



Tennessee Valley Authority, Post Office Box 2000, Decatur, Alabama 35609-2000

April 9, 2003

10 CFR Part 50, App E

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Mail Stop OWFN, P1-35
Washington, D.C. 20555-0001

Gentlemen:

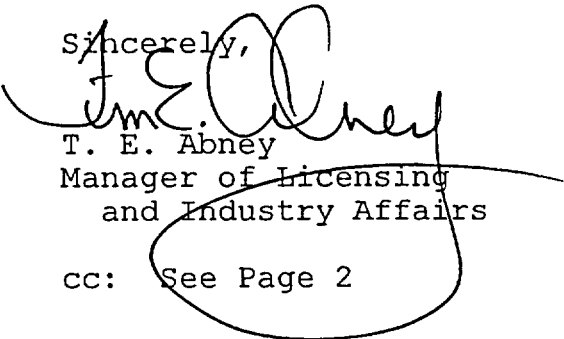
In the Matter of)	Docket Nos. 50-259
Tennessee Valley Authority)	50-260
		50-296

**BROWNS FERRY NUCLEAR PLANT (BFN) - UNITS 1, 2, and 3 -
EMERGENCY PLAN IMPLEMENTING PROCEDURE (EPIP) REVISIONS**

TVA is submitting this notification in accordance with the requirements of 10 CFR Part 50, Appendix E, Section V. Specifically, EIPs were revised, namely, EPIP-2, Revision 26; EPIP-3, Revision 29; EPIP-4, Revision 28; and EPIP-5, Revision 33. The effective date for these revisions is April 3, 2003.

The enclosed information is being sent by certified mail. The signed receipt signifies that you have received this information. If you have any questions, please telephone me at (256) 729-2636.

Sincerely,


T. E. Abney
Manager of Licensing
and Industry Affairs

cc: See Page 2

A045

U.S. Nuclear Regulatory Commission
Page 2
April 9, 2003

cc (Enclosure):

NRC Resident Inspector	(Enclosure provided by
Browns Ferry Nuclear Plant	BFN Document Control Unit)
10833 Shaw Road	
Athens, Alabama 35611-6970	

Mr. Stephen J. Cahill, Branch Chief (2 Enclosures)
U.S. Nuclear Regulatory Commission
Region II
Sam Nunn Atlanta Federal Center
61 Forsyth Street S.W., Suite 23T85
Atlanta, Georgia 30303-8931

Mr. Kahtan N. Jabbour, Senior Project Manager (w/o Enclosure)
U.S. Nuclear Regulatory Commission
One White Flint, North
(MS 08G9)
Office of Nuclear Reactor Regulation
11555 Rockville Pike
Rockville, Maryland 20852-2738

ENCLOSURE
TENNESSEE VALLEY AUTHORITY
BROWNS FERRY NUCLEAR PLANT (BFN)
UNITS 1, 2, AND 3

EMERGENCY PLAN IMPLEMENTING PROCEDURE (EPIP) REVISIONS
EPIP-2, EPIP-3, EPIP-4, AND EPIP-5

SEE ATTACHED

GENERAL REVISIONS

FILING INSTRUCTIONS

FILE DOCUMENTS AS FOLLOWS:

PAGES TO BE REMOVED

EPIP-2, Revision 25
EPIP-3, Revision 28
EPIP-4, Revision 27
EPIP-5, Revision 32

PAGES TO BE INSERTED

EPIP-2, Revision 26
EPIP-3, Revision 29
EPIP-4, Revision 28
EPIP-5, Revision 33

TENNESSEE VALLEY AUTHORITY

BROWNS FERRY NUCLEAR PLANT

EMERGENCY PLAN IMPLEMENTING PROCEDURE

EPIP- 2

NOTIFICATION OF UNUSUAL EVENT

REVISION 26

PREPARED BY: TIM CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION. EMERGENCY PREPAREDNESS

APPROVED BY: JEFF LEWIS

DATE: 04/02/2003

EFFECTIVE DATE: 04/03/2003

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

REVISION LOG

Procedure Number: EPIP-2

Revision Number: 26

Pages Affected: 7,8,10

Description of Change:

- IC-27 This change is being conducted to incorporate the management of NRC Commitment changes as prescribed in the correspondence from site licensing RIMS R08000217713, to remove the Public Information Officer from the notification form and to human factor the notification and follow-up notification forms.
Page 2 - change to step 3.1.1 involves human factoring the Notification Form Title.
Page 7 - changes involves removing the "NRC Commitment Brackets to step requiring the review of PORC and the human factoring of applicable steps.
Page 7 - change involves human factoring attachment title.
Page 8 - change involves human factoring attachment title and modifying information to ensure consistency with NRC guidance.
Page 9 - change involves removing the Public Information Officer from the Attachment B notifications along with the NRC Commitment Brackets
Page 10 - change involved adding a clarify statement concerning the appropriate use of the Follow-up Notification Form.
- IC-28 EPIP-2, revision 23 is being issued to incorporate changes resulting from the letter, NEI to NRC (to Mr. Bruce A. Boger) dated December 18, 2001 requesting confirmation for EAL basis change to include response to a Site-Specific Security Credible Threat. This letter was developed in response to the NRC's October 6, 2001 Safeguards Advisory. The change to this EPIP is a consequence to the EAL change. Under specific conditions this change will activate the ERO along with assembly/accountability. The revision also incorporates standardization of telephone numbers and actions taken by the Unit 1, Unit Operator during ERO staffing.
Page 2 - provide the action to staff the ERO when a credible site security threat notification exists.
Page 3 - provide the action to assembly/account site personnel for the purpose of establishing the "Two Person (Line of Sight) Rule".
Page 4 - standardize the review of PORC for actual events.
Page 7 - add attachment D.
Page 11 - add attachment D, actions taken by the Unit 1 Unit operator to staff the ERO.
- IC-29 EPIP-2, revision 24, page 3 is being conducted to add clarification to the caution note regarding on-site security conditions for assembly/accountability. Additionally page 2 and 5 was revised to update telephone information regarding the Office of Radiation Control.
- IC-30 EPIP-2, revision 25, pages 2, 7, 11 and 12 are being conducted to remove the activation of the ERO upon declaration of an Unusual Event based upon a credible threat. Page 4 is being revised to change the reference for Dose Assessment from EPIP-14 to EPIP-13.
- IC-31 EPIP-2, rev. 26 is being conducted to standardize record retention (page 7) and revise the notification forms to include NRC Terminology from RIS 2002-16 for normal and abnormal releases (pages 8 & 10).

1.0 PURPOSE

- 1.1** Provide for timely notification of appropriate individuals or organizations when the Shift Manager has determined by EPIP-1 that an incident has occurred which is classified as a NOTIFICATION OF UNUSUAL EVENT.
- 1.2** Provide for periodic analysis of the current situation by the Shift Manager/Site Emergency Director (SED) to determine whether the NOTIFICATION OF UNUSUAL EVENT should be terminated, continued, or upgraded to a more serious classification

2.0 SCOPE

This procedure applies to emergency events that are classified as a Notification of Unusual Event by EPIP-1, Emergency Classification Procedure.

3.0 INSTRUCTIONS

3.1 Notification of the Operations Duty Specialist (ODS)

Note: The ODS should be notified within 5 minutes after the emergency event is declared.

Date: ____/____/____

3.1.1 Complete Attachment A (Initial Notification Form).

INITIALS TIME

3.1.2 Notify the ODS and Provide the information from Attachment A.

INITIALS TIME

Note: Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS Telephone Numbers
5-751-1700
5-751-2495

If the ODS cannot be reached within 10 minutes, Then contact the State of Alabama directly by requesting the Office of Radiation Control at:

Day Shift 8 a.m. - 5 p.m. (Central Time)
Primary: 9-1-334-206-5391
Backup: 9-1-800-582-1866

Holidays-Weekends-Offshifts
Montgomery State Trooper Post
9-1-334-242-4378

3.1.3 Fax a copy of Attachment A to the ODS for confirmation of information or state if contacted directly.

INITIALS TIME

ODS Fax Office of Radiation Control
5-751-3620 9-1-334-206-5387

3.0 INSTRUCTIONS (CONTINUED)

- 3.1.4 Receive confirmation call from the ODS (to verify notification of the State of Alabama) (NA this step if the State was contacted directly)

INITIALS

TIME

3.2 NOTIFICATION OF SITE PERSONNEL

- 3.2.1 Provide the Unit 1, Unit Operator with a completed copy of Attachment A

INITIALS

TIME

- 3.2.2 Direct the Unit 1, Unit Operator to make notifications from Attachment B (Unit 1, Unit Operator Notifications), utilizing information from Attachment A.

INITIALS

TIME

- 3.2.3 Make the following plant P.A. announcement:

INITIALS

TIME

THIS IS (NAME), SHIFT MANAGER. A
NOTIFICATION OF UNUSUAL EVENT HAS BEEN
DECLARED ON UNIT ____ I HAVE ASSUMED
THE DUTIES OF SITE EMERGENCY DIRECTOR

- 3.2.4 Notify the Plant Manager or alternate.

INITIALS

TIME

CAUTION: Do not initiate Assembly and Accountability if:

1. A severe weather condition exist or projected on-site, such as a Tornado.
2. An on-site security risk condition exists that may present a danger to site personnel during the assembly/accountability process (Consult with Nuclear Security).

3.3 ACCOUNTABILITY

- 3.3.1 If the NOUE has been declared due to Security EAL, 6.7-U, and Nuclear Security recommends Accountability to establish the "Two Person (Line of Sight) Rule", Then implement EPIP-8, Appendix C, for Assembly and Accountability only.

