



UNITED STATES
 NUCLEAR REGULATORY COMMISSION
 REGION II
 101 MARIETTA STREET, N.W.
 ATLANTA, GEORGIA 30323

APR 20 1990

Report Nos.: 50-280/90-15 and 50-281/90-15

Licensee: Virginia Electric and Power Company
 Glen Allen, VA 23060

Docket Nos.: 50-280 and 50-281

License Nos.: DPR-32 and DPR-37

Facility Name: Surry 1 and 2

Inspection Conducted: March 19-23, 1990

Inspector: W. M. Sartor 4/20/90
Date Signed

Approved by: W. H. Rankin 4/20/90
Date Signed
 W. H. Rankin, Chief
 Emergency Preparedness Section
 Emergency Preparedness and Radiological
 Protection Branch
 Division of Radiation Safety and Safeguards

SUMMARY

Scope:

This routine, announced inspection was conducted in the area of emergency preparedness. Several aspects of the emergency preparedness program were inspected to determine if the program was being maintained in a state of operational readiness for responding to emergencies. This included a review of training, changes to the emergency organization, distribution of changes to the Emergency Plan and Emergency Plan Implementing Procedures (EPIPs), audit reports, staff augmentation, and the maintenance of selected equipment.

Results:

Within the areas inspected, no violations or deviations were identified. The Surry emergency preparedness program was being effectively maintained. Program strengths included the increased emergency preparedness staffing level at both corporate and site, and the increased management support and attention to improving emergency staff augmentation times. All areas inspected were indicative of a program being well maintained with the exception of some document control problems (Paragraph 3).

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REPORT DETAILS

1. Persons Contacted

Licensee Employees

- *W. Benthau, Supervisor, Licensing
- *R. Bilyen, Licensing Engineer
 - E. Castillo, Chemistry Response Team Leader
 - D. Cobb, Control Room Operator/Communicator
 - J. Collins, Director, Emergency Preparedness
- *J. Costello, Station Coordinator, Emergency Planning
- *E. Grechick, Assistant Station Manager
- *D. Hart, Supervisor, Quality Assurance
 - T. Hartwell, Engineering Technician
 - W. Henry, Shift Supervisor
- *E. Smith, Jr., Manager, Quality Assurance
- *W. Thorton, Director, Health Physics and Chemistry
 - D. White, Shift Supervisor
 - L. White, Senior Fire Protection Specialist

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- *D. Collins, Chief, Emergency Preparedness and Radiological Protection Branch
- *J. York, Resident Inspector
- *Attended exit interview

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 8 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 (January 1990), 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 in accordance with licensee procedures. A review of the licensee's Letters of Agreement with offsite emergency response organizations indicated the letters required renewal in accordance with the two year period established for updating the letters. Further review with the corporate emergency planning staff revealed that the licensee had already requested the updating of the letters of agreement from the offsite emergency response organizations.

The inspector also reviewed the Emergency Telephone Directory referenced in EPIP 3.01 that would be used by the Security personnel for the callout of emergency response personnel. The Emergency Telephone Director was found to be current and the Security personnel on duty appeared to understand fully their responsibilities in performing the callout.

No violations or deviations were 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.

An assessment of the state of operational readiness of emergency equipment and instrumentation was made by reviewing selected surveillance test procedures (STPs). The STPs selected were 55.4, Emergency Communication Test; 55.5, Early Warning System Polling Function; and 55.6, Early Warning System Siren Activation Monitoring Test. The results of the STPs reflected equipment that was fully functional in most instances, with the exceptions being identified for prompt corrective action. While reviewing the STPs, the inspector noted there appeared to be several months of missing reports, particularly for the Emergency Communications Test. Additional searching provided the missing STPs; however, it was apparent that the administrative processing of STPs did not provide for adequate tracking. This issue was discussed with licensee representatives and the inspector was informed a new program was pending approval that would improve upon the Periodic Test Tracking System currently being used.

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 EIPs.

