

REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | |
|---|-------------------------------|--|-----------------------------|
| A. Procedure No. AP 3532 | New Revision No. 11 | Title Emergency Preparedness Organization | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | |
| D. List DIs & LPCs: #1 | | | |
| E. Description and Reasons for Procedure/Changes: | | | |
| <ul style="list-style-type: none"> • Added text to control the need for future Applicability Determinations. • Title changes throughout. • Better defined the position of Emergency Plan Drill/Ex Coord. and added liaison responsibilities. • Added Emergency Plan Assistant responsibilities. • Changed Director of HR & PA to Director of Public Affairs and removed some responsibilities and put them under EPM. • Since the Surveillance Tests were the responsibility of the EPM, they were moved to the page of the EPM's responsibilities and updated list. • Redefined the Training Manager's responsibilities. • Eliminated the Emergency Plan Liaison. • Add the Document Control Center's responsibilities for EP documents. • Added section for Notification of Events for co-located businesses on ENVY property. • Revised VYAPF 3532.01 format to make it easier to use electronically. | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | Telephone Extension: |
| (Print/sign/date) Audra Williams <i>Audra Williams</i> | | 2/18/03 | x4177 |

PART 2 - Reviews

| | | | |
|--|-------------|--|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A (App. B used as a reference) (Print/Sign/Date) <i>Lori Traczyk</i> <i>Lori Traczyk 2/18/03</i> | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | | |
| C. Cross-Discipline Reviews: <input checked="" type="checkbox"/> N/A | | | |
| Department | Name | Signature | Date |
| | | | |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations <input type="checkbox"/> N/A | | | |
| <input type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <input checked="" type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) (Print/Sign/Date) Audra Williams <i>Audra Williams</i> 2/18/03 | | | |
| F. ORIGINATOR: <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date <i>AMH 3/13/03</i> <input checked="" type="checkbox"/> Proofread after Final Type (Print/Sign/Date) <i>Audra Williams</i> Audra Williams 3.26.03 | | | |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: to c plan

Crew Briefings:

Other:

N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian W. Fin Brian W. Fin 3/26/03

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 4.2.03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

AP 3532, Rev 11, Emergency Preparedness Organization

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
- | | | |
|---|-----|-----------|
| (1) Assignment of Emergency Response Organization responsibilities | YES | <u>NO</u> |
| (2) Assignment of on-shift Emergency Response Organization personnel | YES | <u>NO</u> |
| (3) Arrangements for Emergency Response Support and Resources | YES | <u>NO</u> |
| (4) Emergency Classification and Action levels, including facility system and effluent parameters | YES | <u>NO</u> |
| (5) Notification Methods and Procedures | YES | <u>NO</u> |
| (6) Emergency Communications among principal response organizations and the public | YES | <u>NO</u> |
| (7) Public Education and Information | YES | <u>NO</u> |
| (8) Adequacy of Emergency Facilities and Equipment | YES | <u>NO</u> |
| (9) Adequacy of Accident Assessment methods, systems and equipment | YES | <u>NO</u> |
| (10) Plume exposure pathway EPZ protective actions | YES | <u>NO</u> |
| (11) Emergency Worker Radiological Exposure Control | YES | <u>NO</u> |
| (12) Medical Services for contaminated injured individuals | YES | <u>NO</u> |
| (13) Recovery and Reentry Plans | YES | <u>NO</u> |
| (14) Emergency response periodic drills and exercises | YES | <u>NO</u> |
| (15) Radiological Emergency Response Training | YES | <u>NO</u> |
| (16) Plan development, review and distribution | YES | <u>NO</u> |

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|-----|-----------|
| (1) Section IV. A - Organization | YES | <u>NO</u> |
| (2) Section IV. B - Assessment Actions | YES | <u>NO</u> |
| (3) Section IV. C - Activation of Emergency Organizations | YES | <u>NO</u> |
| (4) Section IV. D - Notification Procedures | YES | <u>NO</u> |
| (5) Section IV. E - Emergency Facilities and Equipment | YES | <u>NO</u> |
| (6) Section IV. F - Training | YES | <u>NO</u> |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <u>NO</u> |
| (8) Section IV. H - Recovery | YES | <u>NO</u> |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50 N/A of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

This procedure was revised to update the current Emergency Planning organization. Job responsibilities were more clearly defined and updated to reflect actual practices. The Emergency Plan Liaison position was eliminated and the responsibilities were added to the EP Drill/Ex Coordinator and the EP Manager. Additions to the procedure include DCC's responsibility of handling EP documents and Notification of Events which details how co-located businesses will be notified during an event. None of these changes decrease the effectiveness of the EPlan and it continues to meet all requirements.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: _____

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 2/18/03
(Print/Sign)

Reviewed By: Lorin Tkaczyk *Lorin Tkaczyk* Date: 2/19/03
(Emergency Plan Coordinator) (Print/Sign)

APPLICABILITY DETERMINATION

Activity/Document Number: AP 3523 Revision Number: 11

Title: Emergency Preparedness Organization

Provide or attach a brief description of activities (section 6.3 of RM):

- Added text to control the need for future Applicability Determinations.
- Title changes throughout.
- Better defined the position of Emergency Plan Drill/Ex Coord. and added liaison responsibilities.
- Added Emergency Plan Assistant responsibilities.
- Changed Director of HR & PA to Director of Public Affairs and removed some responsibilities and put them under EPM.
- Since the Surveillance Tests were the responsibility of the EPM, they were moved to the page of the EPM's responsibilities and updated list.
- Redefined the Training Manager's responsibilities.
- Eliminated the Emergency Plan Liaison.
- Add the Document Control Center's responsibilities for EP documents.
- Added section for Notification of Events for co-located businesses on ENVY property.
- Revised VYAPF 3532.01 format to make it easier to use electronically.

Address the questions below for all aspects of the activity. If the answer is "YES" for any portion of the activity, apply the identified process to that portion of the activity. It is not unusual to have more than one process apply to a given activity. For example, a change to a door that is a fire door, a security door and a secondary containment door would require an evaluation to the Fire Protection license condition, 10CFR50.54 (p) and a 50.59 screen. See Section 4 of the "50.59 Resource Manual" (RM) for additional guidance.

| I. Does the proposed activity involve a change to the: | | Section 4.2.1 of the RM |
|---|---|--|
| 1. Technical Specifications or Operating License (10CFR50.90)? Note that stand-alone changes to the TS Bases are evaluated in accordance with 10CFR50.59 per AP 0063. | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per AP 0063) |
| 2. Quality Assurance Plan, related implementing procedures identified in PP 7802 or facility changes (10CFR50.54(a))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES contact QA for 10CFR50.54(a)(3) assessment) |
| 3. Security Plan, related implementing procedures or facility changes (10CFR50.54(p))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES contact Security for 10CFR50.54(p) assessment) |
| 4. Emergency Plan, related implementing procedures or facility changes (10CFR50.54(q))? | <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES | (If YES contact E-Plan for 10CFR50.54(q) assessment per AP 3532) |
| 5. IST Program Plan, related implementing procedures or facility changes (10CFR50.55a(f))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES, and a deviation from the code requirement is required, contact Licensing to ensure applicable NRC approval is obtained per AP 0058) |
| 6. ISI Program Plan, related implementing procedures or facility changes (10CFR50.55a(g))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES, and a deviation from the code requirement is required, contact Licensing to ensure applicable NRC approval is obtained per AP 0058) |
| 7. Fire protection program, related implementing procedures or facility changes (License Condition 3.F)? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES provide an evaluation that satisfies License Condition 3.F) |

| | | |
|--|---|--|
| II. Does the proposed activity involve: | | Section 4.2.2 of the RM |
| 1. Maintenance which restores SSCs to their original condition. | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES perform maintenance in accordance with plant procedures (e.g. AP 0021, AP 0049, AP 0050) |
| 2. A temporary alteration supporting maintenance that will be in effect during at-power operations for 90 days or less that has been (or will be) evaluated under 10CFR50.65(a)(4) prior to implementation? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process in accordance with AP 0091.) |
| III. Does the proposed activity involve a change to the UFSAR (including documents <i>incorporated by reference</i>) excluded from the requirement to perform a 50.59 Review (NEI 96-07 or NEI 98-03)? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | Section 4.2.3 of the RM (If YES, process FSAR change per AP 6036 "FSAR Revision Process". Include basis for excluding 10CFR50.59 evaluation below.) |
| IV. Does the proposed activity involve a change to the: | | Section 4.2.4 of the RM |
| 1. Managerial or administrative procedures governing the conduct of Facility operations, maintenance and training (subject to the control of 10CFR50, Appendix B) (RM section 4.2.4). Some procedures may be VOQAM implementing procedures requiring evaluation per 10CFR50.54(a)(3) (prompted above). Also, Maintenance procedure changes that include changes to Design Information, not evaluated under a design change process, shall be evaluated in accordance with 10CFR50.59 | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per procedure change process (e.g. AP 0095, AP 0096, AP 0097)) |
| 2. Regulatory commitment where changing commitment is not covered by another regulation based change process (NEI 99-04)? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per AP 0055 "Regulatory Commitment Management".) |
| V. Does the activity impact other plant specific programs (e.g., The ODCM and PCLRTP controlled per TS 6.7 and the PCP controlled per TRM Section 6) which are controlled by regulations, the Operating License, the Technical Specifications or TRM ? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per the procedure(s) for the appropriate activity.) |
| VI. Is the activity covered by any other specific regulatory change process not discussed above that would preclude the need to evaluate under 10CFR50.59 ? (e.g., 10CFR50.46 for changes to ECCS models and PCT changes, 10CFR50.12 for Exemption Requests, etc) | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES document below and process per applicable regulatory requirements.) |
| VII Does the activity require a 50.59 Screen based on the following Generic NRC correspondence? GL 95-02 for performing Analog-to-Digital upgrades, IEB 80-10 for Contamination of non-radioactive systems, IEC 80-18 for changes to radioactive waste systems and GL 91-18 for compensatory actions including using manual actions in-lieu of automatic actions or use-as-is dispositions affecting the FSAR. GL 95-02 assessments need to look at both system and component level failures (ER20000558_01) | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES complete 50.59 Screen for the subject activity.) |

All aspects of the activity are controlled by one or more of the processes above, therefore a 50.59 Screen is not required. If checked, provide any additional comments below and sign and date below.

Any portion of the activity is not controlled by one or more of the processes above, therefore a 50.59 Screen or 50.59 Evaluation is required. If, checked, provide any additional comments below, sign and date below and complete 50.59 Screen for identified activities.

Additional Applicability Considerations:

Applicability Signoffs: Preparer: Audra Williams *Audra Williams* Date: 2/18/03
(Print name) (Sign)
Reviewer: Loni A. Tkaczyk *Loni A. Tkaczyk* Date: 2/19/03

VERMONT YANKEE NUCLEAR POWER STATION

ADMINISTRATIVE PROCEDURE

AP 3532

REVISION 11

EMERGENCY PREPAREDNESS ORGANIZATION

USE CLASSIFICATION: INFORMATION

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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1.0 PURPOSE, SCOPE, AND DISCUSSION

1.1 Purpose

The purpose of this procedure is to identify the organization and responsibilities for maintenance of the emergency preparedness program.

1.2 Scope

This procedure is applicable to Vermont Yankee Emergency Preparedness.

1.3 Discussion

Due to the total Vermont Yankee involvement required to maintain emergency preparedness and to implement the Emergency Plan in response to a plant emergency, the roles of the various elements of the organization are defined in this procedure.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the scope of the procedure or program is not revised to include a different type of activity. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

2.0 DEFINITIONS

2.1 None

3.0 PRIMARY RESPONSIBILITIES

3.1 As detailed in the procedure.

4.0 PROCEDURE

4.1. General

All departments of the Vermont Yankee organization are responsible for maintaining a level of readiness to implement their responsibilities in the Emergency Plan.

The Vermont Yankee Emergency Planning group consists of four positions:

- 4.1.1. Emergency Plan Manager - responsible for oversight of the development and revision of emergency plans and the coordination of these plans with other response organizations; additionally responsible for the continued assessment and reporting of the state of emergency preparedness for Vermont Yankee; assessment includes those items for which the licensee has responsibility in NUREG 0654 and the Code of Federal Regulations.
- 4.1.2. Emergency Plan On-Site Coordinator - responsible and accountable for the development, administration, maintenance and adequacy of the Emergency Preparedness Program at Vermont Yankee.
- 4.1.3. Emergency Plan/Exercise/Training Coordinator - responsible for developing and maintaining the Emergency Drill and Exercise Program for Vermont Yankee; this includes the development, training coordination of task specific and annual drills and exercises with Company, State, Local and Federal response organizations. Additionally, responsible for developing and maintaining the Off-Site Emergency Planning Program for Vermont Yankee; this includes coordinating Vermont Yankee Programs with State, Local, and Federal response agencies in accordance with applicable regulations.
- 4.1.4. Emergency Plan Assistant - assist in the maintenance and administration of the Preparedness Program and the Emergency Response Organization such that the program ensures compliance with all regulatory and company Emergency Planning requirements.

4.2. Senior Operations Executive

The Senior Operations Executive has overall responsibility for Emergency Planning at Vermont Yankee. This includes annual review of the Emergency Plan and Emergency Assistance Personnel List.

4.3. Director of Public Affairs

The following emergency preparedness functions are the responsibility of the Director of Public Affairs:

- 4.3.1. Documents: responsible for development, maintenance and implementation of the Joint News Center Implementing Guidelines.
- 4.3.2. Training of Non-VY Personnel: coordinates annual media training on emergency planning.

4.4. Emergency Plan Manager (EPM)

The broad responsibilities of the EPM include:

4.4.1. Review: The VY Emergency Plan is reviewed annually and revised as required to maintain the Plan in compliance with regulations and to ensure the Plan assigns responsibilities and provides for actions necessary to ensure effective response in event of a radiological emergency at Vermont Yankee.

4.4.2. Assessment: The EPM is aware of the state of emergency preparedness and ensures that the various elements of the VY organization including the plant staff, communications, training department, and other members of the staff as assigned are aware of any areas of reduced preparedness for which they are responsible. The EPM monitors the resolution of any identified deficiencies in the emergency preparedness program. The scope of this assessment function includes:

- a) participation in audits of the emergency preparedness program,
- b) participation in inspections, drills, and exercises evaluating the emergency preparedness program,
- c) review of and formal concurrence with procedures and revisions to procedures required by the Vermont Yankee Emergency Plan,
- d) review of the results of surveillance tests applicable to the emergency preparedness program,
- e) concurrence with commitments (or the withdrawal of commitments) to outside organizations related to the emergency preparedness program,
- f) review and approve (in conjunction with the Supt. Nuclear Training) training programs and materials required by the emergency preparedness program,
- g) formally maintain, report status, and ensure resolution of emergency preparedness open action items,
- h) assessment of the assignment and training of personnel to implement the emergency response program.

4.4.3. Liaison: The EPM has the primary responsibility for maintaining the necessary liaison with organizations outside Vermont Yankee as required to meet license requirements under regulations. This includes the NRC and FEMA. Additionally, responsible for development and maintenance of the VY Emergency Public Information Program and the dissemination of public information on emergency preparedness.

4.4.4. Direct Responsibility: The EPM is directly responsible for the implementation of the following elements of the Emergency Plan:

- a) Licensee responsibilities related to the maintenance of the Public Notification System (sirens, weather alert receivers, emergency alert stations) for the EPZ.
- b) Licensee responsibilities related to the maintenance of the Nuclear Alert System (orange phone) which is used to initially notify the State Emergency Preparedness organizations of an emergency.
- c) Scheduling and coordination of audits, inspections, drills and exercises of the emergency preparedness program as outlined in OP 3505.
- d) Ensure that the emergency preparedness program meets the licensee responsibility requirements of the Code of Federal Regulations 10CFR50, applicable implementing documents (e.g., NUREG's, NRC IE Information Notices), and commitments to the NRC. Outstanding actions to meet these requirements will be tracked in accordance with AP 0028 with the responsible department identified.
- e) Ensure that all the Emergency Plan Implementing Procedures (EPIPs) are mutually consistent, are consistent with interfacing Local, State, and Federal procedures, and properly implement the VY Emergency Plan. Revisions to EPIPs required for these reasons are identified by the EPM and tracked in accordance with AP 0028.
- f) Maintain the EPIPs to ensure the EPIPs effectively perform the stated purpose of the procedure. EPM is responsible for ensuring that these procedures are technically correct, are compatible with the capabilities of the equipment and personnel assigned to implement these procedures, and that any action items applicable to these procedures identified, in accordance with AP 0028, are satisfactorily resolved.
- g) Ensure that 10CFR50.54(q) evaluations are done on proposed changes to the Emergency Plan, all Emergency Plan Implementing Procedures (EPIPs), JNC Guidelines and any other document which may warrant this evaluation, and findings are documented on VYAPF 3532.01, "10CFR50.54(q) Evaluation Checklist." [INS9324EXT1]

- h) Ensure that 10CFR50.54(q) evaluations are done on proposed Limited Procedure Changes (LPCs) on any of the EPIPS, and findings are documented on VYAPF 3532.01.
- i) Ensure that Letters of Agreement with off-site agencies are evaluated annually to determine their validity and, if necessary, updated.
- j) Ensure that the Emergency Assistance Personnel List (EAPL) is updated quarterly.
- k) Assist the General Manager (or designee) in performance of on-site emergency preparedness work. This effort consists of a commitment to on-site EP work as deemed appropriate by the General Manager and EPM. The EPM additionally provides for any outside assistance requested to perform emergency preparedness work at the plant.
- l) Ensure that all comments or recommendations are documented and resolved in accordance with OP 3505. Action items are tracked in accordance with AP 0028.
- m) Ensure that a review of paperwork associated with a classified emergency event is initiated the next working day following the termination of the event, to ensure that procedural requirements have been satisfied, and if not, conduct an appropriate investigation of the issue. [UND93054EXT3]
- n) Ensures the readiness of emergency facilities at all times. This includes quarterly equipment surveillance and verification and update of telephone numbers.
- o) Ensure all VY staff assigned to the Emergency Assistance Personnel List (EAPL) are trained annually.

4.4.5. Surveillance Tests: The EPM is responsible for the conduct of the following:

- 1009 - Weekly Beeper Functional Test
- 2008 - NMR Communications Siren/Generator Maintenance Report
- 2315 - Monthly TSC/EOF FTS and NAS Phone Test
- 3036 - Emergency Assistance Personnel List Update
- 3116 - JNC Equipment Surveillance
- 3130 - EOF Fire Brigade and Medical Team Lists Updates
- 3145 - Emergency Call-In Status Update
- 3188 - Public Inquiry/States' Numbers Update
- 3254 - CAN Notification Process Refresher
- 3262 - Pager Tel. No./Cap Code Assignments Review
- 4000 - Power Fail Phone System Surveillance
- 4019 - EOF UHF Radio Operability Check
- 5020 - NMR Communications Siren Testing Program Summary Report
- 5022 - Emergency Assistance Personnel List Assignments Audit
- 5025 - News Media Training
- 5032 - DEA Telephone Directory Tel. No. Verification
- 5034 - JNC Personnel Training
- 5037 - State/Local Emergency (EAL) Personnel Training
- 5046 - VY Emergency Public Info Program E-Plan Poster
- 5055 - VY Emergency Public Info Program 3-States Calendar
- 5056 - Emergency Preparedness Exercise/Drill
- 5060 - VY Emergency Public Info Program Motel Brochure
- 5066 - Emergency Plan Review
- 5074 - Medical Drill
- 5078 - Communications Test
- 5079 - Radiological Monitoring Drill
- 5080 - State EOC and Field Assessment Teams Communications Test
- 5092 - States and Local Transmittal/50.54(t) Audit Results
- 5094 - EPI Material Accuracy Verification
- 5134 - Annual Calendar Distribution Surveillance
- 5146 - Local Fire Department Training
- 5147 - Off-Site Participation Fire Drill
- 9006 - Health Physics Drill

4.5. General Manager

The General Manager is responsible for the readiness of the plant staff and contractors to implement the emergency response procedures including the following:

- 4.5.1. Facilities: Maintenance of the on-site emergency response facilities (TSC and OSC) and all emergency response equipment necessary to implement the emergency procedures at the plant. Additionally, the General Manager is responsible for all radiological monitoring and protection equipment.
- 4.5.2. Open Items: Resolution of open items from inspections, exercises, drills, or reviews assigned to the plant.
- 4.5.3. Assignment and Training of Personnel: Ensure that sufficient personnel are assigned to plant emergency response positions on shift, 30 minute shift augmentation, 60 minute shift augmentation, and the full response organization for positions to be manned by plant staff personnel. The General Manager is also responsible to ensure that plant personnel required to augment the EOF staff are assigned. The General Manager is responsible to ensure that the personnel receive the necessary training prior to their assignment and maintain this training.
- 4.5.4. Inspections, Drills and Exercises: Provides the required support for the planning, preparation, conduct, and evaluation activities as specified in the Emergency Plan Implementing Procedures.
- 4.5.5. Recall of Plant Staff: Recall of plant emergency response personnel to work as required by the emergency plan and other regulations and commitments as outlined in OP 3531.

4.6. Manager of Training & Development

The Manager of Training & Development supports implementation of the training program required by the Emergency Plan.

4.6.1. Training Program: Supports development of the training materials necessary to define and conduct EP training for emergency response personnel per OP 3712.

4.6.2. Schedule and Conduct Training: Schedule required training of personnel and ensure that training is conducted for designated personnel. Provides support in accordance with Emergency Plan Training Program Description.

4.6.3. Documentation of Training: Maintain records of completed training per TDDs.

4.6.4. Documents: Responsible Procedure Owner in accordance with AP 0095, for the Emergency Plan Implementing Procedures.

4.7. Document Control Center (DCC)

The Emergency Plan and all Emergency Implementing Procedures shall be maintained in accordance with AP 6805. These documents require controlled distribution to ensure that those on distribution receive periodic updates in a timely manner and therefore, are in possession of the most recent revision.

Custody and control of the masters, including completed VYAPF 3532.01 forms, will be maintained by DCC and will be included in DCC's transfer for archiving. Distribution shall be in accordance with the distribution list maintained by DCC.

In addition to normal distribution to copy holders, Emergency Planning will generate a BVY letter in accordance with AP 0058. This letter will accompany any distribution of the Emergency Plan or Implementing Procedures, including LPCs, to the NRC.

Any document that will be distributed to the public, i.e., library, must have any home or personal phone numbers blacked out prior to distribution.

4.8. Notification of Events

In the event of an accident at the Entergy Nuclear Vermont Yankee Plant, any business that is co-located on Vermont Yankee property must be notified.

During work hours, Entergy Nuclear Vermont Yankee will notify such individuals at the Corporate Building of the event by a public address system announcement and verbal communication by Employee Services & Facilities personnel. At the time of the notification, such individuals will be required to evacuate the building. Upon termination of the event, those individuals will be notified via telephone.

During off hours, the Emergency Planning staff member that is on duty will be responsible for notifying those individuals via telephone per a call-in card. Upon termination of the event, those individuals will be notified via telephone.

5.0 REFERENCES AND COMMITMENTS

5.1. Technical Specifications and Site Documents

5.1.1. VY Emergency Plan

5.2. Codes, Standards, and Regulations

5.2.1. NUREG 0654, Criteria for Preparation and Evaluation of Radiological Emergency Response and Preparedness in Support of Nuclear Power Plants

5.2.2. Code of Federal Regulations (10CFR50.47 and 10CFR50 Appendix E)

5.3. Commitments

5.3.1. INS9324EXT1

5.3.2. UND93054EXT3

5.4. Supplemental References

- 5.4.1. Public Affairs Department Guideline No. 4, "Joint News Center Implementation Guideline"
- 5.4.2. AP 0028, Commitment Tracking
- 5.4.3. AP 0058, NRC Correspondence Control
- 5.4.4. AP 0095, Plant Procedures
- 5.4.5. AP 3125, Emergency Plan Classification and Action Level Scheme
- 5.4.6. OP 3504, Emergency Communications
- 5.4.7. OP 3505, Emergency Preparedness Exercises and Drills
- 5.4.8. OP 3506, Emergency Equipment Readiness Check
- 5.4.9. OP 3507, Emergency Radiation Exposure Control
- 5.4.10. OP 3508, On-Site Medical Emergency Procedure
- 5.4.11. OP 3509, Environmental Sample Collection During an Emergency
- 5.4.12. OP 3510, Off-Site and Site Boundary Monitoring
- 5.4.13. OP 3511, Off-Site Protective Action Recommendations
- 5.4.14. OP 3513, Evaluation of Off-Site Radiological Conditions
- 5.4.15. OP 3524, Emergency Actions to Ensure Initial Accountability and Security Response
- 5.4.16. OP 3525, Radiological Coordination
- 5.4.17. OP 3531, Emergency Call-In Method
- 5.4.18. OP 3533, Post Accident Sampling of Reactor Coolant
- 5.4.19. OP 3534, Post Accident Sampling of Plant Stack Gaseous Releases
- 5.4.20. OP 3535, Post Accident Sampling and Analysis of Primary Containment
- 5.4.21. OP 3536, In-Plant Air Sample Analysis with Abnormal Conditions
- 5.4.22. OP 3540, Control Room Actions During an Emergency
- 5.4.23. OP 3541, Activation of the Technical Support Center
- 5.4.24. OP 3542, Operation of the Technical Support Center
- 5.4.25. OP 3544, Operation of the Operations Support Center
- 5.4.26. OP 3545, Activation of the Emergency Operations Facility/Recovery Center
- 5.4.27. OP 3546, Operation of the Emergency Operations Facility/Recovery Center
- 5.4.28. OP 3547, Security Actions During an Emergency
- 5.4.29. OP 3712, Emergency Plan Training
- 5.4.30. AP 6805, Document Control
- 5.4.31. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

6.0 RECORDS RETENTION

- 6.1. Retain VYAPF 3532.01 in accordance with AP 6807.

7.0 ATTACHMENTS

- 7.1. VYAPF 3532.01 10CFR50.54(q) Evaluation Checklist

10 CFR 50.54(q) Evaluation Checklist (Continued)

| | |
|------------|-----------|
| YES | NO |
|------------|-----------|

2. Could the change affect our ability to meet the following requirements of Appendix E to 10CFR50

- (1) Section IV. A - Organization
- (2) Section IV. B - Assessment Actions
- (3) Section IV. C - Activation of Emergency Organizations
- (4) Section IV. D - Notification Procedures
- (5) Section IV. E - Emergency Facilities and Equipment
- (6) Section IV. F - Training
- (7) Section IV. G - Maintaining Emergency Preparedness
- (8) Section IV. H - Recovery

| | |
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| | |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10CFR50.47(b) and Appendix E to 10CFR50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10CFR50 _____ of Section A above, this change
 DOES DOES NOT decrease the effectiveness of the Emergency Plan and
 DOES DOES NOT continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10CFR50.47(b) and the requirements of Appendix E to 10CFR50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10CFR50.47(b) and the requirements of Appendix E to 10CFR50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10CFR50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: _____

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: _____ Date: _____
(Print/Sign)

Reviewed By: _____ Date: _____
(Emergency Plan Coordinator) (Print/Sign)

REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | | |
|--|------------------------------|---|--|-----------------------------|
| A. Procedure No. OP 3540 | New Revision No. 3 | Title Control Rm Actions During An Emerg. | | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | | |
| D. List DIs & LPCs: N/A | | | | |
| E. Description and Reasons for Procedure/Changes: | | | | |
| <ul style="list-style-type: none"> • Per E_DRILL-2001-GEN-6_09, added steps to the procedure to aid personnel in determining whether the release is above or below federally operating limits and added definitions of elevated and ground releases. • VYOPF 3540.06 pgs 1 & 2. Added statement to instruct states to implement their KI plan. (10CFR50.47(b)(10). • VYOPF 3540.03, .04, .05- Changed wording to instruct contractors/visitors to evacuate site at Alert & report to EOF for SA/GE. • Title changes throughout. • Combined steps 1.5 and 1.9 to call SSS for implementation of OP 3547 and to request an Alt. Communicator. • Changed the Note for Code Red Events. A gai-tronics announcement will be made but in accordance with OP 3132. • Appendix A – Changed steps to access ERFIS through a decnet terminal or through reflections as we are no longer using CVAX. | | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | | Telephone Extension: |
| (Print/sign/date) Audra Williams | | <i>Audra Williams</i> | | 3/9/03 |
| | | | | x4177 |

PART 2 - Reviews

| | | | |
|--|-------------|--|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A (App. B used as a reference) (Print/Sign/Date) <i>Dennis Deer</i> <i>Dennis Deer</i> 3/10/03 | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | | |
| C. Cross-Discipline Reviews: <input type="checkbox"/> N/A | | | |
| Department | Name | Signature | Date |
| TRAINING | Brian Finn | <i>Brian Finn</i> | 3/10/03 |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations <input type="checkbox"/> N/A | | | |
| <input checked="" type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <input type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> 3/9/03 | |
| F. ORIGINATOR: <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered | | | |
| <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date <i>AMH 3/24/03</i> <input checked="" type="checkbox"/> Proofread after Final Type | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> 3.26.03 | |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: *Trainersoft module*

Crew Briefings:

Other:

N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian M. Frain *Brian M. Frain* *3/26/03*

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 4/2/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: *215*

Date procedure issued: *4/2/03*

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP 3540, Rev. 3, Control Room Actions during an Emergency

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
- | | | |
|---|------------|-----------|
| (1) Assignment of Emergency Response Organization responsibilities | YES | <u>NO</u> |
| (2) Assignment of on-shift Emergency Response Organization personnel | YES | <u>NO</u> |
| (3) Arrangements for Emergency Response Support and Resources | YES | <u>NO</u> |
| (4) Emergency Classification and Action levels, including facility system and effluent parameters | YES | <u>NO</u> |
| (5) Notification Methods and Procedures | YES | <u>NO</u> |
| (6) Emergency Communications among principal response organizations and the public | YES | <u>NO</u> |
| (7) Public Education and Information | YES | <u>NO</u> |
| (8) Adequacy of Emergency Facilities and Equipment | <u>YES</u> | NO |
| (9) Adequacy of Accident Assessment methods, systems and equipment | <u>YES</u> | NO |
| (10) Plume exposure pathway EPZ protective actions | <u>YES</u> | NO |
| (11) Emergency Worker Radiological Exposure Control | YES | <u>NO</u> |
| (12) Medical Services for contaminated injured individuals | YES | <u>NO</u> |
| (13) Recovery and Reentry Plans | YES | <u>NO</u> |
| (14) Emergency response periodic drills and exercises | YES | <u>NO</u> |
| (15) Radiological Emergency Response Training | YES | <u>NO</u> |
| (16) Plan development, review and distribution | YES | <u>NO</u> |

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|------------|-----------|
| (1) Section IV. A - Organization | YES | <u>NO</u> |
| (2) Section IV. B - Assessment Actions | <u>YES</u> | NO |
| (3) Section IV. C - Activation of Emergency Organizations | YES | <u>NO</u> |
| (4) Section IV. D - Notification Procedures | YES | <u>NO</u> |
| (5) Section IV. E - Emergency Facilities and Equipment | <u>YES</u> | NO |
| (6) Section IV. F - Training | YES | <u>NO</u> |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <u>NO</u> |
| (8) Section IV. H - Recovery | YES | <u>NO</u> |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50.47(b) (8), (9), (10) and Appendix E Section IV. B & E of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

The Governor Hunt House will no longer be used as an assembly area. At an alert, all contractors/visitors will evacuate the site. At a SA or General (not preceded by an Alert) they will report directly to the EOF for monitoring and decontamination, if necessary, instead of stopping at GHH then proceeding to EOF.