INITIALS

TIME

3.0 INSTRUCTIONS (CONTINUED)

3.4 OFFSITE DOSE ASSESSMENT

- 3.4.1 Evaluate the need for offsite dose assessment.
(N/A STEP IF NOT APPLICABLE)

INITIALS

TIME

3.4.1.1 When offsite dose assessment is required obtain the information from the CECC when operational.

3.4.1.2 If the CECC is not operational, contact the TSC, when staffed or the RADCON Shift Supervisor and request the implementation of EPIP 13, for dose assessment.

3.5 NOTIFICATION OF THE NRC

- 3.5.1 Notify the NRC immediately or within 1 hour and if requested by the NRC maintain an open and continuous communications channel.

INITIALS

TIME

Note: Utilize the Emergency Notification System (ENS) when making this notification. Dial the first number listed on the sticker affixed to the ENS telephone, by dialing 9-1-
"The Ten Digit Number Listed on the ENS Telephones".
If the number is busy, Then select in order, the alternate numbers until a connection is achieved. No access codes are required.

3.0 INSTRUCTIONS (CONTINUED)

3.6 PERIODIC EVALUATION OF THE EVENT

3.6.1 Continue to Evaluate the event by using EPIP-1 as conditions warrant.

3.6.2 If other EAL conditions exist indicating the current emergency classification or significant changes in plant conditions have occurred since the last update to the ODS, and the CECC is not staffed, Then, Complete the "Follow-Up" Notification Form (Attachment C), notify the ODS and provide the new information. Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS - 5-751-1700
5-751-2495

Note If the ODS cannot be reached, Then contact the State of Alabama directly by requesting the Office of Radiation Control at:

Day Shift 8 a.m. - 5 p.m. (Central Time)

Primary: 9-1-334-206-5391

Backup: 9-1-800-582-1866

Holidays-Weekends-Offshifts

Montgomery State Trooper Post

9-1-334-242-4378

3.6.3 If the conditions warrants upgrading to a higher classifications, Then initiate the appropriate EPIP.

3.6.4 If the conditions warrant termination of the classification, Then enter the Termination section of this procedure at step 3.7.

3.6.5 Re-enter this procedural section as conditions warrant at step 3.6.1 or until directed to exit this procedure by steps 3.6.3 or 3.6.4.

3.0 INSTRUCTIONS (CONTINUED)

3.7 TERMINATION OF THE EVENT

If the situation no longer exists terminate the event and notify the following:

Date: ____/____/____

3.7.1 Notify the ODS of the termination of the emergency or the state directly if the ODS cannot be contacted.

INITIALS

TIME

3.7.2 Notify the NRC of the termination of the emergency.

INITIALS

TIME

3.7.3 Notify the Plant Manager or Alternate of the termination of the emergency.

INITIALS

TIME

3.7.4 Complete Attachment A by providing the time and date of termination.

INITIALS

TIME

3.7.4 Notify the Unit 1, Unit Operator. Provide the Unit 1, Unit Operator with the termination time and date and direct the Unit 1, Unit Operator to notify the individuals contacted on Attachment B of the termination of the emergency.

INITIALS

TIME

3.0 INSTRUCTIONS (CONTINUED)

3.8 CLOSURE OF THE NOTIFICATION OF UNUSUAL EVENT

3.8.1 Upon termination of the Notification of Unusual Event, the Shift Manager shall send the completed EPIP-2 and all attachments to Emergency Preparedness (EP).

INITIALS

TIME

3.8.2 Upon receipt of completed EPIP-2 and all attachments, Emergency Preparedness shall forward documents for the purpose of documentation storage.

INITIALS

TIME

4.0 RECORD RETENTION

4.1 RECORDS OF CLASSIFIED EMERGENCIES

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

4.2 DRILL AND EXERCISE RECORDS

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

5.0 ATTACHMENTS

Attachment A - Initial Notification Form Notification of Unusual Event

Attachment B - Unit 1, Unit Operator Notifications

Attachment C - Follow Up Information Form Notification of Unusual Event

ATTACHMENT A (Page 1 of 1)
INITIAL NOTIFICATION FORM
NOTIFICATION OF UNUSUAL EVENT

1. <input type="checkbox"/> This is a Drill <input type="checkbox"/> This is an Actual Event - Repeat - This is an Actual Event	
2. This is _____, Browns Ferry has declared a UNUSUAL EVENT affecting: <input type="checkbox"/> Unit 1 <input type="checkbox"/> Unit 2 <input type="checkbox"/> Unit 3 <input type="checkbox"/> Common	
3. EAL Designator(s): _____	
4. Brief Description of the Event: _____ _____ _____ _____	
5. Radiological Conditions: (Check one under both Airborne and Liquid column.)	
<u>Airborne Releases Offsite</u>	<u>Liquid Releases Offsite</u>
<input type="checkbox"/> Minor releases within federally approved limits ¹	<input type="checkbox"/> Minor releases within federally approved limits ¹
<input type="checkbox"/> Releases above federally approved limits ¹	<input type="checkbox"/> Releases above federally approved limits ¹
<input type="checkbox"/> Release information not known (¹ Tech Specs)	<input type="checkbox"/> Release information not known (¹ Tech Specs)
6. Event Declared: Time: _____ Date: _____	
7. Provide Protective Action Recommendation: <input type="checkbox"/> None	
8. Please repeat the information you have received to ensure accuracy.	
9. Time and Date this information was provided _____ / _____	
Action: When completed, telecopy this information.	

ATTACHMENT B (Page 1 of 1)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

Note: All notifications should be made utilizing the information located on EPIP 2, Attachment A

Received a completed copy of EPIP 2, Attachment A from the Site
Emergency Director.

INITIALS

TIME

Personnel Notifications	Initial Notifications		Termination Notifications	
Notify the Operations Manager (from the weekly duty list)	Initials	Time	Initials	Time
Notify the Vice President (from the weekly duty list)	Initials	Time	Initials	Time
Notify the REP manager (from the weekly-duty list)	Initials	Time	Initials	Time
Notify the Nuclear Security Shift Supervisor. Ext. 3150 or 2219	Initials	Time	Initials	Time
Notify the NRC Resident Ext. 2573, or 2572 or from the weekly duty list.	Initials	Time	Initials	Time

ATTACHMENT C (Page 1 of 1)
FOLLOW-UP INFORMATION FORM
NOTIFICATION OF UNUSUAL EVENT

☐ THIS IS A REAL EVENT ☐ THIS IS A DRILL

Note: This form is for conducting Follow-up Information only.

This is _____ at Browns Ferry.
Name

There has been a NOTIFICATION OF UNUSUAL EVENT declared at Browns Ferry affecting:

☐ Unit 1 ☐ Unit 2 ☐ Unit 3 ☐ Common

The Reactor is ☐ Shutdown ☐ At Power

Plant Conditions are ☐ Stable ☐ Deteriorating

"Follow-Up" Information (e.g., Key Events, Status Changes)

Current Radiological Conditions are: (Check one under both Airborne and Liquid column.)

Airborne Release Offsite

☐ Minor releases within federally approved limits¹

☐ Releases above federally approved limits¹

☐ Release Information not known
(¹Tech Specs)

Liquid Releases Offsite

☐ Minor releases within federally approved limits¹

☐ Releases above federally approved limits¹

☐ Release Information not known
(¹Tech Specs)

Additional Rad information: (e.g., release duration)

☐ There is no Protective Action Recommendation at this time.

Please repeat the information you have received to ensure accuracy.

The time for this follow up is: Time: _____ Date: _____

SIGNATURE: _____

TENNESSEE VALLEY AUTHORITY

BROWNS FERRY NUCLEAR PLANT

EMERGENCY PLAN IMPLEMENTING PROCEDURE

EPIP-3

ALERT

REVISION 29

PREPARED BY: T. W. CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: JEFF LEWIS

DATE: 04/02/2003

EFFECTIVE DATE: 04/03/2003

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

REVISION LOG

Procedure Number: EPIP-3

Revision Number: 29

Pages Affected: 3,5,6,8,11

Description of Change:

- IC-30 This change is being conducted to incorporate the management of NRC Commitment changes as prescribed in the correspondence from site licensing RIMS R08000217713, and to human factor the notification and follow-up notification forms.
Page 2 - change to step 3.2.1 involves human factoring the Notification Form Title.
Page 6 - changes involves removing the "NRC Commitment Brackets to step requiring the review of PORC and the human factoring of applicable steps.
Page 7 - change involves human factoring attachment title and modifying information to ensure consistency with NRC guidance.
Page 8 - change involves adding information regarding the support of the Unit 1 Operator in staffing the ERO.
Page 9 - Updated information for the Unit Operator to use during the ERO staffing process.
Page 10 - change involved adding a clarify statement concerning the appropriate use of the Follow-up Notification Form.
- IC-31 EPIP-3, revision 26 is being issued to incorporate changes regarding assembly and accountability actions. All actions to initiate the accountability and evacuation processes are now located in EPIP-8. The revision additionally standardizes telephone numbers, and PORC reviews. This revision also adds clarification for the actions taken by the Unit 1 Unit Operator during their staffing of the ERO process.
Page 3 - added a statement to the caution information regarding security threat. Clarified steps 3.4.1 and 3.4.2 to implement EPIP-8 regarding actions to be taken for assembly/accountability and evacuation.
Page 6 - standardize Alert procedure closure information.
Page 8,9 - Clarify actions taken by the Unit 1 Unit Operator during the notification attachment.
- IC-32 EPIP-3, revision 27 is being conducted to incorporate changes regarding actions to be taken when dangerous conditions exist on site that would require the assembly of the ERO at the staging area. Additionally page 3 and 5 were revised to update telephone information regarding the Office of Radiation Control.
Page 2 - change instruct the SED when to direct the Unit 1 Unit Operator to assembly the ERO at the staging area.
Page 4 - revision adds clarification to the caution note regarding on-site security conditions for assembly/accountability.
Page 8 - revision adds option for staging area
- IC-33 EPIP-3, revision is being conduct to change the procedure reference for Dose Assessment from EPIP-14 to EPIP-13. Page 4 of this procedure is be revised.
- IC-34 EPIP-3, rev. 29 is being conduct to standardize record retention (page 6) and revise the notification forms to include NRC Terminology from RIS 2002-16 for normal and abnormal releases (page 8 & 11). Additionally the revision will provide a place to document the time and EAL Designation when centers are staffed (page 2). Attachment section was renumbered (page 5).

