

INSPECTION REPORT

1. LICENSEE OR CERTIFICATE HOLDER/LOCATION INSPECTED: Westinghouse Electric Corporation Commercial Nuclear Fuel Division Columbia, SC 29250 REPORT NO: 2010-004		2. NRC/REGIONAL OFFICE: U.S. Nuclear Regulatory Commission Region II 245 Peachtree Center Ave, NE Suite 1200 Atlanta, GA 30303-1257	
3. DOCKET NUMBER: 70-1151	4. LICENSE OR CERTIFICATE NUMBER: SNM-1107	5. DATE(S) OF INSPECTION: June 28 – July 2, 2010	

LICENSEE OR CERTIFICATE HOLDER:

The inspection was an examination of the activities conducted under your license or certificate as they relate to safety and/or safeguards and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license or certificate. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The

- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. Reported events reviewed
- 4. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.
Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

- 5. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.
(Violations and Corrective Actions)

LICENSEE OR CERTIFICATE HOLDER STATEMENT OF CORRECTIVE ACTIONS FOR ITEM 5, ABOVE

I hereby state that, within 30 days, the actions described by me to the inspector will be taken to correct the violation(s) identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to the NRC will be required, unless specifically requested.

Title	Printed Name	Signature	Date
LICENSEE/CERTIFICATE HOLDER REPRESENTATIVE			
NRC INSPECTOR	Jennifer Foster	/RA/	7/28/10

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6. INSPECTOR(S): Jennifer Foster

7. INSPECTION PROCEDURES USED: 88050

EXECUTIVE SUMMARY

Summary of Plant Status

The Westinghouse facility converts uranium hexafluoride into uranium dioxide and fabricates fuel assemblies for use in commercial nuclear power reactors. During the inspection period, the plant performed routine operations. This routine, announced inspection included evaluation of the emergency preparedness program. The inspection involved observations of work activities, review of selected records, and interviews with plant personnel. The inspection identified the following aspects of the licensee program as outlined below:

Emergency Preparedness

- The inspector verified that there were not any major changes to the emergency plan since the last inspection nor had there been any major changes to the organization. The inspector reviewed a sample of changes to procedures made since the last inspection. The reviewed procedures included SEP-001 Rev 5, Emergency Response Organization; SEP-007 Rev 19, Notification Guidelines for NRC and Other Agencies; SEP-013 Rev 0, Post Incident Analysis; SEP-014, Response to Extreme Environmental Conditions; and SEP-019, Response to Loss of City Water. The procedures were appropriately reviewed and approved by management and did not decrease the effectiveness of the EP plan.
- The inspector verified a change in the display of the criticality detector output located at the guard shack. The display had changed since the last inspection to include criticality station #17, a criticality detector located in an area outside. The guard shack display, used in emergency response, now has access to all of the criticality detectors in the plant. The guard shack display label was also changed from gamma detectors to criticality detectors in an attempt to be more straightforward. The inspector interviewed the security guard stationed at the guard shack and determined that the security guard interviewed had an adequate understanding of the changes. The inspector also observed a radiation technician training class in which the criticality detector display changes were discussed in addition to general operation of the criticality detectors. No issues of safety significance were identified.
- The inspector reviewed the accountability procedure and assessed the outdoor areas utilized for accountability purposes. The inspector found the procedure and outdoor gathering areas to be adequate. The inspector interviewed a sample of employees and found that they understood the accountability procedure. The inspector interviewed a security guard responsible for producing the accountability report and found him to be knowledgeable of the process.
- The inspector reviewed the Emergency Response Organization training database and verified that personnel on the emergency response roster had met the annual training requirements in the Emergency Plan.

EXECUTIVE SUMMARY (Continued)