Definitions of elevated and ground releases were added. Steps to the procedure were added to aid personnel in determining if a release is considered ABOVE or BELOW federally approved operating limits for filling out OP 3540.06.

The addition of the KI statement is based on the decision of each of the states to include KI as part of their state plan and public protective actions for their state.

As part of the requirement of 10CFR50.47(b) (10) to provide appropriate PARs to state decision makers, VY has also added the recommendation to the state to implement their KI plans. The state plans provide the basis for distribution of KI.

These changes enhance the procedure and add formality. There is no decrease in the effectiveness of the E-Plan and it continues to meet requirements.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: GHH, Governor

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: E-Plan, OP 3540, OP 3544, OP 3547, OP 3506, OP 3524

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: GHH, Governor

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 3/9/03
(Print/Sign)

Reviewed By: Lori A. Traczynski *Lori A. Traczynski* Date: 3/24/03
(Emergency Plan Coordinator) (Print/Sign)

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3540

REVISION 3

CONTROL ROOM ACTIONS DURING AN EMERGENCY

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PURPOSE

This procedure outlines the basic emergency plan requirements and actions to be followed by the Control Room personnel in an emergency.

DISCUSSION

There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director, who, in turn, instructs Control Room personnel to activate the notification system. Notification of State authorities must be initiated within 15 minutes after the event has been classified. The NRC must be notified immediately after the States' notification, but not later than one (1) hour after the event has been classified.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

The basic shift complement is able to deal with Unusual Event conditions. On-duty personnel are assigned to functions as required. Additional members of the plant organization, including top management, are notified by Plant Security, and augment on-duty personnel as necessary. The Duty On Call Officer who is available on an on-call basis must report to the site and will assume the role of the TSC Coordinator. Dissemination of public information and closure or escalation to a more severe classification will occur as conditions warrant.

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

An Alert event requires action beyond the normal capability of the basic shift complement. Plant response and off-site notification associated with this event classification ensure that sufficient emergency response personnel are mobilized to activate the Technical Support Center and the Operations Support Center. The Emergency Operations Facility/Recovery Center is activated with the Site Recovery Manager, the EOF Coordinator and other EOF/RC staff members. Sufficient emergency assistance personnel to assess off-site radiological impact are assigned if the Alert event is producing releases off-site. Actual releases of radioactivity which substantially exceed Technical Specification limits may be involved and thus radiation monitoring and dose projection may be an integral portion of the emergency response required. Prompt notification is made to State authorities and follow-up information is provided as needed to off-site emergency organizations.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

Plant resources are anticipated to be sufficient to cope with a Site Area Emergency. Outside resources, however, are mobilized and selected members are dispatched to the site. All emergency centers are activated following declaration of a Site Area Emergency. All non-essential personnel are evacuated from the site. Representatives from adjoining States are dispatched to the Emergency Operations Facility. Assessment of plant conditions and off-site radiological parameters determine the type of protective measures necessary for protection of the public sector. The public is notified of the event by local media facilities and periodic updates of information are released to ensure uniform, adequate response to real conditions.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

Contracted service organizations, sponsor utilities, and other industry resources are alerted and requested to render assistance as appropriate. In addition, Federal resources are called upon for assistance. Assessment of plant conditions and off-site radiological parameters determine the type of protective action recommendations.

Plant representatives closeout or escalate the emergency classification, or move to recovery as conditions warrant. Written summaries of the event are provided to off-site authorities and other affected agencies.

Upon declaration of an emergency classification, the Control Room becomes an Emergency Response Facility and the Shift Manager assumes the duties of the Plant Emergency Director (PED).

During the initial stages of an emergency, the PED will direct all phases of the emergency response. Actions will include:

- Classifying an emergency
- Notifying appropriate State authorities
- Notifying the NRC
- Initiating on-site habitability surveys, if necessary
- Formulating on-site personnel response recommendations, if necessary
- Performing initial off-site dose assessment, if necessary
- Initiating corrective actions required to restore normal operation, if necessary

As personnel respond to other Emergency Response Facilities, emergency functions will be transferred to the Technical Support Center Coordinator (TSCC) or the Site Recovery Manager (SRM) as appropriate.

Emergency Classification and PAR Notification Form (VYOPF 3540.06) specifies the contents and formal States notifications of emergency classifications and protective action recommendations (PARs) by Vermont Yankee, and is used by the Control Room in the authorization and transmittal of these notifications. Prior to the SRM assuming responsibility for the emergency response, the TSC Coordinator can authorize escalations and PARs, but the Control Room retains transmittal responsibilities to off-site agencies.

In the event that a Control Room evacuation and plant shutdown using alternate methods are required, Appendix A will be used to initially notify the States and the NRC of the declared emergency.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the procedure scope is not changed. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

- | | | |
|----|---------------|---|
| 1. | Appendix A | States and NRC Emergency Notification for a Control Room Evacuation Event |
| 2. | VYOPF 3540.01 | UNUSUAL EVENT IMMEDIATELY TERMINATED Announcement |
| 3. | VYOPF 3540.02 | UNUSUAL EVENT Announcement |
| 4. | VYOPF 3540.03 | ALERT Announcement |
| 5. | VYOPF 3540.04 | SITE AREA EMERGENCY Announcement |
| 6. | VYOPF 3540.05 | GENERAL EMERGENCY Announcement |
| 7. | VYOPF 3540.06 | Emergency Classification and PAR Notification/Upgrade Form |
| 8. | VYOPF 3540.07 | States Notification for a Control Room Evacuation |

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. UND-98012_01

4. Supplemental References

- a. AP 0009, Event Reports
- b. AP 0010, Situational Reporting Requirements
- c. AP 0021, Work Orders
- d. AP 0156, Notification of Significant Events
- e. AP 0864, Fitness for Duty
- f. AP 3125, Emergency Plan Classification and Action Level Scheme
- g. OP 3132, Operations Department Response to Security Events
- h. OP 3504, Emergency Communications
- i. OP 3507, Emergency Radiation Exposure Control
- j. OP 3508, On-Site Medical Emergency Procedure
- k. OP 3511, Off-Site Protective Action Recommendations
- l. OP 3513, Evaluation of Off-Site Radiological Conditions
- m. OP 3531, Emergency Call-in Method
- n. OP 3541, Activation of the Technical Support Center (TSC)
- o. OP 3542, Operation of the Technical Support Center (TSC)
- p. OP 3544, Operation of the Operations Support Center (OSC)
- q. OP 3545, Activation of the Emergency Operations Facility/Recover Center (EOF/RC)
- r. OP 3546, Operation of the Emergency Operations Facility/Recover Center (EOF/RC)
- s. OP 3547, Security Actions During an Emergency
- t. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.

DEFINITIONS

1. Alternate Communicator: this position will be filled by a qualified Shift Technical Advisor as indicated on Appendix O of the Emergency Call-In List. Alternate Communicators are expected to be able to gather data, fill out appropriate forms, communicate information over the phone to appropriate officials and make plant announcements.
2. Control Room Communicator: (CRC): this position will be filled by a Chemistry Technician. CRCs are expected to communicate information over the phone to appropriate officials and make plant announcements.
3. Elevated Release: An elevated radiological release is any release discharged from the plant stack.
4. Ground Release: A radiological ground release is any release that is not discharged from the plant stack.

PROCEDURE

NOTES

- The responsible individual may assign actions required to other personnel as appropriate. The designated individual, however, has the overall responsibility for the execution of the checklist.
- Record time and initials as required.
- Steps may be performed concurrently or out of sequence.
- Some steps have multiple signature lines, based on event level. The step should be initialed for each event level it is completed for. If an event escalates, each step with that event level designator should be rechecked to ensure no further action is required.

PED Name (print): _____

Date: _____

Time/Date

Initials

1.0 Immediate Actions

1.1. It has been determined that an EAL has been reached per AP 3125. Record time and date of entry.

U _____ / _____
 A _____ / _____
 S _____ / _____
 G _____ / _____

1.2. IF a GENERAL EMERGENCY, THEN implement OP 3511, Off-Site Protective Action Recommendations.

G _____ / _____

1.3. If a release (as indicated by Stack Hi Range (RM-17-155) WARN or HIGH alarm or indication of a ground release) is in progress or expected, ensure that OP 3513, Evaluation of Off-Site Radiological Conditions, is implemented by the SM/PED or Radiological Assistant or their qualified designee.

A _____ / _____
 S _____ / _____
 G _____ / _____

- | | <u>Time/Date</u> | <u>Initials</u> |
|---|--|----------------------------------|
| 1.4. Determine the immediate personnel response to be taken. | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |
| 1.5. Call the Security Shift Supervisor to:. | | |
| 1.5.1. Implement OP 3547, Security Actions During an Emergency | (circle one) U A S G _____ / _____ | _____ _____ |
| 1.5.2. Request an Alternate Communicator to report to the Control Room per OP 3531, Emergency Call-In Method, as warranted. | _____ / _____ | _____ _____ |

NOTES

IF an emergency classification is entered due to a security condition, THEN staffing facilities and performing accountability may put personnel at risk. Therefore, during a Code Red Event:

- the alarm tone shall not be sounded,
- personnel shall not be directed to their facilities and,
- the Gai-Troncis announcement will be made in accordance with OP 3132, Operations Department Response to Security Events.

- | | | |
|---|--|----------------------------------|
| 1.6. Request Control Room Communicator (CRC) to report to Control Room | (circle one) U A S G _____ / _____ | _____ _____ |
| 1.7. Prepare Gai-Tronics announcement for applicable emergency classification. (VYOPF 3540.01-05) | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |
| 1.8. Make Gai-Tronics announcement. | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |

Time/Date

Initials

- 1.9. Request that extra Operations personnel report to the Control Room or OSC per PED request.

_____ / _____

NOTES

- States' notification must be initiated within 15 minutes of emergency classification declaration.
- SM/PED retains responsibility for off-site States' notification (NAS-Orange Phone) until relieved by the Site Recovery Manager.
- The Shift Manager may, at his discretion, have all the Control Room telephone ringers except the Shift Technical Advisor's (STA) desk phone shut off to alleviate distractions in the control room. (UND-98012_01)

- 1.10. Prepare VYOPF 3540.06, Emergency Classification and PAR Notification/Upgrade Form for applicable emergency classification. Use the following criteria for Step B.2, notification of a radioactive release in progress:

U _____ / _____
A _____ / _____
S _____ / _____
G _____ / _____

- 1.10.1. If no radiation release is expected, then check the first box, "no radiation release related to this event".

1.10.2. Check release BELOW federally approved operating limits if:

1.10.2.1. An elevated release as indicated by an increase in radiation levels on Stack Gas Radiation monitors RM-17-156 or 157 or confirmed by stack gas sample less than ODCM limits, due to this event,

OR

1.10.2.2. A ground release of radiation less than the ODCM limits by sample or field monitoring as confirmed by the Chemistry Department

1.10.3. Check release ABOVE federally approved operating limits if:

1.10.3.1. An elevated release of radiation as indicated by a **HIGH Alarm** on RM-17-156 or 157 or confirmed by stack gas sample greater than ODCM limits due to the event,

OR

1.10.3.2. A ground release of radiation greater than the ODCM limits by sample or field monitoring as confirmed by the Chemistry Department.

| | <u>Time/Date</u> | <u>Initials</u> |
|---|------------------|-----------------|
| 1.11. Notify VT/NH/MA State Police Agencies per VYOPF 3540.06. | U _____ / _____ | _____ |
| | A _____ / _____ | _____ |
| | S _____ / _____ | _____ |
| | G _____ / _____ | _____ |
| 1.12. IF commercial telephone service is degraded, THEN instruct Communicator to inform the States of this condition and request that all State call-back communications should occur through the NAS-Orange Phone. (Use Remarks section of VYOPF 3540.06 to note directive.) | U _____ / _____ | _____ |
| | A _____ / _____ | _____ |
| | S _____ / _____ | _____ |
| | G _____ / _____ | _____ |
| 1.13. Fax copy of VYOPF 3540.06 to each State to supplement phone call. | U _____ / _____ | _____ |
| | A _____ / _____ | _____ |
| | S _____ / _____ | _____ |
| | G _____ / _____ | _____ |
| 1.14. After completion of the State's notification, SM/PED acknowledges that the States' notification has been completed. | U _____ / _____ | _____ |
| | A _____ / _____ | _____ |
| | S _____ / _____ | _____ |
| | G _____ / _____ | _____ |
| 1.15. Record call-back from State officials concerning plant conditions: | | |
| VT Official _____ | U _____ / _____ | _____ |
| VT Official _____ | A _____ / _____ | _____ |
| VT Official _____ | S _____ / _____ | _____ |
| VT Official _____ | G _____ / _____ | _____ |
| NH Official _____ | U _____ / _____ | _____ |
| NH Official _____ | A _____ / _____ | _____ |
| NH Official _____ | S _____ / _____ | _____ |
| NH Official _____ | G _____ / _____ | _____ |
| MA Official _____ | U _____ / _____ | _____ |
| MA Official _____ | A _____ / _____ | _____ |
| MA Official _____ | S _____ / _____ | _____ |
| MA Official _____ | G _____ / _____ | _____ |

Time/Date

Initials

1.16. IF State officials have not made contact with the plant within one hour, THEN recall State Police by utilizing the appropriate NAS-Orange Phone number or commercial telephone back-up number listed on VYOPF 3540.06. Record contact above.

1.17. IF the SRM or TSC Coordinator has not assumed overall responsibility for the response effort, and conditions indicate that escalation is necessary, THEN the SM/PED proceeds with the notification for the new emergency classification by repeating those steps, 1 through 1.16, that have multiple event level sign-offs.

A _____ / _____
S _____ / _____
G _____ / _____

NOTE

NRC notification must be initiated immediately after the States' notification, but not later than one (1) hour after the emergency classification declaration.

1.18. Prepare message for NRC using VYAPF 0156.01.

U _____ / _____
A _____ / _____
S _____ / _____
G _____ / _____

1.19. Notify NRC Headquarters on the FTS Emergency Notification System (ENS) phone by dialing the first number listed below, using all 11 digits. If the first number is busy, use the second, etc.

U _____ / _____
A _____ / _____
S _____ / _____
G _____ / _____

- 1-301-816-5100
- 1-301-951-0550
- 1-301-415-0550

1.20. IF contact cannot be established using the FTS System, THEN call the NRC Operations Center via the commercial telephone system, using (in the order listed), one of the telephone numbers listed above and inform the NRC Operations Center of the problem with the FTS System.

U _____ / _____
A _____ / _____
S _____ / _____
G _____ / _____

| | <u>Time/Date</u> | <u>Initials</u> |
|--|--|----------------------------------|
| 1.21. Upon establishing communications, provide message using VYAPF 0156.01, Event Notification Worksheet. | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |
| 1.22. IF desired by NRC Headquarters, THEN maintain an open and continuous communications channel, until relieved by the TSC staff or until continuous communications are no longer necessary. | _____ / _____ | _____ |
| 1.23. When contacted by the Public Affairs Department, provide a brief description of the event (e.g., Plant power level? Involvement of outside agencies? Injuries?). | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |
| PA Contact Name: _____ | Time: _____ | |
| 1.24. When contacted by the TSC Coordinator or EOF Coordinator provide information on event classification and plant conditions. | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |
| 1.25. Request SSS contact outside agencies for assistance (fire, law enforcement, or medical rescue personnel and related equipment) as needed to deal with the event. | | |
| Fire | _____ / _____ | _____ |
| Medical | _____ / _____ | _____ |
| Law Enforcement (in conjunction with the Security Shift Supervisor) | _____ / _____ | _____ |
| 1.26. Initiate and coordinate the initial on-site assistance team activities (until relieved by TSC Coordinator) as follows: | | |
| 1.26.1. Prioritize job tasks to mitigate and control the emergency condition. | _____ / _____ | _____ |
| 1.26.2. Ensure that the applicable work control process defined in AP 0021, Work Orders, is used. | _____ / _____ | _____ |

| | <u>Time/Date</u> | <u>Initials</u> |
|---|--|----------------------------------|
| 1.26.3. Authorize emergency dose commitments for required job tasks in accordance with OP 3507, Emergency Radiation Exposure Control. | A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ |
| 1.26.4. Brief the TSC Coordinator on job tasks initiated, and continue to coordinate job priorities with the TSC Coordinator. | U _____ / _____ A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ _____ |
| 1.27. Verify the Vermont Yankee State Liaison Engineer has been notified per AP 0156 | U _____ / _____ | _____ |

Time/Date

Initials

2.0 Subsequent Actions

2.1. Assess plant conditions periodically and be prepared to initiate escalation of emergency classification to a more severe condition in the absence of the TSC Coordinator and the Site Recovery Manager.

U _____ / _____
A _____ / _____
S _____ / _____

2.2. IF conditions warrant an escalation to a GENERAL EMERGENCY, THEN implement OP 3511, Off-Site Protective Action Recommendations.

G _____ / _____

2.3. Maintain responsibility for the implementation of the VY Emergency Plan until relieved by the TSC Coordinator or Site Recovery Manager. This includes the following responsibilities:

2.3.1. Escalation of the emergency.

NOTE

SM/PED retains responsibility for off-site States' notification until relieved by the Site Recovery Manager.

2.3.2. Notification of off-site States' authorities. (NAS-Orange Phone)

2.3.3. Notification of off-site NRC authorities. (FTS ENS Phone)

2.3.4. Authorization and transmittal of off-site protective action recommendations (PARs).

Time/Date

Initials

2.4. Record the time when and the name of either the TSC Coordinator or SRM who calls to assume the responsibility for implementation of the VY Emergency Plan.

TSCC called at: _____

(circle one)
U A S G

TSCC name: _____

_____/_____

SRM called at: _____

(circle one)
U A S G

SRM name: _____

_____/_____

2.5. Record time when the TSC Coordinator calls to assume responsibility for the deployment of the AOs.

TSCC called at: _____

(circle one)
U A S G

_____/_____

2.6. In concert with the TSC Coordinator and the Site Recovery Manager, provide information to assist with the final closeout of the emergency condition.

_____/_____

FINAL CONDITIONS

1. When the event conditions no longer exist, as approved by the TSC Coordinator, or Site Recovery Manager, announce on the plant page system that the event is terminated.

_____/_____

2. Summarize all actions and resultant conditions in the Shift Manager's Log.

_____/_____

3. Forward a completed copy of this procedure to the Emergency Plan Coordinator for filing in accordance with AP 6807.

_____/_____

APPENDIX A

STATES AND NRC EMERGENCY NOTIFICATION FOR A CONTROL ROOM EVACUATION EVENT

This section will be used during off-normal hours when minimum plant staffing levels exist. The on-shift Chemistry Technician is responsible to complete the initial notifications when directed by the Shift Manager.

STATE NOTIFICATION INSTRUCTIONS:

1. Prepare the State Notification Form (VYOPF 3540.07).
2. Obtain and enter wind speed and wind direction on VYOPF 3540.07 by using one of the following methods:

Method 1 - MET Data History 1 on ERFIS PC Monitor

- a. Depress the "ODPS" key
- b. Tab over to the "HISTORICAL METEOROLOGICAL DATA - 1" poke box
- c. Depress "Enter" key to access the MH1 display
- d. Record wind speed and direction from the UPPER data displayed in the first row

Method 2 - ERFIS Backup Information System

- a. Log onto Reflections (or at a DECNET terminal:<return>for login screen)
- b. At the Username prompt, type ERFIS <return>
- c. At the Password prompt, type: ERFIS <return>
- d. At the Username prompt, type EPLAN <return>
- e. Select Option 1 to display ERFIS BIS Main Menu
- f. Select Option 3a to display Primary Met Tower Data
- g. Record wind speed and direction from the UPPER data displayed in the first column
- h. To exit screen, press any key and then follow instructions to log off ERFIS BIS

NOTE

NWS Public Forecaster will provide information using meteorological data from area reporting stations in the Connecticut River Valley.

Method 3 - Albany National Weather Service (NWS)

- a. Contact the Albany NWS at 9-1-518-435-9574 (primary) or 9-1-800-833-9880 (backup)
- b. Ask for NWS Public Forecaster and request available meteorological conditions for the Vermont Yankee plant site in Vernon, Vermont

APPENDIX A (Continued)

3. Use the prepared message (VYOPF 3540.07) and make States notification as follows:
 - a. Contact each State using appropriate commercial telephone numbers listed below:

VT STATE POLICE: 9-1-802-244-8727 or 9-1-802-257-7101 or 9-1-802-875-2112
NH STATE POLICE: 9-1-603-271-3636
MA STATE POLICE: 9-1-413-584-3000
 - b. After transmittal of message, ensure that all appropriate information is recorded.
 - c. Monitor and receive expected commercial telephone verification of emergency declaration from State authorities.
4. After all States' notifications are completed, immediately continue with NRC notifications.

NRC NOTIFICATION INSTRUCTIONS

NOTE

NRC notification must be initiated immediately after the States' notification, but not later than one (1) hour after the emergency classification declaration.

1. Use the FTS NRC Emergency Notification System (ENS) phone (labeled #41) located in the southwest corner of the TSC Communications Room.
2. Notify the NRC on the FTS ENS phone as follows:
 - a. Lift the receiver on the telephone and listen for dial tone
 - b. After receiving a dial tone, dial the first number listed below using all 11 digits. If the first number is busy, then use the second, etc.

1-301-816-5100
1-301-951-0550
1-301-415-0550

NOTE

Remember to inform the NRC Operations Center of the problems with using the FTS System.

- c. If contact cannot be established using the FTS System, call the NRC Operations Center via the commercial telephone using the same numbers above in the order listed.

APPENDIX A (Continued)

- d. Upon establishing communications with the NRC, provide the following message:

"This is VERMONT YANKEE NUCLEAR POWER STATION in Vernon, Vermont. Please do not interrupt until the entire message is completed.

We are making a one (1) hour notification per 10CFR50.72(a)(1)(i). The Plant has declared a Site Area Emergency due to the evacuation of the Control Room. The Plant is shut down and plant parameter control is being established from alternate shutdown panels. State notifications have been completed and Vermont Yankee's emergency call-in system has been initiated.

- e. Record time of NRC notification and provide any follow-up information as requested using best information known.

_____ (Notification time)

- f. If requested by the NRC, maintain an open and continuous communications channel, until relieved by the TSC staff or until continuous communications are no longer necessary.

- g. Notify Shift Manager when notifications have been completed.

UNUSUAL EVENT IMMEDIATELY TERMINATED ANNOUNCEMENT

1. Before making the announcement, have the Shift Manager/Plant Emergency Director (SM/PED) authorize the prepared announcement.

_____ / _____ / _____
SM/PED Authorization (print/sign) Date Time

2. Turn the PAGE SYS VOLUME INCREASE switch to the ALERT position.
3. Turn the ALARM TONE CONTROL switch to the ON position for 10 seconds then return to the OFF position.
4. Make the following Gai-Tronics announcement:

"Attention all personnel. Attention all personnel. UNUSUAL EVENT, UNUSUAL EVENT, UNUSUAL EVENT.

An UNUSUAL EVENT has been declared and immediately terminated at _____ hours.

There was (describe conditions and affected areas) _____

_____."

5. Repeat the announcement.
6. Turn the PAGE SYSTEM VOLUME INCREASE Switch to the OFF position.

UNUSUAL EVENT ANNOUNCEMENT

1. Before making the announcement, have the Shift Manager/Plant Emergency Director (SM/PED) authorize the prepared announcement.

_____ / _____ / _____
SM/PED Authorization (print/sign) Date Time

2. Turn the PAGE SYS VOLUME INCREASE switch to the ALERT position.
3. Turn the ALARM TONE CONTROL switch to the ON position for 10 seconds then return to the OFF position.

NOTE
Do not make plant announcement during a Code Red event.

4. Make the following Gai-Tronics announcement:

"Attention all personnel. Attention all personnel. UNUSUAL EVENT, UNUSUAL EVENT, UNUSUAL EVENT.

An UNUSUAL EVENT has been declared at _____ hours due to:

(describe conditions and affected areas) _____

The following personnel *(if applicable)* _____
_____ report to _____

All other personnel stay clear of the affected area." *(If applicable)*

5. Repeat the announcement.
6. Turn the PAGE SYSTEM VOLUME INCREASE Switch to the OFF position.

ALERT ANNOUNCEMENT

1. Before making the announcement, have the Shift Manager/Plant Emergency Director (SM/PED) authorize the prepared announcement.

_____ / _____ / _____
SM/PED Authorization (print/sign) Date Time

2. Turn the PAGE SYS VOLUME INCREASE switch to the ALERT position.
3. Turn the ALARM TONE CONTROL switch to the ON position for 10 seconds then return to the OFF position.

NOTE
Do not make plant announcement during a Code Red event.

4. Make the following Gai-Tronics announcement:

"Attention all personnel. Attention all personnel. ALERT, ALERT, ALERT.

An ALERT has been declared at _____ hours due to:

(describe conditions and affected areas) _____

Emergency personnel report to the Technical Support Center, the Operations Support Center, and the Emergency Operations Facility as required. As a precautionary measure, declared pregnant plant staff should leave the site and report to the EOF. All other personnel, visitors, and contractors should evacuate the site. [If applicable:] All other personnel stay clear of the affected area."

5. Repeat the announcement.
6. Turn the PAGE SYSTEM VOLUME INCREASE Switch to the OFF position.

SITE AREA EMERGENCY ANNOUNCEMENT

1. Before making the announcement, have the Shift Manager/Plant Emergency Director (SM/PED) authorize the prepared announcement.

| | | | | |
|-----------------------------------|---|------|---|------|
| SM/PED Authorization (print/sign) | / | Date | / | Time |
|-----------------------------------|---|------|---|------|

2. Turn the PAGE SYS VOLUME INCREASE switch to the EVACUATE position.
3. Turn the ALARM TONE CONTROL switch to the ON position for 10 seconds then return to the OFF position.

NOTE
Do not make plant announcement during a Code Red event.

4. Make the following Gai-Tronics announcement:

"Attention all personnel. Attention all personnel. SITE AREA EMERGENCY, SITE AREA EMERGENCY, SITE AREA EMERGENCY.

A SITE AREA EMERGENCY has been declared at _____ hours due to:

(describe conditions and affected areas) _____

NOTE
The following does not need to be announced if it was announced earlier at the ALERT declaration.

Emergency personnel report to the Technical Support Center, the Operations Support Center, and the Emergency Operations Facility as required. As a precautionary measure, declared pregnant plant staff should leave the site and report to the EOF. All other personnel, visitors, and contractors should report to the Emergency Operations Facility in Brattleboro. [If applicable:] All other personnel stay clear of the affected area."

5. Repeat the announcement.
6. Turn the PAGE SYSTEM VOLUME INCREASE Switch to the OFF position.

GENERAL EMERGENCY ANNOUNCEMENT

1. Before making the announcement, have the Shift Manager/Plant Emergency Director (SM/PED) authorize the prepared announcement.

| | | | |
|-----------------------------------|---|------|------|
| | / | | / |
| SM/PED Authorization (print/sign) | | Date | Time |

2. Turn the PAGE SYS VOLUME INCREASE switch to the EVACUATE position.
3. Turn the ALARM TONE CONTROL switch to the ON position for 10 seconds then return to the OFF position.

NOTE
Do not make plant announcement during a Code Red event.

4. Make the following Gai-Tronics announcement:

"Attention all personnel. Attention all personnel. GENERAL EMERGENCY, GENERAL EMERGENCY, GENERAL EMERGENCY.

A GENERAL EMERGENCY has been declared at _____ hours due to:

(describe conditions and affected areas) _____

NOTE
The following does not need to be announced if it was announced at the ALERT or SITE AREA declaration.

Emergency personnel report to the Technical Support Center, the Operations Support Center, and the Emergency Operations Facility as required. As a precautionary measure, declared pregnant plant staff should leave the site and report to the EOF. All other personnel, visitors, and contractors should report to the Emergency Operations Facility in Brattleboro. [If applicable:] All other personnel stay clear of the affected area.

5. Repeat the announcement.
6. Turn the PAGE SYSTEM VOLUME INCREASE Switch to the OFF position.

EMERGENCY CLASSIFICATION AND PAR NOTIFICATION/UPGRADE FORM

VYOPF 3540.06 INSTRUCTIONS

STATES NOTIFICATION MUST BE INITIATED WITHIN 15 MINUTES OF DECLARATION.

