Catawba Nuclear Station
Emergency Plan Implementing Procedures:
RP/0/A/5000/002, Rev 49
RP/0/A/5000/003, Rev 54
RP/0/A/5000/004, Rev 57
RP/0/A/5000/005, Rev 60

Attachment 4
EPIP 10CFR 50.54(q) Evaluations and screens



#### **ACTION REQUEST - 02256570**

### **Action Request Details**

Type

: EREG

Orig Date : 02/07/2019 08:21

Discovery Date :

**Subject** 

: RP/0/A/5000/002 REV 49

Description

CONTACT SITE EP SUPERVISOR FOR ASSISTANCE IN PREPARING EP01, EP02, AND EP03. ENSURE EREG IS CROSS-REFERENCED TO THE REG AR WHICH INITIATED IT. COMPLETE 50.54(Q) SCREEN AND EVALUATION IF REQUIRED

**Notes** 

**Priority** 

Report To

Status: APPROVED 02/07/2019

Severity

**Due Date** 

: 03/10/2019

**Event Date** 

Originator Facility

: 144004

**Originator Group** 

Department

: 13650

Organization

Owed To

:CN

**Owed To Group** 

: QUALREVW

Owed To Fac : CN

Department

Discipline

#### **Action Request Status History**

Updated Date	Updated By	AR Status	AR Due Date
02/07/2019	144004	INPROG	02/11/2019
02/07/2019	I44004	APPROVED	
02/25/2019	144004		02/25/2019
02/25/2019	144004		· 03/10/2019

#### **Action Request Attributes**

Request Attribute

**Values** 

N

Reqd

**Date** 

**BOUNDED EREG AR** 

Name: STACI N WHITE

Request Attribute

**EREG AR CROSS XREF** 

**Values** 

Reqd

Date 02/07/2019

02/07/2019

Name : STACI N WHITE

Reqd

Date

Request Attribute **REG AR CROSS XREF**  **Values** Ν

02/07/2019

Name : STACI N WHITE

: 02/25/2019 Printed

Page



**ACTION REQUEST - 02256570** 

Action	Request	Notes
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**Action Request Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

**Updated On Updated By** 

Updated On

Time

**Updated By** 

**Action Request Approval Review** 

Route List: : 001

Send

Send Action

Route List Initiator : Action

**Passport** 

Group

Type Date Time

Taken

Date

Last Name

**Action Request Trend/Cause** 

**Action Request Keywords** 

Keyword

**Keyword Description** 

**Action Request Reference Documents** 

Doc

Sub

Minor

Facility Type

Type

Document

Sheet Rev Rev Title

**Action Request Reference Equipment** 

Equip Equip

Equip

Equip

Rev

Facility Unit

Tag

Status

System Type

Number

Rev **Status** 

Printed

: 02/25/2019

Page



### **ACTION REQUEST - 02256570**

### **Action Request Cross References**

Ref	Ref	Ref Ref Nbr		Limit
Type	Nbr	Sub Type	Status	AR Cls Description
AR	02218775	5AD	COMP-NA	N RP/0/A/5000/002 - 0000215962
				NOTIFICATION OF UNUSUAL EVENT
AR	02256533	PRR	COMPLETE	E N RP/0/A/5000/002 rev 049
AS.	02187203	1900 GNRL	COMPLETE	E N EP Excellence Plan - Action SD-EP-4.2
AS -	02194997	0200 PI	COMPLETE	N Revise AD-EP-ALL-0602 to improve
				templates to focus on why a

#### **Action Request Assignment Details**

ASSIGNMENT NUMBER : 01 SUB :

Assigned To : STAC! N WHITE Sec Resp Fac : 50.54(Q) SCREEN Sec Resp Group :

Aff Facility : CN Unit : System

UCR : Schedule Ref :

Organization : Department : 13650 Discipline :

Est Manhrs : Ext Comp Date :

Description

COMPLETE 50.54(Q) SCREEN IN ACCORDANCE WITH AD-EP-ALL-0602.

#### **Action Request Assignment Completion Notes**

I have reviewed the 50.54 screen for RP/0/A/5000/002 rev 49. I approve the screening.

# **Action Request Assignment Status History**

Updated Date	<b>Updated By</b>	Assgn Status	Assgn Due Date
02/07/2019	144004	INPROG	
02/07/2019	144004		02/11/2019
02/07/2019	144004	NTFY/ASG	
02/07/2019	144004	ACC/ASG	



#### ACTION REQUEST - 02256570

02/07/2019

144004

AWAIT/C

02/08/2019

**MEHARE** 

**COMPLETE** 

#### **Action Request Assignment Attributes**

### Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

Updated On

Updated By

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

Updated On

Updated By

\*\*\* No Return Comments Found \*\*\*

#### **Action Request Assignment Completion Approval**

Route List : 001

Route List Initiator : 144004

Send

Send

Action

Time

**Passport DMBRUNS**  Group Type Α

Date Time 02/07/2019 13:49 Taken Date APPROVED 02/08/2019 14:12 BRUNSON

**Last Name** 

**MEHARE** 

Α 02/08/2019 14:12 APPROVED 02/08/2019 15:40 HARE

Action

Action Request Assignment Cause/Action

#### **Action Request Assignment Reference Documents**

Doc

Sub

Minor

Facility

Type Type Document

Sheet Rev

Title

# Action Request Assignment Reference Equipment

Equip Equip

Equip

Equip

Rev

Facility Unit

System Type

Number

Tag

Status

**Status** Rev

Printed

: 02/25/2019

Page



# ACTION REQUEST - 02256570

**Action Request Assignment Cross References** 

Ref Ref

Ref Ref Nbr

Limit

Type Nbr

Sub Type

Status

AS CIs Description

**Action Request Assignment Appendices** 

APPENDIX 1

Printed : 02/25/2019

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EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4 Page 1 of 8

