

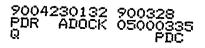
SUMMARY

Scope:

This routine, unannounced inspection was conducted in the area of emergency preparedness to determine if the program was being maintained in a state of operational readiness for responding to emergencies as instructed in Inspection Procedure 82701. The inspection included review of the following programmatic elements: (1) Emergency Plan and its implementing procedures; (2) emergency facilities, equipment, instrumentation, and supplies; (3) organization and management control; (4) training; and (5) independent reviews/audits.

Results:

In the areas inspected, one non-cited violation was identified for failure of an emergency procedure to implement the Emergency Plan as required by Technical Specification (Paragraph 2). The overall program was determined to be adequately maintained. The availability of experienced personnel with many years of participation as members of the emergency organization was considered a program strength.



REPORT DETAILS

Persons Contacted 1.

Licensee Employees

- *W. Alfera, Safety Supervisor
- *J. Barrow, Operations Superintendent
- *G. Boissy, Plant Manager
- *H. Buchanan, Health Physics Supervisor
- *E. Burgess, Quality Improvement Team C. Burton, Operations Supervisor
- *G. Casto, Emergency Planning
- *R. Church, Chairman, Independent Safety Evaluation Group
- *T. Coste, Quality Assurance Staff
- *J. Danek, Corporate Health Physics
- *B. Frechette, Chemistry
- *J. Harper, Superintendent, Quality Assurance
- *L. Jacobus, ALARA Coordinator
- *C. Leppla, Instrumentation and Controls Supervisor
- D. Lowens, Nuclear Energy Engineer
- *M. MacLeod, Nuclear Engineering
- *R. McCullers, Health Physics Operations Supervisor
- W. McGavic, Nuclear Energy Senior Engineer
- L. McLaughlin, Licensing Representative, Technical Staff
- *H. Mercer, Health Physics Technical Supervisor
- *K. Pavne, Health Physicist
- *J. Powell, Technical Staff
- *R. Riha, Nuclear Engineering Staff
- *J. Riley, Procedures and Graphics Supervisor
- *L. Rogers, Electrical Maintenance
- *D. Sager, Site Vice President
- *D. Sipos, Services Manager
- *J. Spodick, Training Department
- C. Stroud, Training Department *J. Walker, Health Physics Emergency Preparedness
- *H. Ware, Training
- *D. West, Technical Staff Supervisor
- *C. Wood, Outage Management
- *E. Wunderlich, Reactor Engineering
- N. Yates, Assistant Plant Technician/Quality Control Vault

Other licensee employees contacted during this inspection included technicians and office personnel.

Nuclear Regulatory Commission

*J. Potter, Section Chief, Facilities Radiation Protection, Region II *W. Rankin, Section Chief, Emergency Preparedness Section, Region II *M. Scott, Resident Inspector







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*Attended exit interview held March 2, 1990

2. Emergency Plan and Implementing Procedures (82701)

Pursuant to 10 CFR 50.47(b)(16), 10 CFR 50.54(q), Appendix E to 10 CFR Part 50, and Section 7 of the licensee's Emergency Plan, this area was inspected to determine whether significant changes were made in the licensee's emergency preparedness program since the last unannounced inspection (December 1987), and to assess the impact of any such changes on the overall state of emergency preparedness at the facility.

The inspector reviewed the licensee's program for making changes to the Emergency Plan and the Emergency Plan Implementing Procedures (EPIPs). The inspector verified that changes to these documents were reviewed and approved by the Facility Review Group and licensee management. A review of records showed that the revised Emergency Plan had been approved on May 1, 1989, and submitted to the NRC within 30 days of the effective date, as required. Selected review of additional records showed that revised Emergency Plans for the Emergency Operations Facility (EOF) had been acknowledged on June 13, 1989.

Copies of the EPIPs were examined in the EOF and found to be current. EPIP 3100022E, titled Classification of Emergencies and approved on February 2, 1990, was the most recently approved revised procedure. A comparison of the classification tables in EPIP 3100022E against the classification tables in the Emergency Plan revealed differences.

The inspector noted that the differences in the classification tables were such that the same off-normal conditions could result in an event classification in the EPIP classification table but not in the Emergency Plan Classification table. For example, in the procedure a rapid drop in either steam generator pressure to less than 600 psi would be an Unusual Event; whereas in the Emergency Plan the action level is an unusual decrease in pressurizer pressure and level with decreasing Tavg and simultaneous abnormal drop in Main Steam Line or steam generator pressure to less than 500 psia.

Licensee representatives were informed that this situation represented a failure to have written procedures which implemented the Emergency Plan as required by Technical Specification 6.8.1.e, which stated "Written procedures shall be established, implemented and maintained covering ... Emergency Plan implementation." Licensee representatives acknowledged awareness of differences and stated the EPIP classification table contained clarifications and changes that had in part been initiated from observations and difficulties noted during NRC administered licensing requal exams during 1989. Licensee management committed to revise the Emergency Plan classification table to be in accordance with the classification table in EPIP 3100022E within 30 days. This NRC identified violation is not being cited because criteria specified in Section V.A of the NRC Enforcement Policy were satisfied. This Item (50-335, 389/90-06-01) is closed.





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One non-cited violation was identified.

3. Emergency Facilities, Equipment, Instrumentation, and Supplies (82701)

Pursuant to 10 CFR 50.47(b)(8) and (9), 10 CFR 50.54(q), and Section IV.E of Appendix E to 10 CFR Part 50, this area was inspected to determine whether the licensee's emergency response facilities and other essential emergency equipment, instrumentation, and supplies were maintained in a state of operational readiness, and to assess the impact of any changes in this area upon the emergency preparedness program.