1. Prepare message (Section I). Check A.1. **IF** an event is being declared and fill in appropriate information. Check A.2. **IF** the Protective Action Recommendation is being up-graded. Complete section B using criteria in step 1.10. Complete section C. If a PAR is part of the message, use VYOPF 3511.01 for affected towns. Read Section E only at initial General Emergency declaration to recommend implementation of State KI plan.
2. Obtain signatures (Section II). Individual filling out form must sign. Prior to notifications, get approval of contents of message by getting appropriate signature.
3. Contact States by using appropriate contact number(s) listed below.
4. Record initial State contact times and name of individual contacted (Section III).
5. Fax States by using appropriate fax numbers(s) listed below.
6. Record time notification was faxed to States (Section IV).
7. After all States notifications are completed, inform authorizing individual.

| CONTACT NUMBERS | | | | |
|--------------------------------------|--------------------------------------|-----|------------------------------------|-----|
| | CONTROL ROOM | | EOF/RC | |
| NAS - ORANGE PHONE GROUP CALL | VT/NH/MA STATE POLICE 111 | | VT/NH/MA STATE EOCs 333 | |
| NAS INDIVIDUAL STATION CALL | VT STATE POLICE | 213 | VT STATE EOC | 314 |
| | NH STATE POLICE | 212 | NH STATE EOC | 311 |
| | MA STATE POLICE | 210 | MA STATE EOC | 313 |

NOTE

If NAS - Orange Phone is non-functional, utilize commercial back-up capability.

| | | | | |
|------------------------------------|---|---------------------------------|---|--------------|
| COMMERCIAL TELEPHONE BACKUP | VT STATE POLICE Primary - 802-244-8727 Backup-802-244-7814 | | VT STATE EOC Switchboard - 802-244-8721 Direct Line - 802-241-5476 | |
| | NH STATE POLICE 603-271-3636 | | NH STATE EOC Switchboard - 603-271-2231 Direct Line - 603-223-3662 | |
| | MA STATE POLICE 413-584-3000 | | MA STATE EOC Switchboard - 508-820-2000 Direct Line - 508-820-2075 | |
| FAX NOTIFICATIONS | VT | 802-875-2176 | VT | 802-241-5556 |
| | NH | 603-271-1153 | NH | 603-225-7341 |
| | MA | 413-584-9981 OR 413-587-5740 | MA | 508-875-2517 |

EMERGENCY CLASSIFICATION AND PAR NOTIFICATION/UPGRADE FORM (Continued)

I. MESSAGE

This is (Name: _____, (Title: _____) - from the Vermont Yankee Nuclear Power Station in Vernon, Vermont. Please do not interrupt until the entire message is completed.

A. We have (complete either 1 or 2) C. At the present time, we recommend the following protective actions:

1. Declared a (check one)
- Unusual Event
 - Unusual Event Terminated
 - Alert
 - Site Area Emergency
 - General Emergency

- None As Follows

at _____ hours due to AP 3125 EAL
alpha-numeric designator _____.

2. Upgraded the Protective Actions for the General Emergency which was declared at _____ hours.

| State | Town | Shelter | Evac |
|-------|--------------|--------------------------|--------------------------|
| VT | Brattleboro | <input type="checkbox"/> | <input type="checkbox"/> |
| | Dummerston | <input type="checkbox"/> | <input type="checkbox"/> |
| | Guilford | <input type="checkbox"/> | <input type="checkbox"/> |
| | Halifax | <input type="checkbox"/> | <input type="checkbox"/> |
| | Vernon | <input type="checkbox"/> | <input type="checkbox"/> |
| NH | Chesterfield | <input type="checkbox"/> | <input type="checkbox"/> |
| | Hinsdale | <input type="checkbox"/> | <input type="checkbox"/> |
| | Richmond | <input type="checkbox"/> | <input type="checkbox"/> |
| | Swanzy | <input type="checkbox"/> | <input type="checkbox"/> |
| | Winchester | <input type="checkbox"/> | <input type="checkbox"/> |
| MA | Bernardston | <input type="checkbox"/> | <input type="checkbox"/> |
| | Colrain | <input type="checkbox"/> | <input type="checkbox"/> |
| | Gill | <input type="checkbox"/> | <input type="checkbox"/> |
| | Greenfield | <input type="checkbox"/> | <input type="checkbox"/> |
| | Leyden | <input type="checkbox"/> | <input type="checkbox"/> |
| | Northfield | <input type="checkbox"/> | <input type="checkbox"/> |
| | Warwick | <input type="checkbox"/> | <input type="checkbox"/> |

B. Plant Conditions:

1. The Plant is: (Check one)
- continuing normal operation
 - reducing power levels
 - shut down
2. There is: (Check one)
- no radiation release related to this event
 - a release of radiation BELOW federally approved operating limits in progress, related to this event
 - a release of radiation ABOVE federally approved operating limits in progress, related to this event

D. Follow your State procedures for the designated Classification
E. (At the initial General Emergency declaration, state the following:)

We recommend you implement your State KI plan.

3. Present Meteorological conditions:
Wind speed _____ mph
Wind direction from _____ degrees.

II. PREPARER/APPROVAL SIGNATURES

Form filled out by (print and sign): _____
Authorized by (print and sign): _____ / _____
(PED / TSCC / SRM) Time/Date

III. NOTIFICATION TIME AND ACKNOWLEDGEMENT: (NOTE: INITIAL CONTACT WITH STATES MUST BE MADE WITHIN 15 MINUTES OF DECLARATION OR UPGRADE)

Time notification initiated: VT _____ NH _____ MA _____
Acknowledge of message: VT _____ NH _____ MA _____
Name Name Name

IV. FAX NOTIFICATION FORM TO THE STATES (NOTE: THIS IS TO SUPPLEMENT THE CALL)

Time notification initiated: VT _____ NH _____ MA _____

REMARKS:

STATES NOTIFICATION FOR A CONTROL ROOM EVACUATION

NOTE

If a warble tone is received when notifying the States using the 9-1-XXX-XXXX, the phone you are using is in the powerfail mode. Re-dial without using the 9, and be sure to use the alternate powerfail number for verification.

VT State Police: 9-1-802-244-8727 or 9-1-802-257-7101 or 9-1-802-875-2112
NH State Police: 9-1-603-271-3636
MA State Police: 9-1-413-584-3000

Time Notification initiated: VT _____ NH _____ MA _____

NOTE

Bold text is the message content to be provided to State authorities.

This is Name: _____, Title: _____
at the Vermont Yankee Nuclear Power Station in Vernon, Vermont. Please do not interrupt until the entire message is completed.

- a) We have declared a Site Area Emergency at _____ hours due to an Evacuation of the Control Room. (S-8-d)
- b) The Plant is shut down. (Use unless better information is known.)
- c) A release is not expected to occur. (Use unless better information is known.)
- d) Present meteorological conditions: wind speed is _____ mph and wind direction is from _____ degrees.
- e) At the present time, we recommend the following protective actions: NONE
- f) Follow your State procedures for the designated classification.

PLEASE NOTE:

You are receiving this notification via commercial telephone. Verification phone number is _____, Ext. _____. Repeat. You are receiving this notification via commercial telephone. Verification phone number is _____, Ext. _____.

MESSAGE ACKNOWLEDGEMENTS: (Record information)

Receipt by (print/sign): _____

| | |
|----------------|-------------|
| VT Name: _____ | Time: _____ |
| NH Name: _____ | Time: _____ |
| MA Name: _____ | Time: _____ |

REMARKS:

REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | |
|--|------------------------------|--|-----------------------------|
| A. Procedure No. OP 3541 | New Revision No. 2 | Title Activation of the TSC | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | |
| D. List DIs & LPCs: 1-2 | | | |
| E. Description and Reasons for Procedure/Changes: <ul style="list-style-type: none"> Title changes throughout. Changed wording for step 6.0 as board is permanently mounted to wall. Changed wording for step 8.0 as parameter sheets are not set up at activation. Changed "blank forms" to "Implementing Forms" to avoid confusion (HU). Clarified the incoming and outgoing fax machines. Clarified steps in declaring activation and added a step to ensure that the facility is setup if activation is declared prior to the completion of setup. Also, ties this directly to OP 3542. Other small changes made to enhance and add formality to procedure. | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | Telephone Extension: |
| (Print/sign/date) Audra Williams | | <i>Audra Williams</i> | 3/10/03 x4177 |

PART 2 - Reviews

| | | | |
|---|-------------|---|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A (App. B used as a reference) | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | (Print/Sign/Date) <i>3/24/03</i> <i>Loei A. Tkaczyk</i> | |
| C. Cross-Discipline Reviews: | | <input checked="" type="checkbox"/> N/A | |
| Department | Name | Signature | Date |
| | | | |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations <input type="checkbox"/> N/A | | | |
| <input checked="" type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <i>AW</i> <input checked="" type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) | | | |
| (Print/Sign/Date) <i>Audra Williams</i> | | <i>Audra Williams</i> <i>3.24.03</i> | |
| F. ORIGINATOR: | | <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date <i>AWP 3/17/03</i> <input checked="" type="checkbox"/> Proofread after Final Type | |
| (Print/Sign/Date) <i>Audra Williams</i> | | <i>Audra Williams</i> <i>3.24.03</i> | |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: Trainersoft Module

Crew Briefings:

Other:

N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian W. Finn *Brian W. Finn* 3/24/3

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 04/02/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP 3541, Rev. 2, Activation of the Technical Support Center

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):

- | | | |
|---|------------|-----------|
| (1) Assignment of Emergency Response Organization responsibilities | YES | <u>NO</u> |
| (2) Assignment of on-shift Emergency Response Organization personnel | YES | <u>NO</u> |
| (3) Arrangements for Emergency Response Support and Resources | YES | <u>NO</u> |
| (4) Emergency Classification and Action levels, including facility system and effluent parameters | YES | <u>NO</u> |
| (5) Notification Methods and Procedures | YES | <u>NO</u> |
| (6) Emergency Communications among principal response organizations and the public | YES | <u>NO</u> |
| (7) Public Education and Information | YES | <u>NO</u> |
| (8) Adequacy of Emergency Facilities and Equipment | <u>YES</u> | NO |
| (9) Adequacy of Accident Assessment methods, systems and equipment | YES | <u>NO</u> |
| (10) Plume exposure pathway EPZ protective actions | YES | <u>NO</u> |
| (11) Emergency Worker Radiological Exposure Control | YES | <u>NO</u> |
| (12) Medical Services for contaminated injured individuals | YES | <u>NO</u> |
| (13) Recovery and Reentry Plans | YES | <u>NO</u> |
| (14) Emergency response periodic drills and exercises | YES | <u>NO</u> |
| (15) Radiological Emergency Response Training | YES | <u>NO</u> |
| (16) Plan development, review and distribution | YES | <u>NO</u> |

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|------------|-----------|
| (1) Section IV. A - Organization | YES | <u>NO</u> |
| (2) Section IV. B - Assessment Actions | YES | <u>NO</u> |
| (3) Section IV. C - Activation of Emergency Organizations | YES | <u>NO</u> |
| (4) Section IV. D - Notification Procedures | YES | <u>NO</u> |
| (5) Section IV. E - Emergency Facilities and Equipment | <u>YES</u> | NO |
| (6) Section IV. F - Training | YES | <u>NO</u> |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <u>NO</u> |
| (8) Section IV. H - Recovery | YES | <u>NO</u> |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50.47(b)(8) & Appendix E, Section IV. E of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

Changes to the steps in the setup of the facility were to enhance the procedure and describe how it actually is being done. It also adds clarity and takes into account Human Performance issues.

The step to allow the TSC to be activated prior to complete setup, but with minimum required staffing of positions, does not affect the performance of the TSC Coordinator or his functions. The setup will simultaneously occur by other staff members and allows the TSC Coord. to focus on his responsibilities while the staff ensures phones/faxes/equipment are properly working. Both OP 3541 and OP 3542 have added steps to ensure that the complete setup is done and steps are not missed.

These changes do not decrease the effectiveness of the EPlan and it continues to meet all requirements.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
- Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: OP 3542

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 3/10/03
(Print/Sign)

Reviewed By: Lon A. Traczyn *Lon A. Traczyn* Date: 3/24/03
(Emergency Plan Coordinator) (Print/Sign)

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3541

REVISION 2

ACTIVATION OF THE TECHNICAL SUPPORT CENTER (TSC)

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PURPOSE

To outline the actions required to activate the Technical Support Center (TSC).

DISCUSSION

The TSC is activated depending on the classification of the emergency. There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

The Technical Support Center Coordinator (TSCC) designates an individual responsible for initiating this procedure following an emergency classification announcement.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the procedure scope is not changed. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

1. Table 1 Personnel Assignment List
2. Table 2 Equipment Locations
3. Figure 1 Technical Support Center Sample Footprint

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. E_Drill-2001-GEN-6_02
 - b. ER2001-1773_02
4. Supplemental References
 - a. AP 3125, Emergency Plan Classification and Action Level Scheme
 - b. OP 3504, Emergency Communications
 - c. OP 3507, Emergency Radiation Exposure Control
 - d. OP 3524, Emergency Actions to Ensure Initial Accountability and Security Response
 - e. OP 3531, Emergency Call-in Method
 - f. OP 3540, Control Room Actions During an Emergency
 - g. OP 3542, Operation of the Technical Support Center (TSC)
 - h. OP 3544, Operation of the Operations Support Center (OSC)
 - i. OP 3545, Activation of the Emergency Operations Facility/Recovery Center EOF/RC
 - j. OP 3546, Operation of the Emergency Operations Facility/Recovery Center EOF/RC
 - k. OP 3547, Security Actions During an Emergency
 - l. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.

PROCEDURE

NOTES

- Phones, Supplies & Equipment are stored in the EP cabinets in the kitchen across from TSC.
- Steps may be performed concurrently or out of sequence.

Designate person to complete 3541

Name (print): _____

Date: _____

Time/Date Initials

- | | | |
|-----|---|------------------|
| 1.0 | Turn on ARMs in the TSC Area. Notify RP Coordinator if ARMs do not appear to be operating properly. | _____/_____ / |
| 2.0 | Check wall mounted phones in TSC for dial tone. (See Figure 4 of OP 3504.) | _____/_____ / |
| 3.0 | Setup & check phones in NRC Office area for dial tone. (See Figure 4 of OP 3504) | _____/_____ / |
| 4.0 | Arrange chairs and tables per Figure 1. | _____/_____ / |
| 5.0 | Layout EOP charts and markers against the East wall. | _____/_____ / |

NOTE

Individuals filling positions on the sign-in board must also sign in on VYOPF 3524.02.

- | | | |
|-----|---|------------------|
| 6.0 | As key personnel arrive, ensure they sign-in on board | _____/_____ / |
| 7.0 | Set out VYOPF 3524.02 sign-in forms and ensure all personnel sign. | _____/_____ / |
| 8.0 | Label the left side of the West wall whiteboard "Plant Parameter Sheets." | _____/_____ / |
| 9.0 | Label the right side of the West wall whiteboard with: | _____/_____ / |
| | 1) TSC Briefing (time) | |
| | 2) Current TSC Coordinator (name) | |

Time/Date Initials

- 10.0 Place emergency classification label on the South wall whiteboard. _____ / _____
- 11.0 Label the whiteboard (South wall) "Chronology of significant events" to the left of the emergency classification label. _____ / _____
- 12.0 Label the whiteboard (South wall) "Work Items/Priorities" to the left of the chronology board. _____ / _____
- 13.0 Setup TSC logbook. _____ / _____
- 14.0 Place paper organizers (file trays) near end of table where the logbook and TSC Coordinator are. _____ / _____
- 15.0 Place large stacks of 3 part forms near paper organizers and on small tables _____ / _____
- 16.0 Place Implementing Procedures, ERF Directory and TSC Implementing Forms books on table near TSC Coordinator. _____ / _____
- 17.0 Setup outgoing fax machine in copier room (x5995) and test by faxing between incoming fax machine (x5440) in copier room. A spare fax machine is available in the General Manager Admin Assistant's office. (See Figure 4 of OP 3504) _____ / _____

NOTE

The Emergency Response Data System (ERDS) must be enabled as soon as possible, but not later than one hour, after the initial declaration of an Alert, Site Area Emergency, or General Emergency.

- 18.0 Process Computer Engineering Staff Member activates the Emergency Response Data System (ERDS) data link w/NRC (per RP 2454). _____ / _____

FINAL CONDITIONS

NOTE

The necessary support staff is dependent on the nature of the emergency and is determined by the TSC Coordinator. Minimum Staffing for activation of the TSC includes:

- TSC Coordinator
- Engineering Representative
- Maintenance Representative
- Security Representative
- Operations Representative
- Reactor Engineering Representative
- Radiation Protection Representative
- Chemistry Representative
- OSC Coordinator

| | <u>Time/Date</u> | <u>Initials</u> |
|---|------------------|-----------------|
| 1. All required positions on Table 1 are filled. | _____ / _____ | |
| 2. Report to the TSC Coordinator that the TSC is ready for activation. | _____ / _____ | |
| 3. Ensure that names of personnel stationed at the TSC are provided to Security as soon possible. (VYOPF 3524.02) | _____ / _____ | |
| 4. Ensure that the TSC setup has been completed as soon as reasonably possible. | _____ / _____ | |
| 5. Return completed procedure to the Emergency Plan Coordinator for filing in accordance with AP 6807 | | |

**TABLE 1
PERSONNEL ASSIGNMENT LIST**

| Required for Activation | Personnel |
|--|------------------|
| Technical Support Center Coordinator | _____ |
| Engineering | _____ |
| Maintenance | _____ |
| Security | _____ |
| Operations | _____ |
| Reactor Engineering | _____ |
| Radiation Protection | _____ |
| Chemistry | _____ |
| Operations Support Center Coordinator | _____ |

**TABLE 2
EQUIPMENT LOCATIONS
(PER OP 3504)**

| ITEM | LOCATION |
|---|--|
| Area map/dispersion wheel, UHF radio, Nomogram | In the Support Area outside of the TSC |
| FTS phones, supplies, procedures, etc. | In upper cabinets in kitchen across from TSC |

FIGURE 1
TECHNICAL SUPPORT CENTER SAMPLE FOOTPRINT

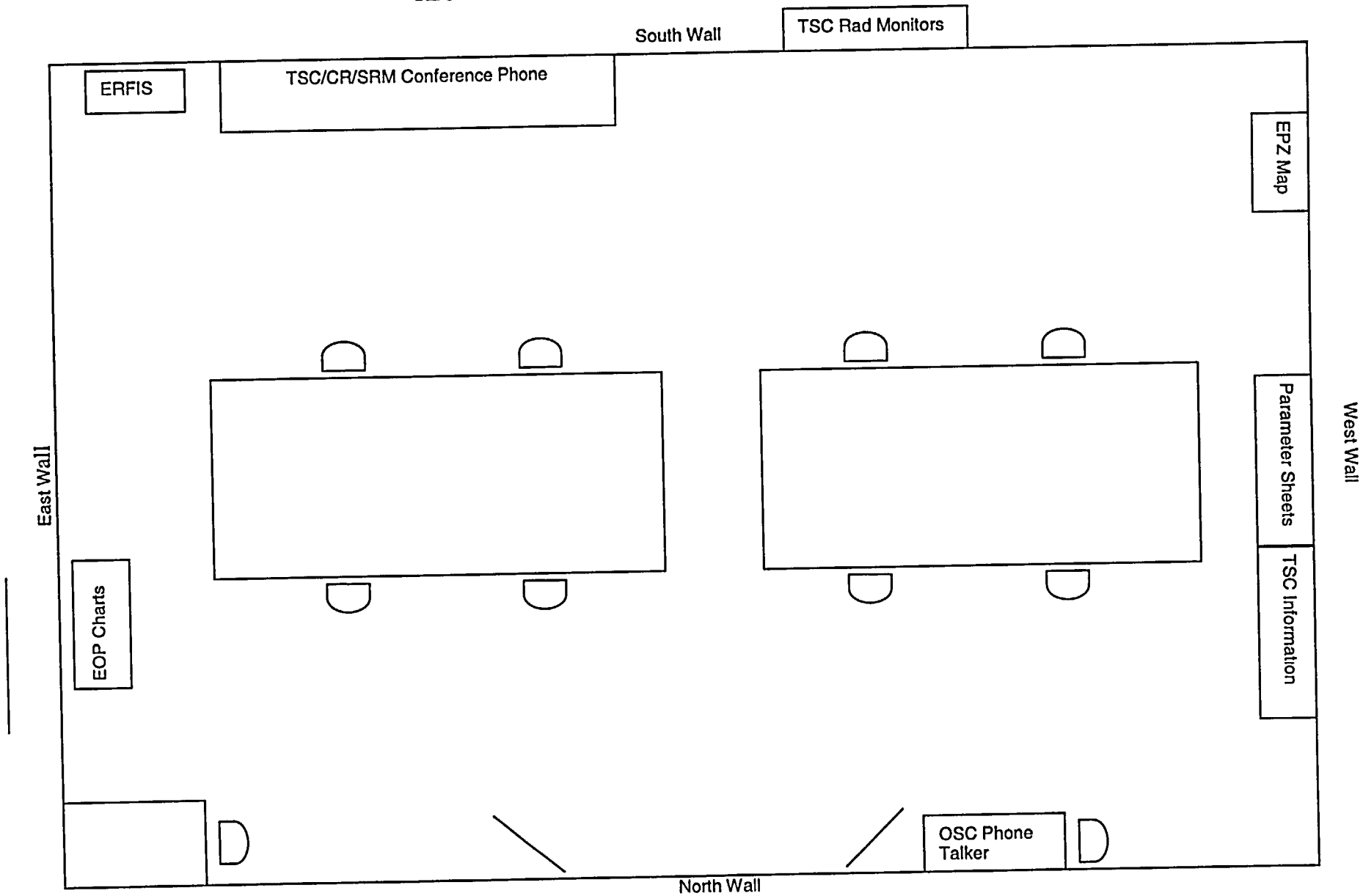


Figure 1
OP 3541 Rev. 2
Page 1 of 1

REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | |
|--|----------------------------------|---|--------------------------------------|
| A. Procedure No. OP 3542 | New Revision No. No. 2 | Title Operation of the TSC | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | |
| D. List DIs & LPCs: 1-3 | | | |
| E. Description and Reasons for Procedure/Changes: | | | |
| <ul style="list-style-type: none"> • Title changes throughout. • Added EAPL to reference section. • Added to Precautions-refer to the EAPL when assigning individuals to positions. • Added NOTE for activation of TSC prior to setup completion. • Added step to ensure OP 3541 has been completed as soon as reasonably possible if not done prior to declaration of activation of TSC. • Added words to assignment of OSCC and SAM Decision Maker steps to use EAPL to determine qualified individuals. | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | Telephone Extension: x4177 |
| (Print/sign/date) Audra Williams | | <i>Audra Williams</i> | 3/9/03 |

PART 2 - Reviews

| | | | |
|--|-------------|--|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A (App. B used as a reference) 3/24/03 (Print/Sign/Date) <i>Lori N. Tkaczyk</i> | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | <i>Lori N. Tkaczyk</i> | |
| C. Cross-Discipline Reviews: | | <input checked="" type="checkbox"/> N/A | |
| Department | Name | Signature | Date |
| | | | |
| | | | |
| | | | |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations <input type="checkbox"/> N/A | | | |
| <input checked="" type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <i>Alw</i> <input checked="" type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> | 3-24-03 |
| F. ORIGINATOR: <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered | | | |
| <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date <i>amp</i> 3/18/03 <input checked="" type="checkbox"/> Proofread after Final Type | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> | 3-24-03 |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: Trainersoft Module prior to Exercise

Crew Briefings:

Other:

N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian M. Finn *Brian M. Finn* 3/25/03

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 4/2/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP

OP 3542, Rev. 2, Operation of the TSC

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
- (1) Assignment of Emergency Response Organization responsibilities YES NO
 - (2) Assignment of on-shift Emergency Response Organization personnel YES NO
 - (3) Arrangements for Emergency Response Support and Resources YES NO
 - (4) Emergency Classification and Action levels, including facility system and effluent parameters YES NO
 - (5) Notification Methods and Procedures YES NO
 - (6) Emergency Communications among principal response organizations and the public YES NO
 - (7) Public Education and Information YES NO
 - (8) Adequacy of Emergency Facilities and Equipment YES NO
 - (9) Adequacy of Accident Assessment methods, systems and equipment YES NO
 - (10) Plume exposure pathway EPZ protective actions YES NO
 - (11) Emergency Worker Radiological Exposure Control YES NO
 - (12) Medical Services for contaminated injured individuals YES NO
 - (13) Recovery and Reentry Plans YES NO
 - (14) Emergency response periodic drills and exercises YES NO
 - (15) Radiological Emergency Response Training YES NO
 - (16) Plan development, review and distribution YES NO

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|-----|-------------------------------------|
| (1) Section IV. A - Organization | YES | <input checked="" type="radio"/> NO |
| (2) Section IV. B - Assessment Actions | YES | <input checked="" type="radio"/> NO |
| (3) Section IV. C - Activation of Emergency Organizations | YES | <input checked="" type="radio"/> NO |
| (4) Section IV. D - Notification Procedures | YES | <input checked="" type="radio"/> NO |
| (5) Section IV. E - Emergency Facilities and Equipment | YES | <input checked="" type="radio"/> NO |
| (6) Section IV. F - Training | YES | <input checked="" type="radio"/> NO |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <input checked="" type="radio"/> NO |
| (8) Section IV. H - Recovery | YES | <input checked="" type="radio"/> NO |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50 N/A of Section A above, this change (DOES/DOES NOT) decrease the effectiveness of the Emergency Plan and (DOES/DOES NOT) continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

The reference to using the EAPL when assigning individuals to specific positions was to add clarity and formality to the procedure. It ensures the use of qualified individuals being assigned.

The note and step added to the procedure for TSC setup and activation allows the TSC to be activated with the minimum staffing requirements met and allows the TSC Coordinator to continue with OP 3542 responsibilities. OP 3541 can be completed concurrently to the TSC Coord. implementing OP 3542. A step following the announcement of TSC activation has been added in OP 3542 to ensure that the setup procedure and the steps involved with OP 3541 will be completed, if not done so prior to activation.

The word "Implementing" was added to the TSC Forms Book so to avoid confusion with any other forms books. This was to eliminate human performance errors.

These changes enhance and formalize the procedure and do not decrease the effectiveness of the E-Plan and it continues to meet all requirements.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: OP 3541

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 3/9/03
(Print/Sign)

Reviewed By: Lori A. Traczyk *Lori A. Traczyk* Date: 3/24/03
(Emergency Plan Coordinator) (Print/Sign)

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3542

REVISION 2

OPERATION OF THE TECHNICAL SUPPORT CENTER (TSC)

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PURPOSE

To outline the operation of the Technical Support Center (TSC).

DISCUSSION

There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director, who, in turn, instructs Control Room personnel to activate the notification system. Notification of State authorities must be initiated within 15 minutes after the event has been classified. The NRC must be notified immediately after the States' notification, but not later than one (1) hour after the event has been classified.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

The basic shift complement is able to deal with Unusual Event conditions. On-duty personnel are assigned to functions as required. Additional members of the plant organization, including top management, are notified by Plant Security, and augment on-duty personnel as necessary. The Duty On Call Officer who is available on an on-call basis must report to the site and will assume the role of the TSC Coordinator. Dissemination of public information and closure or escalation to a more severe classification will occur as conditions warrant.

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

An Alert event requires action beyond the normal capability of the basic shift complement. Plant response and off-site notification associated with this event classification ensure that sufficient emergency response personnel are mobilized to activate the Technical Support Center (TSC) and the Operations Support Center (OSC). The Emergency Operations Facility/Recovery Center (EOF/RC) is activated with the Site Recovery Manager (SRM), the EOF Coordinator and other EOF/RC staff members. Sufficient emergency assistance personnel to assess off-site radiological impact are assigned if the Alert event is producing releases off-site. Actual releases of radioactivity which substantially exceed Technical Specification limits may be involved and thus radiation monitoring and dose projection may be an integral portion of the emergency response required. Prompt notification is made to State authorities and follow-up information is provided as needed to off-site emergency organizations.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

Plant resources are anticipated to be sufficient to cope with a Site Area Emergency. Outside resources, however, are mobilized and selected members are dispatched to the site. All emergency centers are activated following declaration of a Site Area Emergency. All non-essential personnel are evacuated from the site. Representatives from adjoining States are dispatched to the Emergency Operations Facility. Assessment of plant conditions and off-site radiological parameters determine the type of protective measures necessary for protection of the public sector. The public is notified of the event by local media facilities and periodic updates of information are released to ensure uniform, adequate response to real conditions.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

Contracted service organizations, sponsor utilities, and other industry resources are alerted and requested to render assistance as appropriate. In addition, Federal resources are called upon for assistance. Assessment of plant conditions and off-site radiological parameters determine the type of protective action recommendations.

Plant representatives closeout or escalate the emergency classification, or move to recovery as conditions warrant. Written summaries of the event are provided to off-site authorities and other affected agencies.

The Technical Support Center Coordinator (TSCC) is responsible for initiating this procedure following an emergency classification announcement. The TSCC assumes responsibility from the Shift Manager/Plant Emergency Director (SM/PED), including the following primary responsibilities until the SRM assumes them:

- Escalation of the emergency
- Notification of off-site NRC authorities (FTS ENS Phone), and
- Authorization of off-site protective action recommendations (PARs) by signature on VYOPF 3540.06 or VYOPF 3546.02, "Emergency Classification and PAR Notification Form"

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the procedure scope is not changed. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

1. Appendix A Personnel Accountability Check
2. Appendix B TSC Briefing Guideline
3. VYOPF 3542.01 Personnel Accountability Log

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. LAI-801
 - b. INS8626-02
 - c. SIL0324R3
4. Supplemental References
 - a. Emergency Assistance Personnel List (EAPL)
 - b. AP 0009, Event Reports
 - c. AP 0010, Situational Reporting Requirements
 - d. AP 0021, Work Orders
 - e. AP 0156, Notification of Significant Events
 - f. AP 0864, Fitness for Duty
 - g. AP 3125, Emergency Plan Classification and Action Level Scheme
 - h. OP 3504, Emergency Communications
 - i. OP 3507, Emergency Radiation Exposure Control
 - j. OP 3511, Off-Site Protective Action Recommendations
 - k. OP 3513, Evaluation of Off-Site Radiological Conditions
 - l. OP 3524, Emergency Actions to Ensure Initial Accountability and Security Response
 - m. OP 3531, Emergency Call-In Method
 - n. OP 3540, Control Room Actions During an Emergency
 - o. OP 3541, Activation of the Technical Support Center (TSC)
 - p. OP 3544, Operation of the Operations Support Center (OSC)
 - q. OP 3545, Activation of the Emergency Operations Facility/Recovery Center (EOF/RC)
 - r. OP 3546, Operation of the Emergency Operations Facility/Recovery Center (EOF/RC)
 - s. OP 3547, Security Actions During an Emergency
 - t. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.
2. Refer to the Emergency Assistance Personnel List (EAPL) when assigning individuals to positions.

