

Exelon Nuclear

Job Performance Measure

Determine ODCM Compensatory Measures

JPM Number: 2014 ILT NRC JPM SRO Admin 4

Revision Number: 00

Date: 10/24/2013

Developed By: _____
Instructor Date

Validated By: _____
SME or Instructor Date

Reviewed By: _____
Operations Representative Date

Approved By: _____
Training Department Date

JOB PERFORMANCE MEASURE VALIDATION CHECKLIST

NOTE: All steps of this checklist should be performed upon initial validation.
Prior to JPM usage, revalidate JPM using steps 9 and 13 below.

- _____ 1. Task description and number, JPM description and number are identified.
- _____ 2. Knowledge and Abilities (K/A) references are included.
- _____ 3. Performance location specified. (in-plant, control room, simulator, or other)
- _____ 4. Initial setup conditions are identified.
- _____ 5. Initiating cue (and terminating cue if required) are properly identified.
- _____ 6. Task standards identified and verified by SME review.
- _____ 7. Critical steps meet the criteria for critical steps and are identified with an asterisk (*).
- _____ 8. If an alternate path is used, the task standard contains criteria for successful completion.
- _____ 9. Verify the procedure(s) referenced by this JPM reflects the current revision:
 Procedure CY-QC-170-301 Rev: 11
 Procedure QCOS 1700-04 Rev: 13
 Procedure CY-QC-130-650 Rev: 12
 Procedure QCAN 901-3 H-1 Rev: 9
 Procedure QCAN 901-3 G-1 Rev: 11
- _____ 10. Verify cues both verbal and visual are free of conflict.
- _____ 11. Verify performance time is accurate
- _____ 12. If the JPM cannot be performed as written with proper responses, then revise the JPM.
- _____ 13. When JPM is initially validated, sign and date JPM cover page. Subsequent validations, sign and date below:

SME / Instructor	Date
SME / Instructor	Date
SME / Instructor	Date

Revision Record (Summary)

Revision 00, Renamed JPM to 2014 ILT NRC JPM SRO Admin 4. Restarted numbering accordingly.

Previous revision was: This JPM was developed new for the 2012 ILT NRC Exam.

SIMULATOR SETUP INSTRUCTIONS

1. Simulator setup is not applicable.
2. Evaluator, be prepared to fill in a time for “10 minutes ago” on the candidates copy of the Initial Conditions.
3. Be prepared to provide a blank Service Water Rad Monitor Outage Report, QCOS 1700- 04, AFTER the candidate has obtained a copy for himself/herself.
4. Have the following additional procedures available if the student references them
 - CY-QC-130-650
 - CY-QC-170-301
 - QCAN 901-3 G-1
 - QCAN 901-3 H-1



SRO Admin 4



SRO Admin 4



SRO Admin 4 QCAN



SRO Admin 4 QCAN



SRO Admin 4 QCOS

CY-QC-130-650, Rev 001
CY-QC-170-301, Rev 001
901(2)-3 G-1, Rev 019
901(2)-3 H-1, Rev 001
1700-04, Rev 013, SI

INITIAL CONDITIONS

- You are the Unit 1 Unit Supervisor.
- The following annunciators were received 10 minutes ago, at:_____
 - 901-3 G-1, LIQUID PROCESS RAD MON HI RADIATION
 - 901-3 H-1, LIQUID PROCESS RAD MON FAILURE
- The ANSO has since reported the following:
 - The Service Water Rad Monitor indicates downscale on recorder 1-1705-12, Process Liquid Monitor, on Panel 901-2.
 - The “FAIL” light is lit on the SPING Terminal on Panel 912-4 associated with SPING Channel 11-01.
- The EO has just reported that breaker MCC 17-1-1 Ckt 25 is tripped and will not reset.
- The Eberline radiation monitoring system has been verified to be operating properly.
- This JPM is NOT time critical.