# << 10 CFR 50.54(q) Screening Evaluation Form >>

Screening and Evaluation Number	Applicable Sites	
	BNP	
EREG #:2256570	CNS	Х
	CR3	
	HNP	
	MNS	
5AD #2218775	ONS	
	RNP	
	GO	
Document and Revision RP/0/A/5000/002, Notification of Unusual Event, Rev 49 (PRR 2256533)		
Part I. Description of Activity Being Reviewed (event or action, or series of activity plan or affect the implementation of the emergency plan):	ctions that may result in a change t	o the
Enclosure 4.2, Command and Control Turnover Briefing Form, was revised to Turnover Form in AD-EP-ALL-0104, ERO Common Guidelines and Forms.	o align with the Command and Cor	ntrol
Specific Changes are:  Added: "Mode Shutdown Date: Time: " to Added: "Take Cover Order: ÝES NO TIME: "  Added: "Rapid Evacuation: YES NO TIME: "  Added: "Last ENF Number: "  Added: "Continuous Communications with NRC Established: YES NO"	each of the Unit Status blocks	
Deleted: "[] Stable [] Degrading [] Improving" from each of the Unit Status b Deleted: "ERDS Activated: Yes No N/A" from each of the Unit Status blo		
Changed: "Turnover: (From): [] CR / [] TSC" to "(From): [] CR / [] TSC/ [] EO Changed: "(TO) [] TSC / [] EOF" to "(TO) [] CR / [] TSC/ [] EOF Changed: "Units(s) Affected (circle) [] All []1 []2 []3" to "Units(s) Affected (circle) Changed: "Last ENF Sent (time): " to "Last Notification completed (time Changed: "Last Message Sent (time): " to "Notified (time): "	rcle) []1 []2 []3"	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4
Page 2 of 8

# << 10 CFR 50.54(q) Screening Evaluation Form >>

	Enclosure 4.2 command and Control Turnover Briefing	RP/D/A/5000/002 g Form Page 1 of 2			
Station: ( ) CNS ( ) MNS ( ) ONS ( ) BR	P ()HRP ()RMP	Tunover: (circle) (From):   C/R /  TSC			
Unit(s) Affected: (circle) ( ) All ( ) 1 ( )2(	)3	(TO) 🗆 TSC / 🗆 EOF 🗈 Shift Change			
Emergency Classification: Unusual Event declared	atEAL#:Afert Dec	clared at:EAL#:			
Site Area Emergency declared at:	EAL#: General Emergency D	eclared at:EAL#:			
A. C. Unital	12 12 13 13 13 14 15 16 2 14 E 14	L. Unit 3			
Rx Power Cont. Rx Cool Rx Cool Press Temp Press		of Press Rx Power Cont. Rx Cool Rx Cool Press Temp Rx Cool Pres			
☐ Stable ☐ Degrading ☐ Improving	D Stable D Degrading D Improving	☐ Stable ☐ Degrading ☐ Improving			
FPB Status (circle appropriate condition)	FPB Status (circle appropriate condition)	FPB Status (circle appropriate condition)			
Fuel Intact Potential Loss Loss	Fuel Intact Potential Loss Loss	Fuel Intact Potential Loss Loss			
RCS Intact. Potential Loss Loss	RCS Intact Potential Loss Loss	RCS Intact Potential Loss Loss			
Cont Infact Potential Loss Loss Major Equipment Out of Service:	Cont Infact Potential Loss Loss Major Equipment Out of Service:	Cont Intact Potential Loss Loss Major Equipment Out of Service:			
waya Equipment Out or detrice.	norgo Espajanean enten sentene.	пады Ецарпен Онго Зетте.			
Evolutions in Progress:	Evolutions in Progress:	Evolutions in Progress:			
-					
ERDS Activated: Yes No NVA	ERDS Activated: Yes No NA	ERDS Activated: Yes No N/A			
Response Procedures in Progress (optional):	EOP/APs in Progress				
		··			
Station Priorities:		· · · · · · · · · · · · · · · · · · ·			
Site Assembly: YES NOTME:	Other Agency	hrolveneu:			
SIGNOCHIST SEC. IN SHIRE		DIFFRE DILAW ENFORCEMENT DIOTHER			
Site Evacuation: YES NO TIME:	LI INZULAL				

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4
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# << 10 CFR 50.54(q) Screening Evaluation Form >>

Enclosure 4.2 Command and Control Turnover Briefing Form	RP/ <b>0</b> /A/5000/002 Page 2 of 2
RadioTogical: Emergency Worker dose limits approved: YES NO Who	ì
Off-Site Notifications: Last ENF Sent (time): Next ENF Due (time):  NRC Communication: Last Message Sent (time):  Have Communicators discussed Turnover with acquiring facility Communicators? YES NO	
Upon the transfer of Command and Control, the following will be performed by:  Event Classification:	
Name of Individual turning over Duties:	fules

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	. Rev. 5

ATTACHMENT 4
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# << 10 CFR 50.54(q) Screening Evaluation Form >>

											_	
						sure 4.2					RP/ <b>0</b> /A/500	
			Со	mmand ar	id Control	Turnover l	Briefing	Form			Page 1 of 2	
Station: (	) CNS () N	NS ()ON	s () ENP	( ) HNP	()RNF	·		Turno	ver: (F	rom): 🛘 CR	/ 🗆 TSC /	CI EOF
	ected: (circle)	<b>D1 D</b>	2 🛮 3						£1		I D TSC /	□ EOF
Unit(S) An	ected: (cucie)										ift Change	
Emergeno	y Classification	: Unusual Ev	ent Declared a	t	EAL#		Aleri	Declare	d at:	EAL#		
		Site Area E	mergency Dec	lared at:	EA	Ĺ# <u>.</u>	Gene	eral Eme	rgency Decla	redat:	EAL#	
	Ü	nat i		gampyangy anny Manadana landi	The years of	Unit 2	A STATE OF STATE	المعالمة الم	ىسىنىچىدۇر يىسىپ رىسىنچىيىدۇرىدىدۇ			
Rx Power	Cont	Roc Cool Temp	Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool	Press	Por Power	Cont. Press	Rx Cool Temp	Rx Cool Pres
-												
Mode	Shutdown	Date:Ti	mec	Mode_	Shutdov	vn Date:	_Time:		Mode	Shuldow	n Date:	Time:
FPB Status (circle appropriate condition)			FPB Status	s (circle app	ropriate cond	tion)		FPB Status	circle appr	opriate condi	tion)	
Fixel 1	ntact Potentia	f Loss Loss		Fuel in	lad Poter	ntiai Loss C	055			laci Poleni		OSS
RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss				tact Poler lact Poler		oss oss			laci Poleni laci Poteni		oss oss	
	nizet Possision ripment Out of S				pment Out of		033			pment Out of S		
Evolution	s in Progress:			Evolutions	in Progress:				Evolutions	in Progress:		
		<u>,</u>				T EOP/APs is	Program	(antion)				
Response	Procedures in l	andless (chicu	qr)r			EUT/MES B	e L (OR)	foheres				

# EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)

AD-EP-ALL-0602

Rev. 5

ATTACHMENT 4
Page 5 of 8

# << 10 CFR 50.54(q) Screening Evaluation Form >>

	<del></del>		· · · · · · · · · · · · · · · · · · ·	
Enclosure 4.2	RP/	0/A/50	000/002	
Command and Control Turnover Briefing Form	Pag	e 2 of 2	t.	ļ
Site Assembly: YES NO TIME: Location/Comments: Other Agency Invo Site Evacuation: YES NO TIME: DMEDICAL DIF Take Cover Order: YES NO TIME: Additional Informatix Rapid Evacuation: YES NO TIME:	IRE ILLAW ENFOR	CEMEN	T DOTHER	
Radiological: Emergency Worker dose limits approved: YES NO For whom:	<del></del>			_
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Number				
Release Pathway: WIND SPEED: WIND DIRECTION:	····			
Offsite PARS Recommended: YES NO Zones Evacuated: Zones Sheitered				
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose Assessors discussed 1	umover? YES NO			
Off-Site Notifications: Last Notification Completed (time): Last ENF Number. Next EN	IF Due (time):			
NRC Communication: Notified (time): Continuous Communications with NRC	Established: YES	NO		A CONTRACT
Have Communicators discussed Tumover with acquiring facility Communicators? YES NO				
Upon the transfer of Command and Control, the following will be performed by:	-			
Event Classification: Q CR Q TSC PAR Decision Making: Q CR Q TSC Q EOF State and Local Notification: Q CR Q TSC Q EOF NRC Notifications: Q CR Q TSC				
State and Local Notification: DCR DTSC DEOF NRC Notifications: DCR DTSC  Emergency Exposure Controls & KI: DCR DTSC Control of FATS: DCR DTSC DEOF				
Dose Assessment: D CR D TSC D EOF				ė,
Name of Individual turning over Duties:				
Name to manage an angular buses.				
Turnover Complete: YES NO TSC / EOF Activated at	idual assuming duties	<u></u>		
Additional Information:	<b>-</b>			
		J.,	ر در	
Part II. Activity Previously Reviewed?	Yes		No	Χ.
Is this activity Fully bounded by an NRC approved 10 CFR 50.90 submittal or	10 CFR 50.5	4(q)	Continue	to
Alert and Notification System Design Report?	Effectiveness		Attachme	nt 4,
If yes, identify bounding source document number or approval reference and	Evaluation is required. En		10 CFR 50.54(q)	
ensure the basis for concluding the source document fully bounds the proposed	justification		Screening	g
change is documented below:	below and		Evaluatio	
h	complete Attachment 4	ı	Form, Pa	IT 111
Justification:	Part V.	.,		
Bounding document attached (optional)			· · · · · ·	
and the second of the second o		1 Fry 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	د از دول در از دول در از دول در د در دول در دو	g <mark>i sasa</mark> a

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
	Rev. 5

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Page 6 of 8

# << 10 CFR 50.54(q) Screening Evaluation Form >>

Part	III. Editorial Change	Yes		No	X
para	s activity an editorial or typographical change only, such as formatting, graph numbering, spelling, or punctuation that does not change intent?	10 CFR 50.5 Effectivenes Evaluation is required. En	s not	Continue Attachme Part IV ar address r	nt 4, nd
Justi	fication:	justification		editorial	1011
		complete Attachment	4,	changes	
nation maker to		Part V.	Factor represent the section	w or skylectrical and a constitution of process	and ordered "at his relic
		in all in the		28.5	
Scre	IV. Emergency Planning Element and Function Screen (Reference Attachme ening Criteria)	·			_
	s this activity involve any of the following, including program elements from N fanswer is yes, then check box.	UREG-0654/I	FEMA	REP-1 Se	ction
10	10 CFR-50.47(b)(1) Assignment of Responsibility (Organization Control)				ار آن آن آن معاملات شانت
1a	Responsibility for emergency response is assigned.				Х
1b	The response organization has the staff to respond and to augment staff on (24-7 staffing) in accordance with the emergency plan.	a continuing	basis		
2	10 CFR 50 47(b)(2) Onsite Emergency Organization				
2a	Process ensures that onshift emergency response responsibilities are staffe	d and assign	ed		
2b	The process for timely augmentation of onshift staff is established and main	tained.			
3	10 CFR 50 47(b)(3) Emergency Response Support and Resources				
3a	Arrangements for requesting and using off site assistance have been made				
3b	State and local staff can be accommodated at the EOF in accordance with t (NA for CR3)	he emergenc	y plan		
4	10 CFR 50:47(b)(4) Emergency Classification System		2547		
4a	A standard scheme of emergency classification and action levels is in use. (Requires final approval of Screen and Evaluation by EP CFAM.)				
5	10 CFR 50:47(b)(5) Notification Methods and Procedures				
5а	Procedures for notification of State and local governmental agencies are ca declared emergency within 15 minutes (60 minutes for CR3) after declaration providing follow-up notification.				
5b	Administrative and physical means have been established for alerting and p to the public within the plume exposure pathway. (NA for CR3)	providing pron	npt ins	tructions	
5c	The public ANS meets the design requirements of FEMA-REP-10, Guide fo Notification Systems for Nuclear Power Plants, or complies with the license design report and supporting FEMA approval letter. (NA for CR3)				