PROCEDURE

NOTES

- With the exception of authorizing Protective Action Recommendations and classifications, actions required in this checklist may be assigned to other personnel as appropriate. The designated individual, however, has the overall responsibility for the execution of the checklist.
- Record time and initials as required.
- Steps may be performed concurrently or out of sequence.
- Some steps have multiple signature lines, based on event level. The step should be initialed for each event level it is completed for. If an event escalates, each step with that event level designator should be rechecked to ensure no further action is required.

TSC Coordinator Name (print): _____

Date: _____

Time/Date Initials

1.0 Immediate Actions

- 1.1. Contact the SM/PED, in the Control Room, to obtain specific information concerning the initiating event.

U _____ / _____
A _____ / _____
S _____ / _____
G _____ / _____

Time/Date

Initials

- 1.2. For an UNUSUAL EVENT or UNUSUAL EVENT-TERMINATED, contact the Director of Public Affairs or Company Spokesperson to ensure adequate information concerning the event has been received and record person contacted below.

_____ / _____
 Public Affairs Person Contacted

NOTES

- SM/PED retains responsibility for off-site States' notifications (NAS – Orange Phone) until Site Recovery Manager assumes responsibility for implementation of VY Emergency Plan
- The FTS NRC ENS phone (#41) is located in the southwest corner of the room (see Figure 4 of OP 3504)

- 1.3. Contact the SM/PED when ready to assume overall responsibility for the implementation of the VY Emergency Plan. This includes the following primary responsibilities: _____ / _____

- 1.3.1. Escalation of the emergency,
- 1.3.2. Notification of off-site NRC authorities (FTS ENS phone), and
- 1.3.3. Authorization of off-site protective action recommendations (PARs).

NOTE

Facility activation may be modified or suspended if the safety of personnel may be jeopardized by a security event or other event hazardous to personnel.

- 1.4. Assign an individual to implement OP 3541, Activation of the TSC.

Name: _____ / _____

- 1.5. Assign an individual to read AP 3125 and track all subsequent EAL entries.

Name: _____ / _____

- | | <u>Time/Date</u> | <u>Initials</u> |
|--|------------------------------|-----------------|
| 1.6. Ensure that a TSC staff member is assigned to record in the TSC Logbook all TSC activities associated with exercising effective direction and control of the emergency. | / | _____ |
| 1.7. If a release is in progress or expected, ensure that OP 3513, Evaluation of Off-Site Radiological Conditions, is implemented by a qualified individual. | (circle event) A S G / | _____ |
| 1.8. IF conditions warrant escalation to a GENERAL EMERGENCY, THEN implement OP 3511, "Off-Site Protective Action Recommendations." | G / | _____ |

NOTE

Minimum staffing for activation includes:

- 1) TSC Coordinator
- 2) Engineering Representative
- 3) Maintenance Representative
- 4) Security Representative
- 5) Operations Representative
- 6) Reactor Engineering Representative
- 7) Radiation Protection Representative
- 8) Chemistry Representative
- 9) OSC Coordinator

- | | | |
|---|------------------------------|-------|
| 1.9. Ensure that Technical Support Center Staff is in place for activation and that the minimum required staffing is fulfilled. | (circle event) A S G / | _____ |
|---|------------------------------|-------|

NOTE

The TSC may be "activated" prior to setup as long as the minimum required staffing is fulfilled. Setup should be completed as soon as reasonably possible.

- | | | |
|---|------------------------------|-------|
| 1.10. Notify the SM/PED (and the SRM, if applicable) that the TSC is activated. | (circle event) A S G / | _____ |
|---|------------------------------|-------|

Time/Date

Initials

1.11. Announce over the plant paging system that the TSC is activated. ("Attention in the Plant, Attention in the Plant, the Technical Support Center is now activated, repeat, the Technical Support Center is now activated") (Repeat)

_____ / _____

1.12. If activation of TSC was declared prior to TSC setup completion, ensure all steps of OP 3541 have been completed as soon as reasonably possible.

_____ / _____

NOTE

The Emergency Response Data System (ERDS) must be enabled as soon as possible, but not later than one hour, after the initial declaration of an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY

1.13. Ensure the ERDS data link with the NRC has been enabled per RP 2454.

_____ / _____

1.14. Maintain overall responsibility until relieved by the Site Recovery Manager.

1.15. Record time when Site Recovery Manager calls to assume responsibility for implementation of the VY Emergency Plan.

SRM Name: _____

_____ / _____

1.16. Assign the Operations Support Center Coordinator (OSCC). (Use EAPL to determine qualified individual.)

OSCC Name: _____

_____ / _____

NOTE

All work assignments from the TSC to the OSC should be made through the phone to the Communicator. Do not use the ring down phone or Gaitronics.

1.17. IF the possibility of a radiological release is likely to occur, THEN the TSC Coordinator or designee initially directs the activities and maintains communications with site boundary and off-site teams until the EOF/RC is deemed operational.

_____ / _____

Time/Date

Initials

NOTE

Accountability may be suspended if the safety of personnel may be jeopardized by a security event or other event hazardous to personnel.

- 1.18. Direct a staff member to perform initial and continuous personnel accountability of the TSC, OSC and CR personnel as stipulated in, Appendix A, Personnel Accountability Check, and OP 3524 guidance. (circle event)
A S G
_____ / _____
- 1.19. When notified by Security that the initial accountability check has been completed, contact the SRM at the EOF to report status (including any missing personnel).
_____ / _____
- 1.20. IF any persons are reported missing during the accountability checks, THEN perform the following steps:
 - 1.20.1. Page the unaccounted for individual(s) in an attempt to locate them,
 - 1.20.2. As necessary, direct the OSC Coordinator to dispatch an on-site search and rescue team to locate the individual(s), and,
 - 1.20.3. Inform the Security Access Control Officer once the individual(s) are located.
- 1.21. Once accountability is complete, make decision regarding further disposition of company and contractor evacuees, either to stand by or leave the site completely.

NOTE

If ERFIS is not available, the assigned individual (in Step 1.22) will also relay appropriate meteorological and radiological information to the Radiological Assistant at the EOF.

- 1.22. When necessary, assign an individual to report to the Control Room to relay appropriate radiological information to the RP Checkpoint. (circle event)
A S G
_____ / _____

Time/Date

Initials

1.23. Direct and coordinate the on-site assistance team activities as follows:

1.23.1. Prioritize job tasks to be implemented with the SM/PED, and OSC Coordinator, if staffed.

1.23.2. Ensure that the applicable work control process defined in AP 0021, "Work Orders", is used.

1.23.3. Authorize emergency dose commitments for required job tasks in accordance with OP 3507, "Emergency Radiation Exposure Control."

1.23.4. Obtain periodic updates of job tasks implemented.

1.23.5. Periodically re-evaluate job priorities to mitigate the emergency condition and prevent or minimize release of radioactive material.

1.24. Ensure that a licensed individual reviews and approves all 10CFR50.54(x) considerations. Document any 10CFR50.54(x) considerations made in TSC Log Book.

_____ / _____

1.25. When informed by the SRM that the EOF/RC is activated, make the announcement over the plant paging system that the EOF is activated. ("Attention in the Plant, attention in the Plant. The Emergency Operations Facility and Recovery Center is activated. Repeat the Emergency Operations Facility and Recovery Center is activated.") (Repeat)

(circle event)

A S G

_____ / _____

2.0 Subsequent Actions

Time/Date

Initials

NOTE

Activation of the TSC and the EOF constitutes an ALERT per AP 3125.

- | | | | |
|------|---|--|--|
| 2.1. | Initiate the escalation of the emergency classification as conditions warrant. IF conditions warrant escalation to a GENERAL EMERGENCY, THEN implement OP 3511, "Off-Site Protective Action Recommendations." | (circle event) A S G _____ / _____ | |
| 2.2. | If warranted, ensure that manpower and planning is being conducted to provide for response efforts over an extended period. | (circle event) A S G _____ / _____ | |
| 2.3. | If the NRC requests an open, continuous ENS communications channel (FTS ENS Phone), assign a technically competent individual to continuously maintain the FTS ENS Phone (LAI-801). Name: _____ | (circle event) A S G _____ / _____ | |
| 2.4. | Notify the Control Room that the TSC is assuming responsibility for transmitting plant parameter sheets to the EOF. (VYOPF 3504.02) | _____ / _____ | |
| 2.5. | After consultation with the OSC Coordinator, notify the Control Room that the TSC is assuming responsibility for deployment of the AOs. | _____ / _____ | |

NOTE

Refer to OP 3504 to establish the HPN channel.

- | | | | |
|------|---|--|--|
| 2.6. | If the NRC requests an open, continuous Health Physics Network (HPN) Communications Channel, assign a technically competent individual to continuously maintain the HPN phone until relieved by the EOF staff (LAI-801). Name: _____ | (circle event) A S G _____ / _____ | |
|------|---|--|--|

Time/Date

Initials

- 2.7. Provide continuous technical support and assistance to the Site Recovery Manager concerning Emergency Action Levels (EALs) and emergency classifications changes (INS8626-02).
- 2.8. Transfer status information to the Site Recovery Manager as appropriate.
- 2.9. Verify that continuous accountability per Appendix A, Step 5 is maintained. IF any persons are reported missing during the accountability checks, THEN perform Step 1.20 in the Immediate Actions Section.

_____ / _____

NOTE

Ensure that the status boards are updated frequently, and units of measurement are specified.

- 2.10. Using Appendix B, brief the TSC staff periodically on the status of the emergency and pertinent plant conditions.
- 2.11. Engage in periodic discussion with the SM/PED to maintain up-to-date plant status/priorities and review intended plans.
- 2.12. If deemed necessary to request emergency assistance from the General Electric BWR Emergency Support Program, refer to OP 3504 (SIL0324R3).
- 2.13. Relative to the Engineering Support Group (ESG), assign technically competent individual(s) to do the following:
 - 2.13.1. Coordinate and prioritize any engineering tasks requested of the ESG, and
 - 2.13.2. Obtain and direct the necessary support personnel to assist the ESG in their activities (INPO, Mutual Assistance, etc.)
- 2.14. Have announced over the plant paging system any protective actions the States may be implementing. ("Attention in the Plant Attention in the Plant, the State(s) of VT/NH/MA have or has directed the following Protective Actions be taken in the following towns (whatever the actions the towns are") (Repeat).

_____ / _____

_____ / _____

A _____ / _____
S _____ / _____
G _____ / _____

2.15. If it is determined that the emergency requires implementation of Severe Accident Management, duties and responsibilities will be assumed per the SAM Guideline.

2.16. Assign the SAM Decision Maker. (Use EAPL to determine qualified individual.)

Name: _____

2.17. Depending upon the duration of the emergency, the Purchasing Coordinator, in coordination with SRM, will make arrangements for food delivery. When food arrives at Gate 1, Security will notify the TSC Coordinator. The TSC Coordinator will delegate to staff, who are not actively engaged in plant mitigation or recovery efforts, the distribution of food to workers.

Time/Date

Initials

_____ / _____

FINAL CONDITIONS

Time/Date

Initials

A. For UNUSUAL EVENT

1. De-escalation from an emergency phase to a recovery phase will require satisfying the following criteria:

a. Criticality controls are in effect

U _____ / _____

b. The core is being adequately cooled

U _____ / _____

c. The fission product release has been controlled.

U _____ / _____

d. Control has been established over containment pressure and temperature.

U _____ / _____

e. An adequate heat transfer path to an ultimate heat sink has been established.

U _____ / _____

f. Reactor coolant system pressure is under control.

U _____ / _____

g. UNUSUAL EVENT conditions (from AP 3125) have been reviewed, under control, and not expected to deteriorate further.

U _____ / _____

Time/Date

Initials

- 2. Immediately after the UNUSUAL EVENT has been terminated, contact the respective State Police Dispatcher for each State, using the Nuclear Alert System (NAS - Orange Phone) (VT-213, NH-212, MA-210) or use backup commercial phone numbers (VT 802-244-8727, NH 603-271-3636, MA 413-584-3000).

U ____ / ____

- 3. Request that the State Police Dispatcher advise the cognizant State official of the following:

"Vermont Yankee's UNUSUAL EVENT emergency has been terminated at _____(time) on _____(date).

Please have your cognizant official contact Vermont Yankee to provide a verbal closeout."

U ____ / ____

NOTE

In the event of an UNUSUAL EVENT which is immediately terminated, this verbal closeout may be accomplished when the State official calls for initial information.

- 4. Record time/date of calls and names of the State officials who were provided with the verbal closeout of the UNUSUAL EVENT.

| | <u>Official</u> | <u>Time</u> | <u>Date</u> |
|--|-----------------|-------------|-------------|
|--|-----------------|-------------|-------------|

| | | | |
|-------------|-------|---|---|
| State of VT | _____ | / | / |
|-------------|-------|---|---|

| | | | |
|-------------|-------|---|---|
| State of NH | _____ | / | / |
|-------------|-------|---|---|

| | | | |
|-------------|-------|---|---|
| State of MA | _____ | / | / |
|-------------|-------|---|---|

U ____ / ____

- 5. Contact the Nuclear Regulatory Commission for a verbal closeout of the event.

| | | |
|-------------|------|----------|
| _____ | / | / |
| NRC Contact | Time | Initials |

U ____ / ____

- 6. Notify the Director of Public Affairs or designee when the event has been terminated.

U ____ / ____

- 7. Initiate an Event Report per AP 0009 for the event that resulted in the declaration of the UNUSUAL EVENT.

U ____ / ____

Time/Date

Initials

B. For ALERT, SITE AREA and GENERAL

1. Upon termination of the emergency, assist the Site Recovery Manager with the verbal closeout and preparation of a written report, if required, to off-site authorities.

_____/_____

2. Ensure that the Vernon Process Computer Engineering staff has shut off the ERDS data link with the NRC.

_____/_____

3. Ensure TSC equipment and facilities are returned to pre-emergency status.

_____/_____

4. Ensure the TSC Implementing Forms Book and the E-Plan Implementing Procedures Book are complete and current by replacing any missing forms/procedures following the event.

_____/_____

C. Event Closure

1. Forward this procedure to the Emergency Plan Coordinator (EPC).

_____/_____

NOTE

Emergency Planning will sign off Step C.2

2. When a written report is generated, ensure a copy is forwarded to the Emergency Plan Coordinator for the following Off-Site Authorities:

Director of Vermont Emergency Management -
State of Vermont

_____/_____

Director of Massachusetts Emergency Management -
Commonwealth of Massachusetts

_____/_____

Director of New Hampshire Emergency Management -
State of New Hampshire

_____/_____

APPENDIX A

PERSONNEL ACCOUNTABILITY CHECK

NOTE

Initial accountability should be completed as soon as possible upon the announcement of the emergency classification. A target of approximately 30 minutes should be used.

1. Obtain a copy of VYOPF 3524.02 to initiate the sign in of all individuals reporting to the TSC and OSC.
2. Ensure that individuals reporting to the TSC and OSC sign in on VYOPF 3524.02.
3. Contact the SM/PED in the Control Room to obtain the names of all personnel who are assigned to the Control Room and record names of individuals on VYOPF 3524.02.
4. As soon as possible, take the completed VYOPF 3524.02 to the Security Access Control Officer at Gatehouse 2.
5. Coordinate the implementation of continuous accountability as follows:

NOTE

Figures 1 and 3 of OP 3524 lists the monitoring post to be staffed.

- a. Assign individuals to accountability posts to monitor all personnel entering/exiting the emergency response facilities in the Administration Building per OP 3524.
- b. Instruct individuals to maintain a continuous accountability check of all personnel leaving and returning using VYOPF 3542.01.
- c. Ensure that the traffic flow of personnel enters the Administration Building through the main west entrance and all other entrances are posted by Security (per OP 3524).
- d. If any persons are unaccounted for during accountability checks, immediately report the names to the TSC Coordinator and Security.

APPENDIX B

TSC BRIEFING GUIDELINE

- "This is a Drill" (when appropriate)
- Current E-Plan Classification and Activation Status
- Operations Status and Priorities (Ops Rep)
- Engineering Status (Eng Rep)
- Maintenance Field Team Status (Maint Rep)
- RP/Chemistry updates (RP/Chem Rep)
- Report any current PARs.
- Questions/Comments?
- Next Briefing time is _____
- "This is a Drill" (when appropriate)

(Following briefs, consider making plant announcement on current status)

NEW PROCEDURE CONTROL FORM (Continued)

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted): #03-0123

E-Mail notification: Trainersoft Module

Crew Briefings:

Other:

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

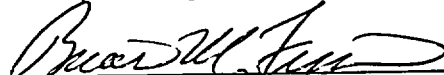
Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian W. Fin



3/26/03

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 04/02/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP 3543, Original, Activation of the Operations Support Center (OSC)

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
- | | | |
|---|------------|-----------|
| (1) Assignment of Emergency Response Organization responsibilities | <u>YES</u> | <u>NO</u> |
| (2) Assignment of on-shift Emergency Response Organization personnel | <u>YES</u> | <u>NO</u> |
| (3) Arrangements for Emergency Response Support and Resources | <u>YES</u> | <u>NO</u> |
| (4) Emergency Classification and Action levels, including facility system and effluent parameters | <u>YES</u> | <u>NO</u> |
| (5) Notification Methods and Procedures | <u>YES</u> | <u>NO</u> |
| (6) Emergency Communications among principal response organizations and the public | <u>YES</u> | <u>NO</u> |
| (7) Public Education and Information | <u>YES</u> | <u>NO</u> |
| (8) Adequacy of Emergency Facilities and Equipment | <u>YES</u> | <u>NO</u> |
| (9) Adequacy of Accident Assessment methods, systems and equipment | <u>YES</u> | <u>NO</u> |
| (10) Plume exposure pathway EPZ protective actions | <u>YES</u> | <u>NO</u> |
| (11) Emergency Worker Radiological Exposure Control | <u>YES</u> | <u>NO</u> |
| (12) Medical Services for contaminated injured individuals | <u>YES</u> | <u>NO</u> |
| (13) Recovery and Reentry Plans | <u>YES</u> | <u>NO</u> |
| (14) Emergency response periodic drills and exercises | <u>YES</u> | <u>NO</u> |
| (15) Radiological Emergency Response Training | <u>YES</u> | <u>NO</u> |
| (16) Plan development, review and distribution | <u>YES</u> | <u>NO</u> |

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|------------|-----------|
| (1) Section IV. A - Organization | <u>YES</u> | NO |
| (2) Section IV. B - Assessment Actions | YES | <u>NO</u> |
| (3) Section IV. C - Activation of Emergency Organizations | <u>YES</u> | NO |
| (4) Section IV. D - Notification Procedures | YES | <u>NO</u> |
| (5) Section IV. E - Emergency Facilities and Equipment | <u>YES</u> | NO |
| (6) Section IV. F - Training | YES | <u>NO</u> |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <u>NO</u> |
| (8) Section IV. H - Recovery | YES | <u>NO</u> |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50.47(1)&(8) & Appendix E, Section IV. A, C & E of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

This is a new procedure that details the steps to be taken for setting up the facility and when to activate the facility. This procedure captures the steps that were already being done - formality. The staffing responsibilities have not changed, this procedure now defines what they are.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
- Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: OP 3544

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 03/13/03
(Print/Sign)

Reviewed By: Lori A. Tkaczyk *Lori Tkaczyk* Date: 3/13/03
(Emergency Plan Coordinator) (Print/Sign)

APPLICABILITY DETERMINATION

Activity/Document Number: OP 3543 Revision Number: Original

Title: Activation of the Operations Support Center (OSC)

Provide or attach a brief description of activities (section 6.3 of RM):

New activation procedure for facility.

Address the questions below for all aspects of the activity. If the answer is "YES" for any portion of the activity, apply the identified process to that portion of the activity. It is not unusual to have more than one process apply to a given activity. For example, a change to a door that is a fire door, a security door and a secondary containment door would require an evaluation to the Fire Protection license condition, 10CFR50.54 (p) and a 50.59 screen. See Section 4 of the "50.59 Resource Manual" (RM) for additional guidance.

| I. Does the proposed activity involve a change to the: | | Section 4.2.1 of the RM |
|---|---|--|
| 1. Technical Specifications or Operating License (10CFR50.90)? Note that stand-alone changes to the TS Bases are evaluated in accordance with 10CFR50.59 per AP 0063. | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per AP 0063) |
| 2. Quality Assurance Plan, related implementing procedures identified in PP 7802 or facility changes (10CFR50.54(a))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES contact QA for 10CFR50.54(a)(3) assessment) |
| 3. Security Plan, related implementing procedures or facility changes (10CFR50.54(p))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES contact Security for 10CFR50.54(p) assessment) |
| 4. Emergency Plan, related implementing procedures or facility changes (10CFR50.54(q))? | <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES | (If YES contact E-Plan for 10CFR50.54(q) assessment per AP 3532) |
| 5. IST Program Plan, related implementing procedures or facility changes (10CFR50.55a(f))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES, and a deviation from the code requirement is required, contact Licensing to ensure applicable NRC approval is obtained per AP 0058) |
| 6. ISI Program Plan, related implementing procedures or facility changes (10CFR50.55a(g))? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES, and a deviation from the code requirement is required, contact Licensing to ensure applicable NRC approval is obtained per AP 0058) |
| 7. Fire protection program, related implementing procedures or facility changes (License Condition 3.F)? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES provide an evaluation that satisfies License Condition 3.F) |

| | | |
|--|---|--|
| II. Does the proposed activity involve: | | Section 4.2.2 of the RM |
| 1. Maintenance which restores SSCs to their original condition. | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES perform maintenance in accordance with plant procedures (e.g. AP 0021, AP 0049, AP 0050) |
| 2. A temporary alteration supporting maintenance that will be in effect during at-power operations for 90 days or less that has been (or will be) evaluated under 10CFR50.65(a)(4) prior to implementation? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process in accordance with AP 0091.) |
| III. Does the proposed activity involve a change to the UFSAR (including documents <i>incorporated by reference</i>) excluded from the requirement to perform a 50.59 Review (NEI 96-07 or NEI 98-03)? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | Section 4.2.3 of the RM (If YES, process FSAR change per AP 6036 "FSAR Revision Process". Include basis for excluding 10CFR50.59 evaluation below.) |
| IV. Does the proposed activity involve a change to the: | | Section 4.2.4 of the RM |
| 1. Managerial or administrative procedures governing the conduct of Facility operations, maintenance and training (subject to the control of 10CFR50, Appendix B) (RM section 4.2.4). Some procedures may be VOQAM implementing procedures requiring evaluation per 10CFR50.54(a)(3) (prompted above). Also, Maintenance procedure changes that include changes to Design Information, not evaluated under a design change process, shall be evaluated in accordance with 10CFR50.59 | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per procedure change process (e.g. AP 0095, AP 0096, AP 0097)) |
| 2. Regulatory commitment where changing commitment is not covered by another regulation based change process (NEI 99-04)? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per AP 0055 "Regulatory Commitment Management".) |
| V. Does the activity impact other plant specific programs (e.g., The ODCM and PCLRTP controlled per TS 6.7 and the PCP controlled per TRM Section 6) which are controlled by regulations, the Operating License, the Technical Specifications or TRM ? | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES process per the procedure(s) for the appropriate activity.) |
| VI. Is the activity covered by any other specific regulatory change process not discussed above that would preclude the need to evaluate under 10CFR50.59 ? (e.g., 10CFR50.46 for changes to ECCS models and PCT changes, 10CFR50.12 for Exemption Requests, etc) | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES document below and process per applicable regulatory requirements.) |
| VII Does the activity require a 50.59 Screen based on the following Generic NRC correspondence? GL 95-02 for performing Analog-to-Digital upgrades, IEB 80-10 for Contamination of non-radioactive systems, IEC 80-18 for changes to radioactive waste systems and GL 91-18 for compensatory actions including using manual actions in-lieu of automatic actions or use-as-is dispositions affecting the FSAR. GL 95-02 assessments need to look at both system and component level failures (ER20000558 01) | <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | (If YES complete 50.59 Screen for the subject activity.) |

All aspects of the activity are controlled by one or more of the processes above, therefore a 50.59 Screen is not required. If checked, provide any additional comments below and sign and date below.

Any portion of the activity is not controlled by one or more of the processes above, therefore a 50.59 Screen or 50.59 Evaluation is required. If checked, provide any additional comments below, sign and date below and complete 50.59 Screen for identified activities.

Additional Applicability Considerations:

Applicability Signoffs: Preparer: Audra Williams Audra Williams Date: 03/13/03
(Print name) (Sign)

Reviewer: Lois A. Tkaczyk Lois A. Tkaczyk Date: 3/13/03

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3543

ORIGINAL

ACTIVATION OF THE OPERATIONS SUPPORT CENTER (OSC)

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PURPOSE

To outline the actions required to activate the Operations Support Center (OSC).

DISCUSSION

The OSC is activated depending on the classification of the emergency. There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

The Operations Support Center Coordinator (OSCC) designates an individual responsible for initiating this procedure following an emergency classification announcement.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the procedure scope is not changed. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

1. Table 1 Personnel Assignment List
2. Table 2 Equipment Locations
3. Figure 1 Operations Support Center Footprint

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. None
4. Supplemental References
 - a. AP 3125, Emergency Plan Classification and Action Level Scheme
 - b. OP 3504, Emergency Communications
 - c. OP 3507, Emergency Radiation Exposure Control
 - d. OP 3524, Emergency Actions to Ensure Initial Accountability and Security Response
 - e. OP 3531, Emergency Call-in Method
 - f. OP 3540, Control Room Actions During an Emergency
 - g. OP 3542, Operation of the Technical Support Center (TSC)
 - h. OP 3544, Operation of the Operations Support Center (OSC)
 - i. OP 3545, Activation of the Emergency Operations Facility/Recovery Center EOF/RC
 - j. OP 3546, Operation of the Emergency Operations Facility/Recovery Center EOF/RC
 - k. OP 3547, Security Actions During an Emergency
 - l. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.

PROCEDURE

NOTES
Steps may be performed concurrently or out of sequence.

Designate person to complete OP 3543.

Name (print): _____

Date: _____

Time/Date Initials

- 1.0 Assign personnel as required to the various functions in the OSC. (Complete Table 1) _____ / _____
- 2.0 Prepare facility for support personnel.
 - 2.1. Clear off RP Manager's desk and table for OSC Dispatcher, and Log Keeper. _____ / _____
 - 2.2. Arrange chairs and table in RP Manager's office as necessary for the OSC Coordinator, OSC Dispatcher, and Log Keeper. _____ / _____
 - 2.3. Set up auto ringdown phone on RP Manager's desk per OP 3504. _____ / _____
 - 2.4. Place appropriate procedures, forms and log book on RP Manager's desk. _____ / _____
 - 2.5. Set out VYOPF 3524.02 sign-in forms. _____ / _____
 - 2.6. Turn on PC, located on RP Manager's desk, and perform the following:
 - 2.6.1. Start RTime (ERFIS) by clicking on icon on desktop or selecting from program menu _____ / _____
 - 2.6.2. Display current meteorological data _____ / _____
- 3.0 Assign individuals, as necessary, to handle miscellaneous clerical work and station them in RP office. _____ / _____
- 4.0 Set up Manpower Status Board located in OSC hallway. _____ / _____
- 5.0 Ensure personnel sign-in on VYOPF 3524.02. _____ / _____

FINAL CONDITIONS

NOTE

The necessary support staff is dependent on the nature of the emergency and is determined by the TSC Coordinator.