INITIATING CUE

For this situation:

- Identify the Required Actions.
- Complete the necessary paperwork.
- Complete the necessary notifications.

(Be prepared to provide a blank Outage Report, QCOS 1700- 04, AFTER the candidate has obtained a copy for himself/herself.)

(Have the following additional procedures available if the student references them

- CY-QC-130-650
- CY-QC-170-301
- QCAN 901-3 G-1
- QCAN 901-3 H-1)

Fill in the JPM Start Time when the student acknowledges the Initiating Cue.

Information For Evaluator’s Use:

UNSAT requires written comments on respective step.

- * Denotes critical steps.
- Denotes critical elements of a critical step.

Number any comments in the “Comment Number” column on the following pages. Then annotate that comment in the “Comments” section. The comment section should be used to document: the reason that a step is marked as unsatisfactory, marginal performance

relating to management expectations, or problems the examinee had while performing the JPM. Comments relating to procedural or equipment issues should be entered and tracked using the site's appropriate tracking system.

Some operations that are performed from outside of the control room may require multiple steps. These items may be listed as individual steps in this JPM. It is acceptable for the candidate to direct the local operator to perform groups of procedure steps instead of calling for each individual item to be performed.

The timeclock starts when the candidate acknowledges the initiating cue.

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JPM Start Time: _____

<u>STEP</u>	<u>ELEMENT</u>	<u>STANDARD</u>	SAT	UNSAT	Comment Number
EVALUATOR NOTE: The necessary compensatory actions are found in either the Offsite Dose Calculation Manual (ODCM) Section 12.2.1, or in the Outage Report for the Service Water Radiation Monitor, QCOS 1700-04.					
*	<ul style="list-style-type: none"> Recognize that the Initial Conditions render the Service Water Rad Monitor inoperable 	Service Water Rad Monitor declared inoperable by stating the Rad Monitor is Inoperable or by recording the Rad Monitor is Inoperable in step H.1.b below			
ODCM Condition C Action C.1 or QCOS Step G.1.a	Identify the correct REQUIRED ACTION and COMPLETION TIME per C.1: Collect and analyze grab samples for beta or gamma activity at an LLD $\leq 1\text{E-}07$ $\mu\text{Ci/ml}$ Once per 12 hours	Collect and analyze grab samples for beta or gamma activity at an LLD $\leq 1\text{E-}07$ $\mu\text{Ci/ml}$ once per 12 hours identified.	—	—	—
ODCM Condition C Action C.2 or QCOS Step G.1.b	Identify the correct REQUIRED ACTION and COMPLETION TIME per C.2: Restore the Service Water Rad Monitor to OPERABLE status within 30 days	Restore the Service Water Rad Monitor to OPERABLE status within 30 days identified.	—	—	—
CUE	When the need to submit an IR is addressed, inform the candidate that the ANSO has submitted one. Provide the following IR Number: <u>IR 3456789</u>				

<u>STEP</u>	<u>ELEMENT</u>	<u>STANDARD</u>	SAT	UNSAT	Comment Number
QCOS 1700-04 Step H.1.a	Record the following information on Attachment A: Unit: 1 Date: Time: IR #: 3456789	Unit: 1, Date and Time and IR # 3456789 recorded on QCOS 1700-04 Attachment A	—	—	—
QCOS 1700-04 Step H.1.b	Record the following information on Attachment A: Instrument: “2251-887” or “Service Water Radiation Monitor” Date and Time declared Inop:	Instrument and the Date and Time it was declared inoperable recorded on QCOS 1700-04 Attachment A.	—	—	—
QCOS 1700-04 Step H.1.c	Record the following information on Attachment A: Reason for inoperability: (Loss of power or equivalent)	Reason for inoperability recorded on QCOS 1700-04 Attachment A.	—	—	—
QCOS 1700-04 Step H.1.d	Record the following information on Attachment A: Date and time 30 days from the time that instrument was declared inoperable.	Date and time 30 days from the time that instrument was declared inoperable recorded on QCOS 1700-04 Attachment A.	—	—	—
EVALUATOR ROLE PLAY: As Chemistry Tech as necessary to acknowledge the directive in the next step. Provide the following technician name: Maria Sklodowska					