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EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Screening Evaluation Form >>

Part IV. Emergency Planning Element and Function Screen (cont.)			
6	10 CFR 50:47(b)(6) Emergency Communications		
6a	Systems are established for prompt communication among principal emergency response organizations.		
6b	Systems are established for prompt communication to emergency response personnel.		
7	10 CFR 50 47(b)(7) Public Education and Information		
7a	Emergency preparedness information is made available to the public on a periodic basis within the plume exposure pathway emergency planning zone (EPZ). (NA for CR3)		
7b	Coordinated dissemination of public information during emergencies is established.		
8	10 CFR 50 47(b)(8) Emergency Facilities and Equipment		
8a	Adequate facilities are maintained to support emergency response.		
8b	Adequate equipment is maintained to support emergency response.		
9	10 GFR 50.47(b)(9) Accident Assessment		
9a	Methods, systems, and equipment for assessment of radioactive releases are in use.		
10	10 CFR-50:47(b)(10) Protective Response		
10a	A range of public PARs is available for implementation during emergencies. (NA for CR3)		
10b	Evacuation time estimates for the population located in the plume exposure pathway EPZ are available to support the formulation of PARs and have been provided to State and local governmental authorities. (NA for CR3)		
10c	A range of protective actions is available for plant emergency workers during emergencies, including those for hostile action events.		
10d	KI is available for implementation as a protective action recommendation in those jurisdictions that chose to provide KI to the public.		
77	10 CFR 50:47(b)(11) Radiological Exposure Control		
11a	The resources for controlling radiological exposures for emergency workers are established.		
12	10 GFR 50.47(b)(12) Medical and Public Health Support		
12a	Arrangements are made for medical services for contaminated, injured individuals.		
13	10 CFR 50.47(b)(13) Recovery Planning and Post-accident Operations		
13a	Plans for recovery and reentry are developed.		
14	40 GFR 50.47(b)(14) Drills and Exercises		
14a	A drill and exercise program (including radiological, medical, health physics and other program areas) is established.		
14b	Drills, exercises, and training evolutions that provide performance opportunities to develop, maintain, and demonstrate key skills are assessed via a formal critique process in order to identify weaknesses.		
14c	Identified weaknesses are corrected.		
15	10 CFR-50 47(b)(15) Emergency Response Training		
15a	Training is provided to emergency responders.		

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4 Page 8 of 8

# << 10 CFR 50.54(q) Screening Evaluation Form >>

Part I	V. Emergency Planning Element and Function Screen (cont.)	
<u>16</u>	10 CFR 50.47(b)(16) Emergency Plan Maintenance	
16a	Responsibility for emergency plan development and review is established.	
16b	Planners responsible for emergency plan development and maintenance are properly trained.	
PART	T IV. Conclusion	
If no I	Part IV criteria are checked, then provide Justification and complete Part V below.	
Justif	fication:	
If any Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV criteria are checked, then complete Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part V and perform a 10 CFR 50.54(q)		
Effec CFAI	tiveness Evaluation. Program Element 4a requires final approval of Screen and Evaluation by EP M.	Х

Part V Signatures: EP CFAMIFinal Approval is required for changes af then mark the EP CFAM signature block as not app	fecting Program Element 4a :If CFAM appro licable (N/A) to indicate that signature is not	val is NOT required,
Preparer Name (Print):	Preparer Signature:	Date:
Staci White	See CAS	See CAS
Reviewer Name (Print):	Reviewer Signature:	Date:
See CAS	See CAS	See CAS
Approver (EP Manager Name (Print):	Approver Signature:	Date:
See CAS	See CAS	See CAS
Approver (EP CFAM, as required) Name (Print) N/A	Approver Signature: N/A	Date: N/A

QA RECORD



#### ACTION REQUEST - 02256570

### **Action Request Assignment Details**

ASSIGNMENT NUMBER : 02 SUB :

Status : COMPLETE Reschedule : Pri Resp Group
Assigned To : STACI N WHITE Sec Resp Fac

Subject : 50.54(Q) EVALUATION Sec Resp Group :

Aff Facility : CN Unit : System

UCR : Schedule Ref :

Organization : Department : 13650 Discipline

Est Manhrs : Ext Comp Date :

Description

COMPLETE 50.54(Q) EVALUATION IN ACCORDANCE WITH AD-EP-ALL- 0602.

### **Action Request Assignment Completion Notes**

I approve the 50.54Q eval for RP/0/A/5000/002.

# Action Request Assignment Status History

Updated Date	Updated By	Assgn Status	Assgn Due Date
02/07/2019	144004	INPROG	
02/07/2019	144004		02/11/2019
02/07/2019	144004	NTFY/ASG	
02/07/2019	l44004 '	ACC/ASG	
02/07/2019	144004	AWAIT/C	
02/08/2019	DMBRUNS	ACC/ASG	
02/08/2019	144004	AWAIT/C	
02/08/2019	DMBRUNS	ACC/ASG	
02/08/2019	144004	AWAIT/C	·
02/08/2019	MEHARE	COMPLETE	•

#### Action Request Assignment Attributes



#### ACTION REQUEST - 02256570

# Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

Minor editorial comment. DMB Minor editorial comment. DMB

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

Updated By

20190208 20190208

**DMBRUNS** 

**DMBRUNS** 

**Last Name** 

Updated On

**Updated By** 

### Action Request Assignment Completion Approval

Route List : 001

Route List Initiator : 144004

Time

Send Send Action Action **Passport** Group Type Date Time Taken Date

**DMBRUNS** 02/08/2019 14:06 APPROVED 02/08/2019 14:13 **BRUNSON** Α **DMBRUNS** Α 02/08/2019 13:53 RETURNED 02/08/2019 14:02 BRUNSON **DMBRUNS** Α 02/07/2019 13:52 RETURNED 02/08/2019 13:48 **BRUNSON** APPROVED 02/08/2019 15:44 HARE **MEHARE** Α 02/08/2019 14:13