Minimum Staffing for activation of the OSC includes:

- OSC Coordinator

| | <u>Time/Date</u> | <u>Initials</u> |
|---|------------------|-----------------|
| 1. All required positions on Table 1 are filled. | _____ / _____ | _____ |
| 2. Report to the TSC Coordinator that the OSC setup is complete and ready for activation. | _____ / _____ | _____ |
| 3. Ensure that names of personnel stationed at the OSC are provided to Security as soon possible. (VYOPF 3524.02) | _____ / _____ | _____ |
| 4. Return completed procedure to the Emergency Plan Coordinator for filing in accordance with AP 6807. | _____ / _____ | _____ |

TABLE 1

PERSONNEL ASSIGNMENT LIST

| Required for Activation | Personnel |
|--|--------------------------------------|
| Operations Support Center Coordinator | _____ |
| Positions to be Staffed | (not required for activation) |
| OSC Coordinator's Assistant | _____ |
| Switching and Tagging Coordinator/ Ops Work Coordinator | _____ |
| OSC Dispatcher | _____ |
| Log Keeper | _____ |
| Manpower Status Board Keeper | _____ |
| Radiological Habitability Assessment | _____ |
| Work Coordinators – Maintenance | _____ |
| Electrical | _____ |
| I & C | _____ |

TABLE 1 (Continued)

Positions to be Staffed (continued)

(not required for activation)

Site Boundary Team (2 individuals)

Off-Site Team – Blue (2 individuals)

Off-Site Team – Green (2 individuals)

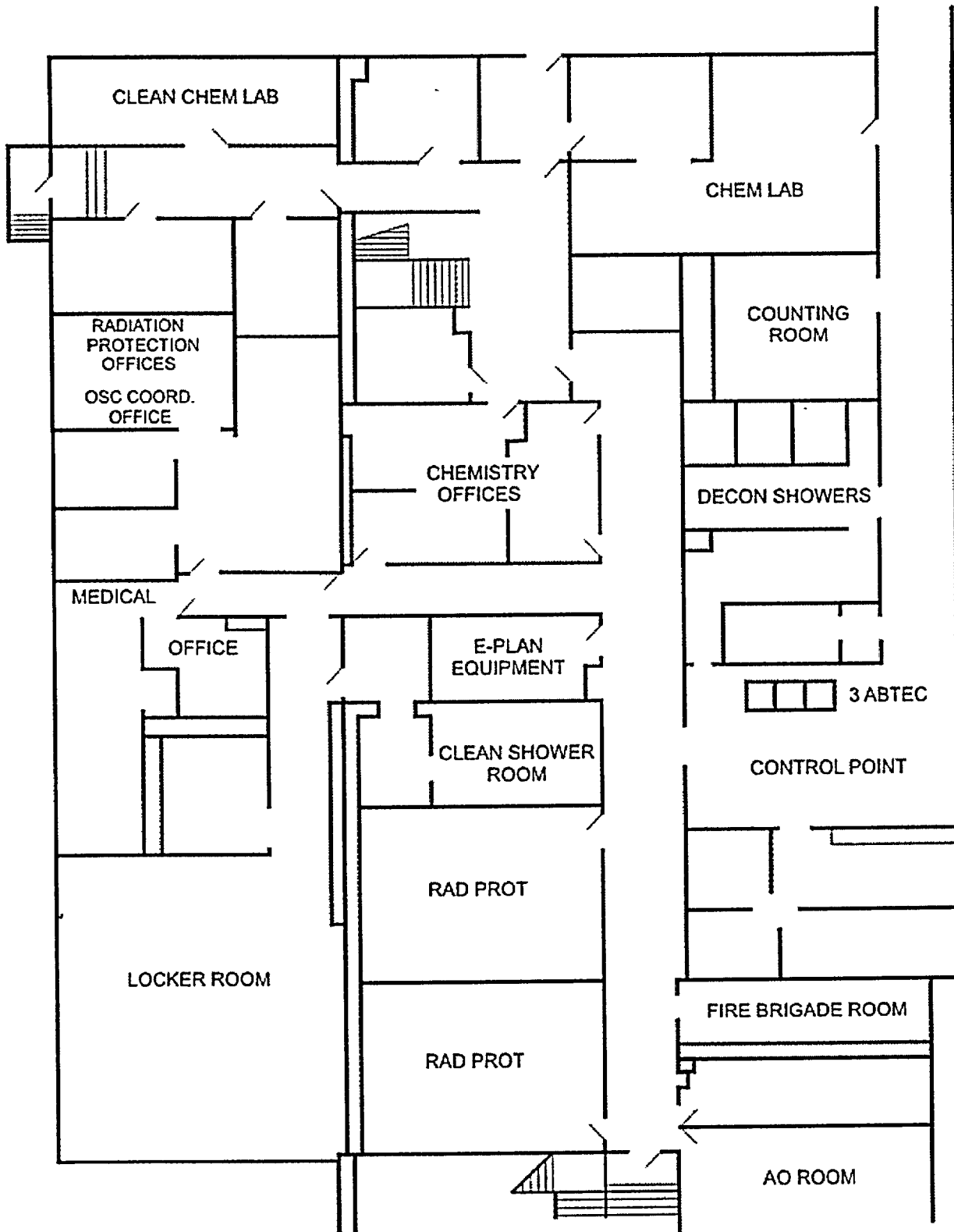
Off-Site Team – Black (2 individuals)
(OPTIONAL)

Auxiliary Operators

**TABLE 2
EQUIPMENT LOCATIONS
(PER OP 3504)**

| ITEM | LOCATION |
|--|--|
| OFF SITE and ON SITE Monitoring Kits OSC Manpower Status Board Tags | Emergency Kit Storage Room across from Checkpoint |
| OSC Procedures, forms, supplies, phones | In File Cabinet in RP office |
| OSC Manpower Status Board | Mounted on wall in OSC Hallway |

FIGURE 1
OPERATIONS SUPPORT CENTER FOOTPRINT



REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | |
|---|------------------------------|---|--------------------------------------|
| A. Procedure No. OP 3544 | New Revision No. 3 | Title Operation of the Operations Support Center (OSC) | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | |
| D. List DIs & LPCs: 1 | | | |
| E. Description and Reasons for Procedure/Changes: | | | |
| <ul style="list-style-type: none"> • Title changes throughout. • Added reference to the EAPL. • Added statement after OSC Coord. Name to ensure they are EAPL qualified. • Added step (1.8) to assign a qualified individual to be OSC Dispatcher. • Added Ops Coordinator to the Switching/Tagging position. • Added note (pg 7) for use of EAPL when assigning off-site teams. • Changed "Communicator" to Ops Dispatcher in note (pg 9) • Appendix B -Added to #7 "whiteboard status updated" to ensure teams stop by the status board when work is completed • Appendix C - Added Ops Work Coordinator to responsibility of S/T and added steps for performance of that duty. • Removed Table 1 and placed it in OP 3544 Activation of the OSC. • VYOPF 3544.02 - added updating status board at completion of job. Added where each of the 3 copies of the form should go to. | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | Telephone Extension: x4177 |
| (Print/sign/date) Audra Williams | | <i>Audra Williams</i> | 3/13/03 |

PART 2 - Reviews

| | | | |
|--|-------------|---|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | (App. B used as a reference) (Print/Sign/Date) <i>Lori A. Tkaczuk</i> <i>Shouk Tkaczuk</i> 3/13/03 | |
| C. Cross-Discipline Reviews: | | <input checked="" type="checkbox"/> N/A | |
| Department | Name | Signature | Date |
| Ops | Steve Aprca | <i>Stephen Aprca</i> | 3-24-03 |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations | | <input type="checkbox"/> N/A | |
| <input checked="" type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <input type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> | 3-26-03 |
| F. ORIGINATOR: | | <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date _____ <input checked="" type="checkbox"/> Proofread after Final Type | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> | 3-26-03 |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: Trainersoft Module

Crew Briefings:

Other: N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No: PORC Secretary: Date: Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)
Brian M. Fran *Brian M. Fran* → 3/26/03

B. Plant Manager (Print/Sign/Date) (For SPs Only)
N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 04/02/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP 3544, Rev. 3, Operation of the Operations Support Center (OSC)

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
- | | | |
|---|-----|----|
| (1) Assignment of Emergency Response Organization responsibilities | YES | NO |
| (2) Assignment of on-shift Emergency Response Organization personnel | YES | NO |
| (3) Arrangements for Emergency Response Support and Resources | YES | NO |
| (4) Emergency Classification and Action levels, including facility system and effluent parameters | YES | NO |
| (5) Notification Methods and Procedures | YES | NO |
| (6) Emergency Communications among principal response organizations and the public | YES | NO |
| (7) Public Education and Information | YES | NO |
| (8) Adequacy of Emergency Facilities and Equipment | YES | NO |
| (9) Adequacy of Accident Assessment methods, systems and equipment | YES | NO |
| (10) Plume exposure pathway EPZ protective actions | YES | NO |
| (11) Emergency Worker Radiological Exposure Control | YES | NO |
| (12) Medical Services for contaminated injured individuals | YES | NO |
| (13) Recovery and Reentry Plans | YES | NO |
| (14) Emergency response periodic drills and exercises | YES | NO |
| (15) Radiological Emergency Response Training | YES | NO |
| (16) Plan development, review and distribution | YES | NO |

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|-----|-----------|
| (1) Section IV. A - Organization | YES | <u>NO</u> |
| (2) Section IV. B - Assessment Actions | YES | <u>NO</u> |
| (3) Section IV. C - Activation of Emergency Organizations | YES | <u>NO</u> |
| (4) Section IV. D - Notification Procedures | YES | <u>NO</u> |
| (5) Section IV. E - Emergency Facilities and Equipment | YES | <u>NO</u> |
| (6) Section IV. F - Training | YES | <u>NO</u> |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <u>NO</u> |
| (8) Section IV. H - Recovery | YES | <u>NO</u> |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50.47(b)(1) of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

The change defines the position of OSC Dispatcher and adds responsibility of Ops Work Coordinator to Switching/Tagging Coordinator. These are not key positions, but staff positions that the staff has found to be useful during an emergency. By defining the positions, it adds formality and limits HU. Other changes are minor and enhance the procedure by adding formality and helping to reduce HU. None of these changes decrease the effectiveness of the E-Plan and it continues to meet all requirements.

10 CFR 50.54 (q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: _____

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 03/13/03
(Print/Sign)

Reviewed By: Lon A. Kaczyk *Lon A. Kaczyk* Date: 3/13/03
(Emergency Plan Coordinator) (Print/Sign)

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3544

REVISION 3

OPERATION OF THE OPERATIONS SUPPORT CENTER (OSC)

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PURPOSE

To outline the operation of the Operations Support Center (OSC).

DISCUSSION

There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director, who, in turn, instructs Control Room personnel to activate the notification system. Notification of State authorities must be initiated within 15 minutes after the event has been classified. The NRC must be notified immediately after the States' notification, but not later than one (1) hour after the event has been classified.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

The basic shift complement is able to deal with Unusual Event conditions. On-duty personnel are assigned to functions as required. Additional members of the plant organization, including top management, are notified by Plant Security, and augment on-duty personnel as necessary. The Duty On Call Officer who is available on an on-call basis must report to the site and will assume the role of the TSC Coordinator. Dissemination of public information and closure or escalation to a more severe classification will occur as conditions warrant.

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

An Alert event requires action beyond the normal capability of the basic shift complement. Plant response and off-site notification associated with this event classification ensure that sufficient emergency response personnel are mobilized to activate the Technical Support Center (TSC) and the Operations Support Center (OSC). The Emergency Operations Facility/Recovery Center (EOF/RC) is activated with the Site Recovery Manager (SRM), the EOF Coordinator and other EOF/RC staff members. Sufficient emergency assistance personnel to assess off-site radiological impact are assigned if the Alert event is producing releases off-site. Actual releases of radioactivity which substantially exceed Technical Specification limits may be involved and thus radiation monitoring and dose projection may be an integral portion of the emergency response required. Prompt notification is made to State authorities and follow-up information is provided as needed to off-site emergency organizations.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

Plant resources are anticipated to be sufficient to cope with a Site Area Emergency. Outside resources, however, are mobilized and selected members are dispatched to the site. All emergency centers are activated following declaration of a Site Area Emergency. All non-essential personnel are evacuated from the site. Representatives from adjoining States are dispatched to the Emergency Operations Facility. Assessment of plant conditions and off-site radiological parameters determine the type of protective measures necessary for protection of the public sector. The public is notified of the event by local media facilities and periodic updates of information are released to ensure uniform, adequate response to real conditions.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

Contracted service organizations, sponsor utilities, and other industry resources are alerted and requested to render assistance as appropriate. In addition, Federal resources are called upon for assistance. Assessment of plant conditions and off-site radiological parameters determine the type of protective action recommendations.

Plant representative's closeout or escalate the emergency classification, or move to recovery as conditions warrant. Written summaries of the event are provided to off-site authorities and other affected agencies.

The Operations Support Center Coordinator (OSCC) is responsible for initiating this procedure following appointment by the Technical Support Center Coordinator.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the scope of the procedure or program is not revised to include a different type of activity. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

- | | | |
|----|---------------|---|
| 1. | Appendix A | Radiological Habitability Assessment |
| 2. | Appendix B | On-Site Assistance Team Checklist |
| 3. | Appendix C | OSC Staff Responsibilities |
| 4. | Table 1 | Deleted |
| 5. | VYOPF 3544.01 | Emergency Conditions Radiological Assessment Form |
| 6. | VYOPF 3544.02 | OSC Team Work Status Form |

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. EPEX86RP1
 - b. EPEX8803CPE1
 - c. INS9007CPE3
4. Supplemental References
 - a. Emergency Assistance Personnel List (EAPL)
 - b. AP 0009, Event Reports
 - c. AP 0010, Situational Reporting Requirements
 - d. AP 0021, Work Orders
 - e. AP 0140, Vermont Yankee Local Control Switching Rules
 - f. AP 0156, Notification of Significant Events
 - g. AP 0864, Fitness for Duty
 - h. AP 3125, Emergency Plan Classification and Action Level Scheme
 - i. OP 3504, Emergency Communications
 - j. OP 3507, Emergency Radiation Exposure Control
 - k. OP 3508, On-Site Medical Emergency Procedure
 - l. OP 3510, Off-Site and Site Boundary Monitoring
 - m. OP 3531, Emergency Call-In Method
 - n. OP 3540, Control Room Actions During an Emergency
 - o. OP 3541, Activation of the Technical Support Center (TSC)
 - p. OP 3542, Operation of the Technical Support Center (TSC)
 - q. OP 3545, Activation of the Emergency Operations Facility/Recovery Center (EOF/RC)
 - r. OP 3546, Operation of the Emergency Operations Facility/Recovery Center (EOF/RC)
 - s. OP 3547, Security Actions During an Emergency
 - t. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.
2. Refer to Emergency Assistance Personnel List (EAPL) when assigning individuals to positions.

PROCEDURE

- NOTES**
- The responsible individual may assign actions required to other personnel as appropriate. The designated individual, however, has the overall responsibility for the execution of the checklist.
 - Record time and initials as required.
 - Steps may be performed concurrently or out of sequence.
 - Some steps have multiple signature lines, based on event level. The step should be initialed for each event level it is completed for. If an event escalates, each step with that event level designator should be rechecked to ensure no further action is required.

OSC Coordinator Name (print): _____
 (Must be qualified individual per EAPL)

Date: _____

Time/Date Initials

1.0 Immediate Actions

- | | | | |
|------|---|---|-------------------------|
| 1.1. | Provide support to the Control Room as requested. | A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ |
| 1.2. | Assist in coordination of Operations relief planning. | A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ |
| 1.3. | Ensure that Operations Support Center (OSC) Staff is in place. | (circle one) A S G _____ / _____ | _____ _____ |
| 1.4. | Assign an OSC Coordinator Assistant: Name: _____ | _____ / _____ | _____ |
| 1.5. | IF there are indications that a stack release is in progress, THEN have OSC personnel obtain a stack sample immediately. (EPEX86RP1) | A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ |

- | | | <u>Time/Date</u> | <u>Initials</u> |
|-------|--|---|-------------------------|
| 1.6. | IF there is no indication of a stack release, THEN perform stack sampling as required. | A _____ / _____ S _____ / _____ G _____ / _____ | _____ _____ _____ |
| 1.7. | Ensure that the names of personnel stationed at the OSC are reported to Security as soon as possible. (VYOPF 3524.02) | (circle one) A S G _____ / _____ | _____ _____ |
| 1.8. | Assign a qualified individual (Ops. background) to be OSC Dispatcher. Name: _____ | (circle one) A S G _____ / _____ | _____ _____ |
| 1.9. | Assign a qualified individual to implement Appendix A, Radiological Habitability Assessment. Name: _____ | (circle one) A S G _____ / _____ | _____ _____ |
| 1.10. | Designate a qualified individual (Ops. SRO/Control Authority Qualified) to be Switching and Tagging/Ops Coordinator (see Appendix C). Name: _____ | (circle one) A S G _____ / _____ | _____ _____ |

NOTE

Site Boundary and Off-Site Teams are comprised of qualified individuals from the Emergency Assistance Personnel List (EAPL) OSC Team Listing designated by the OSC.

- 1.11. Utilizing white board located in OSC hallway, designate qualified personnel to implement the following emergency team assignments as applicable and as they become available:

1.11.1. Site Boundary Survey Team

Names: _____ (Leader)

_____ / _____

The Team Leader or designee opens the Site Boundary Kit located at the OSC, obtains the clipboard and follows instructions per OP 3510, Appendix A.

Time/Date

Initials

1.11.2. Off-Site Green Team

Names: _____ (Leader)

_____ / _____

The Team Leader or designee opens one Off-Site Monitoring Kit located at the OSC, obtains the clipboard and follows instructions per OP 3510, Appendix B.

1.11.3. Off-Site Blue Team

Names: _____ (Leader)

_____ / _____

The Team Leader or designee opens one Off-Site Monitoring Kit located at the OSC, obtains the clipboard and follows instructions per OP 3510, Appendix C.

1.11.4. Off-Site Black Team

NOTE

This additional off-site team may be deployed at the discretion of the Radiological Coordinator.

Names: _____ (Leader)

_____ / _____

The Team Leader or designee opens one Off-Site Monitoring Kit located at the OSC, obtains the clipboard and follows instructions per OP 3510, Appendix D.

NOTE

All work assignments from the TSC to the OSC should be made through the phone to the OSC Dispatcher. Do not use the ring down phone or Gaitronics.

- 1.12. Coordinate the implementation of on-site assistance team activities with the TSC Coordinator as follows:

NOTE

Depending on the nature of the task, teams will be assembled as appropriate. When more than one member is involved, a Work Coordinator will be assigned. The Work Coordinator or assigned individual has total responsibility for all work associated with the job.

- 1.12.1. Designate a Work Coordinator (if applicable) and team members based on job task requirements and conditions.

- 1.12.2. Maintain a continuous accountability of OSC on-site assistance team assignments and tasks as follows:

- 1.12.2.1. Complete the appropriate sections of VYOPF 3544.02, OSC Team Work Status Form.

_____ / _____

NOTE

Work Status forms (VYOPF 3544.02) are posted in the OSC hallway.

- 1.12.2.2. To help identify for OSC personnel the mission of the OSC Teams, ensure that VYOPF 3544.02, OSC Team Work Status Form is posted and updated in the OSC. (INS9007CPE3)

_____ / _____

Time/Date

Initials

1.12.3. For tasks involving on-site repair activities, instruct the Work Coordinator or assigned individual to implement Appendix B, On-Site Assistance Team Checklist.

_____/_____

1.12.4. For tasks involving injured personnel of search and rescue activities, instruct the team members to implement applicable steps in Appendix B, On-Site Assistance Team Checklist, and OP 3508, On-Site Medical Emergency Procedure.

_____/_____

1.12.5. Provide teams with the necessary instructions and pertinent plant status conditions to initiate and conduct job tasks.

_____/_____

1.12.6. When On-Site Assistance/Rescue Teams return from their assignments, ensure that the close out of the work effort is completed and documented.

_____/_____

2.0 Subsequent Actions

2.1. Assist in the coordination of recovery efforts as requested by the TSC.

A_____/_____
S_____/_____
G_____/_____

NOTE

Consideration should be given to the importance of assessing plant conditions, sample locations and sample activity.

2.2. Coordinate the implementation of post accident sampling, and prioritize the assignment of desired samples to be collected and analyzed with the Radiation Protection Coordinator (or designated alternate) at the TSC, as conditions warrant.

A_____/_____
S_____/_____
G_____/_____

- | | <u>Time/Date</u> | <u>Initials</u> |
|--|------------------|-----------------|
| 2.3. Periodically ensure that radiological assessment is performed according to Appendix A for the OSC, TSC, Control Room and Gates 1 and 2. | / | |
| 2.4. Ensure that unassigned OSC personnel remain within the OSC. | / | |
| 2.5. Periodically assess the personnel situation at the OSC, dispatch extra reserves to the EOF/RC as directed by the TSC Coordinator. | / | |
| 2.6. Report findings to and receive instruction from the Shift Manager/Plant Emergency Director and/or the TSC Coordinator. | | |

NOTE

The OSC Coordinator will base his operations in the OSC but may find it necessary to go to the TSC from time to time.

- | | | |
|--|-----------------------------|--|
| 2.7. If deemed necessary, assign an individual to the TSC who will remain in contact with the OSC. | (circle one) A S G | |
| Name: _____ | / | |
| 2.8. Periodically brief OSC personnel on current plant conditions and significant developments. | / | |

FINAL CONDITIONS

- | | | |
|---|---|--|
| 1. Ensure the OSC is returned to pre-emergency status. | / | |
| 2. Submit completed copies of this procedure to the TSC Coordinator. | / | |
| 3. Send all dosimetry and records to the Radiological Assistant for evaluation. | / | |

APPENDIX A

RADIOLOGICAL HABITABILITY ASSESSMENT

1. Obtain a copy of OP 3507, Emergency Radiation Exposure Control.
2. Obtain a RM-14/20, a PIC-6, or other suitable dose rate instrument and a low volume air sampler. Perform the necessary function checks on the instrumentation.
3. If no multichannel analysis of the sample is available, utilize silver zeolite cartridges for quantitative iodine results.
4. Monitor conditions in the area(s) assigned:

NOTE

Security at Gatehouse 2 do not routinely wear dosimetry. The habitability technician will inform Security when to don dosimetry.

OSC Responsibility

OSC

TSC

Control Room

Gate 1, 2

Other Areas: _____, _____, _____

5. Ensure the placement of two (2) high range ion chamber or electronic dosimeters in a representative location for the assessment of total exposure for each of the above locations.
6. Relative to KI usage, implement OP 3507.
7. Report findings and recommendations on VYOPF 3544.01 and submit to the TSC Coordinator or EOF Coordinator (if applicable).

NOTE

Additional information, such as area surveys, should be recorded on the reverse side of VYOPF 3544.01.

APPENDIX B

ON-SITE ASSISTANCE TEAM CHECKLIST

NOTE

The Work Coordinator or assigned individual has total responsibility for all work associated with the job. Work Control process defined in AP 0021, Work Orders, must be used as appropriate.

1. Determine appropriate work controls, necessary equipment, spare parts, and services and their availability.
2. Receive status update and instructions from the OSC Coordinator or designated assistant.
3. Obtain appropriate radiation protection information and plant radiological conditions.
4. Ensure that a dose commitment for the job task is established in accordance with OP 3507, "Emergency Radiation Exposure Control".
5. Prior to team deployment, ensure that team members are briefed on the specific work controls and radiation protection controls to be followed for the job task.
6. Provide periodic updates on work effort status and other significant information to the OSC Coordinator or designated assistant especially area radiation levels and accrued exposure values.
7. Upon job completion, ensure that appropriate close out of the work effort is completed (i.e., job status notification, team debriefing, whiteboard status updated, and work effort documentation).

APPENDIX C

OSC STAFF RESPONSIBILITIES

SWITCHING & TAGGING/OPS WORK COORDINATOR:

1. As Ops Work Coordinator, assign work and brief operations personnel.
2. Perform Switching and Tagging, as requested, per AP 0140.

NOTE

The Control Authority will perform the following Tagging evolutions from the OSC using a manual process or by computer from the Tagging Desk if assigned by the OSC Coordinator.

- Use current revision of AP 0140 for all Switching & Tagging requests.
- Maintain Equipment Status Index using VYAPF 0140.05.
- Use VYAPF 0140.01 to write tagging orders on which will be used by Switchman.
- Handwrite information on tags for Switchman and fill out VYAPF 0140.03 for Tagging Order.
- Issue Tagging Order to Switchman; have tags second verified by assigned Switchman.
- Once tags are hung, update Equipment Status Index, VYAPF 0140.05, and notify Work Party Leader that tags are hung.
- Sign Work Party Leader onto Tagging Order per telecom or in person per Control Authority discretion.
- Authorize Work Party Leader to commence work.
- Work Party Leader notifies Control Authority that work is complete by telecom or in person.
- Control Authority uses VYAPF 0140.03 to issue tags off restoration to Switchman.
- Control Authority has second Switchman perform verification of Tagging restoration.
- Control Authority updates Equipment Status Index, VYAPF 0140.05.

EMERGENCY CONDITIONS RADIOLOGICAL ASSESSMENT FORM

DATE _____

TIME _____

LOCATION OF SAMPLING _____

DATA

Maximum Dose Rate (W.B.) _____

Average Dose Rate (W.B.) _____

Air Sample Results (silver zeolite cartridge? YES NO) _____

RECOMMENDED ACTION (From sampling information and specifications in Appendices A and B of OP 3507, Emergency Radiation Exposure Control)

COMMENTS

NOTE

Additional information, such as area surveys, should be recorded on the reverse side of this form.

_____/_____
Surveyor (print/sign) Date

REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | |
|--|----------------------------------|---|-----------------------------|
| A. Procedure No. OP 3545 | New Revision No. No. 2 | Title Activation of the EOF/RC | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | |
| D. List DIs & LPCs: 1-3 | | | |
| E. Description and Reasons for Procedure/Changes: <ul style="list-style-type: none"> • Title changes throughout. • Added wording to steps to make finding equipment easier. (HU) • Removed step to test fax machines and put it in the OP 3546 Media Adv. Asst. responsibilities. • Added step to test the primary and alternate auto ring down phones as only phones needed testing prior to activation. • Figure 1- <ul style="list-style-type: none"> ○ Removed PAR board from Rad Assess area. ○ Added directions on table placement for Room 125, 121, 122. ○ Added designations for map and dispersion wheel in OSMT Area. ○ Removed Map from SRM area. | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | Telephone Extension: |
| (Print/sign/date) Audra Williams <i>Audra Williams</i> 3/12/03 | | | x4177 |

PART 2 - Reviews

| | | | |
|--|-------------|---|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A (App. B used as a reference) (Print/Sign/Date) <i>Lon A. Tkaczyk Lon A. Tkaczyk 3/13/03</i> | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | | |
| C. Cross-Discipline Reviews: | | <input checked="" type="checkbox"/> N/A | |
| Department | Name | Signature | Date |
| | | | |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations <input type="checkbox"/> N/A | | | |
| <input checked="" type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <input type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) (Print/Sign/Date) Audra Williams <i>Audra Williams</i> 3/12/03 | | | |
| F. ORIGINATOR: <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date <i>DWR 3/25/03</i> <input checked="" type="checkbox"/> Proofread after Final Type (Print/Sign/Date) Audra Williams <i>Audra Williams</i> 3-26-03 | | | |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: Trainersoft Module

Crew Briefings:

Other:

N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian M. Finn *Brian M. Finn* 3/26/03

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 04/02/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP 3545, Rev. 2, Activation of the EOF/RC

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
 - (1) Assignment of Emergency Response Organization responsibilities
YES NO
 - (2) Assignment of on-shift Emergency Response Organization personnel
YES NO
 - (3) Arrangements for Emergency Response Support and Resources
YES NO
 - (4) Emergency Classification and Action levels, including facility system and effluent parameters
YES NO
 - (5) Notification Methods and Procedures
YES NO
 - (6) Emergency Communications among principal response organizations and the public
YES NO
 - (7) Public Education and Information
YES NO
 - (8) Adequacy of Emergency Facilities and Equipment
YES NO
 - (9) Adequacy of Accident Assessment methods, systems and equipment
YES NO
 - (10) Plume exposure pathway EPZ protective actions
YES NO
 - (11) Emergency Worker Radiological Exposure Control
YES NO
 - (12) Medical Services for contaminated injured individuals
YES NO
 - (13) Recovery and Reentry Plans
YES NO
 - (14) Emergency response periodic drills and exercises
YES NO
 - (15) Radiological Emergency Response Training
YES NO
 - (16) Plan development, review and distribution
YES NO

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|------------|-----------|
| (1) Section IV. A - Organization | YES | <u>NO</u> |
| (2) Section IV. B - Assessment Actions | YES | <u>NO</u> |
| (3) Section IV. C - Activation of Emergency Organizations | YES | <u>NO</u> |
| (4) Section IV. D - Notification Procedures | YES | <u>NO</u> |
| (5) Section IV. E - Emergency Facilities and Equipment | <u>YES</u> | NO |
| (6) Section IV. F - Training | YES | <u>NO</u> |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | <u>NO</u> |
| (8) Section IV. H - Recovery | YES | <u>NO</u> |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50.47(b) (8) & Appendix E, Section IV. E of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

The changes to the procedure were enhancements and add formality. The changes to the floor plan have already been covered in LPC#2. This change is just an enhancement to the floor plan after a drill was conducted using the new diagram. The functionality of the room has not changed.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: _____

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 3/12/03
(Print/Sign)

Reviewed By: Lorin Tkaczyk *Lorin Tkaczyk* Date: 3/13/03
(Emergency Plan Coordinator) (Print/Sign)

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3545

REVISION 2

**ACTIVATION OF THE
EMERGENCY OPERATIONS FACILITY/RECOVERY CENTER (EOF/RC)**

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PROCEDURE..... 5

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PURPOSE

To outline the actions required to activate the Emergency Operations Facility/Recovery Center (EOF/RC).

DISCUSSION

The EOF/RC is activated depending on the classification of the emergency. There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

The first individual to arrive at the EOF is responsible for initiating this procedure following an emergency classification announcement.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the procedure scope is not changed. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

- | | | |
|----|------------|---------------------------|
| 1. | Appendix A | Deleted |
| 2. | Table 1 | Personnel Assignment List |
| 3. | Table 2 | Equipment Locations |
| 4. | Figure 1 | EOF/RC Footprint Sample |
| 5. | Figure 2 | Deleted |
| 6. | Figure 3 | EOF/RC Layout |

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. None
4. Supplemental References
 - a. AP 3125, Emergency Plan Classification and Action Level Scheme
 - b. OP 3504, Emergency Communications
 - c. OP 3507, Emergency Radiation Exposure Control
 - d. OP 3531, Emergency Call-in Method
 - e. OP 3540, Control Room actions During an Emergency
 - f. OP 3541, Activation of the Technical Support Center (TSC)
 - g. OP 3542, Operation of the Technical Support Center (TSC)
 - h. OP 3544, Operation of the Operations Support Center (OSC)
 - i. OP 3546, Operation of the Emergency Operations Facility/Recovery Center (EOF/RC)
 - j. OP 3547, Security Actions During an Emergency
 - k. AP 6807, Collection, Temporary Storage and Retrieval of QA Records

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.

PROCEDURE

NOTE
Steps may be performed concurrently or out of sequence.

Name (print): _____ Time/Date Initials

- 1.0 Establish the Emergency Operations Facility /Recovery Center for activation. (See Figures 1 & 2)

NOTE
Key staff are required to sign in on the staffing board in the SRM area.

- 2.0 Assign personnel as required to the various functions in the Emergency Operations facility. (Complete Table 1)
- 3.0 Prepare facilities for the arrival of off-site authorities and other support personnel.
 - 3.1. Obtain keys for the EOF Emergency Equipment Cabinets from the Training Building Security desk in the lobby and open cabinets. (See Table 2)
 - 3.2. Organize rooms, equipment, status boards and maps per Figure 1.
 - 3.3. Turn on ERFIS PCs (3) and monitors located at the EOF/RC (per Figure 1) and display current meteorological data.
 - 3.3.1. Click on ODPS.
 - 3.3.2. Click on Historical Meteorological Data – 1.
 - 3.4. Contact Manpower and Planning to have an individual from IT move the color printer located on second floor of the Training Bldg and connect it to the ERFIS PC in Room 122.
 - 3.5. Check radios per OP 3504, Section F.4.a. and Figures 6 and 10. (OSMT Communications Area)
 - 3.6. Test by listening for dial tone, both the primary and the alternate auto-ring down circuits.