- The inspector reviewed the Emergency Response Team (ERT) training database and verified that personnel had met the quarterly training requirements in the Emergency Plan. The inspector also reviewed a sample of training certificates for a few selected ERT personnel and found that the training folders were consistent with the database and that the selected ERT personnel had been trained in first aid, Cardiopulmonary Resuscitation (CPR), and Automated External Defibrillator (AED).
- The inspector conducted interviews and procedure walk-throughs with two Emergency Directors and four Incident Commanders. The selected interviewees included staff from all three shifts. The inspector evaluated the decisions made by the Emergency Directors and the Incident Commanders for a fictional criticality scenario. The Emergency Directors and Incident Commanders used the procedure SEPR-001-5 Rev 1, Criticality Accident. No regulatory issues were identified.
- The inspector determined through the review of records and interviews with personnel that the licensee conducted practice drills at a more frequent rate than the Emergency Plan requires and that the drills met the intent of the Emergency Plan.
- The inspector reviewed the Memoranda of Understanding (MOU) documentation for the off-site agencies and found the agreements to be consistent with the requirements in the Emergency Plan. Although the licensee and the South Carolina Department of Health and Environmental Conservation (SC DHEC) Bureau of Radiological Health had a working relationship in the past, they had not had a formal, documented MOU. Since the last inspection, the licensee and SC DHEC developed a MOU. The inspector reviewed the new MOU and determined that it was adequate.
- The inspector verified that offsite support agencies were offered site-specific training annually as required in the Emergency Plan. The Columbia Fire Department and National Oceanic and Atmosphere Association (NOAA) accepted the offer and participated in the 2009 training. The inspector contacted the Columbia Fire Department and Palmetto Health Richland Hospital. The chief of the fire department stated that he was satisfied with the site-specific training provided and verified that both radiological and chemical hazards were covered. The contact at the hospital indicated that he was satisfied with the relationship at Westinghouse and that it was consistent with the MOU. The hospital conducts in-house training and utilizes state training to help their staff understand the hazards associated with the plant. The inspector verified the participation of the fire department and local hospital in emergency drills.
- The inspector verified that the licensee conducted communication checks with the offsite response organization quarterly and updated the appropriate procedure; SEP-007, Notification Guidelines for NRC and Other Agencies. The inspector independently verified that the licensee emergency call list in SEP-007 was current.
- The inspector verified that the licensee maintained their certification of compliance with the Emergency Planning and Community Right to Know Act of 1986.
- The inspector verified the Emergency Operations Center (EOC) contained all of the equipment required in the Emergency Plan and that the communication systems were operable.
- The inspector observed the operation of the high-volume air sampler, Impactor, which would be utilized to measure air both onsite and offsite in an emergency scenario. The technicians operated the equipment correctly. The inspector noted that the technicians and environmental engineering staff were unfamiliar with what the expected background levels should be for the instrument. Although the licensee does extensive environmental sampling through the ambient air monitoring program, the ambient air filters are systematically delayed for seven days before detection to account for natural radon on the samples. The

EXECUTIVE SUMMARY (Continued)

Impactor samples would be measured immediately if used in an emergency response scenario and the filter paper would be expected to contain some level of radon. In the absence of properly understanding the environmental air background as measured by the Impactor, confusion could occur between the characterization of natural radon and potential contamination from an emergency event. No regulatory issues were identified.

- The inspector observed the equipment inventory of the Fire Engine. The inspector reviewed the 2009 inventory sheets for the Fire Engine, the Hazardous Materials Truck, and the Self Contained Breathing Apparatus (SCBA). The inventories were complete and were conducted at least quarterly, as required by the Emergency Plan. The inspector verified that the calibration was current on a sample of the SCBA equipment.
- The inspector observed the inventory of the Health Physics equipment used for emergency response. The inspector determined that the monthly inventory and equipment check were completed in accordance with SEP-004 Rev 6, Emergency Equipment and Supplies. In November 2009, ROP-01-031, Operability Checks for Radiation Survey Instruments, was revised to include the Health Physics instruments stored inside the brigade cabinets for emergency response. The ROP-01-031 procedure described a more rigorous operability check in which the instrument's net source readings were compared to the ranges in ROS-01-032-1, Response Ranges for Portable Instrument Operability Checks. The inspector observed that the revision had not been implemented in the field as of June 30, 2010. The inspector verified that when the operability checks were completed using ROP-01-031, the Health Physics instruments used for emergency response were within the appropriate ranges. The inspector also verified that the Health Physics instruments were calibrated semiannually as required by the Emergency Plan. No issues of significance were identified.

Exit Meeting Summary

The inspection scope and results were summarized on Friday, July 2, 2010, with Mr. David Precht and members of your staff. No dissenting comments were received.

Key Points of Contact

<u>Name</u>	<u>Title</u>
M. Rosser	Manager, Environment, Health and Safety
S. Carver	Emergency Response Manager
T. Shannon	Radiation Protection Manager
D. Shealy	Training Chief

Procedures Reviewed

SEP-001 Rev 5	Emergency Response Organization
SEP-007 Rev 19	Notification Guidelines for NRC and Other Agencies
SEP-004 Rev 6	Emergency Equipment and Supplies
ROP-01-032 Rev 14	Source Checks for Radiation Survey/ Counting Instruments
SEPR-001-5 Rev 1	Criticality Accident
SEP-013 Rev 0	Post Incident Analysis
SEP-014	Response to Extreme Environmental Conditions
SEP-019	Response to Loss of City Water