Action Request Assignment Cause/Action

**Action Request Assignment Reference Documents** 

Doc

Sub

Minor

Facility

Type

Type **Document**  Sheet Rev Rev Title

Action Request Assignment Reference Equipment

Equip Equip

Equip

Equip

Rev

Facility Unit System Type

Number

Tag

**Status** 

Status Rev

**Action Request Assignment Cross References** 

Ref

Ref

Ref Ref Nbr

Limit

Type Nbr Sub Type Status

AS Cls Description

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: 15



ACTION REQUEST - 02256570

**Action Request Assignment Appendices** 

APPENDIX 1

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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ATTACHMENT 5 Page 1 of 10

# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Screening and Evaluation Number				
EREG #:2256570       CNS       X         CR3       □         HNP       □         5AD #:2218775       ONS       □         RNP       □         Document and Revision       □				
CR3       □         HNP       □         MNS       □         5AD #:2218775       ONS       □         RNP       □         GO       □         Document and Revision				
HNP □  MNS □  5AD #:2218775				
5AD #:2218775 ONS □  RNP □  GO □  Document and Revision				
5AD #:2218775				
RNP ☐ GO ☐ Document and Revision				
GO Document and Revision				
Document and Revision				
Part I. Description of Proposed Change:				
Enclosure 4.2, Command and Control Turnover Briefing Form, is being revised to align with the Command and Control Turnover Form in AD-EP-ALL-0104, ERO Common Guidelines and Forms.				
Specific Changes are:				
Added: "Mode Shutdown Date: Time: " to each of the Unit Status blocks				
Added: "Take Cover Order: YES NO TIME:" Added: "Rapid Evacuation: YES NO TIME:"				
Added: "Last ENF Number:"				
Added: "Continuous Communications with NRC Established: YES NO"				
Deleted: "[] Stable [] Degrading [] Improving" from each of the Unit Status blocks Deleted: "ERDS Activated: Yes No N/A" from each of the Unit Status blocks				
Changed: "Turnover: (From): [] CR / [] TSC" to "(From): [] CR / [] TSC/ [] EOF"  Changed: "(TO) [] TSC / [] EOF" to "(TO) [] CR / [] TSC/ [] EOF				
Changed: "Units(s) Affected (circle) [] All []1 []2 []3" to "Units(s) Affected (circle) []1 []2 []3"				
Changed: "Last ENF Sent (time):" to " Last Notification completed (time):"				
Changed: "Last Message Sent (time):" to "Notified (time):"				

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

c	Enclosure DIMIDAND and Confrol Tu			RP/0/A/5000/002 Page 1 of 2
Station: ( ) CNS ( ) MNS ( ) ONS ( ) BNI Unit(s) Affected: (circle) ( ) All ( ) 1 ( ) 2( )		Terno	(то) 🗆	C/R / D TSC TSC / D EOF
<del></del>				Shift Change
Emergency Classification: Unusual Event declared				
Site Area Emergency declared at:		-		
L Unit 1	The Laboratory	U-l:2		Unit 3
Rx Power Cont. Rx Cool Rx Cool Press Temp Press	Dy Pourer Cont. R	x Cool Proces	Dy Posser Cont.	Rx Cool Br Cool Prov
Pleas Temp Pleas	Press	Temp Ru Courriess	Press	Temp Ra Courte
☐ Stable ☐ Degrading ☐ Improving	D Stable D Degrading	☐ improving	🛘 Stable 🗘 Degradir	ng 🖸 Improving
FPB Status (circle appropriate condition) FPB Status (circle appropriate condition)			FPB Status (circle appre	opriate condition)
Fuel Infact Potential Loss Loss	Fuel Intact Potential L		Fuel Intact Potent	al Loss Loss
RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss	RCS Intact Potential L.		RCS Intact Potent	
Major Equipment Out of Service:	Cont Intact Potential L Major Equipment Out of Servi	oss Loss	Cont Intact Potent Major Equipment Out of 9	
			major Edupations Cocare	JOSTROG
Evolutions in Progress:	Evolutions in Progress:		Evolutions in Progress:	
ERDS Activated: Yes No N/A	ERDS Activated: Yes N	o N/A	ERDS Activated: Yes	No N/A
Response Procedures in Progress (optional):	EC	P/APs in Progress (options	l)	- +
Station Priorities:		<del></del>		
	<del></del>			<del></del>
Site Assembly: YES NOTIME		Other Agency brooken		
Site Evacuation: YES NOTATE:		DIMEDICAL DIFFRE	D LAW ENFORCEMEN	T DOTHER
Location/Comments:		Additional Information (Is	ijuries):	
Ŷ		4		

Printed : 02/25/2019

EMERGENCY PLAN CHANGE SCREENING AND	
<b>EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q</b>	)

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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Enclosure 4.2  Command and Control Turnover Briefing Form	RP/ <b>0</b> /A/5000/002 Page 2 of 2
Radiological: Ernergency Worker dose limits approved: YES NO Who	
Refease in Progress: YES NO Field Monitoring Teams Deployed: YES NO Number	
Release Pathway. WIND SPEED: WIND DIRECTION:	_
Offsite PARS Recommended: YES NO Zones Evacuated: Zones Sheltered:	
Il Recommended: YES NO Current Dose Run Available: YES NO Have Dose Assessors discussed Turnover? YES NO	
Off-Site Notifications: Last ENF Sent (time): Next ENF Due (time):	
NRC Communication: Last Message Sent (time):	
lave Communicators discussed Turnover with acquising facility Communicators? YES NO	
Upon the transfer of Command and Control, the following will be performed by:	
Event Classification:	
State and Local Notification: Q CR Q TSC Q EOF NRC Notifications: Q CR Q TSC	
Emergency Exposure Controls & KI:   CR DTSC Control of FMTs:   CR DTSC DEOF  CONTROL OF FMTs:   CR DTSC DEOF	•
Name of Individual turning over Duties:	
Furnover Complete: YES NO TSC/EOF Activated at:  (circle) (circle) Time Date Hame individual assuming	ı duties
Additional Information:	, 40.00
	•
	•
	•