_____/_____
_____/_____
_____/_____
_____/_____

- 3.7. Place ERF Directories in Rad Assessment Area and Communications Area.

_____/____

FINAL CONDITIONS

NOTE

Minimum staffing for activation of the EOF/RC includes:

- Site Recovery Manager
- EOF Coordinator
- Radiological Assistant
- Communications Assistant
- SRM Compliance Advisor
- SRM Ops Advisor #1

- | | <u>Time/Date</u> | <u>Initials</u> |
|---|------------------|-----------------|
| 1. All required positions on Table 1 are filled. | _____/____ | _____ |
| 2. Report to the EOF/RC Coordinator, or EOF Coordinator's Assistant, that the EOF/RC is ready for Activation. | _____/____ | _____ |
| 3. Report to SRM that EOF is ready for activation. | _____/____ | _____ |
| 4. Return completed procedure to the Emergency Plan Coordinator for filing in accordance with AP 6807. | | |

TABLE 1
PERSONNEL ASSIGNMENT LIST

| Required for Activation | Personnel |
|--|--------------------------------------|
| Site Recovery Manager | _____ |
| EOF Coordinator | _____ |
| Radiological Assistant | _____ |
| Communication Assistant | _____ |
| SRM Compliance Advisor (required to assume communication function) | _____ |
| SRM Ops Advisor #1 | _____ |
| Positions to be Staffed | (not required for activation) |
| Purchasing Coordinator | _____ |
| Radiological Coordinator | _____ |
| Nuclear Information Director | _____ |
| SRM Ops Advisor #2 | _____ |
| EOF Coordinator's Assistant | _____ |
| SRM State Advisor | _____ |
| JNC Technical Representative | _____ |
| SRM Media Advisor | _____ |
| SRM Radiological Advisor | _____ |

TABLE 1 (Continued)

Positions to be Staffed (continued)

| | |
|--------------------------------|-------|
| ERFIS Operator | _____ |
| METPAC Operator | _____ |
| Manpower & Planning Assistant | _____ |
| Personnel & Equipment Monitors | _____ |
| Personnel & Equipment Monitors | _____ |
| Facilities Coordinator | _____ |
| Telecommunications Coordinator | _____ |
| Switchboard Operator | _____ |

TABLE 2
EQUIPMENT LOCATIONS
(per OP 3504)

| Cabinet No. | Location |
|--------------------|---|
| 1 | In the Site Recovery Manager's Office area. |
| 2 | In the hallway outside room 126, contains equipment for Room 125/126 and EOF Engineers. |
| 3 | In the Hallway across from the Chemistry Lab, contains equipment for use by the Radiological Assistant and staff. |
| 4 | In the hallway across from the Chemistry Lab, contains equipment for use by the Radiological Assistant and staff. |

Other Equipment Areas to be opened

Sprinkler Room (back of room 118) contains equipment for the Radiological Assistant and staff, Manpower/Planning and Personnel & Equipment Monitoring.

State Cabinets in Room 117. Upper and Lower cabinets. Contain equipment for the State EOF responders. **DO NOT REMOVE EQUIPMENT FROM THESE CABINETS** - just open them.

EOF Engineering Equipment

Aperture cards, reader and printer are located on the second floor of the Training Building outside of Room 201.

Mini-Prints are located on the network and can be printed to any of the Canon copiers that contain 11 x 17 paper, or
Uncontrolled hard copies are available in the TIC and Room 128.

Vendor Manuals are located at the Plant and PSB.

FIGURE 1

EOF/RC FOOTPRINT SAMPLE

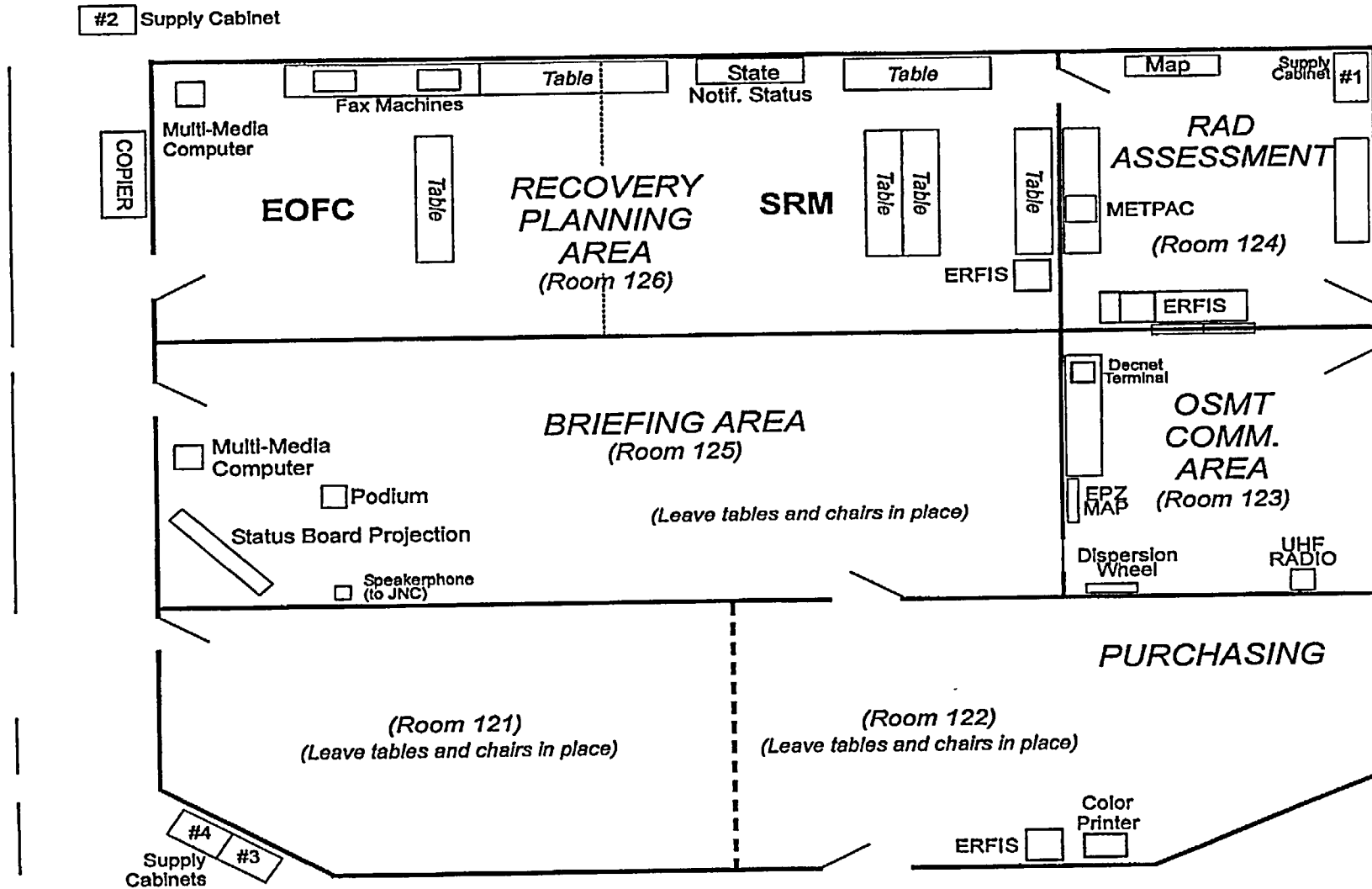


FIGURE 3
EOF/RC LAYOUT

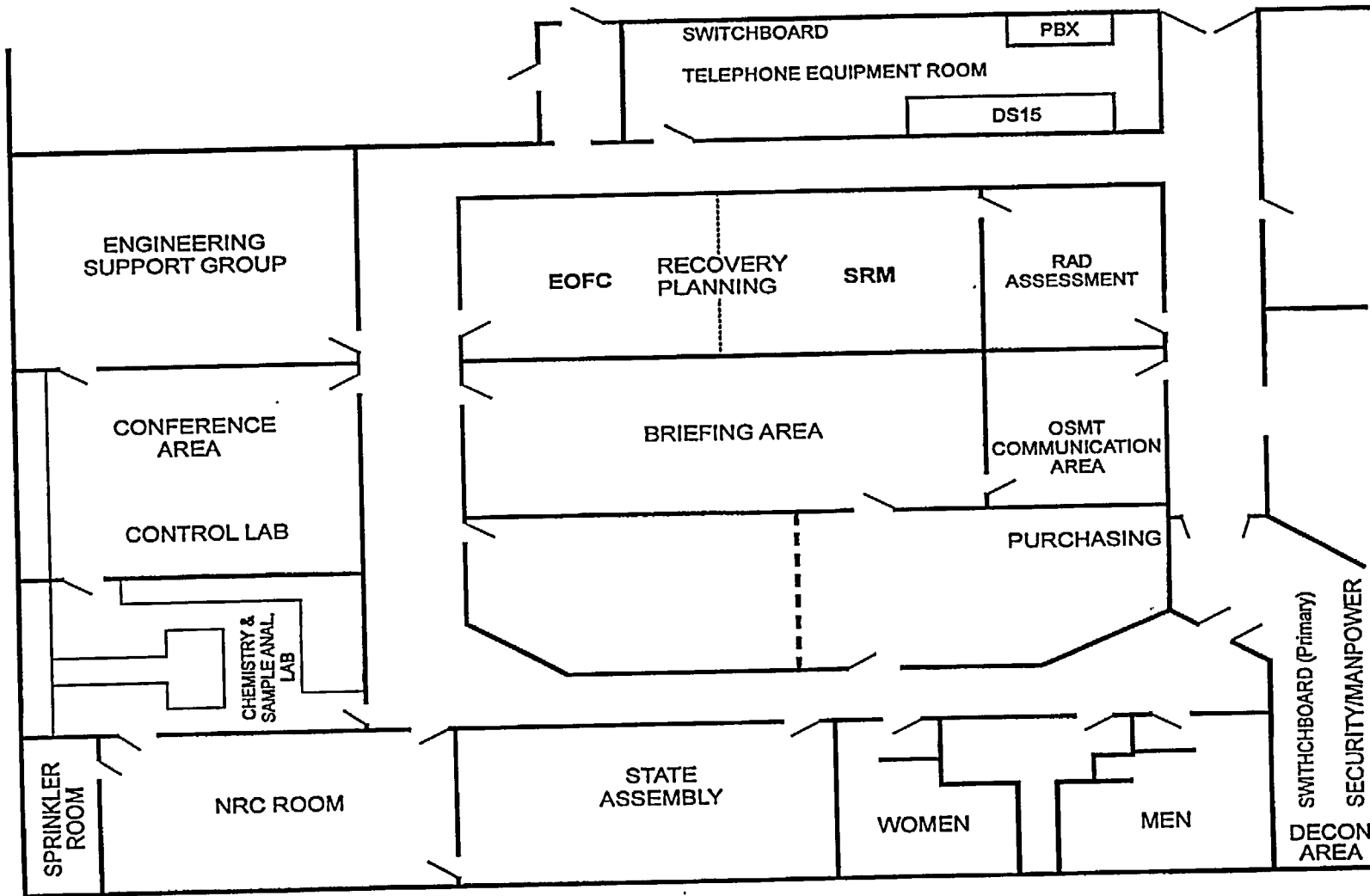


Figure 3
OP 3545 Rev. 2
Page 1 of 1

REVISED PROCEDURE CONTROL FORM

PART 1 - Initiation

| | | | |
|--|----------------------------------|---|-----------------------------|
| A. Procedure No. OP 3546 | New Revision No. No. 3 | Title Operation of the Emergency Operations Facility/Recovery Center (EOF/RC) | |
| B. Review Criteria: <input type="checkbox"/> Partial <input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Complete | | C. Periodic Review Cycle: <input checked="" type="checkbox"/> 2 Year (Event Driven) <input type="checkbox"/> N/A | |
| D. List DIs & LPCs: 1 & 2 | | | |
| E. Description and Reasons for Procedure/Changes: | | | |
| <ul style="list-style-type: none"> • Title changes throughout. • Added Appendix T – Manpower and Planning Liaison position • Added EAPL to references. Added to Notes in procedure that personnel being assigned positions must be qualified per EAPL. • Specified who maintains logbooks in the final conditions of procedure. • Revised App. D, Personnel & Equip Monitoring Team, to reflect actual practices and clarify steps • EPEX-2001-TSC_07: Revised App. G, Manpower & Planning Asst, to reflect actual practices and the addition of the M/P Liaison position. Completely revised the personnel release form to make it functional Added VYAPF 3546 06, Shift and Relief Planning Worksheet. • E_DRILL-2001-GEN-6_09. Revised App. K, Compliance Advisor, to add the steps for determining the criteria for determining a release in progress. • Drill Critique comments (2/2003): Revised App. M, Media Adv. & Asst, to differentiate between steps needed for setup of the facility and those needed to operate facility. Clarified steps and made them more in line with HU. Added reference to location of equipment. • Drill Critique comments (2/2003) App Q, Telecommunications Coord., Clarified the location of the phones that need to be checked in warehouse • VYOPF 3546 06, pg 1 of 2: Added wording to step 1. Complete Section B using criteria in App. K, Step 4. Changed phone number for MA fax notifications | | | |
| F. Originator Name: (App. A was used as references to create this revision, App. C is completed and attached unless Part 1.B above is "Editorial".) | | | Telephone Extension: |
| (Print/sign/date) Audra Williams | | <i>Audra Williams</i> | 3/14/03 x4177 |

PART 2 - Reviews

| | | | |
|--|--------------------|---|-------------|
| A. Walk-Through Validation: <input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A | | B. Technical Verification Reviewer <input type="checkbox"/> N/A | |
| <input type="checkbox"/> Field Walk-Through <input type="checkbox"/> Table-Top <input type="checkbox"/> Simulator Validation | | (App. B used as a reference) (Print/Sign/Date) <i>Loi A. Tkaczyk Loi A. Tkaczyk 3/14/03</i> | |
| C. Cross-Discipline Reviews: <input type="checkbox"/> N/A | | | |
| Department | Name | Signature | Date |
| Training | <i>Dennis Deer</i> | <i>Dennis Deer</i> | 3/25/03 |
| D. 50.59 Review Per AP 6002, Preparing 50.59 Evaluations <input type="checkbox"/> N/A | | | |
| <input checked="" type="checkbox"/> 50.59 AD previously performed and documented in the text of this procedure and is still applicable. <input type="checkbox"/> 50.59 Applicability Determination completed and attached; 50.59 Screening NOT required. <input type="checkbox"/> 50.59 Review Screening completed and attached, 50.59 Evaluation NOT required. <input type="checkbox"/> 50.59 Evaluation completed and attached. | | | |
| E. QUALIFIED REVIEWER: Use App. D as a reference (May perform 50.59 Applicability Determination) (Part 2.D) | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> | 3.26.03 |
| F. ORIGINATOR: <input checked="" type="checkbox"/> Comments Resolved <input checked="" type="checkbox"/> Re-verify All DIs & LPCs Considered | | | |
| <input checked="" type="checkbox"/> Sent for Final Type (CDS or STC (SPs only)) Initial/Date <i>AWR 3/25/03</i> <input checked="" type="checkbox"/> Proofread after Final Type | | | |
| (Print/Sign/Date) Audra Williams | | <i>Audra Williams</i> | 3.26.03 |

PART 3 - Training/Notification Requirements

A. Indicate training or notifications required to implement procedure: (Required for Administrative Procedures)

Include in formal training (TCR submitted):

E-Mail notification: Trainersoft Module

Crew Briefings:

Other:

N/A

PART 4 - PORC

Plant Operation Review Committee: Required N/A

Meeting No:

PORC Secretary:

Date:

Plant Manager:

PART 5 - Approval

A. Responsible Procedure Owner: (Print/Signature/Date)

Brian M. Finn *Brian M. Finn* 3/26/03

B. Plant Manager (Print/Sign/Date) (For SPs Only)

N/A

C. Special Instructions: N/A

Approved for Training

Issue on DATE: 04/02/03

Submit Surveillance Database Change per AP 4000

Other:

PART 6 - Issuance

Procedure Change No.: 215

Date procedure issued: 4/2/03

Notes:

10 CFR 50.54(q) Evaluation Checklist

List of Emergency Plan Section(s)/Emergency Plan Implementing Procedure(s) or any other document to be evaluated. (Include Title and Revision No.):

OP 3546, Rev 3, Operation of the EOF/RC

A. Screening Evaluation

Based on a review of the following questions, determine if the change has the potential to affect our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.

A "YES" answer to any part of the questions requires that a written evaluation be done to determine whether the effectiveness of the Emergency Plan was decreased as specified in Section B of this checklist.

A "NO" answer to all questions requires no written evaluation as specified in Section B of this checklist.

1. Could the proposed change affect our ability to meet the following standards of 10 CFR 50.47(b):
- | | | |
|---|------------|-----------|
| (1) Assignment of Emergency Response Organization responsibilities | <u>YES</u> | <u>NO</u> |
| (2) Assignment of on-shift Emergency Response Organization personnel | <u>YES</u> | <u>NO</u> |
| (3) Arrangements for Emergency Response Support and Resources | <u>YES</u> | <u>NO</u> |
| (4) Emergency Classification and Action levels, including facility system and effluent parameters | <u>YES</u> | <u>NO</u> |
| (5) Notification Methods and Procedures | <u>YES</u> | <u>NO</u> |
| (6) Emergency Communications among principal response organizations and the public | <u>YES</u> | <u>NO</u> |
| (7) Public Education and Information | <u>YES</u> | <u>NO</u> |
| (8) Adequacy of Emergency Facilities and Equipment | <u>YES</u> | <u>NO</u> |
| (9) Adequacy of Accident Assessment methods, systems and equipment | <u>YES</u> | <u>NO</u> |
| (10) Plume exposure pathway EPZ protective actions | <u>YES</u> | <u>NO</u> |
| (11) Emergency Worker Radiological Exposure Control | <u>YES</u> | <u>NO</u> |
| (12) Medical Services for contaminated injured individuals | <u>YES</u> | <u>NO</u> |
| (13) Recovery and Reentry Plans | <u>YES</u> | <u>NO</u> |
| (14) Emergency response periodic drills and exercises | <u>YES</u> | <u>NO</u> |
| (15) Radiological Emergency Response Training | <u>YES</u> | <u>NO</u> |
| (16) Plan development, review and distribution | <u>YES</u> | <u>NO</u> |

10 CFR 50.54(q) Evaluation Checklist (Continued)

2. Could the change affect our ability to meet the following requirements of Appendix E to 10 CFR 50.

- | | | |
|---|-----|----|
| (1) Section IV. A - Organization | YES | NO |
| (2) Section IV. B - Assessment Actions | YES | NO |
| (3) Section IV. C - Activation of Emergency Organizations | YES | NO |
| (4) Section IV. D - Notification Procedures | YES | NO |
| (5) Section IV. E - Emergency Facilities and Equipment | YES | NO |
| (6) Section IV. F - Training | YES | NO |
| (7) Section IV. G - Maintaining Emergency Preparedness | YES | NO |
| (8) Section IV. H - Recovery | YES | NO |

B. Effectiveness Determination

For each applicable (i.e., a "yes" answer specified) standard to 10 CFR 50.47(b) and Appendix E to 10 CFR 50 identified from Section A above, complete the evaluation form below to determine whether the change decreases the effectiveness of the Emergency Plan and whether it continues to meet the stated applicable standard or requirement.

A facsimile of the evaluation form may be used as needed and attached to this checklist.

For applicable item 10 CFR 50 .47(b) (1), (9), (10) and Appendix E, Section IV. A & B of Section A above, this change DOES NOT decrease the effectiveness of the Emergency Plan and DOES continue to meet the stated applicable standard or requirement.

BASIS FOR ANSWER:

The addition of Manpower and Planning Liaison was an enhancement to that area and responsibilities. The addition of the worksheets also was an enhancement to the M/P process.

Definitions of elevated and ground releases were added. Steps to the procedure were added to aid personnel in determining if a release is considered ABOVE or BELOW federally approved operating limits for filling out OP 3546.02.

All other changes to the procedure were for formalization and enhancement and do not decrease the effectiveness of the Plan or Procedure and continues to meet all requirements.

10 CFR 50.54(q) Evaluation Checklist (Continued)

C. Conclusion (Fill out appropriate information)

- The changes made do not decrease the effectiveness of the Emergency Plan and continue to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50.
- The changes made do decrease the effectiveness of the Emergency Plan and decrease our ability to meet the standards of 10 CFR 50.47(b) and the requirements of Appendix E to 10 CFR 50. The following course of action is recommended:
 - Revise proposed changes to meet applicable standards and requirements.
 - Cancel the proposed changes.
 - Process proposed changes for NRC approval prior to implementation in accordance with 10 CFR 50.54(q).

D. Impact on Other Documents (TRM, Tech Specs)

Keywords used in search: _____

- This change does not affect any other documents.
- This change does affect other documents.

Document(s) affected: OP 3540

Section(s) affected: _____

E. Impact on the Updated FSAR

Use AP 6036 to determine if the proposed E-Plan change modifies existing UFSAR information or requires the addition of new UFSAR information and initiate UFSAR change(s) as required.

Keywords used in UFSAR search: _____

Additional Comments:

Prepared By: Audra Williams *Audra Williams* Date: 3/14/03
(Print/Sign)

Reviewed By: Lori A Traczyk *Lori A Traczyk* Date: 3/14/03
(Emergency Plan Coordinator) (Print/Sign)

VERMONT YANKEE NUCLEAR POWER STATION

OPERATING PROCEDURE

OP 3546

REVISION 3

**OPERATIONS OF THE
EMERGENCY OPERATIONS FACILITY/RECOVERY CENTER (EOF/RC)**

USE CLASSIFICATION: REFERENCE

| LPC No. | Effective Date | Affected Pages |
|---------|----------------|----------------|
| | | |
| | | |

Implementation Statement: N/A

Issue Date: 04/02/03

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PURPOSE

To outline the operation of the Emergency Operations Facility/Recovery Center (EOF/RC).

DISCUSSION

There are four emergency classifications, Unusual Event, Alert, Site Area Emergency, and General Emergency. The decision to make an immediate initial declaration rests with the Shift Manager/Plant Emergency Director, who, in turn, instructs Control Room personnel to activate the notification system. Notification of State authorities must be initiated within 15 minutes after the event has been classified. The NRC must be notified immediately after the States' notification, but not later than one (1) hour after the event has been classified.

An Unusual Event is defined as any plant-related event which indicates a potential degradation of plant safety margins which is not likely to affect personnel on-site or the public off-site or result in radioactive releases requiring off-site monitoring. Unusual Event conditions will not have caused serious damage to the plant and may not require a change in operation status.

The basic shift complement is able to deal with Unusual Event conditions. On-duty personnel are assigned to functions as required. Additional members of the plant organization, including top management, are notified by Plant Security, and augment on-duty personnel as necessary. The Duty On Call Officer who is available on an on-call basis must report to the site and will assume the role of the TSC Coordinator. Dissemination of public information and closure or escalation to a more severe classification will occur as conditions warrant

An Alert event is defined as an indication of a substantial degradation of plant safety margins which could affect on-site personnel safety, could require off-site impact assessment, but is not likely to require off-site protective action.

An Alert event requires action beyond the normal capability of the basic shift complement. Plant response and off-site notification associated with this event classification ensure that sufficient emergency response personnel are mobilized to activate the Technical Support Center and the Operations Support Center. The Emergency Operations Facility/Recovery Center is activated with the Site Recovery Manager, the EOF Coordinator and other EOF/RC staff members. Sufficient emergency assistance personnel to assess off-site radiological impact are assigned if the Alert event is producing releases off-site. Actual releases of radioactivity which substantially exceed Technical Specification limits may be involved and thus radiation monitoring and dose projection may be an integral portion of the emergency response required. Prompt notification is made to State authorities and follow-up information is provided as needed to off-site emergency organizations.

A Site Area Emergency indicates an event which involves likely or actual major failures of plant functions needed for the protection of the public. The possibility does exist for some releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide action recommendations to State authorities and follow-up information as needed to off-site emergency organizations.

Plant resources are anticipated to be sufficient to cope with a Site Area Emergency. Outside resources, however, are mobilized and selected members are dispatched to the site. All emergency centers are activated following declaration of a Site Area Emergency. All non-essential personnel are evacuated from the site. Representatives from adjoining States are dispatched to the Emergency Operations Facility. Assessment of plant conditions and off-site radiological parameters determine the type of protective measures necessary for protection of the public sector. The public is notified of the event by local media facilities and periodic updates of information are released to ensure uniform, adequate response to real conditions.

A General Emergency is declared when substantial core degradation or melting has occurred, with a potential for loss of containment integrity. The possibility does exist for releases of radioactive material and response to this event emphasizes the ability to monitor the releases and to provide for protective action recommendations to State authorities.

Contracted service organizations, sponsor utilities, and other industry resources are alerted and requested to render assistance as appropriate. In addition, Federal resources are called upon for assistance. Assessment of plant conditions and off-site radiological parameters determine the type of protective action recommendations.

Plant representatives closeout or escalate the emergency classification, or move to recovery as conditions warrant. Written summaries of the event are provided to off-site authorities and other affected agencies.

Emergency Classification and PAR Notification/Upgrade Form (VYOPF 3546.02) specifies the contents and formal States notifications of emergency classifications and protective action recommendations (PARs) by Vermont Yankee, and is used by the Control Room or SRM in the authorization and transmittal of these notifications. Prior to the SRM assuming responsibility for the emergency response, the TSC Coordinator can authorize escalations and PARs, but the Control Room retains transmittal responsibilities to off-site agencies.

In accordance with AP 6002, Preparing 50.59 Evaluations, the results of an Applicability Determination (AD) has determined that an AD is not required for future changes provided the procedure scope is not changed. The basis for this conclusion is that this document is an Emergency Implementing Procedure and is subject to 10CFR50.54(q) to determine if the changes decrease the effectiveness of the Emergency Plan and if they have the potential to affect our ability to meet the standards of 10CFR50.47(b) and the requirements of 10CFR50 Appendix E.

ATTACHMENTS

1. Appendix A Site Recovery Manager (SRM)
2. Appendix B Emergency Operations Facility Coordinator (EOFC)
3. Appendix C Emergency Operations Facility Coordinator's Assistant
4. Appendix D Personnel & Equipment Monitoring Team
5. Appendix E Communications Assistant
6. Appendix F Radiological Assistant
7. Appendix G Manpower and Planning Assistant
8. Appendix H Engineering Support Group Assistant
9. Appendix I Ops Advisor Responsibilities
10. Appendix J State Advisor Responsibilities
11. Appendix K Compliance Advisor Responsibilities
12. Appendix L JNC Technical Representative Responsibilities
13. Appendix M Media Advisor and Media Advisor Assistant Responsibilities
14. Appendix N Radiological Coordinator Responsibilities
15. Appendix O State Liaison Responsibilities
16. Appendix P Facilities Coordinator Responsibilities
17. Appendix Q Telecommunications Coordinator Responsibilities
18. Appendix R Response Check of RM-14/Frisker Probe
19. Appendix S Technical Representative Escalation Checklist/Script
20. Appendix T Manpower and Planning Liaison Responsibilities
21. VYOPF 3546.01 Plant Status Briefing Form
22. VYOPF 3546.02 Emergency Classification and PAR Notification/Upgrade Form
23. VYOPF 3546.03 Instructions to Personnel Prior to Being Released from the Assembly Area
24. VYOPF 3546.04 Deleted
25. VYOPF 3546.05 Shift and Relief Planning Worksheet
26. Table 1 Radiological Assistant's Organization
27. Table 2 White Plains Recovery Support Group Corporate Call List

REFERENCES AND COMMITMENTS

1. Technical Specifications and Site Documents
 - a. Vermont Yankee Nuclear Power Station Emergency Plan
2. Codes, Standards and Regulations
 - a. None
3. Commitments
 - a. INS8722-01
 - b. E_Drill-98EOF3
 - c. LAI-801
 - d. EPEX97TSC-2

4. Supplemental References

- a. AP 0009, Event Reports
- b. AP 0010, Situational Reporting Requirements
- c. AP 0021, Work Orders
- d. AP 0156, Notification of Significant Events
- e. AP 0864, Fitness for Duty
- f. AP 3125, Emergency Plan Classification and Action Level Scheme
- g. OP 3504, Emergency Communications
- h. OP 3507, Emergency Radiation Exposure Control
- i. OP 3508, On-Site Medical Emergency Procedure
- j. OP 3509, Environmental Sample Collection During an Emergency
- k. OP 3510, Off-Site and Site Boundary Monitoring
- l. OP 3511, Off-Site Protective Action Recommendations
- m. OP 3513, Evaluation of Off-Site Radiological Conditions
- n. OP 3531, Emergency Call-In Method
- o. OP 3540, Control Room Actions During an Emergency
- p. OP 3541, Activation of the Technical Support Center (TSC)
- q. OP 3542, Operation of the Technical Support Center (TSC)
- r. OP 3544, Operation of the Operations Support Center (OSC)
- s. OP 3545, Activation of the Emergency Operations Facility/Recovery Center (EOF/RC)
- t. OP 3547, Security Actions During an Emergency
- u. AP 6807, Collection, Temporary Storage and Retrieval of QA Records
- v. PP 7019, Severe Accident Management Program
- w. Emergency Assistance Personnel List (EAPL)

PRECAUTIONS/LIMITATIONS

1. Refer to OP 3504 for alternate methods of communication in the event that primary methods fail.

PROCEDURE

NOTES

- With the exception of authorizing Protective Action Recommendations and classifications, actions required in each appendix may be assigned by the responsible individual to other personnel as appropriate. The designated individual, however, has the overall responsibility for the execution of the appendix.
- Personnel assigned to fill positions in procedure steps must be qualified per the Emergency Assistance Personnel List (EAPL).