1.0 PURPOSE

- 1.1** Provide for timely notification of appropriate individuals or organizations when the Shift Manager/Site Emergency Director (SED) has determined by EPIP-1 that an incident has occurred which is classified as an ALERT.
- 1.2** Provide for periodic evaluation of the current situation by the Shift Manager/SED to determine whether the ALERT should be terminated, continued, or upgraded to a more serious classification.

2.0 SCOPE

This procedure applies to emergency events that are classified as Alert by EPIP-1, Emergency Classification Procedure.

3.0 INSTRUCTIONS

Date: ____/____/____

- 3.1 If all Emergency Centers **ARE STAFFED**, Notify the following that a "ALERT Emergency Classification was declared at Time: _____, EAL Designator _____, and EPIP 3 is being implemented".

Then continue in this procedure at Step 3.4.

CECC ☐
TSC ☐
OSC ☐

Control Rooms ☐
Plant PA Announcement ☐

INITIALS

TIME

This is NAME, Site Emergency Director, an Alert has been declared at BFN, we are currently implementing EPIP-3. Standby for further updates.

If all Emergency Centers **ARE NOT STAFFED**,

Then N/A this step and continue in this procedure.

3.2 **Notification of the Operations Duty Specialist (ODS) & Emergency Responders**

Note: The ODS **should** be notified within 5 minutes after the emergency event is declared.

- 3.2.1 **Complete** Attachment A (Initial Notification Form).

INITIALS

TIME

- 3.2.2 **Activating Emergency Response Organization (ERO)**

- 3.2.2.1 **If** ongoing/anticipated on-site security events **may** present a danger to the emergency responders, **Then** consult with Nuclear Security.

INITIALS

TIME

- 3.2.2.2 **If** ongoing/anticipated events present a danger to emergency responders, **Then** direct the Unit 1 Unit Operator to make notifications per Attachment B and select "Staging Area" as the option for the Emergency Paging System.

INITIALS

TIME

- 3.2.2.3 **If** there are no ongoing/anticipated danger to emergency responders, **Then** direct the Unit 1 Unit Operator to make notifications per Attachment B and select as applicable, "Drill" or "Emergency" as the option for the Emergency Paging System.

INITIALS

TIME

3.0 INSTRUCTIONS (CONTINUED)

3.2.3 Notify the ODS and Provide the information from Attachment A.

INITIALS

TIME

Note: Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct

ODS Telephone Numbers - 5-751-1700, or 2495

If the ODS cannot be reached within 10 minutes, Then contact the State of Alabama directly by requesting the Office of Radiation Control at:

Day Shift 8 a m - 5 p m (Central) Holidays-Weekends-Off-Shifts

Primary: 9-1-334-206-5391 Montgomery State Trooper Post

Backup: 9-1-800-582-1866 9-1-334-242-4378

3.2.4 Fax a copy of Attachment A to the ODS for confirmation of information or state if the state was contacted directly.

INITIALS

TIME

ODS Fax
5-751-8620

Office of Radiation Control Fax
9-1-334-206-5387

3.2.5 Receive confirmation call from the ODS (to verify notification of the State of Alabama)(NA this step, if the state was contacted directly).

INITIALS

TIME

3.3 NOTIFICATION OF SITE PERSONNEL

3.3.1 Make the following plant P.A. announcement:

INITIALS

TIME

THIS IS (NAME), SHIFT MANAGER. A ALERT HAS BEEN DECLARED ON UNIT ____ I HAVE ASSUMED THE DUTIES OF SITE EMERGENCY DIRECTOR. REPORT TO YOUR ASSIGNED EMERGENCY RESPONSE FACILITY AT THIS TIME.

3.0 INSTRUCTIONS (CONTINUED)

CAUTION: Do not initiate Assembly and Accountability if:

1. A severe weather condition exist/projected on-site, such as a Tornado.
2. An on-site security risk condition exists that may present a danger to site personnel during the assembly/accountability process (Consult with Nuclear Security).

3.4 ACCOUNTABILITY

- 3.4.1** If the emergency situation warrants an Assembly, Accountability, Then implement EPIP-8, Appendix C, concurrently with this procedure.
(N/A STEP IF NOT APPLICABLE)

INITIALS

TIME

- 3.4.2** If the emergency situation does not warrant an Assembly, Accountability at this time, Continue to assess the situation, implementing EPIP-8 when necessary.

3.5 OFFSITE DOSE ASSESSMENT

- 3.5.1** Evaluate the need for offsite dose assessment.
(N/A STEP IF NOT APPLICABLE)

INITIALS

TIME

- 3.5.1.1** When offsite dose assessment is required obtain the information from the CECC when operational.

- 3.5.1.2** If the CECC is not operational, contact the TSC, when staffed or the RADCON Shift Supervisor and request the implementation of EPIP 13, for dose assessment.

3.0 INSTRUCTIONS (CONTINUED)**3.6 NOTIFICATION OF THE NRC**

- 3.6.1** Notify the NRC immediately or within 1 hour and if requested by the NRC maintain an open and continuous communications channel.

INITIALSTIME

Note: Utilize the Emergency Notification System (ENS) when making this notification. Dial the first number listed on the sticker affixed to the ENS telephone, by dialing 9-1-"The Ten Digit Number Listed on the ENS Telephones". If the number is busy, Then select in order, the alternate numbers until a connection is achieved. No access codes are required.

3.7 PERIODIC EVALUATION OF THE EVENT

- 3.7.1** Continue to Evaluate the event using EPIP-1 as conditions warrant.

- 3.7.2** If plant conditions warrant the need for follow up information, Complete the Follow Up Notification Form, Attachment C.

Note: Conditions that warrant this evaluation are as a minimum when other EAL conditions exist indicating the current emergency classification or significant changes in plant conditions have occurred.

- 3.7.3** If the CECC is not staffed, Then notify the ODS and provide follow up information from the completed Attachment C form. Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS - 5-751-2495, 1700

Note: If the ODS cannot be reached, Then contact the State of Alabama directly by requesting the Office of Radiation Control at:

Day Shift 8 a.m. - 5 p.m. (Central Time)

Primary: 9-1-334-206-5391

Backup: 9-1-800-582-1866

Holidays-Weekends-Off-shifts

Montgomery State Trooper Post

9-1-334-242-4378

- 3.7.4** If the conditions warrant upgrading to a higher classification, Then initiate the appropriate EPIP.

3.0 INSTRUCTIONS (CONTINUED)

3.7.5 If the conditions warrants termination of the classifications, Then enter EPIP-16, Termination and Recovery Procedure.

3.7.6 After the evaluation has been completed, if staffed, Notify the following of the status:

- CECC
- NRC (ENS)
- TSC
- OSC
- CONTROL ROOMS
- PLANT PA ANNOUNCEMENT

3.7.7 Re-enter this procedural section as conditions warrant at step 3.7.1 or until directed to exit this procedure by steps 3.7.4 or 3.7.5.

3.8 CLOSURE OF THE ALERT

3.8.1 Upon termination of the Notification of Alert, the Shift Manager shall send the completed EPIP-3 and all attachments to Emergency Preparedness (EP).

INITIALS

TIME

3.8.2 Upon receipt of completed EPIP-3 and all attachments, Emergency Preparedness shall forward documents for the purpose of documentation storage.

INITIALS

TIME**4.0 RECORD RETENTION****4.1 RECORDS OF CLASSIFIED EMERGENCIES**

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

4.2 DRILL AND EXERCISE RECORDS

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

5.0 ATTACHMENTS

Attachment A - Initial Notification Form Alert

Attachment B - Unit 1, Unit Operator Notifications

Attachment C - Follow Up Information Form Alert

ATTACHMENT A (Page 1 of 1)
INITIAL NOTIFICATION FORM
ALERT

1. <input type="checkbox"/> This is a Drill		<input type="checkbox"/> This is an Actual Event - Repeat - This is an Actual Event	
2. This is _____, Browns Ferry has declared a ALERT			
affecting: <input type="checkbox"/> Unit 1		<input type="checkbox"/> Unit 2	<input type="checkbox"/> Unit 3 <input type="checkbox"/> Common
3. EAL Designator(s): _____			
4. Brief Description of the Event:			

5. Radiological Conditions: (Check one under both Airborne and Liquid column.)			
<u>Airborne Releases Offsite</u>		<u>Liquid Releases Offsite</u>	
<input type="checkbox"/> Minor releases within federally approved limits ¹		<input type="checkbox"/> Minor releases within federally approved limits ¹	
<input type="checkbox"/> Releases above federally approved limits ¹		<input type="checkbox"/> Releases above federally approved limits ¹	
<input type="checkbox"/> Release information not known (¹ Tech Specs)		<input type="checkbox"/> Release information not known (¹ Tech Specs)	
6. Event Declared:	Time: _____	Date: _____	
7. Provide Protective Action Recommendation:		<input type="checkbox"/> None	
8. Please repeat the information you have received to ensure accuracy.			
9. Time and Date this information was provided _____ / _____			
Action: When completed, telecopy this information.			