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

v 49 Enclosure 4.2							
Co	Ench	osure 4.2 I Turnover F	Briefing Form	ı		RP/ <b>0</b> /A/500 Page 1 of 2	0/002
Station: ( ) CNS ( ) MNS ( ) ONS ( ) ENP Unit(s) Affected: (circle)			Turne		ro) □ CR □ Sh	R / D TSC / E R / D TSC / E ift Change	
Emergency Classification: Unusual Event Declared a Site Area Emergency Dec		#L#:	General Em	• •	sed at:	EAL#:	<del></del>
Rx Power Conf. Rx Cool Rx Cool Press Temp Press	Rx Power Cont. Press	Rx Cool Temp	Rx Cool Press		Cont	Rx Cool Temp	Rx Cool Press
Mode Shufdown Date: Time:  FPB Status (circle appropriate condition)  Fuel Intact Potential Loss Loss  RCS Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:		repriate condit ntial Loss Lo ntial Loss Lo ntial Loss Lo	-	FPB Status Fuel Int RCS Int Cont Int	act Potent	opriate condition Loss Loss Loss Loss Loss Loss Loss Lo	58 58
Evolutions in Progress:  Response Procedures in Progress (optional):	Evolutions in Progress:		Progress (option		in Progress:		
Station Priorities:			· · · · · · · · · · · · · · · · · · ·				

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

	. Сотт	Enclosure 4.2 nand and Control Turnover E	iriefing Form	RP/ <b>0</b> /A/5000/00 Page 2 of 2	2
Site Assembly: YES Site Evacuation: YES Take Cover Order: YES Rapid Evacuation: YES	NO TIME: NO TIME: NO TIME: NO TIME:		Other Agency Involveme  D MEDICAL II FIRE  Additional Information (Inju	DIAW ENFORCEMENT D	OTHER.
	Worker dose limits approved:				
Release in Progress: YES	NO Field Monitoring Teams Dr	eployed: YES NO Number			
Release Pathway:		WIND SPEED:	WIND DIRECTION:		
Offsite PARS Recommended		rated:		•	
Ki Recommended: YES	NO Dose Assessment Availa	ble: YES NO Have Do	se Assessors discussed Turnov	er? YES NO	
Off-Site Notifications:		me): Last ENF Nur		<del></del>	
NRC Communication:	Notified (time):		ommunications with NFAC Estab		
Have Communicators discus	sed Tumover with acquiring facilit	ly Communicators? YES	NO		
Upon the transfer of Comm Event Classification: State and Local Notification: Emergency Exposure Contro Dose Assessment	S&KIL DCR DTSC	PAR Decision Making:  EOF NRC Notifications:  Control of FMTs:	OCROTSCOEOF OCROTSCOEOF		
Name of Individual turning o	ver Duliest				
Timioves Complete: YES (circle Additional Information:		l at Date	Name individual	assuming dulies	·
Bases Validation and	d Verification (V&V) F	Condition (IC) and Eme orm , is attached (requi	red for IC or EAL ch	ange)	Yes C No X
icensing Basis of	the ERO				
	ons A.1.b, Concept o	cribed in the originally a f Operations, A.1.c, Blo			
Revision 150 (dated	September 2017) sec	ignment of Responsibili ctions A.1.b, Concept o I, Key Decision Making.			Section A
have change Operations F	ed (i.e., Shift Supervis Facility), but the indivi	s, the titles of some of the sor to Shift Manager, Cr iduals responsible for C ined the same. The sum	isis Management Co ommand and Contro	enter to Emergency ol and the transfer pro	ocess for

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EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

not reduce the effectiveness of the CNS Emergency Plan when compared to the NRC-approved Plan.

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 2, lists RP/0/A/5000/002, as an implementing procedure. (AD-EP-ALL-0104 had not been created when the CNS Emergency Plan was initially approved by the NRC.)

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 147, lists RP/0/A/5000/002, and AD-EP-ALL-0104 as implementing procedures.

### List Commitments Associated with the Change

A search to identify site specific commitments related to the ERO positions and their assigned responsibilities was performed. No site specific commitments were identified aside from those in the Emergency Plan.

RG 1.219 Guidance on Making Changes to Emergency Plans for Nuclear Power Reactors, Rev 1. (July 2016) 3.5 Emergency Plan

- a. "Emergency plan" means the document(s) that the licensee prepared and maintains that identifies and describes its methods for maintaining emergency preparedness and responding to emergencies. An emergency plan includes the plan that the NRC originally approved and all subsequent changes that the licensee made with and without prior NRC review and approval under 10 CFR 50.54(q). See 10 CFR 50.54(q)(1)(ii) for additional information.
- b. This definition highlights that "emergency plan" includes the documents that describes the programmatic methods that the licensee uses to maintain emergency preparedness and to respond to emergencies. These methods, or program elements, are the implementation aspects of the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50 and generally correspond to the evaluation criteria of NUREG-0654 or approved alternatives that supply specific acceptable methods for complying with the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50. Such programmatic documents are subject to the 10 CFR 50.54(q) change process. Non-programmatic documents, such as training rosters, equipment and maintenance test reports, lesson plans, and other documents that "document the performance" of the program elements, as opposed to those that "establish" the program elements, are not included.
- c. Ordinarily, sub-tier documents such as emergency plan implementing procedures (EPIPs) are not considered to be part of an emergency plan for the purpose of evaluating proposed changes. If a licensee relocates a programmatic description from the emergency plan to a sub-tier document, that programmatic description continues to be subject to the 10 CFR 50.54(q) change process. For example, licensees have relocated the details of emergency classification schemes from the emergency plan to an EPIP or to large wall charts maintained in the control room. Because the EPIP or wall chart is now the means to demonstrate compliance with the planning standards in 10 CFR 50.47(b)(4), these sub-tier documents are subject to 10 CFR 50.54(q). Repeating, as opposed to relocating, program element descriptions in sub-tier documents do not necessarily make the sub-tier documents subject to the 10 CFR 50.54(q) change process. However, the descriptions in the various documents must remain consistent.
- e. This definition also highlights the need to consider the NRC-approved plan and the subsequent changes in reviewing against 10 CFR 50.54(q) to ensure that a series of incremental changes (each determined not to reduce the effectiveness of the plan) do not reduce the effectiveness of the plan when compared to the