The organization and management of the emergency preparedness program were reviewed and discussed with licensee representatives. The more significant changes in the management of the emergency preparedness program had occurred at the corporate level during 1989. Prior to the management changes the Supervisor of Emergency Preparedness reported to the Manager, Nuclear Programs who reported to the Vice President of Nuclear Services. The Vice President of Nuclear Services position was filled in June 1989, and in November 1989 the Supervisor of Emergency

Preparedness position was upgraded to Director level with the Director of Emergency Preparedness reporting directly to the Vice President of Nuclear Services. Additional upgrading of the corporate emergency preparedness staff has been the doubling of the staff to 10 personnel. The increased corporate staff has increased the support available to the site, particularly in the area of scenario development. Changes to the site emergency preparedness staff closely parallels the corporate restructuring with the site staff doubling from one to two and the Station Coordinator Emergency Planning position being elevated one level. The more significant change because of its effect upon emergency planning was the management realignment of the Chemistry Department reporting to the Superintendent Radiation Protection vice the Technical Services Superintendent. A parallel change was made in the emergency organization with the Chemistry team now reporting to the Radiological Assessment Coordinator. This change now permits both the health physics and chemistry team personnel to be directed by the same Coordinator, thus improving the health physics/chemistry coordination. The site EIPs provided for the aforementioned changes.

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. The effectiveness of this formal program was evaluated by walkthroughs with selected personnel and a walkthrough one evening starting at approximately 7:30 p.m. of the on duty staff that would become the initial emergency response organization if an emergency were to occur. All of the personnel interviewed were aware of their emergency assignments and responsibilities. A review of the training records for these personnel the next day documented that their training was complete and current. Additional training records were reviewed by choosing three positions at random from EPIP 3.02, titled TSC Activation, and then verifying the status of training from the personnel on the callout list who would have been called in to fill the selected positions. Again, all required training was found to be current.

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.

The inspector had reviewed the audit reports during the previous inspection (January 8-12, 1990) with the exception of Audit Report No. 90-01 which was conducted January 8-29, 1990. A review of this report identified only one Surry finding relative to Fitness for Duty. The inspector noted that the Station Coordinator Emergency Planning had initiated corrective action.

No violations or deviations were identified.

7. Action on Previous Inspection Findings (92701, 92702)

- a. (Closed) Violation 50-280, 281/89-09-04: Failure to meet the augmentation staff requirements within the time periods specified in Table 5.1 of the Station Emergency Plan.

The licensee response dated June 12, 1989, was considered acceptable by Region II. The licensee stated that notifications had been prioritized, corporate callout procedures had been prioritized, and additional personnel had been designated to staff specific positions where discrepancies in response times had been noted. The inspector reviewed the completed surveillance test procedures (STP) of the seven most recent callout drills and reviewed the licensee evaluation of the emergency response organization's composition. The inspector was also informed that two personnel had been relocated to insure the augmentation of a key Table 5.1 position. The corrective actions stated in the licensee response had been implemented, and the STP results of the most recent test had been fully successful. Additionally, the inspector noted that the licensee had selected random times to include weekends to conduct their augmentation drill callouts to better evaluate their program. The licensee had also initiated the use of pagers for key personnel which has also improved response times.

- b. (Closed) IFI 50-280, 281/87-29-12: Improved command and control of the offsite monitoring teams. The inspector reviewed the licensee's procedures and interviewed selected personnel designated as the Radiological Assessment Coordinator and the Field Team Radio Operator. Personnel were fully aware of the procedures in place for maintaining command and control of the offsite monitoring teams.

- c. (Closed) IFI 50-280, 281/89-33-01: Review licensee's corrective action to enhance PAR decision making. The licensee had prepared a flow chart that improved the PAR decision making process for inclusion into EPIP 1.05, Response to General Emergency.

8. Exit Interview

The inspection scope and findings were summarized on March 23, 1990, with those persons indicated in Paragraph 1 above. The inspector described the areas inspected. The licensee did not identify as proprietary any of the material provided to or reviewed by the inspector during this inspection. Dissenting comments were not received from the licensee. Licensee management was informed that a previous violation and two IFIs discussed in Paragraph 7 were closed during this inspection.