ATTACHMENT B (Page 1 of 2)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

- NOTES:** (1) The Emergency Paging System (EPS) consists of a dedicated touch screen CRT. Activation of any screen feature requires the user place their fingertip within the boundary of the select button and leave it there for at least 1 second. The CRT Screen will normally display a large rectangle that indicates that the paging system is available but currently inactive
- (2) If the EPS fails to operate, contact the SM/SED immediately. Request that the ODS be contacted to initiate the system from his location. If the system fails to operate from the ODS area, then utilize the Weekly Duty List and Call-Out List to manually staff the Emergency Responders, implementing this attachment at step E.

1. Activation of the Emergency Paging System (EPS).

A. **PRESS** the EPS CRT Screen once to activate the paging options. _____
INITIALS TIME

B. **PRESS** the appropriate option as instructed by the SED

- PAGER TEST
- DRILL
- EMERGENCY
- STAGING AREA
- ABORT

INITIALS TIME

C. **PRESS** the START Button to initiate the option or **ABORT** to deny the option request. _____
INITIALS TIME

D. **MONITOR** the Paging System Terminal Display _____
INITIALS TIME

1. IF... A "NO" response is observed

OR

The position being paged has not responded
within approximately 20 minutes

THEN... Utilize the Weekly Duty List and attempt to contact the position representative with available information. (No Fitness for Duty Question Required)

2. IF... The individual cannot be reached utilizing the Weekly Duty List

THEN .. Utilize the Call-Out List and attempt to contact an alternate position representative. (Fitness for Duty Question Required)

ATTACHMENT B (Page 2 of 2)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

- | | | | |
|----|--|-------------------|---------------|
| E. | Manual Call-Out (N/A step if EPS operates normally) | _____
INITIALS | _____
TIME |
| 1. | Utilize the current Weekly Duty List and contact positions as listed. | | |
| 2. | If a position can not be reached from the current Weekly Duty list, then refer to the Call-out List as applicable to fill all vacant positions. | | |
| F. | CONTINUE until all positions have been filled. | _____
INITIALS | _____
TIME |
| 2. | <u>Notify</u> the Unit Supervisors on shift. | _____
INITIALS | _____
TIME |
| 3. | <u>Notify</u> Nuclear Security Shift Supervisor and state "AN ALERT HAS BEEN DECLARED" and direct to activate EPIP-11, Security and Access Control. | _____
INITIALS | _____
TIME |
| | • Plant Extension 3150 or 2219 | | |
| 4. | <u>Notify</u> the Chemistry Lab Supervisor and state "AN ALERT HAS BEEN DECLARED" and direct to implement 2/3-TI-331, Post Accident Sampling Procedure and CI-900 series, Analysis Procedures. | _____
INITIALS | _____
TIME |
| | • Plant Extension 2367 or 2368 | | |
| 5. | <u>Notify</u> the RADCON Shift Supervisor and state "AN ALERT HAS BEEN DECLARED" and direct to activate EPIP-14, Radiological Control Procedure. | _____
INITIALS | _____
TIME |
| | • Plant Extension 7865 or 3104 | | |
| 6. | <u>Notify</u> the "On-Call" NRC Resident and state "AN ALERT HAS BEEN DECLARED," per BFN-EPIP-03. | _____
INITIALS | _____
TIME |
| | • Plant Extension 2572 [Secretary] or from weekly duty list | | |

ALERT

EPIP-3

BROWNS FERRY
NUCLEAR PLANT

ATTACHMENT C (Page 1 of 1)
FOLLOW-UP INFORMATION FORM
ALERT

☐ THIS IS A REAL EVENT ☐ THIS IS A DRILL

Note: This form is for conducting Follow-up Information only.
This is _____ at Browns Ferry.

Name

There has been a Alert declared at Browns Ferry affecting:

☐ Unit 1 ☐ Unit 2 ☐ Unit 3 ☐ Common

The Reactor is ☐ Shutdown ☐ At Power

Plant Conditions are ☐ Stable ☐ Deteriorating

“Follow-Up” Information (e.g , Key Events, Status Changes)

Current Radiological Conditions are: (Check one under both Airborne and Liquid column)

Airborne Release Offsite

- ☐ Minor releases within federally approved limits¹
☐ Releases above federally approved limits¹
☐ Release Information not known
(¹Tech Specs)

Liquid Releases Offsite

- ☐ Minor releases within federally approved limits¹
☐ Releases above federally approved limits¹
☐ Release Information not known
(¹Tech Specs)

Additional Rad information: (e.g., release duration)

☐ There is no Protective Action Recommendation at this time.

Please repeat the information you have received to ensure accuracy.

The time for this follow up is. Time: _____ Date: _____

SIGNATURE: _____

LAST PAGE

TENNESSEE VALLEY AUTHORITY

BROWNS FERRY NUCLEAR PLANT

EMERGENCY PLAN IMPLEMENTING PROCEDURE

EPIP-4

SITE AREA EMERGENCY

REVISION 28

PREPARED BY: T. W. CORNELIUS

PHONE 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: JEFF LEWIS

DATE: 04/02/2003

EFFECTIVE DATE: 04/03/2003

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

REVISION LOG

Procedure Number: EPIP-4

Revision Number: 28

Pages Affected: 2, 7, 8, 11

Description of Change:

- IC-31 This change is being conducted to incorporate a manual method of evacuating on-site, non-emergency response personnel during emergency situations. In addition changes to the procedure are being conducted to incorporate the management of NRC Commitment changes as prescribed in the correspondence from site licensing RIMS R08000217713, and to human factor the notification and follow-up notification forms.
- Page 2 - change to step 3.2.1 involves human factoring the Notification Form Title.
- Page 3 - changes to steps 3.4.1 - 3.4.5 involves information regarding steps for the SED to take when conducting an Accountably/Assembly and Evacuation.
- Page 6 - changes involves removing the "NRC Commitment Brackets to step requiring the review of PORC and the human factoring of applicable steps.
- Page 7 - change involves human factoring attachment title.
- Page 8 - change involves human factoring attachment title and modifying information to ensure consistency with NRC guidance.
- Page 9 - change involves adding information for Unit 1 Operator regarding ERO staffing support.
- Page 10 - updated information for the Unit Operator to use during the ERO staffing process.
- Page 11 - change involved adding a clarify statement concerning the appropriate use of the Follow-up Notification Form.
- IC-32 EPIP-4, revision 25 is being issued to incorporate changes regarding assembly and accountability actions. All actions to initiate the accountability and evacuation processes are now located in EPIP-8. The revision additionally standardizes telephone numbers, and PORC reviews. This revision also adds clarification for the actions taken by the Unit 1 Unit Operator during their staffing of the ERO process.
- Page 3 - added a statement to the caution information regarding security threat. Clarified steps 3.4.1 and 3.4.2 to implement EPIP-8 regarding actions to be taken for assembly/accountability and evacuation.
- Page 6 - standardize Site Area Emergency procedure closure information
- Page 8,9 - Clarify actions taken by the Unit 1 Unit Operator during the notification attachment.
- IC-33 EPIP-4, revision 26 is being conducted to incorporate changes regarding actions to be taken when dangerous conditions exist on site that would require the assembly of the ERO at the staging area. Additionally page 3 and 5 were revised to update telephone information regarding the Office of Radiation Control.
- Page 2 - change instruct the SED when to direct the Unit 1 Unit Operator to assembly the ERO at the staging area.
- Page 4 - revision adds clarification to the caution note regarding on-site security conditions for assembly/accountability.
- Page 8 - revision adds option for staging area
- IC-34 EPIP-4, revision 27 is being conduct to change the procedure reference for Dose Assessment from EPIP-14 to EPIP-13. Page 4 of this procedure is be revised.
- IC-35 EPIP-4, rev 28 is being conduct to standardize record retention (page 7) and revise the notification forms to include NRC Terminology from RIS 2002-16 for normal and abnormal releases (page 8 & 11). Additionally the revision will provide a place to document the time and EAL Designation when centers are staffed (page 2).

1.0 PURPOSE

- 1.1 Provide for timely notification of appropriate individuals or organizations when the Shift Manager/Site Emergency Director (SED) has determined by EPIP-1 that an incident has occurred which is classified as a SITE AREA EMERGENCY (SAE)
- 1.2 Provide for periodic evaluation of the current situation by the Shift Manager/SED to determine whether the SAE should be terminated, continued, or upgraded to a more serious classification

2.0 SCOPE

This procedure applies to emergency events that are classified as Site Area Emergency by EPIP-1, Emergency Classification Procedure.

3.0 INSTRUCTIONS

Date: ____/____/____

- 3.1 If all Emergency Centers **ARE STAFFED**, Notify the following that a "Site Area Emergency Classification was declared at Time: _____, EAL Designator _____, and EPIP 4 is being implemented".

Then continue in this procedure at Step 3.4.

CECC ☐
TSC ☐
OSC ☐

Control Rooms ☐
Plant PA Announcement ☐

This is NAME, Site Emergency Director, an Site Area Emergency has been declared at BFN, we are currently implementing EPIP-4. Standby for further updates.