The inspector toured the licensee's emergency response facilities (ERFs) including the Control Room for Unit 1, the Technical Support Center (TSC), the Operations Support Center (OSC), and the EOF. All facilities and emergency equipment therein appeared to be maintained in an appropriate state of readiness. According to observations by the inspector and statements by licensee representatives, no significant ERF changes were made since the last inspection. While touring the TSC, the inspector observed activities in place which included the posting of changes to some of the controlled documentation maintained therein for the emergency organization. A review of selected documentation found it to be properly maintained.

The inspector selectively reviewed documentation of the monthly emergency equipment inventory and communications tests conducted since December 1988, in accordance with Revision 17 to procedure HP-90, "Emergency Equipment". The records indicated that the monthly inventories were being conducted in accordance with procedures and any deficiencies identified during the monthly audits were promptly resolved.

No violations or deviations were identified.

4. Organization and Management Control (82701)

Pursuant to 10 CFR 50.47(b)(1) and (16) and Section IV.A of Appendix E to 10 CFR Part 50, this area was inspected to determine the effects of any changes in the licensee's emergency response organization and/or management control systems on the emergency preparedness program and to verify that such changes were properly factored into the Emergency Plan and EPIPs.

The organization and management of the emergency preparedness program were reviewed and discussed with licensee representatives. Since the last routine emergency preparedness inspection, the emergency planning coordinator position had been filled during January 1989. According to licensee representatives the only significant changes to the offsite support agencies had been the retirement of a county Emergency Management Director and a reorganization into the Department of Public Safety which included the 911 emergency number. The above changes had no adverse affect on the emergency planning program.





















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No violations or deviations were identified.

5. Training (82701)

Pursuant to 10 CFR 50.47(b)(2) and (15), Section IV.F of Appendix E to 10 CFR Part 50, and Section 7.2 of the licensee's Emergency Plan, this area was inspected to determine whether the licensee's key emergency response personnel were properly trained and understood their emergency responsibilities.

The inspector reviewed documentation of the emergency response training program, including training procedures and selected lesson plans, and interviewed members of the instructional staff. Based on these reviews and interviews, the inspector determined that the licensee had established a formal emergency training program for the emergency teams which included: Radiological Monitoring Teams; Security Teams; and First Aid/ Decontamination Teams. However, the inspector was not able to determine that the Emergency Team Leaders and their alternates were conducting applicable training sessions annually as indicated in Section 7.2.2.5, 1) of the Emergency Plan. Discussions with selected team leaders indicated the intent of this training was being met by routine training provided by the training staff with the team leader in attendance at the training. Further concerns and questions regarding training indicated that a licensee meeting in February 1990 had documented the need for initiating revised training standards. A member of the training staff had prepared a matrix that compared the emergency organization positions against training The approval and implementation of this program should requirements. Another training result in an enhanced emergency training program. concern focused on the lack of formal retraining of the licensed operating staff prior to the implementation of the recently approved EPIP 3100022E, Interviews and review of selected Classification of Emergencies. documentation indicated the revised procedure had been initiated with a Night Order as well as an opportunity for the operators to review and comment on the revised procedure in its draft form. The Training System Action request for this procedure indicated a Training Bulletin Report had been determined to be required for training relevancy. This would assure that all licensed operators had reviewed the revised procedure within approximately one month. Because the procedural changes appeared to be more succinct and observed simulator requalification examination training noted timely and correct emergency classifications, this concern was not identified as a finding. The scenario observed by an inspector and properly classified by a nuclear power supervisor was a steam generator tube rupture with stuck open code safety. Walkthroughs were conducted with selected members of the EOF emergency organization to determine how and who was responsible for assuring the EOF was available to the responding emergency organization. Although it was not clearly delineated in procedures, discussions with selected emergency response personnel demonstrated full awareness of their responsibilities.



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No violations or deviations were identified.

6. Independent Review/Audits (82701)

Pursuant to 10 CFR 50.47(b)(14) and (16) and 10 CFR 50.54(t), this area was inspected to determine whether the licensee had performed an independent review of audits of the emergency preparedness program, and whether the licensee had a corrective action system for deficiencies and weaknesses identified during exercise and drills.

Records of emergency preparedness program audits were reviewed. The records showed that independent audits of the program were conducted by the plant Quality Assurance Department. The audit records for 1989 indicated the Emergency Plan Audit No. QSL-OPS-89-678 was conducted from May 2 - June 9, 1989. With minor exceptions, the complete audit centered on the equipment and inventory documents required by Health Physics Operating Procedure No. HP-90, "Emergency Equipment". The audit report identified no findings; therefore, corrective action was not required. Interviews with licensee representatives disclosed that a specific audit of the emergency exercise was not conducted in 1989 because the St. Lucie QA Department was involved with the preparation of the scenario and acted as evaluators during the drill. The QA comments during the drill were included as evaluation comments at the critique.

No violations or deviations were identified.

7. Exit Interview

The inspection scope and results were summarized on March 2, 1990, with those persons indicated in Paragraph 1. The inspector described the areas inspected and discussed in detail the inspection results listed below. Proprietary information is not contained in this report. Dissenting comments were not received from the licensee. The following NCV was identified and reviewed during this inspection:

NCV/90-06-01 - Failure of an EPIP to implement the Emergency Plan (Paragraph 2).



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