1. Select the appropriate appendix:
 - a. Appendix A, Site Recovery Manager (SRM)
 - b. Appendix B, Emergency Operations Facility Coordinator (EOFC)
 - c. Appendix C, Emergency Operations Facility Coordinator's Assistant
 - d. Appendix D, Personnel & Equipment Monitoring Team
 - e. Appendix E, Communications Assistant
 - f. Appendix F, Radiological Assistant
 - g. Appendix G, Manpower and Planning Assistant
 - h. Appendix H, Engineering Support Group Assistant
 - i. Appendix I, Ops Advisor Responsibilities
 - j. Appendix J, State Advisor Responsibilities
 - k. Appendix K, Compliance Advisor Responsibilities
 - l. Appendix L, JNC Technical Representative Responsibilities
 - m. Appendix M, Media Advisor and Media Advisor Assistant Responsibilities
 - n. Appendix N, Radiological Coordinator Responsibilities
 - o. Appendix O, State Liaison Responsibilities
 - p. Appendix P, Facilities Coordinator Responsibilities
 - q. Appendix Q, Telecommunications Coordinator Responsibilities
 - r. Appendix R, Response Check of RM-14/Frisker Probe
 - s. Appendix S, Technical Representative Escalation Checklist/Script
 - t. Appendix T, Manpower and Planning Liaison Responsibilities

NOTES

- Some spaces have multiple signature lines, based on event level. The step should be initialed for each event level it is completed for. If an event escalates, each step with that designator should be rechecked to ensure no further action is required.
- Steps may be performed concurrently or out of sequence.

2. Complete the appropriate appendix and record time and initials as required.

3. Alternate Assembly and Staging Area

- a. If a Code Red Security Event occurs during off-hours, the Emergency Operations Facility will be used as an alternate assembly and staging area for personnel who would normally report to emergency response facilities at the plant site. A pager code of "777" and a Community Alert Message notifies personnel to report to the EOF in an off-hours Code Red Security Event.
- b. The warehouse (Joint News Center) will be used for the alternate assembly and staging area. The Joint News Center will be relocated in a Code Red Security Event occurring after hours.
- c. EOF staff will activate the EOF per procedure. TSC/OSC personnel arriving at the EOF will be directed to the alternate assembly and staging area. Personnel will sign in at the assembly area to provide an available manpower list.
- d. The TSC Coordinator and OSC Coordinator will organize response teams based on the nature of the emergency and release second shift personnel.

FINAL CONDITIONS

1. Return all completed Appendices and forms to the Emergency Plan Coordinator for filing per AP 6807.

APPENDIX A

SITE RECOVERY MANAGER (SRM)

SRM Name (print): _____

Date: _____

1.0 Obtain overall status of emergency situation. Ensure that VYOPF 3546.01, "Plant Status Briefing Form" is filled out and is current. (INS8722-01)

(circle one)
A S G

Time/Date

Initials

_____/_____

NOTES

- SM/PED retains responsibility for off-site States' notification (NAS-Orange Phone) until Site Recovery Manager assumes responsibility for implementation of VY Emergency Plan.
- TSC Coordinator or SM/PED (if applicable) retains responsibility for off-site NRC authorities' notification (FTS ENS Phone) unless Site Recovery Manager indicates otherwise.
- In a Code Red Security Event, when the Control Room and TSC is not able, the Site Recovery Manager will assume responsibility for the off-site NRC notification (FTS ENS phone).

2.0 Contact the TSC Coordinator or SM/PED (if applicable) when ready to assume overall responsibility for the implementation of the VY Emergency Plan. This includes the following primary responsibilities:

2.1. Escalation or de-escalation of the emergency.

(circle one)
A S G

_____/_____

2.2. Notification of off-site States' authorities. (NAS-Orange Phone)

(circle one)
A S G

_____/_____

APPENDIX A (Continued)

- | | <u>Time/Date</u> | <u>Initials</u> |
|---|-----------------------|-----------------|
| 2.3. Authorization and transmittal of off-site protective action recommendations. | (circle one) A S G | |
| | _____ / _____ | _____ |
| 3.0 Assign EOF Coordinator: | | |
| Name: _____ | _____ / _____ | _____ |

NOTE

Minimum Staffing for activation (see white board in SRM office area):

Site Recovery Manager
 EOF Coordinator
 Radiological Assistant
 Communication Assistant
 Compliance Advisor
 Ops Advisor #1

- | | | |
|---|-----------------------|-------|
| 4.0 Inform the EOF Coordinator, the SM/PED, TSC Coordinator, and the States representatives that the EOF/RC is activated. | | |
| | _____ / _____ | _____ |
| 5.0 IF a GENERAL EMERGENCY, THEN implement OP 3511, Off-Site Protective Action Recommendations. | G _____ / _____ | _____ |
| 6.0 If a release is in progress or expected, ensure that OP 3513, Evaluation of Off-Site Radiological Conditions, is implemented by the Radiological Assistant. | (circle one) A S G | |
| | _____ / _____ | _____ |
| 7.0 Act as the principal plant emergency response organization spokesperson in all interfacing with off-site authorities. | | |
| 8.0 Act, or designate an individual, as the official point of contact for communications and information to the States. (SRM State Advisor) | (circle one) A S G | |
| Name: _____ | _____ / _____ | _____ |

APPENDIX A (Continued)

| | | <u>Time/Date</u> | <u>Initials</u> |
|------|--|--------------------------------|-----------------|
| 9.0 | Contact the PED to ensure that the States have called back to affirm receipt of initial notification, if not re-contact the States. (SRM State Advisor) | (circle one) A S G / | |
| 10.0 | Ensure that the State representatives at the EOF are updated on the status of the emergency periodically. (SRM State Advisor) | | |
| 11.0 | Assess plant conditions as reported by the response organization and direct that all needed response efforts are addressed. | | |
| 12.0 | Ensure PED makes a single (initial) ISO notification. (Ops Advisor #1) | (circle one) A S G / | |
| 13.0 | Depending upon the duration of the emergency, instruct the Purchasing Coordinator to make arrangements for food and potable water delivery to all emergency response centers, including off-site teams. (Purchasing Coordinator) | / | |
| 14.0 | Ensure that manpower planning is being conducted to provide for response efforts over an extended period. (Manpower & Planning Asst.) | / | |
| 15.0 | Review and approve, or have designated alternate review and approve, periodic news releases prepared by the Nuclear Information Director or designated alternate prior to release. | / | |

APPENDIX A (Continued)

Time/Date

Initials

16.0 IF conditions warrant escalation to a more severe emergency class, THEN the Site Recovery Manager should, following discussion and concurrence with the TSC Coordinator and SM/PED, complete the following actions in the order identified below:

16.1. IF there is an escalation to a GENERAL EMERGENCY, implement OP 3511, Off-Site Protective Action Recommendations.

G _____ / _____

16.2. Direct the SM/PED to make the appropriate plant announcement.

A _____ / _____

S _____ / _____

G _____ / _____

NOTE

States' notification must be initiated within 15 minutes of emergency classification declaration.

16.3. Ensure that the notification of the VT/NH/MA State EOCs is being implemented per VYOPF 3546.02, Emergency Classification and PAR Notification/Upgrade Form. (Compliance Advisor)

S _____ / _____

G _____ / _____

16.4. If any State EOC is not manned, and the EOF/RC State representative is not present, notify the appropriate State Police agency per VYOPF 3546.02. (Compliance Advisor)

S _____ / _____

G _____ / _____

16.5. Inform each EOF/RC State representative of the transition on the emergency class and the condition producing the change. (SRM State Advisor)

A _____ / _____

S _____ / _____

G _____ / _____

16.6. After completion of the State's notification, SRM acknowledges that the States' notification has been completed.

A _____ / _____

S _____ / _____

G _____ / _____

16.7. Notify White Plains Recovery Support Group Managers of escalation per Table 2.

A _____ / _____

S _____ / _____

G _____ / _____

APPENDIX A (Continued)

- | | <u>Time/Date</u> | <u>Initials</u> |
|---|------------------------------|-----------------|
| 17.0 IF the State of Vermont issues an evacuation order for Brattleboro, THEN contact the Nuclear Information Director and discuss impact on the Joint News Center (JNC). | (circle one) S G / | _____ |
| 18.0 IF a decision is made to evacuate the JNC, THEN announce that, as a precautionary measure, all declared pregnant staff should evacuate the EOF. (E_Drill-98EOF3) | (circle one) S G / | _____ |
| 19.0 Ensure VYOPF 3546.01 is faxed to the TSC to update the TSC Coordinator of any protective actions the States may be implementing. (Media Advisor Assistant) | | |

FINAL CONDITIONS

- | | | |
|---|---|-------|
| 1. IF the following criteria are satisfied, THEN De-escalation from an emergency phase to a recovery phase is warranted: | | |
| a. Criticality controls are in effect. | / | _____ |
| b. The core is being adequately cooled. | / | _____ |
| c. The fission product release has been controlled. | / | _____ |
| d. Control has been established over containment pressure and temperature. | / | _____ |
| e. An adequate heat transfer path to an ultimate heat sink has been established. | / | _____ |
| f. Reactor coolant system pressure is under control. | / | _____ |
| g. The States of Vermont, New Hampshire, and Massachusetts reach agreement with the Site Recovery Manager or designated alternate that there is no longer a need for consideration of further public protective action. | / | _____ |

APPENDIX A (Continued)

| | <u>Time/Date</u> | <u>Initials</u> |
|--|------------------|-----------------|
| 2. IF conditions warrant de-escalation to a recovery phase, THEN the Site Recovery Manager completes the following actions in the order identified below: | | |
| a. Review plant conditions with each State official stationed at the EOF/RC and recommend de-escalation. | _____ / _____ | _____ |
| b. Contact the respective State EOC via the Nuclear Alert System (NAS - Orange Phone) or land line. IF any State EOC is not manned, THEN notify the respective State Police Dispatcher via the NAS Orange Phone or land line and request a State Emergency Management official call the Site Recovery Manager via the NAS Orange Phone or land line as soon as possible. | _____ / _____ | _____ |
| c. After an agreement has been reached with the States, direct the SM/PED to make the appropriate plant announcement. | _____ / _____ | _____ |
| 3. Notify the Nuclear Information Director, or designated alternate, de-escalation or termination of the event has occurred. | _____ / _____ | _____ |
| 4. Devise a recovery plan applicable to the plant condition(s) following the termination of the emergency phase. | _____ / _____ | _____ |
| 5. Provide a verbal close-out of the event with off-site authorities and agencies as follows: | | |
| a. NRC | _____ / _____ | _____ |
| b. State of Vermont | _____ / _____ | _____ |
| c. State of New Hampshire | _____ / _____ | _____ |
| d. Commonwealth of Massachusetts | _____ / _____ | _____ |
| 6. Site Recovery Manager will notify White Plains Recovery Managers of de-escalation to a recovery phase per Table 2. | _____ / _____ | _____ |

APPENDIX A (Continued)

| | | <u>Time/Date</u> | <u>Initials</u> |
|----|---|------------------|-----------------|
| 7. | Initiate an Event Report per AP 0009 for the event that resulted in the declaration of the emergency. | _____ / _____ | _____ |

| |
|---|
| <p style="text-align: center;"><u>NOTE</u></p> <p style="text-align: center;">Emergency Planning will sign off step 8.</p> |
|---|

| | | | |
|----|--|---------------|-------|
| 8. | When a written report is generated, ensure a copy is forwarded to the Emergency Plan Coordinator for the following off-site authorities: | | |
| a. | Director of Vermont Emergency Management, State of VT | _____ / _____ | _____ |
| b. | Director of Massachusetts Emergency Management, Commonwealth of MA | _____ / _____ | _____ |
| c. | Director of New Hampshire Emergency Management, State of NH | _____ / _____ | _____ |

APPENDIX B

EMERGENCY OPERATIONS FACILITY COORDINATOR (EOFC)

EOF Coordinator Name (print): _____

Date: _____

Time/Date

Initials

NOTE

Coordination with the EOFC Assistant is required to determine which steps may have already been completed.

- | | | | |
|-----|---|---|-------|
| 1.0 | Contact the Security Manager (if outside of normal hours), to ensure that arrangements are made to perform Fitness-For-Duty testing at the EOF. | _____ / _____ | _____ |
| 2.0 | Contact the Shift Manager/Plant Emergency Director (SM/PED), or TSC if staffed, and obtain specific information concerning the event. | (circle one) A S G _____ / _____ | _____ |
| 3.0 | Assess on-site and off-site radiological conditions associated with any accidental releases. (Reference OP 3509, 3510 and 3513) | S _____ / _____ G _____ / _____ | _____ |
| 4.0 | Act as liaison with the States' representatives until relieved by the SRM. | S _____ / _____ G _____ / _____ | _____ |
| 5.0 | Document and coordinate offsite monitoring team activities. | S _____ / _____ G _____ / _____ | _____ |
| 6.0 | Direct the call-in of off-duty personnel as required. Personnel are requested and assigned as per OP 3546 Appendices. | (circle one) S G _____ / _____ | _____ |
| 7.0 | Ensure that radiological assessment (refer to OP 3544, Appendix A) is being performed as deemed appropriate by the Radiological Assistant. | A _____ / _____ S _____ / _____ G _____ / _____ | _____ |
| 8.0 | Obtain information concerning protective action recommendations from the Radiological Assistant. | G _____ / _____ | _____ |

APPENDIX B (Continued)

| | | <u>Time/Date</u> | <u>Initials</u> |
|------|--|------------------|-----------------|
| 9.0 | Provide information to the Site Recovery Manager concerning dose assessment results and protective action recommendations. | | |
| 10.0 | Coordinate with the Radiological Assistant, the radiological assessment of off-site conditions. | | |
| 11.0 | Coordinate with the Radiological Assistant to determine if monitoring of incoming personnel is required at the control point at the entrance to the EOF. | _____ / _____ | _____ |
| 12.0 | Coordinate with the Radiological Assistant to determine if a control point needs to be established at the Joint News Center entrance and if monitoring of incoming personnel is required. | _____ / _____ | _____ |
| 13.0 | Ensure the EOF staff is periodically briefed on plant status conditions and changes (i.e., plant radiological conditions, meteorological information, emergency class changes, protective action recommendations, and state/local agencies protective measure decisions). (Ops Advisor #2) | | |
| 14.0 | Ensure that the status forms are being utilized to transmit emergency information. | | |
| 15.0 | Periodically check with the Manpower and Planning Assistant to evaluate and discuss future manpower and logistics needs. | | |
| 16.0 | Depending upon the duration of the emergency, arrangements will be made by the Purchasing Coordinator to have food/water delivered. Coordinate the distribution with Manpower & Planning when notified of food delivery. | | |

APPENDIX B (Continued)

FINAL CONDITIONS

1. Direct the responsible personnel to restore all emergency equipment to its normal readiness state. _____ / _____

2. Review and initial the following Emergency Operations Facility logs to ensure completeness and accuracy:
 - a. Site Recovery Manager (maintained by Ops Advisor #1 and Compliance Advisor) _____ / _____
 - b. Procurement _____ / _____
 - c. EOF Coordinator (maintained by EOFCA Assistant) _____ / _____
 - d. Personnel and Equipment Monitoring _____ / _____
 - e. Manpower & Planning _____ / _____

APPENDIX C

EMERGENCY OPERATIONS FACILITY COORDINATOR'S ASSISTANT

EOF Coordinator's Assistant

Name (print): _____

Date: _____

Time/Date

Initials

NOTE

Coordination with the EOF Coordinator is required to determine which steps may have already been completed.

1.0 Direct the activation and staffing of the EOF, per OP 3545, until the arrival of the EOF Coordinator (SSCA No. 0422).

2.0 Open EOF Coordinator's cabinet, remove clipboard and contact TSC or Control Room. Inform the TSC Coordinator, or in the absence of personnel in the TSC, inform the Plant Emergency Director (PED) of your presence and request the following:

(circle one)
A S G

_____ / _____

2.1. Summary evaluation of plant conditions (take notes).

_____ / _____

2.2. Type of release, if release is in progress or expected.

_____ / _____

2.3. Directional variability of the wind (i.e., any indication of trending toward a new direction?).

_____ / _____

2.4. Whether or not the PED needs assistance in notifying plant management personnel, or other on-site assistance.

_____ / _____

3.0 Upon arrival of the EOF Coordinator, advise the EOF Coordinator of the situation and its status and act as the assistant by keeping a log of significant events and other duties as requested.

(circle one)
A S G

_____ / _____

4.0 Be alert for any possible changes in meteorological conditions, especially wind direction and wind speed. If necessary, contact the TSC for meteorological conditions.

APPENDIX D

PERSONNEL & EQUIPMENT MONITORING TEAM

Personnel & Equipment Monitoring Team

(1) Name (print): _____

Date: _____

(2) Name (print): _____

Date: _____

Time/Date

Initials

NOTE

All monitoring should be done in a low background area. (<2000 cpm)

1.0 Obtain two portable friskers (RM 14 with HP-210 Probe) and the Personnel Monitoring clipboard and logbook from the charging shelf in the sprinkler room in Room 118.

_____ / _____

2.0 Perform response check of the RM 14 probes using Appendix J.

_____ / _____

3.0 Establish a control point at the EOF entrance.

_____ / _____

4.0 Determine if a release is in progress. If a release is in progress, monitor yourself first then all personnel on duty inside the EOF.

_____ / _____

5.0 At the discretion of the EOF Coordinator and Radiological Assistant, monitor all incoming personnel at the EOF control point.

_____ / _____

6.0 At the discretion of the EOF Coordinator and Radiological Assistant, establish a control point at the entrance to the Joint News Center (JNC) to monitor all personnel entering the JNC.

_____ / _____

7.0 Record names of all personnel monitored in the Personnel and Equipment Monitoring Logbook. Include time and results of readings.

APPENDIX D (Continued)

- 8.0 Immediately segregate all personnel arriving in protective clothing (PCs) and identify their vehicles, if applicable.
 - 8.1. Survey PC-attired personnel and their vehicles with priority.
 - 8.2. Note in the Personnel and Equipment Monitoring Logbook the name(s) and vehicle(s) exceeding 2x background or 2000 net cpm, whichever is less.
 - 8.3. Hold for decontamination and release.
- 9.0 Perform facial survey with a frisker (DO NOT attempt nasal smear or tissue "blow" samples) in order to identify potential for internal dose of individual.
- 10.0 Report all significant or positive results to the EOF Coordinator and the Radiological Assistant.
- 11.0 Log all personnel monitoring results in the Personnel and Equipment Monitoring Logbook.

APPENDIX E
COMMUNICATIONS ASSISTANT

Communications Assistant

Name (print): _____

Date: _____

| | <u>Time/Date</u> | <u>Initials</u> |
|--|------------------|-----------------|
| 1.0 Test phones for dial tone (per Figure 6, OP 3504). | / | _____ |
| 2.0 Obtain box of Three-Part Message and Reply forms from the EOF Coordinator's cabinet. | / | _____ |
| 3.0 Assign available personnel to phones and radio and provide them with a supply of blank Three-Part Message and Reply forms. | / | _____ |

| |
|---|
| <p><u>NOTE</u></p> <p>Radio procedures are contained in OP 3504.</p> |
|---|

- 4.0 Establish radio communications with all on-site and off-site teams prior to their departure to assigned tasks.
- 5.0 Record the date, time, and parties involved for each incoming or outgoing message by telephone or radio on a Three-Part Message and Reply Form.

APPENDIX F
RADIOLOGICAL ASSISTANT

Radiological Assistant

Name (print): _____

Date: _____

Time/Date

Initials

NOTE

Table 1 may be utilized as a manpower organizational guideline to the extent deemed practicable.

1.0 On the dispersion map, select the appropriate plume stability angle in accordance with reported meteorological conditions.

_____ / _____

2.0 IF the NRC requests an open, continuous Health Physics Network (HPN) communications channel, THEN ensure a technically competent individual is available to continuously maintain the HPN phone (LAI-801). Refer to OP 3504 to establish HPN channel.

Name: _____

_____ / _____

3.0 Assign personnel from Manpower and Planning to provide assistance in communications, dose assessment and board updates as required.

Name: _____

_____ / _____

4.0 Assign the Radiological Coordinator and direct the individual to perform the procedure outlined in OP 3525, Radiological Coordination. (Ensure individual is qualified per EAPL.)

Name: _____

_____ / _____

5.0 Coordinate with the EOF Coordinator to determine if monitoring of incoming personnel is required at the control point at the entrance to the EOF.

_____ / _____

APPENDIX F (Continued)

- 6.0 Coordinate with the EOF Coordinator to determine if a control point needs to be established at the Joint News Center entrance and if monitoring of incoming personnel is required.

_____ / _____

NOTE

All communications to the plant should go through the TSC, or, if the TSC is not staffed, through the Control Room.

- 7.0 Direct and evaluate the performance of dose projections as per the procedure outlined in OP 3513, Evaluation of Off-Site Radiological Conditions.

_____ / _____

- 8.0 Perform required steps in OP 3511, Off-Site Protective Action Recommendations.

_____ / _____

- 9.0 Assemble all available information relating to the radiological situation both on and off-site.

_____ / _____

- 10.0 Provide support to the Radiation Protection Coordinator or designated alternate at the TSC to ensure that on-site protective actions are being considered and carried out.

_____ / _____

- 11.0 Review exposure control measures and maintain and review exposure records with the Radiation Protection Coordinator or designated alternate at the TSC as appropriate.

_____ / _____

- 12.0 Organize the information and concisely state the latest radiological conditions on the status and mapboards.

- 13.0 As new or additional information becomes available, update the boards.

- 14.0 Keep the EOF Coordinator informed of pertinent changes, especially updates regarding protective action recommendations.

- 15.0 Assist the EOF Coordinator as requested.

APPENDIX G

MANPOWER AND PLANNING ASSISTANT

Manpower and Planning Assistant

Name (print): _____

Date: _____

Time/Date

Initials

NOTES

- The Manpower & Planning Clipboard contains the latest EAPL, E-Plan Team assignments, organizational chart, phone list and staffing worksheets, as well as Fire Brigade and Medical Team lists.
- Supplies are located in the sprinkler room in Room 118.

1.0 Assign personnel to assist with manpower duties (1 or 2 people as necessary):

Name(s): _____

_____ / _____

2.0 Obtain a briefing of the nature of the emergency and extent of damage to the plant and equipment.

_____ / _____

3.0 Establish contact with Manpower & Planning Liaison in TSC. Record name, phone and fax numbers:

Name: _____

Phone #: _____ Fax #: _____

_____ / _____

4.0 Utilizing the manpower whiteboards, determine initial staff by obtaining rosters from the EOF and TSC/OSC.

_____ / _____

APPENDIX G (Continued)

NOTE

- As personnel arrive at the EOF, they must either key in access code, show identification or be positively identified by EOF Staff member to enter the building. All unidentified personnel should be denied access and, if necessary, request Security assistance.
- Do Not block open EOF entrance doors.

5.0 As personnel arrive, they will report to their assigned positions. Personnel not otherwise assigned to a position should assemble in the training building cafeteria. Maintain an awareness of extra personnel in the EOF not otherwise assigned to emergency duties to determine available manpower.

6.0 Attend briefings in EOF and brief personnel in lobby including Security.

7.0 Ensure that the general assembly area does not become overcrowded. If an overflow of spare personnel occurs, send them to an alternate assembly area in the EOF.

8.0 Assemble specialized assistance teams as requested by the TSC Coordinator.

9.0 In coordination with the Purchasing Coordinator, arrange lodging for Vermont Yankee emergency workers if their homes are in evacuated areas.

10.0 Depending upon the duration of the emergency, arrangements will be made to have food delivered. Immediately notify EOF Coordinator when food arrives. Coordinate with him/her the distribution of the food.

11.0 Assist the EOF Coordinator by attempting to anticipate and provide for future manpower and logistics needs.

APPENDIX G (Continued)

NOTE

A person may be listed in more than one assignment group in the EAPL.
When filling positions, individuals must be qualified per the EAPL.

12.0 Depending upon the anticipated duration of the emergency, prepare relief schedules.

_____ / _____

13.0 Fax prepared relief schedules to the Manpower & Planning Liaison for TSC Coordinator approval.

_____ / _____

14.0 Once the TSC approves the relief schedule, coordinate implementation with the SRM. Excuse those personnel not presently needed. Use VYOPF 3546.03 to provide those personnel being released with instructions on reporting responsibilities. (EPEX97TSC-2)

_____ / _____

APPENDIX H
ENGINEERING SUPPORT GROUP ASSISTANT

Engineering Support Group Assistant

Name (print): _____

Date: _____

Time/Date

Initials

NOTES

- The ESG Clipboard contains the latest EAPL, organizational chart and phone list.
- Supplies are located in E-Plan Cabinet #2, located outside of Room 126, and in sprinkler room in Room 118.

- | | | | |
|-----|--|---|--|
| 1.0 | Obtain items from Cabinet #2 and set up area. | / | |
| 2.0 | Place Action Item List magnetic tags on white board for use as status board. | / | |
| 3.0 | Establish the following positions: (Place magnetic tags on white board) | | |
| | Senior Management: _____ | | |
| | Phone Communicator: _____ | | |
| | Action Item List Scribe: _____ | | |
| | Briefing Representative: _____ | | |
| | Critique Scribe (optional): _____ | | |
| 4.0 | Establish communication with the General Manager's Office (TSC x5200). | / | |
| 5.0 | Route sign-in sheet for compilation of personnel available for assignments. | / | |
| 6.0 | Monitor and update status of action items and communicate results. | | |

APPENDIX H (Continued)

| | <u>Time/Date</u> | <u>Initials</u> |
|---|------------------|-----------------|
| 7.0 Depending upon the anticipated duration of the emergency, work with Manpower and Planning to prepare relief schedules and excuse those personnel not presently needed. Use VYOPF 3546.03 to provide those personnel being released with instructions on reporting responsibilities. | _____ / _____ | _____ |
| 8.0 Maintain communication with the plant. | | |
| 9.0 Compile a list of critique items. | _____ / _____ | _____ |

FINAL CONDITIONS

1. When directed by the SRM, or designated alternate, assist with developing a recommended recovery plan.
2. Direct the responsible personnel to restore all emergency equipment to its normal readiness state.

APPENDIX I

OPS ADVISOR RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

OPS ADVISOR #1

1. Initially test, by listening for dial tone, both the primary and the alternate auto-ring down circuits and then implement one. Continuously monitor for users who fail to mute their microphone when not actually speaking and advise them to do so.
 - Monitor ring down circuit, advise SRM of major events.
 - Evaluate need for escalation, protective action recommendation, de-escalation.
 - During escalations and de-escalations, advise the PED to sound the proper emergency alarm at the same time the State Advisor makes his declaration.
 - Maintain a current bound log of events and SRM decisions.
2. Be particularly careful not to direct or instruct control room personnel in the performance of their duties.
 - Advise the PED to make a single (initial) ISO notification at the Alert, Site Area, or General Emergency level.

OPS ADVISOR #2

1. Complete Plant Status Briefing Form (VYOPF 3546.01). Serialize each new form and obtain SRM approval.
 - Give copy of VYOPF 3546.01 to the Media Advisor Assistant for distribution to the TSC, Technical Representative in the Press Release Writer's Area, etc.
2. Identify plant parameters which are of substantial concern or which have significant trends.
 - Brief all SRM Staff in the SRM Communications Area (e.g., State Advisor, Media Advisor, Radiological Advisor, etc.) of each significant plant parameter change, escalation, or PAG recommendation.
3. Establish a rhythm of regular SRM staff briefings. Alternates should be prepared to step in immediately and without direction if the primary individual becomes tied up.

APPENDIX J

STATE ADVISOR RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

STATE ADVISOR

1. Set up State Area, including set-up of status information and removal of training materials.
2. Identify spokesman for each State and complete status information in the SRM's office.
3. Make Compliance Advisor aware of States that have not responded to ensure proper orange phone notification.
4. For those States whose representatives have not yet arrived, provide informational updates to their State EOCs until their arrival at Vermont Yankee.
5. Provide initial briefings as State Representatives arrive and ensure States representatives are aware of and invited to the Ops Advisor #2 briefings. Advise/provide additional information on each significant change in plant parameters, escalations or de-escalations, PAG recommendations, and METPAC calculations.
6. Maintain any VY Status Boards in the State Area and ensure status boards are consistent with SRM area status boards.
7. Provide copies of appropriate status forms to State and NRC representatives.
 - Respond to State questions, and update Media Advisor.
 - Provide feedback to the SRM directly or via the Ops. Advisor #2 regarding State questions and concerns.

APPENDIX K

COMPLIANCE ADVISOR RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

COMPLIANCE ADVISOR

1. Review E-Plan Implementation Procedures to ensure SRM completion of required steps.
2. Prompt SRM/State Advisor to maintain regular briefings.
3. Function as SRM office area gatekeeper.
4. Prepare VYOPF 3546.02, Emergency Classification and PAR Notification/Upgrade Form for applicable emergency classification. Use the following criteria for Step B.2, notification of a radioactive release in progress:
 - a. If no radiation release is expected, then check the first box, "no radiation release related to this event."
 - b. Check release BELOW federally approved operating limits if:
 - 1) An elevated release as indicated by an increase in radiation levels on Stack Gas Radiation monitors RM-17-156 or 157 or confirmed by stack gas sample less than ODCM limits, due to this event,

OR
 - 2) A ground release of radiation less than the ODCM limits by sample or field monitoring as confirmed by the Chemistry Department.
 - c. Check release ABOVE federally approved operating limits if:
 - 1) An elevated release of radiation as indicated by a **HIGH Alarm** on RM-17-156 or 157 or confirmed by stack gas sample greater than ODCM limits due to this event,

OR
 - 2) A ground release of radiation greater than the ODCM limits by sample or field monitoring as confirmed by the Chemistry Department.

APPENDIX K (Continued)

5. Make Orange Phone Notifications when required by procedure and with SRM concurrence. Log and inform the Media Advisor of such notifications.
6. Prompt SRM to personally notify Governor on escalations/protective action recommendations. Log such notifications.
7. Maintain status boards in SRM area.
8. Log significant incoming calls.

APPENDIX L

JNC TECHNICAL REPRESENTATIVE RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

JNC TECHNICAL BRIEFING REPRESENTATIVE

1. Report to Press Release Writing Area and begin preparations for periodic news conferences by participating in plant-related discussions.
2. Assist the Nuclear Information Director in preparing for regular media briefings.
3. Accompany NID in short briefings for the state and/or NRC in the state conference rooms using small version of reactor/drywell graphic.
4. Participate in regular media briefings and respond to technical questions.
5. Assist Technical Representative and Press Release Writer with their duties.