INITIALS _____ TIME _____

If all Emergency Centers **ARE NOT STAFFED**,

Then N/A this step and continue in this procedure.

3.2 Notification of the Operations Duty Specialist (ODS) & Emergency Responders

Note: The ODS **should** be notified within 5 minutes after the emergency event is declared.

- 3.2.1 **Complete** Attachment A (Initial Notification Form).

INITIALS _____ TIME _____

- 3.2.2 **Activating Emergency Response Organization (ERO)**

- 3.2.2.1 **If** ongoing/anticipated on-site security events **may** present a danger to the emergency responders, **Then** consult with Nuclear Security.

INITIALS _____ TIME _____

- 3.2.2.2 **If** ongoing/anticipated events present a danger to emergency responders, **Then** direct the Unit 1 Unit Operator to make notifications per Attachment B and select "Staging Area" as the option for the Emergency Paging System.

INITIALS _____ TIME _____

- 3.2.2.3 **If** there are no ongoing/anticipated danger to emergency responders, **Then** direct the Unit 1 Unit Operator to make notifications per Attachment B and select as applicable, "Drill" or "Emergency" as the option for the Emergency Paging System.

INITIALS _____ TIME _____

3.0 INSTRUCTIONS (CONTINUED)

3.2.3 Notify the ODS and Provide the information from Attachment A.

INITIALS

TIME

Note: Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS Telephone Numbers
5-751-1700, 2495

If the ODS cannot be reached within 10 minutes, Then contact the State of Alabama directly by requesting the Rad Health Duty Officer at:

Day Shift 8 a m - 5 p m.(Central) Holidays-Weekends-Off-Shifts
Primary: 9-1-334-206-5391 Montgomery State Trooper Post
Backup: 9-1-800-582-1866 9-1-334-242-4378

3.2.4 Fax a copy of Attachment A to the ODS for confirmation of information or if the state is contacted directly.

INITIALS

TIME

ODS Fax Office of Radiation Control Fax
5-751-8620 9-1-334-206-5387

3.2.5 Receive confirmation call from the ODS (to verify notification of the State of Alabama)(NA this step, if the state was contacted directly).

INITIALS

TIME

3.3 NOTIFICATION OF SITE PERSONNEL

3.3.1 Make the following plant P.A. announcement.

INITIALS

TIME

THIS IS (NAME), SHIFT MANAGER. A SITE AREA EMERGENCY HAS BEEN DECLARED ON UNIT ____ . I HAVE ASSUMED THE DUTIES OF SITE EMERGENCY DIRECTOR. REPORT TO YOUR ASSIGNED EMERGENCY RESPONSE FACILITY AT THIS TIME.

3.0 INSTRUCTIONS (CONTINUED)

CAUTION: Do not initiate Assembly and Accountability if:

1. A severe weather condition exist or projected on-site, such as a Tornado.
2. An on-site security risk condition exists that may present a danger to site personnel during the assembly/accountability process (Consult with Nuclear Security)

3.4 ACCOUNTABILITY AND EVACUATION OF NON-EMERGENCY RESPONDERS

3.4.1 If Assembly and Accountability has not been conducted, Then, implement EPIP-8, Appendix C concurrently with this procedure. If Accountability has been conducted, Then N/A this step and continue in this procedure at step 3.4.2.

INITIALS	TIME
----------	------

3.4.2 If an order to evacuate non-emergency responders has not be issued, Then upon completion of Assembly and Accountability, initiate the order to evacuate non-emergency responders, through the implementation of EPIP-8, Appendix F, concurrently with this procedure. If the order to evacuate non-emergency responders has been conducted, Then continue in this procedure at step 3.5.1.

INITIALS	TIME
----------	------

3.5 DOSE ASSESSMENT

3.5.1 Evaluate the need for offsite dose assessment.
(N/A STEP IF NOT APPLICABLE)

INITIALS	TIME
----------	------

3.5.1.1 When offsite dose assessment is required, obtain the information from the CECC when operational.

3.5.1.2 If the CECC is not operational; contact the TSC, when staffed, or the RADCON Shift Supervisor and request the implementation of EPIP 13, for dose assessment.

3.0 INSTRUCTIONS (CONTINUED)

3.6 NOTIFICATION OF THE NRC

- 3.6.1 Notify the NRC immediately or within 1 hour; and if requested by the NRC maintain an open and continuous communications channel.

INITIALS

TIME

Note: Utilize the Emergency Notification System (ENS) when making this notification. Dial the first number listed on the sticker affixed to the ENS telephone, by dialing 9-1-"The Ten Digit Number Listed on the ENS Telephones". If the number is busy, Then select in order, the alternate numbers until a connection is achieved. No access codes are required.

3.7 PERIODIC EVALUATION OF THE EVENT

- 3.7.1 Continue to Evaluate the event using EPIP-1 as conditions warrant.

- 3.7.2 If plant conditions warrant the need for follow up information, Complete the Follow Up Notification Form, Attachment C.

Note: Conditions that warrant this evaluation are as a minimum when other EAL conditions exist indicating the current emergency classification or significant changes in plant conditions have occurred.

- 3.7.3 If the CECC is not staffed, Then notify the ODS and provide follow up information from the completed Attachment C form. Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS - 5-751-2495, 1700

Note: If the ODS cannot be reached, Then contact the State of Alabama directly by requesting the Rad Health Duty Officer at:

Day Shift 8 a m - 5 p m (Central Time)

Primary: 9-1-334-206-5391

Backup: 9-1-800-582-1866

Holidays-Weekends-Off-shifts

Montgomery State Trooper Post

9-1-334-242-4378

3.0 INSTRUCTIONS (CONTINUED)

3.7 PERIODIC EVALUATION OF THE EVENT (CONTINUED)

3.7.4 If the conditions warrants upgrading to a higher classification, Then initiate EPIP-5, General Emergency.

3.7.5 If the conditions warrant termination of the classification, Then enter EPIP-16, Termination and Recovery Procedure.

3.7.6 After the evaluation has been completed, if staffed, Notify the following of the status:

- CECC
- NRC (ENS)
- TSC
- OSC
- CONTROL ROOMS
- PLANT PA ANNOUNCEMENT

3.7.7 Re-enter this procedural section as conditions warrant at step 3.7.1 or until directed to exit this procedure by steps 3.7.4 or 3.7.5.

3.8 CLOSURE OF THE SITE AREA EMERGENCY

3.8.1 Upon termination of the Notification of Site Area Emergency, the Shift Manager shall send the completed EPIP-4 and all attachments to Emergency Preparedness (EP).

INITIALS

TIME

3.8.2 Upon receipt of completed EPIP-4 and all attachments, Emergency Preparedness shall forward documents for the purpose of documentation storage.

INITIALS

TIME

4.0 RECORD RETENTION

4.1 RECORDS OF CLASSIFIED EMERGENCIES

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

4.2 DRILL AND EXERCISE RECORDS

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years

5.0 ATTACHMENTS

Attachment A - Initial Notification Form Site Area Emergency

Attachment B - Unit 1, Unit Operator Notifications

Attachment C - Follow Up Information Form Site Area Emergency

ATTACHMENT A (Page 1 of 1)
INITIAL NOTIFICATION FORM
SITE AREA EMERGENCY

1. ☐ This is a Drill ☐ This is an Actual Event - Repeat - This is an Actual Event

2. This is _____, Browns Ferry has declared a **SITE AREA EMERGENCY**
affecting: ☐ Unit 1 ☐ Unit 2 ☐ Unit 3 ☐ Common

3. EAL Designator(s): _____

4. Brief Description of the Event:

5. Radiological Conditions: (Check one under both Airborne and Liquid column.)

Airborne Releases Offsite

Liquid Releases Offsite

☐ Minor releases within federally approved limits¹

☐ Minor releases within federally approved limits¹

☐ Releases above federally approved limits¹

☐ Releases above federally approved limits¹

☐ Release information not known
(¹Tech Specs)

☐ Release information not known
(¹Tech Specs)

6. Event Declared: Time: _____ Date: _____

7. Provide Protective Action Recommendation: ☐ None

8. Please repeat the information you have received to ensure accuracy.

9. Time and Date this information was provided _____ / _____

Action: When completed, telecopy this information.

ATTACHMENT B (Page 1 of 2)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

- NOTES:** (1) The Emergency Paging System consists of a dedicated touch screen CRT. Activation of any screen feature requires the user place their fingertip within the boundary of the select button and leave it there for at least 1 second. The CRT Screen will normally display a large rectangle that indicates that the paging system is available but currently inactive.
- (2) If the EPS fails to operate, contact the SM/SED immediately. Request that the ODS be contacted to initiate the system from his location. If the system fails to operate from the ODS area, then utilize the Weekly Duty List and Call-Out List to manually staff the Emergency Responders, implementing this attachment at step E.

1. Activation of the Emergency Paging System (EPS).

A. **PRESS** the EPS CRT Screen once to activate the paging options. _____
INITIALS TIME

B. **PRESS** the appropriate option _____
INITIALS TIME

- PAGER TEST
- DRILL
- EMERGENCY
- STAGING AREA
- ABORT

C. **PRESS** the START Button to initiate the option or **ABORT** to deny the option request. _____
INITIALS TIME

D. **MONITOR** the Paging System Terminal Display _____
INITIALS TIME

1. IF... A "NO" response is observed

OR

The position being paged has not responded within approximately 20 minutes

THEN... Utilize the Weekly Duty List and attempt to contact the position representative with available information. (No Fitness for Duty Question Required)

2. IF... The individual cannot be reached utilizing the Weekly Duty List.

THEN... Utilize the Call-Out List and attempt to contact an alternate position representative (Fitness for Duty Question Required)

ATTACHMENT B (Page 2 of 2)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

E. Manual Call-Out (N/A step if EPS operates normally)

1. Utilize the current Weekly Duty List and contact positions as listed.
2. If a position can not be reached from the current Weekly Duty list, then refer to the Call-out List as applicable to fill all vacant positions.

