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SUBJECT: Forwards responses to NRC 940728 RAI re Revs 26 & 27 of radiological emergency plan. Reconfirms earlier determination that changes made in Revs 26 & 27 of radiological emergency plan do not decrease effectiveness of emergency plan.

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10 CFR §50.47(b)  
10 CFR §50.54(q)  
10 CFR Part 50 Appendix E  
L-94-221

U. S. Nuclear Regulatory Commission  
Attn: Document Control Desk  
Washington, D. C. 20555

Gentlemen:

Re: Turkey Point Units 3 and 4  
Docket Nos. 50-250 and 50-251  
Revisions 26 and 27 to Radiological Emergency Plan for Turkey  
Point Plant

By letter dated July 28, 1994 (William E. Cline to J. H. Goldberg), the NRC informed Florida Power & Light Company (FPL) that certain changes to the Turkey Point Radiological Emergency Plan appeared, to the NRC staff, to be inconsistent with the emergency planning standards of 10 CFR §50.47(b) and 10 CFR Part 50 Appendix E. In the July 28, 1994, letter, the NRC requested additional information in order to make a determination as to whether the effectiveness of the Turkey Point Radiological Emergency Plan is decreased. The purpose of this letter is to respond to the NRC's request for additional information.

Attached are responses to the request for additional information regarding Revisions 26 and 27 of the Turkey Point Radiological Emergency Plan. After consideration of the NRC's July 28, 1994, request for information, FPL has reconfirmed its earlier determination that the changes made in Revisions 26 and 27 of the Turkey Point Radiological Emergency Plan do not decrease the effectiveness of the Emergency Plan.

If you should have any additional questions regarding the information provided in this response, please contact us.

Sincerely,

T. F. Plunkett  
Vice President  
Turkey Point Plant

Attachment

cc: Stewart Ebnetter, Regional Administrator, Region II, USNRC  
T. P. Johnson, Senior Resident Inspector, USNRC, Turkey Point Plant  
William E. Cline, Chief, Radiological Protection and Emergency Preparedness Branch, Division of Radiation Safety and Safeguards, Region II, USNRC

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Response to NRC Request for Additional Information Regarding  
Revisions 26 and 27 of the Turkey Point  
Radiological Emergency Plan

NRC Request

1. Section 5.3.1, On-Site Radiation Protection Program (Revision 26)

This section was modified in an effort to incorporate the revised Federal guidance promulgated in EPA 400-R-92-001, "Manual of Protective Action Guides and Protective Actions for Nuclear Incidents." However, the licensee attached a restriction to the basic 5-rem dose limit for emergency workers which states, "Limits should include current annual [sic]." This restriction means that an emergency worker's 5-rem limit during an emergency response effort would be reduced by an amount equal to that individual's current annual occupational dose. According to 10 CFR 50.47(b)(11), the licensee's Radiological Emergency Plan must include means for controlling radiological exposures to emergency workers using "exposure guidelines consistent with EPA Emergency Worker and Lifesaving Activity Protective Action Guides." Current EPA guidance applicable to this area is contained in Section 2.5 of EPA 400-R-92-001, and does not endorse the above restriction added by the licensee. The licensee's Plan therefore appears to be inconsistent with the emergency planning standard of 10 CFR 50.47(b)(11).

FPL Response

FPL approved Revision 26 to the Turkey Point Radiological Emergency Plan on December 30, 1993. FPL has determined that the changes to the Turkey Point Radiological Emergency Plan resulting from Revision 26 do not decrease the effectiveness of the Turkey Point Radiological Emergency Plan. FPL's rationale for this determination is provided below.

At the time of implementation of EPA 400-R-92-001, FPL consciously elected to consider current annual exposure towards the 5-rem exposure limit. FPL is of the position that other procedural controls that permit dose limit extensions are in place such that at no time would this Radiological Emergency Plan provision unnecessarily restrict emergency response efforts. A process, consistent with EPA 400-R-92-001 guidance, promptly allows for extending the allowable dose of an emergency worker in the event of a radiological emergency at Turkey Point Plant (reference: Emergency Plan Implementing Procedure 20111 (EPIP-20111), "Reentry").

Guidance within the Turkey Point Radiological Emergency Plan, as implemented in EPIP-20111, with respect to the consideration of current annual exposure towards the 5-rem exposure limit is worded as a recommendation. The Emergency Coordinator (EC) is procedurally directed that he "should" include the current annual exposure in his decision-making process. This recommendation allows the EC to make a conscious decision with respect to whom to select for emergency actions (e.g., deciding between assigning an emergency response task involving radiation exposure to one of two equally qualified individuals, one with significantly less current annual exposure than the other) to keep total exposure, even under emergency conditions, as low as reasonably achievable. However, FPL believes that the Turkey Point Radiological Emergency Plan recommendation will, in no way, unnecessarily limit the options of the EC nor restrict emergency response activities.