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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

NRC-approved plan.

The differences in approved revisions and the current revisions of the Emergency Plans have been reviewed and they have been determined to meet the regulatory requirements required during revisions. Each revision has been reviewed by the NRC during the inspection process.

Part III. Description of How the Proposed Change Complies with Regulation and Commitments.

If the emergency plan, modified as proposed, no longer complies with planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50, then ensure the change is rejected, modified, or processed as an exemption request under 10 CFR 50.12, Specific Exemptions, rather than under 10 CFR 50.54(g):

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The changes described continue to meet NRC requirements as described in 10 CFR 50.47(b) and 10 CFR 50, Appendix E and Emergency Plan Sections A and P.

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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Part IV. Description of Emergency Plan Planning Standards, Functions and Program Elements Affected by the Proposed Change (Address each function identified in Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV of associated Screen):

The following portion of planning standard §50.47(b)(1) is related to the change:

Primary responsibilities for emergency response by the nuclear facility licensee have been assigned, and each principal response organization has staff to augment its initial response on a continuous basis.

The function for §50.47(b)(1) related to this change are:

a. Responsibility for emergency response is assigned.

Appendix E to Part 50 lists the following:

IV. Content of Emergency Plans

A. Organization

The organization for coping with radiological emergencies shall be described, including definition of authorities, responsibilities, and duties of individuals assigned to the licensee's emergency organization and the means for notification of such individuals in the event of an emergency. Specifically, the following shall be included:

- 1. A description of the normal plant operating organization.
- 2. A description of the onsite emergency response organization (ERO) with a detailed discussion of:
  - a. Authorities, responsibilities, and duties of the individual(s) who will take charge during an emergency;

The NUREG-0654 Part II.A elements for §50.47(b)(1) related to this change are:

- A.1.d. Each organization shall identify a specific individual by title who shall be in charge of the emergency response.
- A.2. Each principal organization shall be capable of continuous (24-hour) operations for a protracted period. The individual in the principal organization who will be responsible for assuring continuity of resources (technical, administrative, and material) shall be specified by title.

Part V. Description of Impact of the Proposed Change on the Effectiveness of Emergency Plan Functions:

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The description of the authorities, responsibilities and duties of the individual(s) who will take charge in an emergency is maintained. There is no reduction in effectiveness of the CNS Emergency Plan.

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Pa	Part VI. Evaluation Conclusion.					
An	Answer the following questions about the proposed change.					
1	Does the proposed change comply with 10 CFR 50.47(b) and 10 CFR 50 Appendix E?	Yes X	No □			
2	Does the proposed change maintain the effectiveness of the emergency plan (i.e., no reduction in effectiveness)?	Yes X	No □			
3	Does the proposed change maintain the current Emergency Action Level (EAL) scheme?	Yes X	No □			
4	Choose one of the following conclusions:					
a The activity does continue to comply with the requirements of 10 CFR 50.47(b) and 10 CFR 50, Appendix E, and the activity does not constitute a reduction in effectiveness or change in the current Emergency Action Level (EAL) scheme. Therefore, the activity can be implemented without prior NRC approval.			х			
b The activity does not continue to comply with the requirements of 10 CFR 50.47(b) or 10 CFR 50 Appendix E or the activity does constitute a reduction in effectiveness or EAL scheme change. Therefore, the activity cannot be implemented without prior NRC approval.						
Pa	Part VII. Disposition of Proposed Change Requiring Prior NRC Approval					
Will the proposed change determined to require prior NRC approval be either revised or rejected? Yes □			No □			
Co	If No, then initiate a License Amendment Request in accordance 10 CFR 50.90, AD-LS-ALL-0002, Regulatory Correspondence, and AD-LS-ALL-0015, License Amendment Request and Changes to SLC, TRM, and TS Bases, and include the tracking number:					

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

		1111	
10 CFR 50.47(b)(4) (i.e., Emergency Action Le	Il is required for changes affecting risk significant planning vels and Emergency Action Level Bases). If CFAM apprais not applicable (N/A) to indicate that signature is not re	oval is <b>N</b> 0	d OT
Preparer Name (Print): Staci White	Preparer Signature: See CAS	Date: 2/7/201	19
Reviewer Name (Print): See CAS	Reviewer Signature: See CAS	Date: See CA	
Approver (EP Manager) Name (Print): See CAS	Approver Signature: See CAS	Date: See CA	48
Approver (CFAM, as required) Name (Print): N/A	Approver Signature: N/A	Date: N/A	
		<u> </u>	
Assignments.	an or implementing procedures, then create two EREG G of Changes to the NRC, then create two EREG General	eneral	· ·
One for EP to provide the 10 CFR 50.54(q) to Licensing.	summary of the analysis, or the completed 10 CFR 50.5	54(q),	x
One for Licensing to submit the 10 CFR 50 is put in effect.	0.54(q) information to the NRC within 30 days after the ch	ange	x

**QA RECORD** 



#### ACTION REQUEST - 02256620

### **Action Request Details**

Type

: EREG

Orig Date : 02/07/2019 11:05

Discovery Date :