INITIALS TIME

F. CONTINUE until all positions have been filled.

INITIALS TIME

2. Notify the Unit Supervisors on shift.

INITIALS TIME

3. Notify Nuclear Security Shift Supervisor and state "AN SITE AREA EMERGENCY HAS BEEN DECLARED" and direct to activate EPIP-11, Security and Access Control.

INITIALS TIME

- Plant Extension 3150 or 2219

4. Notify the Chemistry Lab Supervisor and state "AN SITE AREA EMERGENCY HAS BEEN DECLARED" and direct to implement 2/3-TI-331, Post Accident Sampling Procedure and CI-900 series, Analysis Procedures.

INITIALS TIME

- Plant Extension 2367 or 2368

5. Notify the RADCON Shift Supervisor and state "AN SITE AREA EMERGENCY HAS BEEN DECLARED" and direct to activate EPIP-14, Radiological Control Procedure.

INITIALS TIME

- Plant Extension 7865 or 3104

6. Notify the "On-Call" NRC Resident and state "AN SITE AREA EMERGENCY HAS BEEN DECLARED".

INITIALS TIME

- Plant Extension 2572 [Secretary] or from weekly duty list

ATTACHMENT C (Page 1 of 1)
FOLLOW-UP INFORMATION FORM
SITE AREA EMERGENCY

☐ THIS IS A REAL EVENT ☐ THIS IS A DRILL

Note: This form is for conducting Follow-up Information only.

This is _____ at Browns Ferry.
Name

There has been a Site Area Emergency declared at Browns Ferry affecting:

☐ Unit 1 ☐ Unit 2 ☐ Unit 3 ☐ Common

The Reactor is ☐ Shutdown ☐ At Power

Plant Conditions are ☐ Stable ☐ Deteriorating

"Follow-Up" Information (e.g., Key Events, Status Changes)

Current Radiological Conditions are: (Check one under both Airborne and Liquid column.)

Airborne Release Offsite

Liquid Releases Offsite

<input type="checkbox"/> Minor releases within federally approved limits ¹	<input type="checkbox"/> Minor releases within federally approved limits ¹
<input type="checkbox"/> Releases above federally approved limits ¹	<input type="checkbox"/> Releases above federally approved limits ¹
<input type="checkbox"/> Release Information not known (Tech Specs)	<input type="checkbox"/> Release Information not known (Tech Specs)

Additional Rad information: (e.g., release duration)

☐ There is no Protective Action Recommendation at this time

Please repeat the information you have received to ensure accuracy

The time for this follow up is: Time: _____ Date: _____

SIGNATURE: _____

TENNESSEE VALLEY AUTHORITY

BROWNS FERRY NUCLEAR PLANT

EMERGENCY PLAN IMPLEMENTING PROCEDURE

EPIP-5

GENERAL EMERGENCY

REVISION 33

PREPARED BY: T. W. CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: JEFF LEWIS

DATE: 04/02/2003

EFFECTIVE DATE: 04/03/2003

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

REVISION LOG

Procedure Number: EPIP-5

Revision Number: 33

Pages Affected: 2,7,8,12

Description of Change:

- IC-37 This change is being conducted to incorporate a manual method of evacuating on-site, non-emergency response personnel during emergency situations. In addition changes to the procedure are being conducted to incorporate the management of NRC Commitment changes as prescribed in the correspondence from site licensing RIMS R08000217713, and to human factor the notification and follow-up notification forms.
- Page 2 - change to step 3.2.1 involves human factoring the Notification Form Title and revised telephone for Morgan County.
 - Page 3/4 - changes to steps 3.4.1 - 3.4.5 involves information regarding steps for the SED to take when conducting an Accountably/Assembly and Evacuation.
 - Page 6 - changes involves removing the "NRC Commitment Brackets to step requiring the review of PORC and the human factoring of applicable steps.
 - Page 7 - change involves human factoring attachment title.
 - Page 8 - change involves human factoring attachment title.
 - Page 9 - change involves adding information for Unit 1 Operator regarding ERO staffing support.
 - Page 10 - revised to update information supporting Unit 1 Operator actions regarding ERO staffing support.
 - Page 11 - revised Protective Action Recommendation Flowchart
 - Page 12 - change involved adding a clarify statement concerning the appropriate use of the Follow-up Notification Form.
- IC-38 EPIP-4, revision 25 is being issued to incorporate changes regarding assembly and accountability actions. All actions to initiate the accountability and evacuation processes are now located in EPIP-8. The revision additionally standardizes telephone numbers, and PORC reviews. This revision also adds clarification for the actions taken by the Unit 1 Unit Operator during their staffing of the ERO process.
- Page 3 - added a statement to the caution information regarding security threat. Clarified steps 3.4.1 and 3.4.2 to implement EPIP-8 regarding actions to be taken for assembly/accountability and evacuation.
 - Page 6 - standardize Site Area Emergency procedure closure information.
 - Page 8,9 - Clarify actions taken by the Unit 1 Unit Operator during the notification attachment.
- IC-39 EPIP-5, revision 31 is being conducted to incorporate changes regarding actions to be taken when dangerous conditions exist on site that would require the assembly of the ERO at the staging area. Additionally page 3 and 6 were revised to update telephone information regarding the Office of Radiation Control.
- Page 2 - change instruct the SED when to direct the Unit 1 Unit Operator to assembly the ERO at the staging area.
 - Page 4 - revision adds clarification to the caution note regarding on-site security conditions for assembly/accountability.
 - Page 9 - revision adds option for staging area
- IC-40 EPIP-4, revision 32 is being conduct to change the procedure reference for Dose Assessment from EPIP-14 to EPIP-13. Page 5 of this procedure is be revised.

IC-41

EPIP-5, rev. 33 is being conduct to standardize record retention (page 7) and revise the notification forms to include NRC Terminology from RIS 2002-16 for normal and abnormal releases (page 8 & 12). Additionally the revision will provide a place to document the time and EAL Designation when centers are staffed (page 2)

1.0 PURPOSE

- 1.1 Provide for timely notification of appropriate individuals or organizations when the Shift Manager/Site Emergency Director (SED) has determined by EPIP-1 that an incident has occurred which is classified as a GENERAL EMERGENCY (GE).
- 1.2 Provide for periodic evaluation of the current situation by the Shift Manager/SED to determine whether the GE should be terminated, or continued.

2.0 SCOPE

This procedure applies to emergency events that are classified as General Emergency by EPIP-1, Emergency Classification Procedure.

3.0 INSTRUCTIONS

Date: ____/____/____

- 3.1 If all Emergency Centers **ARE STAFFED**, Notify the following that a
“General Emergency Classification was declared at
Time: _____, EAL Designator _____, and EPIP 5 is being implemented”.

Then continue in this procedure at Step 3.4.

CECC ☐
TSC ☐
OSC ☐

Control Rooms ☐
Plant PA Announcement ☐

INITIALS

TIME

This is NAME, Site Emergency Director, an General
Emergency has been declared at BFN, we are currently
implementing EPIP-5 Standby for further updates

If all Emergency Centers **ARE NOT STAFFED**,

Then N/A this step and continue in this procedure.

3.2 Notification of the Operations Duty Specialist (ODS) & Emergency Responders

Note: The ODS **should** be notified within 5 minutes after the emergency event is
declared.

3.2.1 Complete Attachment A (Initial Notification Form).

INITIALS

TIME

3.2.2 Activating Emergency Response Organization (ERO)

- 3.2.2.1 If ongoing/anticipated on-site security events may
present a danger to the emergency responders,
Then consult with Nuclear Security.

INITIALS

TIME

- 3.2.2.2 If ongoing/anticipated events present a danger to
emergency responders, **Then** direct the Unit 1
Unit Operator to make notifications per
Attachment B and select “Staging Area” as the
option for the Emergency Paging System.

INITIALS

TIME

- 3.2.2.3 If there are no ongoing/anticipated danger to
emergency responders, **Then** direct the Unit 1
Unit Operator to make notifications per
Attachment B and select as applicable, “Drill” or
“Emergency” as the option for the Emergency
Paging System

INITIALS

TIME

3.0 INSTRUCTIONS (CONTINUED)

- 3.2.3 **Notify** the ODS and **Provide** the information from Attachment A.

INITIALS

TIME

Note: Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS Telephone Numbers

5-751-1700, 2495

If the ODS cannot be reached within 10 minutes, **Then** contact the following and Provide the information from Attachment A:

1. Limestone County: 9-232-0111

INITIALS

TIME

2. Morgan County: 9-1-256-432-2143

INITIALS

TIME

3. Lawrence County: 9-1-256-974-7641

INITIALS

TIME

4. Lauderdale County: 9-1-256-760-9117

INITIALS

TIME

5. State of Alabama Rad Health Duty Officer:

INITIALS

TIME

Day Shift 8 a.m. - 5 p.m. (Central) Holidays-Weekends-Off-Shifts

Primary: 9-1-334-206-5391 Montgomery State Trooper Post

Backup: 9-1-800-582-1866 9-1-334-242-4378

- 3.2.4 **Fax** a copy of Attachment A to the ODS for confirmation of information or the state if contacted directly.