<u>STEP</u>	<u>ELEMENT</u>	<u>STANDARD</u>	SAT	UNSAT	Comment Number
* QCOS 1700-04 Step H.2	•Notify Chemistry to perform LCO requirements per CY-QC-130-650, and record on attachment A. •	Chemistry notified to perform LCO requirements per CY-QC-130-650. Date and time of notification and Person notified recorded on QCOS 1700-04 Attachment A.	—	—	—
QCOS 1700-04 Step H.3	Review Outage Report actions for accuracy.	Unit Supervisor signature signed off on QCOS 1700-04 Attachment A, Step H.3 and submitted to Shift Manager for review.	—	—	—
CUE	ROLE PLAY SHIFT MANAGER as necessary to accept Attachment A for review.				
CUE	If not already addressed, ask the candidate the following question: “What actions, if any, would be necessary if the Service Water Rad Monitor is not returned to service within 30 days?”				
ODCM Condition G or QCOS 1700-04 Step F.2	Identify the correct REQUIRED ACTION for CONDITION G: Explain why the inoperability was not corrected in a timely manner in the next Radioactive Effluent Release Report.	Condition G reporting requirement identified.	—	—	—
CUE	Inform the candidate that the JPM is complete.				

JPM Stop Time: _____

JPM SUMMARY

Operator's Name: _____ **Job Title:** ☐ EO ☐ RO ☒ SRO ☐ FS
☐ STA/IA ☐ SRO Cert

JPM Title: Determine ODCM Compensatory Measures

JPM Number: 2014 ILT NRC JPM SRO Admin 4

Revision Number: 00

Task Number and Title: **S-1701-K41** Given Process Radiation Monitoring System operability status OR key parameter indications, various plant conditions and a copy of the Offsite Dose Calculation Manual (ODCM), DETERMINE if ODCM operability requirements are met and required actions, if any.

K/A Number and Importance: **K/A: 2.3.15** **Rating:** SRO 3.1
 Knowledge of radiation monitoring systems, such as fixed radiation monitors and alarms, portable survey instruments, personnel monitoring equipment, etc.

Suggested Testing Environment: Simulator/Classroom

Alternate Path: ☐ Yes ☒ No SRO Only: ☒ Yes ☐ No Time Critical: ☐ Yes ☒ No

Reference(s):

CY-QC-170-301, Rev 11, "Offsite Dose Control Manual" (ODCM) Section 12.2.1

QCOS 1700-04 Rev. 13, "Service Water Effluent Gross Activity Radiation Monitor Outage Report"

CY-QC-130-650, Rev. 12, "Inoperable Chemistry Instruments LCO Requirements"

QCAN 901-3 H-1, Rev. 9, "Liquid Process Rad Monitor Failure"

QCAN 901-3 G-1, Rev 11, "Liquid Process Rad Mon Hi Radiation"

Actual Testing Environment: ☐ Simulator ☐ Control Room ☐ In-Plant ☐ Other

Testing Method: ☐ Simulate ☒ Perform

Estimated Time to Complete: 15 minutes

Actual Time Used: _____ minutes

EVALUATION SUMMARY:

Were all the Critical Elements performed satisfactorily? ☐ Yes ☐ No

The operator's performance was evaluated against standards contained within this JPM and has been determined to be: ☐ Satisfactory ☐ Unsatisfactory

Comments: _____

Evaluator's Name: _____ (Print)

Evaluator's Signature: _____ **Date:** _____

[If this page is an odd numbered page, a blank page is automatically generated after this page to keep the student cue sheet separate from this page]

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