In the development of emergency worker exposure limits, FPL acknowledged that the EPA 400-R-92-001 guidance on non-emergency operations during emergency conditions includes the restriction on subtracting the emergency worker's current annual exposure from the 5-rem limit. As stated in EPA 400-R-92-001, section 2.5, "...any radiation exposure of workers that is associated with an incident, but accrued during nonemergency operations, should be limited in accordance with relevant occupational limits for normal situations."

In summary, FPL has concluded that the emergency worker exposure guidelines which were implemented by Revision 26 to the Turkey Point Radiological Emergency Plan do not decrease the effectiveness of the Turkey Point Radiological Emergency Plan and meet the intent of the EPA 400-R-92-001 guidelines. Nonetheless, based on clarification provided in an NRC document on Questions and Answers on 10 CFR Part 20 implementation (dated May 26, 1994), FPL acknowledges that the removal of annual dose consideration may, in fact, enhance the Turkey Point Radiological Emergency Plan's effectiveness regarding emergency worker exposure. Accordingly, FPL intends to incorporate the new guidance change with respect to emergency worker emergency exposure in the next revision of the Turkey Point Radiological Emergency Plan.

#### NRC Request

2. Table 3-1, Section 1.2, Section 5, et al. (Revision 27)

In 10 CFR 20.1003, the terms "total effective dose equivalent" (TEDE) and "committed dose equivalent" (CDE) are defined as standard radiation protection terminology. The licensee's Radiological Emergency Plan defines and uses "total whole body dose" and "thyroid dose", respectively, as substitute terms for "TEDE" and "thyroid CDE" to ostensibly minimize confusion for

local officials when considering the need for protective actions for the public based on offsite dose projections provided by the licensee. This usage is inconsistent with regulatory terminology as defined and used in 10 CFR Part 20 and as used in EPA 400-R-92-001, "Manual of Protective Action Guides and Protective Actions for Nuclear Incidents." During exercises or actual emergencies, the licensee's use of the subject nonstandard terminology could lead to substantive communications problems when interfacing with the NRC and other Federal agencies. The desirability of using standard terminology whenever possible in emergency response communications has long been recognized, and is reflected most conspicuously in the requirement that all nuclear power plant licensees must use standard nomenclature for the four emergency classes associated with their classification scheme.

#### FPL Response

FPL approved Revision 27 to the Turkey Point Radiological Emergency Plan on March 28, 1994. FPL has determined that the changes to the Turkey Point Radiological Emergency Plan resulting from Revision 27 do not decrease the effectiveness of the Turkey Point Radiological Emergency Plan. FPL's rationale for this determination is provided below.

The decision to use Total Whole Body Dose in lieu of Total Effective Dose Equivalent (TEDE) was a conscious decision between FPL and the agencies assigned primary responsibility for public health and safety (State of Florida and risk counties). FPL and the state and local governments felt the use of the term "Total Whole Body Dose" to describe the revised 10 CFR Part 20 and EPA 400-R-92-001 concept of TEDE was preferable to ensure clear and consistent lines of communications are maintained between FPL, the state and local governments, and Federal government agencies. The use of this terminology is considered the most effective means for developing and issuing protective actions, as well as communicating the terminology to decision makers and to the media. As a result, FPL, in concert with the state and local governments, has determined that this change to the Turkey Point Radiological Emergency Plan has not decreased the Turkey Point Radiological Emergency Plan's effectiveness.

Notwithstanding the above, FPL recognizes the desirability of using standard terminology in emergency response communications with Federal agencies. FPL is sensitive to the NRC's concerns regarding the use of standard terminology and considers that the Turkey Point Radiological Emergency Plan contains sufficient information to "convert" from one terminology to the other. FPL itself is extremely familiar with the application of both terminologies and is able to

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communicate with the NRC and other Federal agencies using the "standard terminology."

FPL has discussed the NRC's concern with the use of the "nonstandard terminology" with the State of Florida, Florida Power Corporation, and the involved local governments during the State of Florida Radiological Emergency Preparedness Task Force meeting on August 10, 1994 in Marathon, Florida. The Federal Emergency Management Agency (FEMA) and the NRC were present at that meeting. Consensus was achieved on the terminology to be used to describe the revised dose concept. "Total Dose (TEDE)" and "Thyroid Dose (CDE)" will be used in lieu of "Total Whole Body Dose" and "Thyroid Dose." Involved parties concluded that this would minimize the potential for confusion between the state, counties, utilities, Federal agencies, and the media.

FPL intends to include the above described change in the next revision of the Turkey Point Radiological Emergency Plan.