INITIALS

TIME

ODS Fax
5-751-8620

Office of Radiation Control Fax
9-1-334-206-5387

- 3.2.5 **Receive** confirmation call from the ODS (to verify notification of the State of Alabama), (N/A this step if the State was contacted directly).

INITIALS

TIME

3.0 INSTRUCTIONS (CONTINUED)

3.3 NOTIFICATION OF SITE PERSONNEL

3.3.1 Make the following plant P.A. announcement:

INITIALS TIME

THIS IS (NAME), SHIFT MANAGER. A GENERAL
EMERGENCY HAS BEEN DECLARED ON
UNIT ____ . I HAVE ASSUMED THE DUTIES OF
SITE EMERGENCY DIRECTOR. REPORT TO
YOUR ASSIGNED EMERGENCY RESPONSE
FACILITY AT THIS TIME.

CAUTION: Do not initiate Assembly and Accountability if:

1. A severe weather condition exist or projected on-site, such as a Tornado.
2. An on-site security risk condition exists that may present a danger to site personnel during the assembly/accountability process (Consult with Nuclear Security).

3.4 ACCOUNTABILITY AND EVACUATION OF NON-EMERGENCY RESPONDERS

3.4.1 If Assembly and Accountability has not been conducted,
Then, implement EPIP-8, Appendix C concurrently with
this procedure. If Accountability has been conducted,
Then, continue in this procedure at step 3.4.2.

INITIALS TIME

3.4.2 If an order to evacuate non-emergency responders has
not be issued, Then upon completion of Assembly and
Accountability, Initiate the order to evacuate non-
emergency responders, through the implementation of
EPIP-8, Appendix F, concurrently with this procedure. If
the order to evacuate non-emergency responders has been
conducted, Then continue in this procedure at step 3.5.1.

INITIALS TIME

3.0 INSTRUCTIONS (CONTINUED)

3.5 DOSE ASSESSMENT

- 3.5.1 Evaluate the need for offsite dose assessment.
(N/A STEP IF NOT APPLICABLE)

INITIALS TIME

3.5.1.1 When offsite dose assessment is required Obtain the information from the CECC when operational.

3.5.1.2 If the CECC is not operational, Contact the TSC, when staffed or the RADCON Shift Supervisor and Request the implementation of EPIP 13, for dose assessment.

3.6 NOTIFICATION OF THE NRC

- 3.6.1 Notify the NRC immediately or within 1 hour and if requested by the NRC maintain an open and continuous communications channel.

INITIALS TIME

Note: Utilize the Emergency Notification System (ENS) when making this notification. Dial the first number listed on the sticker affixed to the ENS telephone, by dialing 9-1-
"The Ten Digit Number Listed on the ENS Telephones".
If the number is busy, Then select in order, the alternate numbers until a connection is achieved. No access codes are required.

3.7 PROTECTIVE ACTION RECOMMENDATION

- 3.7.1 If the CECC is not staffed, Then make a Protective Action Recommendation (PAR) using Attachment C.
(This PAR shall be made only by the SED)
(N/A STEP IF NOT APPLICABLE)

INITIALS TIME

3.0 INSTRUCTIONS (CONTINUED)

3.8 PERIODIC EVALUATION OF THE EVENT

3.8.1 Continue to Evaluate the event using EPIP-1 as conditions warrant.

3.8.2 If plant conditions warrant the need for follow-up information, Complete the Follow-Up Notification Form, Attachment D.

Note: Conditions that warrant this evaluation are as a minimum when other EAL conditions exist indicating the current emergency classification or significant changes in plant conditions have occurred.

3.8.3 If the CECC is not staffed, Then notify the ODS and provide follow up information from the completed Attachment D form. Utilize the direct ring-down ODS phone when making this notification or as applicable dial direct.

ODS - 5-751-2495, 1700

Note: If the ODS cannot be reached, Then contact the State of Alabama directly by requesting the Rad Health Duty Officer at:

<u>Day Shift 8 a.m. - 5 p.m. (Central Time)</u>	<u>Holidays-Weekends-Off-shifts</u>
Primary: 9-1-334-206-5391	Montgomery State Trooper Post
Backup: 9-1-800-582-1866	9-1-334-242-4378

3.8.4 If the conditions warrant termination of the classification, Then enter EPIP-16, Termination and Recovery Procedure.

3.8.5 After the evaluation has been completed, if staffed, Notify the following of the status.

- CECC
- OSC
- NRC (ENS)
- CONTROL ROOMS
- TSC
- PLANT PA ANNOUNCEMENT

3.8.6 Re-enter this procedural section as conditions warrant at step 3.8.1 or until directed to exit this procedure by steps 3.8.4.

3.0 INSTRUCTIONS (CONTINUED)

3.9 CLOSURE OF THE GENERAL EMERGENCY

3.9.1 Upon termination of the Notification of General Emergency, the Shift Manager shall send the completed EPIP-5 and all attachments to Emergency Preparedness (EP).

INITIALS

TIME

3.9.2 Upon receipt of completed EPIP-5 and all attachments, Emergency Preparedness shall forward documents for the purpose of documentation storage.

INITIALS

TIME

4.0 RECORD RETENTION

4.1 RECORDS OF CLASSIFIED EMERGENCIES

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

4.2 DRILL AND EXERCISE RECORDS

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

5.0 ATTACHMENTS

Attachment A - Initial Notification Form General Emergency

Attachment B - Unit 1, Unit Operator Notifications

Attachment C - Protective Action Recommendations

Attachment D - Follow Up Information Form General Emergency

ATTACHMENT A (Page 1 of 1)
INITIAL NOTIFICATION FORM
GENERAL EMERGENCY

1. <input type="checkbox"/> This is a Drill <input type="checkbox"/> This is an Actual Event - Repeat - This is an Actual Event										
2. This is _____, Browns Ferry has declared a GENERAL EMERGENCY affecting: <input type="checkbox"/> Unit 1 <input type="checkbox"/> Unit 2 <input type="checkbox"/> Unit 3 <input type="checkbox"/> Common										
3. EAL Designator(s): _____										
4. Brief Description of the Event: _____										
5. Radiological Conditions: (Check one under both Airborne and Liquid column.)										
<table border="0" style="width: 100%;"><tr><td style="width: 50%; text-align: center;">Airborne Releases Offsite</td><td style="width: 50%; text-align: center;">Liquid Releases Offsite</td></tr><tr><td><input type="checkbox"/> Minor releases within federally approved limits¹</td><td><input type="checkbox"/> Minor releases within federally approved limits¹</td></tr><tr><td><input type="checkbox"/> Releases above federally approved limits¹</td><td><input type="checkbox"/> Releases above federally approved limits¹</td></tr><tr><td><input type="checkbox"/> Release information not known (¹Tech Specs)</td><td><input type="checkbox"/> Release information not known (¹Tech Specs)</td></tr></table>			Airborne Releases Offsite	Liquid Releases Offsite	<input type="checkbox"/> Minor releases within federally approved limits ¹	<input type="checkbox"/> Minor releases within federally approved limits ¹	<input type="checkbox"/> Releases above federally approved limits ¹	<input type="checkbox"/> Releases above federally approved limits ¹	<input type="checkbox"/> Release information not known (¹ Tech Specs)	<input type="checkbox"/> Release information not known (¹ Tech Specs)
Airborne Releases Offsite	Liquid Releases Offsite									
<input type="checkbox"/> Minor releases within federally approved limits ¹	<input type="checkbox"/> Minor releases within federally approved limits ¹									
<input type="checkbox"/> Releases above federally approved limits ¹	<input type="checkbox"/> Releases above federally approved limits ¹									
<input type="checkbox"/> Release information not known (¹ Tech Specs)	<input type="checkbox"/> Release information not known (¹ Tech Specs)									
6. Event Declared: _____ Time: _____ Date: _____										
7. The Meteorological Conditions are: _____ (Use 91 meter data from the Met Tower)										
Wind Direction is FROM: _____ degrees Wind Speed: _____ m.p.h										
8. Provide Protective Action Recommendation: (Check either 1 or 2, and mark wind direction.)										
<input type="checkbox"/> Recommendation 1 <ul style="list-style-type: none">• EVACUATE LISTED SECTORS (2 mile Radius & 10 miles downwind)• Shelter all non-listed sectors• Consider issuance of POTASSIUM IODINE in accordance with the State Plan.	WIND FROM⁰ (Mark)	<input type="checkbox"/> Recommendation 2 <ul style="list-style-type: none">• EVACUATE LISTED SECTORS• (2 mile radius & 5 mile downwind)• SHELTER all other non-listed sectors• Consider issuance of POTASSIUM IODIDE in accordance with the State Plan								
A-2, B-2, F-2, G-2, E-5, -10, F-5, -10, G-5, -10	4 - 40	A-2, B-2, F-2, G-2, E-5, F-5, G-5								
A-2, B-2, F-2, G-2, F-5, -10, G-5, -10, H-10	41 - 73	A-2, B-2, F-2, G-2, F-5, G-5								
A-2, B-2, F-2, G-2, G-5, -10, H-10, I-10	74 - 92	A-2, B-2, F-2, G-2, G-5								
A-2, B-2, F-2, G-2, A-5, G-5, H-10, I-10, J-10, K-10	93 - 137	A-2, B-2, F-2, G-2, A-5, G-5								
A-2, B-2, F-2, G-2, A-5, -10, I-10, J-10, K-10	138 - 203	A-2, B-2, F-2, G-2, A-5,								
A-2, B-2, F-2, G-2, A-5, -10, B-5, -10	204 - 282	A-2, B-2, F-2, G-2, A-5, B-5								
A-2, B-2, F-2, G-2, B-5, -10, C-10, D-10, E-5, -10	283 - 326	A-2, B-2, F-2, G-2, B-5, E-5								
A-2, B-2, F-2, G-2, C-10, D-10, E-5, -10, F-5, -10	327 - 3	A-2, B-2, F-2, G-2, E-5, F-5								
9. Please repeat the information you have received to ensure accuracy.										
10. Time and Date this information was provided _____ / _____ Action: When completed, telecopy this information.										