JNC TECHNICAL REPRESENTATIVE

1. Report to Press Release Writing Area and assist the Press Release Writer and Technical Briefing Representative by communicating (via speakerphone) with the Media Advisor located in the EOF.
2. Review draft press releases to ensure accuracy.
3. Participate in plant-related discussions in the Press Release Writing Area to ensure general understanding of plant conditions.
4. Be available to fill in for Technical Briefing Representative in a news conference, if necessary.

APPENDIX M

MEDIA ADVISOR AND MEDIA ADVISOR ASSISTANT RESPONSIBILITIES

NOTES

- Synchronize clocks with ERFIS.
- Always begin announcements with the current time.
- Dial x4699 to access the paging system for all areas.

MEDIA ADVISORS (2)

SETUP-Steps 1-3:

1. Ensure the PA speaker volume is turned up (position 10) in the EOF/RC room.
2. When the EOF has been activated, make announcement over PA system along with the current time (from ERFIS) for facility synchronization, i.e., "The EOF was activated at _____ hrs. The time is now _____ hrs, please synchronize clocks in your area.."
3. Instruct the switchboard operator not to make public address announcements after the EOF has been activated (except for the activation of the Joint News Center).

NOTE

The following action items may be implemented in any order.

4. Assist in the preparation of press releases by keeping press writing area personnel updated on the event, and obtain SRM signature (or designated individual) on final press releases.
5. Make PA announcements for EOF activation, escalations and de-escalations of emergency status. In addition to announcements for escalations, periodically (e.g., every 30 minutes) make PA announcements of the current emergency status. A suitable announcement may be: "Attention, attention, attention. The time is _____ hrs. Plant conditions remain at the Alert level."
6. Obtain Media Advisor Clipboard with Technical Representative Escalation Checklists (Appendix S) on it and provide the JNC Technical Representative at the Joint News Center a completed checklist for each escalation.

APPENDIX M (Continued)

7. Coordinate the "uneventful merge" of the NRC Site Team.
8. Assist the Recovery Staff (CA, SA, OAS) in collecting information and resources to provide for long term operation of the site recovery function (e.g., manpower, food, reference materials, other logistical concerns).

MEDIA ADVISOR ASSISTANT

SETUP-Steps 1-3:

1. Set up fax machines (per OP 3545, Figure 1) in Recovery Planning area and test by faxing between both machines. Send test sheet to TSC (x5440) and call x5157 to confirm receipt of fax.
2. Plug speakerphone, for communication with Press Release Writer's Area, into jack #8 in Room 125. Ensure it is properly working by calling x4878. (Phone and extra batteries are in Cabinet #2.)

NOTE

In the event the computer is not available, use the whiteboard or a flipchart to maintain a handwritten status board. Graphics are available as transparencies and are located in Cabinet #1 (room 124).

3. Power up the computer and the multimedia projector in room 126 and, if directed to do so, the one in room 125. Go to the Emergency Planning Department's intranet web site for templates and graphics.

NOTE

The following action items may be implemented in any order.

4. Press Release staff will deliver two copies of Press Releases, ensure that one is delivered to the Media Advisor and the other one is posted on whiteboard in room 126.
5. Fax one copy of Plant Status Briefing Form (VYOPF 3546.01) to the TSC (x5440) and hand carry one copy to the Technical Representative in the Press Release Writer's Area (upstairs in room 201) after each briefing.
6. Use the "Status Board" template from the Emergency Planning intranet web site to create and maintain the electronic status board. Information includes Time of Event and Description of Event. Ensure status boards (electronic or hand written) are consistent throughout the EOF/RC.

APPENDIX M (Continued)

7. If media is requested for briefings, locate the appropriate graphic from the Emergency Planning intranet web site and project on screen.
8. Use the form on the Media Advisor's clipboard to log all phone calls and PA announcements made by the Media Advisor. Include time, type, and description.

APPENDIX N

RADIOLOGICAL COORDINATOR RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

RADIOLOGICAL COORDINATOR

1. As directed by the Radiological Assistant, perform the procedure outlined in OP 3525, Radiological Coordination.
2. When the EOF becomes operational and radio contact has been established with the Site Boundary and Off-Site Teams, assume responsibility for the overall direction of the monitoring teams.
3. Provide meteorological data initially, periodically and upon changing conditions to Ops. Advisor #2. Watch carefully for the first and all subsequent METPAC data and graphics. Continuously ensure Ops. Advisor #2 has current METPAC and METDATA information. Also, be alert for any stack gas instrument changes which may be telephoned directly to the EOF Coordinator's radiological assistant or off-site monitoring team coordinator.
4. Project future concerns based on existing radiological and meteorological conditions and notify Rad Assistant of significant potential events or non-conservatism.
5. Update Ops. Advisor #2 of upper and lower wind speed and direction.
6. Evaluate radiological conditions, and advise the Rad Assistant.
7. Maintain plume dispersion map wheel. Ensure that the Rad Assistant and State map wheels are properly maintained.
8. Investigate other radiological concerns as requested by the Rad Assistant.

APPENDIX O

STATE LIAISON RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

STATE LIAISON (3)

1. Ensure you have large copies of AP 3125, Electrical Distribution overview, PCIS overview and the EOP/SAG RPV and Containment action levels drawings and a wallet card with important contact phone numbers to bring to the State.
2. Contact the Emergency Director and advise that you are traveling to their headquarters. (If using cell phone, maintain an open line if requested to do so.)
3. Once at State, use State guidelines or checklists to perform required duties.
4. Provide clarification/information (not direction) to questions about information they are receiving from their representatives at VY.
5. Assist State personnel by interpreting information/data, if necessary, for use with NRC-ERDs, METPAC, Rascal and any other computer systems used for rad assessment.
6. Assist State personnel in performing their duties by helping to analyze information in engineering, operations, and rad assessment areas.
7. Communicate with Media Advisor or EOF Coordinator.

APPENDIX P
FACILITIES COORDINATOR RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

FACILITIES COORDINATOR (Use the Joint News Center Guidelines for guidance)

1. Notify the following vendors of the emergency declaration and direct them to respond to Vermont Yankee Training Center.
 - Hunter North Corporation
 - Ikon Office Solutions
2. Obtain a badge from the Warehouse Tote container beside the stage.
3. Assist in the distribution of labeled plastic totes on second floor of Joint News Center.
4. Set up tables and chairs in Credentialing Area and Warehouse.
5. Assist Floor Liaison with setting up sound system in Warehouse.
6. The Media Advisor will announce current time during EOF activation announcement. Individual areas will be responsible for synchronizing their own clocks at that time. All subsequent messages from the EOF will be preceded with the current time. Ensure all clocks in the EOF are correct.
7. Assign Security contractor personnel to proper locations.
8. Maintain communications with Joint News Center Coordinator.

APPENDIX Q

TELECOMMUNICATIONS COORDINATOR RESPONSIBILITIES

NOTE

The following action items may be implemented in any order.

TELECOMMUNICATIONS COORDINATOR

1. Ensure Switchboard is operable and coordinate the deactivation of auto-attendant feature of VY's phone system when Switchboard Operator is ready to receive calls.
2. Notify the following vendors of the emergency declaration and direct them to respond to Vermont Yankee Training Center.
 - Northeast Mountain Radio Communications (NMR)
 - Consult/Techs
3. Obtain a badge from the Warehouse Tote container beside the stage.
4. Ensure the operability of phone communications link between the Press Release Writer Area on second floor and the Media Advisor in the EOF on first floor.
5. Ensure the intercom volumes are turned to full volume (10) throughout building.
6. Plug in News Media telephones in the designated section of the warehouse, by the entrance to the EOF, and verify operability by checking for dial tones.

APPENDIX R

RESPONSE CHECK OF RM-14/FRISKER PROBE

1. Perform a visual inspection of the instrument. If any conditions are found which could affect operability, do not use the instrument.
 - a. Frayed cables or cords
 - b. Broken meter face
 - c. Missing lights, switches
2. Check the calibration due date. If the instrument is out of calibration, do not use the instrument
 - a. Calibration due date is listed as follows:
(month – year, 6-02) This means that the calibration is due the last day of June 2002.
3. Check the battery.
 - a. Plug the instrument into a 110-120 VAC outlet.
 - b. Turn the selector switch to the battery position.
 - c. The needle should move to the BATT OK region of the meter face, if it does not, do not use the instrument.
4. Source Check:
 - a. Obtain source EKit Response Check Source (CS-137 button source) from the E-Plan Cabinet.
 - b. Position the selector switch to the x100 position.
 - c. Place the source in contact with the frisker probe.
 - d. The meter should indicate greater than 10,000 cpm (100 on the meter face). If it does not, do not use the instrument.
5. If steps 1-4 above have been completed satisfactorily:
 - a. Initial and date the calendar on the RM-14.
 - b. Turn the selector switch to the lowest scale (x1) to prepare for frisking personnel.

APPENDIX S

TECHNICAL REPRESENTATIVE ESCALATION CHECKLIST/SCRIPT

Escalation (*EAL code* _____) Introduction. Due to the present conditions at the Vermont Yankee nuclear power plant, as of ____:____ we have escalated our classification to:

- Unusual Event. This emergency classification is the lowest of four NRC-defined levels.
- Alert: This emergency classification is the second lowest of four NRC-defined levels.
- Site Area: This emergency classification is the second highest of four NRC-defined levels.
- General: This emergency classification is the highest of four NRC-defined levels.

Our decision to escalate the emergency classification is due to:

- Increasing radiation levels _____
- Damaged reactor fuel cladding/or fission. prod. barriers _____
- Leakage of reactor coolant water _____
- A fire at the plant _____
- Natural phenomena:
 - River level _____
 - Wind velocity/Tornado _____
 - Earthquake _____
- Loss of electrical power on the plant site _____
- Loss of safety equipment _____
- Other
 - Explosion _____
 - Crash _____
 - Main turbine failure _____
 - Release of hazardous materials or toxic substance _____
 - Evacuation of control room _____
- Security event _____
- General criteria as established by our emergency plans _____

- There has been no radioactivity released as a result of this incident.
- There has been a minute release of radioactivity at the plant as a result of this event, but no increase was measurable at the site boundary and thus there were no public health or safety implications.
- There has been a radiation release from the plant that is measurable at the site boundary. The radiation dose per hour at the plant boundary is about _____ millirem which is equivalent to what people receive from natural sources in about _____ days. Normal background is about 1 mr/day from sun and earth.

(If appropriate) Our technical representative is here to provide a brief description of the plant condition at this point...

This classification of :

- Unusual Event: augments our on-shift technical resources at the plant and implements a formal notification process for offsite emergency organizations.
- Alert: partially mobilizes emergency response and technical personnel at the plant, activates Vermont Yankee's emergency response facilities including our emergency operations facility and this news media center, assigns responsibility for Vermont Yankee's overall response to a site recovery manager, and provides formal notification and follow-up information to offsite emergency response organizations. We also evacuate unassigned people from the plant site as a precaution.
- SAE: mobilizes all Vermont Yankee emergency response personnel, activates state and local emergency response facilities, provides for closer interaction with Vermont Yankee and state emergency response officials here in Brattleboro.
- GE: activates all available local, state and federal radiological emergency response resources and appropriate protective measures are determined based on weather conditions and actual or projected radiological conditions.

As we focus the additional technical resources on addressing the plant conditions we will be providing state emergency officials with continuous updates to support their response and will continue to hold joint press conferences to inform the news media. Area residents should stay tuned to the Emergency Alert System radio stations for further information from state public safety organizations. We will return here as soon as possible with additional information.

APPENDIX T

MANPOWER AND PLANNING LIAISON RESPONSIBILITIES

Manpower and Planning Liaison (located at the TSC)

Name (print): _____

Date: _____

Time/Date

Initials

NOTE

The Manpower & Planning Clipboard contains the latest EAPL, organizational chart, phone list and staffing worksheets, as well as Fire Brigade and Medical Team lists. The Clipboard is located in the E-Plan cabinets in the kitchen across from TSC.

1. Obtain clipboard from supply cabinet in TSC kitchen. Contact Manpower & Planning at the EOF and establish phone and fax numbers.
2. Using VYOPF 3546.05, list individuals filling initial staff positions for the TSC and OSC. Fax completed worksheet to Manpower & Planning at the EOF.
3. EOF Manpower & Planning will prepare the relief staff using VYOPF 3546.05 and fax to the Liaison. Obtain approval from TSC Coordinator and then notify Manpower & Planning.
4. Act as the contact person for all personnel requests from the TSC and OSC. Relay requests to the Manpower & Planning Assistant at the EOF.
5. Notify individual requesting personnel of who is being sent and when they are expected to arrive.
6. Use VYOPF 3546.03 to provide information to all relief shift personnel prior to sending them home. If necessary, provide plume path, hotel arrangements, etc. as developed by EOF Manpower & Planning.

_____ / _____

PLANT STATUS BRIEFING FORM

Vermont Yankee Nuclear Power Station, Vernon, Vermont

DATE: _____ ISSUE NO.: _____ TIME : _____

EVENT CLASSIFICATION: ALERT SITE AREA GENERAL Declared at: _____

REASON:

REACTOR STATUS: Operating
 Reducing Power Power Level: _____ %
 Shutdown at _____
Rx Pressure: _____ psig Drywell Press: _____ psig

PLANT SITUATION: Stable Improving Degrading

RADIOACTIVE RELEASE: None Anticipated
 In Progress Time stack release started _____
Time ground release started _____

OPERATIONAL PRIORITIES:

INJURIES/FATALITIES:

VY PROTECTIVE ACTION RECOMMENDATION:
 NONE SHELTER EVACUATE (Attach & read from VYOPF 3511.01 for any PARs)

METEOROLOGICAL: Wind Speed Upper _____ mph Lower _____ mph
Wind Direction (FROM) Upper _____ deg Lower _____ deg
Delta T Upper _____ degF Lower _____ degF
Stability Class Upper _____ Lower _____

PROTECTIVE ACTIONS TAKEN BY THE STATES:

| VT | Shelter | Evac | NH | Shelter | Evac | MA | Shelter | Evac |
|-------------|--------------------------|--------------------------|--------------|--------------------------|--------------------------|-------------|--------------------------|--------------------------|
| Brattleboro | <input type="checkbox"/> | <input type="checkbox"/> | Chesterfield | <input type="checkbox"/> | <input type="checkbox"/> | Bernardston | <input type="checkbox"/> | <input type="checkbox"/> |
| Dummerston | <input type="checkbox"/> | <input type="checkbox"/> | Hinsdale | <input type="checkbox"/> | <input type="checkbox"/> | Colrain | <input type="checkbox"/> | <input type="checkbox"/> |
| Guilford | <input type="checkbox"/> | <input type="checkbox"/> | Richmond | <input type="checkbox"/> | <input type="checkbox"/> | Gill | <input type="checkbox"/> | <input type="checkbox"/> |
| Halifax | <input type="checkbox"/> | <input type="checkbox"/> | Swanzey | <input type="checkbox"/> | <input type="checkbox"/> | Greenfield | <input type="checkbox"/> | <input type="checkbox"/> |
| Vernon | <input type="checkbox"/> | <input type="checkbox"/> | Winchester | <input type="checkbox"/> | <input type="checkbox"/> | Leyden | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | Northfield | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | Warwick | <input type="checkbox"/> | <input type="checkbox"/> |

OTHER:

SRM Approval _____ Time Presented _____ Briefer Initials _____

EMERGENCY CLASSIFICATION AND PAR NOTIFICATION/UPGRADE FORM

VYOPF 3546.02 INSTRUCTIONS

STATES NOTIFICATION MUST BE INITIATED WITHIN 15 MINUTES OF DECLARATION.

1. Prepare message (Section I). Check A.1. **IF** an event is being declared and fill in appropriate information. Check A.2. **IF** the Protective Action Recommendation is being up-graded. Complete section B using criteria in Appendix K, Step 4. Complete section C. If a PAR is part of the message, use VYOPF 3511.01 for affected towns. Read Section E only at initial General Emergency declaration to recommend implementation of State KI plan.
2. Obtain signatures (Section II). Individual filling out form must sign. Prior to notifications, get approval of contents of message by getting appropriate signature.
3. Contact States by using appropriate contact number(s) listed below.
4. Record initial State contact times and name of individual contacted (Section III).
5. Fax States by using appropriate fax number(s) listed below.
6. Record time notification was faxed to States (Section IV).
7. After all States notifications are completed, inform authorizing individual.

| CONTACT NUMBERS | | | | |
|--------------------------------------|--------------------------------------|-----|------------------------------------|-----|
| | CONTROL ROOM | | EOF/RC | |
| NAS - ORANGE PHONE GROUP CALL | VT/NH/MA STATE POLICE 111 | | VT/NH/MA STATE EOCs 333 | |
| NAS INDIVIDUAL STATION CALL | VT STATE POLICE | 213 | VT STATE EOC | 314 |
| | NH STATE POLICE | 212 | NH STATE EOC | 311 |
| | MA STATE POLICE | 210 | MA STATE EOC | 313 |

NOTE

If NAS - Orange Phone is non-functional, utilize commercial back-up capability.

| | | |
|------------------------------------|--|---|
| COMMERCIAL TELEPHONE BACKUP | VT STATE POLICE Primary - 802-244-8727 Backup - 802-244-7814 | VT STATE EOC Switchboard - 802-244-8721 Direct Line - 802-241-5476 |
| | NH STATE POLICE 603-271-3636 | NH STATE EOC Switchboard - 603-271-2231 Direct Line - 603-223-3662 |
| | MA STATE POLICE 413-584-3000 | MA STATE EOC Switchboard - 508-820-2000 Direct Line - 508-820-2075 |
| FAX NOTIFICATIONS | VT - 802-875-2176 NH - 603-271-1153 MA - 413-584-9981 OR 413-587-5740 | VT - 802-241-5556 NH - 603-225-7341 MA - 508-875-2517 |

EMERGENCY CLASSIFICATION AND PAR NOTIFICATION/UPGRADE FORM (Continued)

I. MESSAGE

This is (Name: _____), (Title: _____) from the Vermont Yankee Nuclear Power Station in Vernon, Vermont. Please do not interrupt until the entire message is completed.

A. We have: (complete either 1 or 2)

1. Declared a (check one):
- Unusual Event
 - Unusual Event Terminated
 - Alert
 - Site Area Emergency
 - General Emergency

at _____ hours due to AP 3125 EAL
alpha-numeric designator _____

2. Upgraded the Protective Actions for the General Emergency which was declared at _____ hours.

B. Plant Conditions:

1. The Plant is: (Check one)

- continuing normal operation
- reducing power levels
- shut down

2. There is: (Check one)

- no radiation release related to this event
- a release of radiation BELOW federally approved operating limits in progress, related to this event
- a release of radiation ABOVE federally approved operating limits in progress, related to this event

3. Present Meteorological conditions:

Wind speed _____ mph
Wind direction from _____ degrees.

C. At the present time, we recommend the following protective actions:

- None As Follows

| State | Town | Shelter | Evac |
|---------|--------------------------|--------------------------|--------------------------|
| VT | Brattleboro | <input type="checkbox"/> | <input type="checkbox"/> |
| | Dummerston | <input type="checkbox"/> | <input type="checkbox"/> |
| | Guilford | <input type="checkbox"/> | <input type="checkbox"/> |
| | Halifax | <input type="checkbox"/> | <input type="checkbox"/> |
| | Vernon | <input type="checkbox"/> | <input type="checkbox"/> |
| NH | Chesterfield | <input type="checkbox"/> | <input type="checkbox"/> |
| | Hinsdale | <input type="checkbox"/> | <input type="checkbox"/> |
| | Richmond | <input type="checkbox"/> | <input type="checkbox"/> |
| | Swansey | <input type="checkbox"/> | <input type="checkbox"/> |
| MA | Winchester | <input type="checkbox"/> | <input type="checkbox"/> |
| | Bernardston | <input type="checkbox"/> | <input type="checkbox"/> |
| | Colrain | <input type="checkbox"/> | <input type="checkbox"/> |
| | Gill | <input type="checkbox"/> | <input type="checkbox"/> |
| | Greenfield | <input type="checkbox"/> | <input type="checkbox"/> |
| | Leyden | <input type="checkbox"/> | <input type="checkbox"/> |
| | Northfield | <input type="checkbox"/> | <input type="checkbox"/> |
| Warwick | <input type="checkbox"/> | <input type="checkbox"/> | |

D. Follow your State procedures for the designated Classification

E. (At the initial General Emergency declaration, state the following:)

We recommend you implement your State KI plan.

II. PREPARER/APPROVAL SIGNATURES

Form filled out by (print and sign): _____
Authorized by (print and sign): _____ / _____
(PED / TSCC / SRM) Time/Date

III. NOTIFICATION TIME AND ACKNOWLEDGEMENT: (NOTE: INITIAL CONTACT WITH STATES MUST BE MADE WITHIN 15 MINUTES OF DECLARATION OR UPGRADE)

Time notification initiated: VT _____ NH _____ MA _____
Acknowledgement of message: VT _____ NH _____ MA _____
Name Name Name

IV. FAX NOTIFICATION FORM TO THE STATES (NOTE: THIS IS TO SUPPLEMENT THE CALL)

Time notification initiated: VT _____ NH _____ MA _____

Remarks:

INSTRUCTIONS TO PERSONNEL
PRIOR TO BEING RELEASED FROM THE ASSEMBLY AREA

Provide the following information to all ERO members prior to their release from the assembly area:

CAUTION

Call Manpower and Planning at (802) 257-5271 PRIOR to reporting to your facility to receive updated information.

1. Shift Assignment Information:

Name: _____ Shift: _____

Assignment: _____

Report to the following facility at _____ hours:

- | | |
|--|--|
| <input type="checkbox"/> Control Room | <input type="checkbox"/> Technical Support Center |
| <input type="checkbox"/> Operations Support Center | <input type="checkbox"/> Emergency Operations Facility |
| <input type="checkbox"/> Joint News Center | |

2. Go home and await further instructions.

3. Call Manpower and Planning at (802) 257-5271 if:

- you must be away from your telephone for any length of time.
- you need information on shift status.
- you live in the EPZ and are told to evacuate.
- you are going to some place other than instructed (identify how you can be reached).

4. If you live in the EPZ and are evacuated, accommodations will be provided to you for the duration of the emergency.

5. Follow any further instructions if called by the Manpower and Planning Assistant.

SHIFT AND RELIEF PLANNING WORKSHEET

Date: _____

EOF & OFF-SITE

| POSITION | INITIAL SHIFT | RELIEF SHIFT | POSITION | INITIAL SHIFT | RELIEF SHIFT |
|-----------------------------|---------------|--------------|--------------------------------------|---------------|--------------|
| Site Recovery Mgr* | | | Personnel & Equipment Monitoring (2) | | |
| EOF Coordinator* | | | | | |
| Radiological Asst* | | | Facilities Coordinator | | |
| Communication Asst* | | | Telecommunications Coord. | | |
| Compliance Advisor* | | | Switchboard Operator | | |
| Ops Advisor #1* | | | Communicators (2) | | |
| Ops Advisor #2 | | | | | |
| EOF Coord Assistant | | | Radiological Staff | | |
| Purchasing Coordinator | | | | | |
| Radiological Coordinator | | | | | |
| Nuclear Info Director | | | | | |
| State Advisor | | | Off-Site Team-Green(2) | | |
| State Liaison (3) | | | | | |
| | | | Off-Site Team-Blue (2) | | |
| | | | | | |
| Technical Representative | | | Off-Site Team-Black (2) | | |
| Tech Briefing Rep | | | | | |
| Media Advisor | | | Site boundary Team (2) | | |
| Media Advisor Assistant | | | | | |
| Radiological Advisor | | | | | |
| ERFIS Operator | | | | | |
| METPAC Operator | | | Security | | |
| Manpower/Planning Assistant | | | | | |
| Manpower/Planning (2) | | | | | |

*Required per Emergency Plan

SHIFT AND RELIEF PLANNING WORKSHEET (Continued)

Date: _____

IN-PLANT

| POSITION | INITIAL SHIFT | RELIEF SHIFT | POSITION | INITIAL SHIFT | RELIEF SHIFT |
|------------------------------|---------------|--------------|--------------------------|---------------|--------------|
| Shift Manager (PED)* | | | OSC Coordinator* | | |
| STA* | | | OSC Coordinator's Asst. | | |
| CRS* | | | Switching/Tagging Coord. | | |
| CROs (2)* | | | Rad Habitability Assess. | | |
| | | | Phone Talker/Log Keeper | | |
| AOs (2)* | | | Work Coordinators (3) | | |
| | | | | | |
| Chemistry Technician* | | | | | |
| RP Technician* | | | OSC Clerical Support (1) | | |
| Communicator* | | | Repair Teams | | |
| TSC Coordinator* | | | | | |
| Engineering Coordinator* | | | | | |
| Maintenance Coord.* | | | | | |
| Security Coordinator* | | | | | |
| Operations Coordinator* | | | Search/Rescue Team | | |
| Reactor Eng. Coord.* | | | | | |
| RP Coordinator* | | | | | |
| Chemistry Coordinator* | | | | | |
| Manpower/Planning Liaison | | | | | |
| | | | | | |
| | | | | | |

* Required per Emergency Plan

TABLE 1

RADIOLOGICAL ASSISTANT'S ORGANIZATION

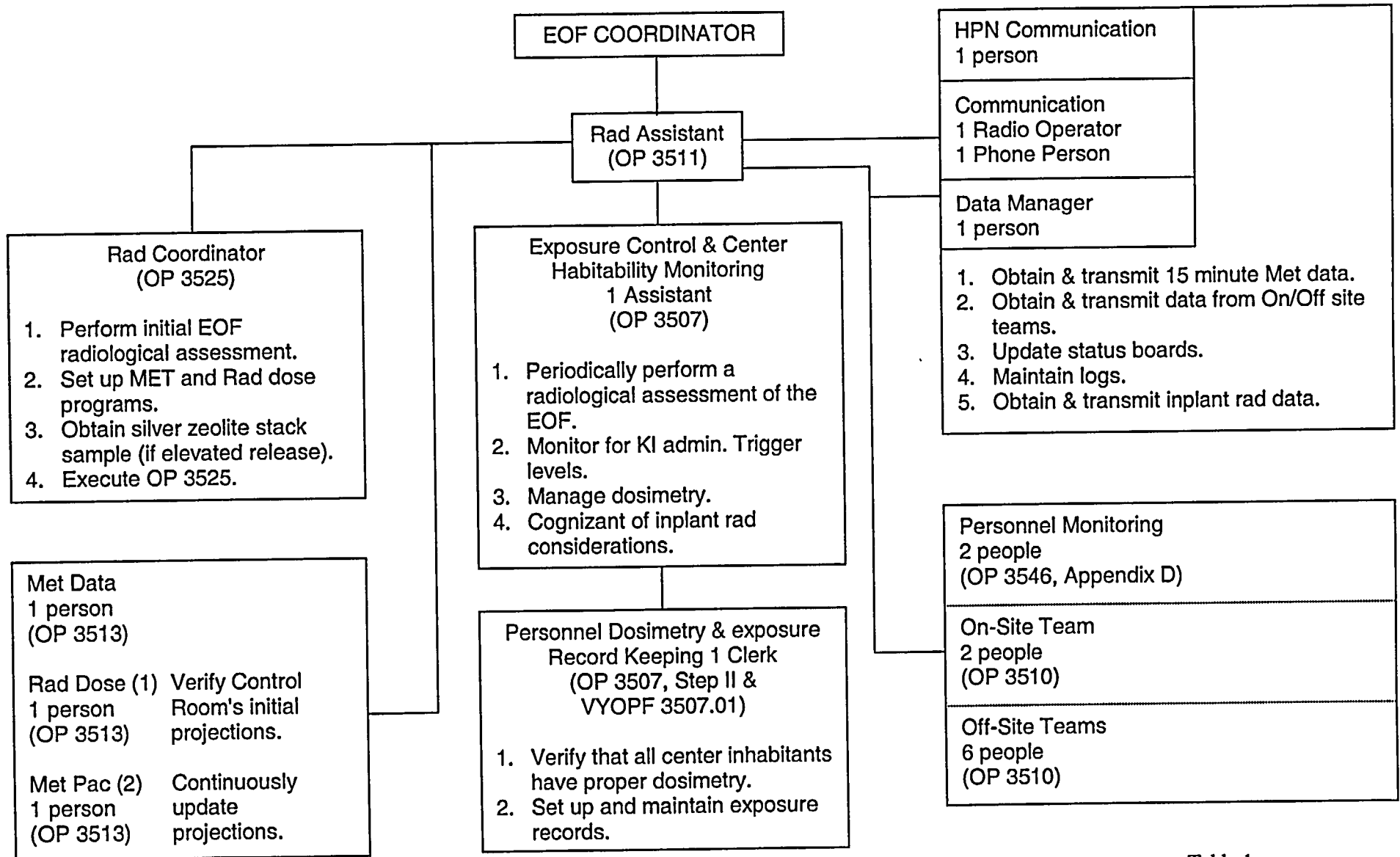


TABLE 2

WHITE PLAINS RECOVERY SUPPORT GROUP CORPORATE CALL LIST

RECOVERY SUPPORT GROUP MANAGERS (For notification of escalation)

| NAME | HOME PHONE | WORK PHONE | PAGER # |
|---------------|------------|----------------|-----------|
| G. Wilverding | [REDACTED] | (914) 272-3375 | 718-3375* |
| M. Karasulu | [REDACTED] | (914) 272-3442 | 718-3442* |
| G. Canavan | [REDACTED] | (914) 272-3440 | 718-3440* |
| G. Rorke | [REDACTED] | (914) 272-3428 | 718-3428* |

RECOVERY MANAGERS (For notification of de-escalation to a recovery phase)

| NAME | HOME PHONE | WORK PHONE | PAGER # |
|--------------|------------|----------------|------------------------------|
| H. Salmon | [REDACTED] | (914) 272-3220 | 800-734-9140 |
| D. Robson | [REDACTED] | (914) 272-3452 | 800-844-8084 Pin: 1487471 |
| T. Dougherty | [REDACTED] | (914) 272-3451 | 718-3451* |
| J. Kelly | [REDACTED] | (914) 272-3370 | 888-593-5942 |

* 1-800-436-2732