ATTACHMENT B (Page 1 of 2)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

- NOTES:** (1) The Emergency Paging System consists of a dedicated touch screen CRT. Activation of any screen feature requires the user place their fingertip within the boundary of the select button and leave it there for at least 1 second. The CRT Screen will normally display a large rectangle that indicates that the paging system is available but currently inactive.
- (2) If the EPS fails to operate, contact the SM/SED immediately. Request that the ODS be contacted to initiate the system from his location. If the system fails to operate from the ODS area, then utilize the Weekly Duty List and Call-Out List to manually staff the Emergency Responders, implementing this attachment at step E.

1. Activation of the Emergency Paging System (EPS).

A. **PRESS** the EPS CRT Screen once to activate the paging options. _____
INITIALS TIME

B. **PRESS** the appropriate option _____
INITIALS TIME

- PAGER TEST
- DRILL
- EMERGENCY
- STAGING AREA
- ABORT

C. **PRESS** the START Button to initiate the option or **ABORT** to deny the option request. _____
INITIALS TIME

D. **MONITOR** the Paging System Terminal Display _____
INITIALS TIME

1. **IF...** A "NO" response is observed
OR
The position being paged has not responded
within approximately 20 minutes

THEN... Utilize the Weekly Duty List and attempt to contact the position representative with available information. (No Fitness for Duty Question Required)

2. **IF...** The individual cannot be reached utilizing the Weekly Duty List

THEN... Utilize the Call-Out List and attempt to contact an alternate position representative. (Fitness for Duty Question Required)

ATTACHMENT B (Page 2 of 2)
UNIT 1, UNIT OPERATOR NOTIFICATIONS

Date: ____/____/____

E. Manual Call-Out (N/A step if EPS operates normally)

1. Utilize the current Weekly Duty List and contact positions as listed
2. If a position can not be reached from the current Weekly Duty list, then refer to the Call-out List as applicable to fill all vacant positions

INITIALS TIME

F. CONTINUE until all positions have been filled.

INITIALS TIME

2. Notify the Unit Supervisors on shift.

INITIALS TIME

3. Notify Nuclear Security Shift Supervisor and state "A GENERAL EMERGENCY HAS BEEN DECLARED" and direct to activate EPIP-11, Security and Access Control.

INITIALS TIME

- Plant Extension 3150 or 2219

4. Notify the Chemistry Lab Supervisor and state "A GENERAL EMERGENCY HAS BEEN DECLARED" and direct to implement 2/3-TI-331, Post Accident Sampling Procedure and CI-900 series, Analysis Procedures.

INITIALS TIME

- Plant Extension 2367 or 2368

5. Notify the RADCON Shift Supervisor and state "A GENERAL EMERGENCY HAS BEEN DECLARED" and direct to activate EPIP-14, Radiological Control Procedure.

INITIALS TIME

- Plant Extension 7865 or 3104

6. Notify the "On-Call" NRC Resident and state "A GENERAL EMERGENCY HAS BEEN DECLARED".

INITIALS TIME

- Plant Extension 2572 [Secretary] or from weekly duty list

ATTACHMENT C (Page 1 of 1)
PROTECTIVE ACTION RECOMMENDATIONS

Note 1: If conditions are unknown utilizing the flowchart, then answer NO.

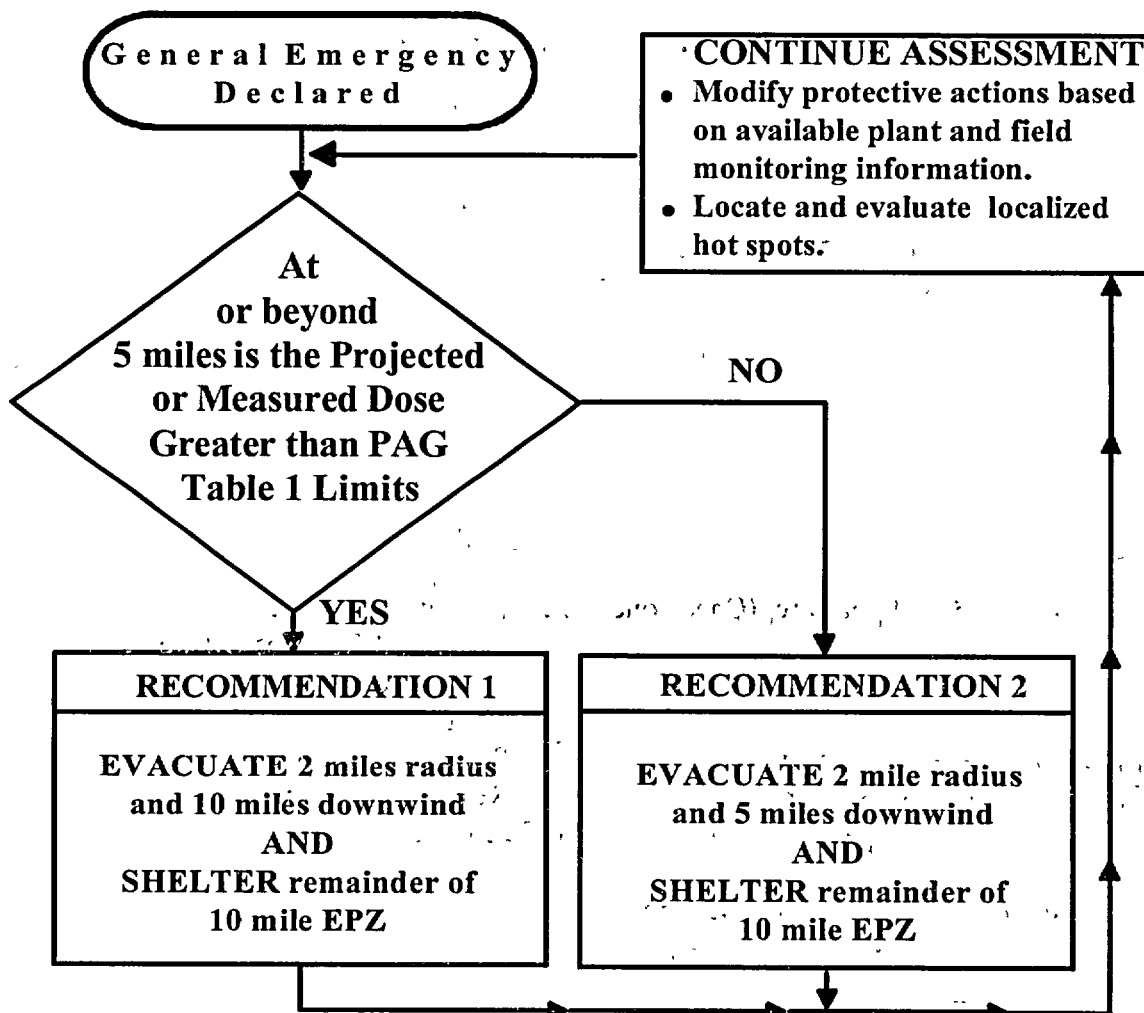


TABLE 1 Protective Action Guides	
TYPE	LIMIT
Measured	3.9E-6 micro Ci/cc of Iodine 131 or 1 REM/hr External Dose
Projected	1 REM TEDE or 5 REM Thyroid CDE

ATTACHMENT D (Page 1 of 1)
FOLLOW-UP INFORMATION FORM
GENERAL EMERGENCY

☐ THIS IS A REAL EVENT ☐ THIS IS A DRILL

Note: This form is for conducting Follow-up Information only.

This is _____ at Browns Ferry.
Name

There has been a General Emergency declared at Browns Ferry affecting:

☐ Unit 1 ☐ Unit 2 ☐ Unit 3 ☐ Common

The Reactor is ☐ Shutdown ☐ At Power
Plant Conditions are ☐ Stable ☐ Deteriorating

"Follow-Up" Information (e.g., Key Events, Status Changes, Status of any Plant Evacuations)

Current Radiological Conditions are (Check one under both Airborne and Liquid column.)

Airborne Release Offsite

Liquid Releases Offsite

<input type="checkbox"/> Minor releases within federally approved limits ¹	<input type="checkbox"/> Minor releases within federally approved limits ¹
<input type="checkbox"/> Releases above federally approved limits ¹	<input type="checkbox"/> Releases above federally approved limits ¹
<input type="checkbox"/> Release Information not known (¹ Tech Specs)	<input type="checkbox"/> Release Information not known (¹ Tech Specs)

Additional Rad information: (e.g., release duration)

The current meteorological conditions from the site are:

Wind Speed _____, Wind Direction from _____

The following Protective Action Recommendation is provided:

☐ Recommendation 1 ☐ Recommendation 2

Please repeat the information you have received to ensure accuracy

The time for this follow up is: Time: _____ Date: _____

SIGNATURE: _____

LAST PAGE