**Subject** 

: RP/0/A/5000/003 Rev 54

Description

CONTACT SITE EP SUPERVISOR FOR ASSISTANCE IN PREPARING EP01, EP02, AND EP03. ENSURE EREG IS CROSS-REFERENCED TO THE REG AR WHICH INITIATED IT. Perform 50.54(q) screen and evaluation

**Notes** 

**Priority** 

Report To

Status : APPROVED 02/07/2019

Severity

**Due Date** 

: 03/10/2019

**Event Date** 

Originator

**Facility** 

: 144004

Department

**Originator Group** 

: 13650

Organization

Owed To

: CN

**Owed To Group** 

: QUALREVW

Owed To Fac : CN

Department

Discipline

# **Action Request Status History**

Updated Date	Updated By	AR Status	AR Due Date
02/07/2019	144004	INPROG	02/11/2019
02/07/2019	144004	APPROVED	•
02/25/2019	144004		02/25/2019
02/25/2019	144004		03/10/2019

### **Action Request Attributes**

Request Attribute **BOUNDED EREG AR**  **Values** Ν

Reqd

Date

Name: STACI N WHITE

02/07/2019

Request Attribute

**EREG AR CROSS XREF** 

Values

Ν

Reqd

Date 02/07/2019

Name: STACI N WHITE

Request Attribute

**Values** 

Regd

Date

**REG AR CROSS XREF** 

Name: STACI N WHITE

02/07/2019

**Printed** : 02/25/2019

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#### ACTION REQUEST - 02256620

**Action Request Notes** 

**Action Request Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

Updated On

**Updated By** 

**Action Request Approval Review** 

Route List : 001

Send

Send

**Action** 

Action

Route List Initiator :

**Passport** 

Group Type Date

Time Taken Date

Time

**Last Name** 

**Action Request Trend/Cause** 

**Action Request Keywords** 

Keyword

Facility

**Keyword Description** 

**Action Request Reference Documents** 

Doc Type

Sub Type

**Document** 

Minor

Sheet Rev

Rev

Title

**Action Request Reference Equipment** 

Equip Equip

Equip

Equip

Rev

Facility Unit

System Type

Number

Tag

Status

Rev Status

Printed

: 02/25/2019

Page



#### **ACTION REQUEST - 02256620**

#### **Action Request Cross References**

Ref	Ref	Ref	Ref Nbr		Limit	
Type	Nbr	Sub	Туре	Status	AR CIs	Description
AR	02214028		5AD	COMP-NA	N	RP/0/A/5000/003 - 0000215963 ALERT
AR	02256534		PRR	COMPLETE	N	RP/0/A/5000/003 rev 054
AS	02187203	1900	GNRL	COMPLETE	N	EP Excellence Plan - Action SD-EP-4.2
AS	02194997	0200	PI	COMPLETE	N	Revise AD-EP-ALL-0602 to improve
						templates to focus on why a

# **Action Request Assignment Details**

ASSIGNMENT NUMBER : 01 SUB :

> : EP01 Due Date : 02/11/2019

Pri Resp Fac : COMPLETE Reschedule Pri Resp Group

Assigned To : STACI N WHITE . Sec Resp Fac

Subject : 50.54(Q) SCREEN Sec Resp Group :

**Aff Facility** : CN Unit **System** 

UCR Schedule Ref

Organization Department Discipline : 13650

**Est Manhrs** Ext Comp Date :

#### **Description**

Type

**Status** 

COMPLETE 50.54(Q) SCREEN IN ACCORDANCE WITH AD-EP-ALL-0602.

# **Action Request Assignment Completion Notes**

I approve the 50.54Q screen for RP/0/A/5000/003 rev.54

#### **Action Request Assignment Status History**

Updated Date	Updated By	Assgn Status	Assgn Due Date
02/07/2019	144004	INPROG	
02/07/2019	144004		02/11/2019
02/07/2019	I44004	NTFY/ASG	
02/07/2019	144004	ACC/ASG	
02/07/2019	144004	AWAIT/C	



#### ACTION REQUEST - 02256620

02/08/2019

**MEHARE** 

**COMPLETE** 

**Action Request Assignment Attributes** 

**Action Request Assignment Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On Updated By

**Updated On** 

**Updated By** 

**Action Request Assignment Completion Approval** 

Route List : 001

Send

Send

Action

**Action** 

Route List Initiator : 144004

**Passport** 

Group Fac

Type

Date Time Taken

Date / Time **Last Name** 

**DMBRUNS** 

Α

02/07/2019 13:57

APPROVED 02/08/2019 14:14

**BRUNSON** 

**MEHARE** 

Α

02/08/2019 14:14

APPROVED 02/08/2019 15:47 HARE

**Action Request Assignment Cause/Action** 

**Action Request Assignment Reference Documents** 

Doc

Facility Type

Sub Type

**Document** 

Minor

Sheet Rev Rev

Title

Action Request Assignment Reference Equipment

Equip Equip

**Equip** 

**Equip** 

Rev

Facility Unit

System Type

Number

Tag

**Status** 

Status

Printed : 02/25/2019

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# **ACTION REQUEST - 02256620**

**Action Request Assignment Cross References** 

Ref Ref

Ref Ref Nbr

Limit

Type Nbr

Sub Type

Status

AS CIs Description

**Action Request Assignment Appendices** 

APPENDIX 1

Printed : 02/25/2019

# EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q) Rev. 5

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

	ii i Oliii	
Screening and Evaluation Number	Applicable Sites	
	BNP	
EREG #:2256620	CNS	Х
	CR3	
	HNP	
	MNS	
5AD #:_2214028	ONS	
	RNP	
	GO	
Document and Revision RP/0/A/5000/003, Alert, Rev 54 (PRR 2256534)		er≱a ja ii ii de ⊊aa
Part I. Description of Activity Being Reviewed (event or action, or series of emergency plan or affect the implementation of the emergency plan):	f actions that may result in a change	e to the
Deleted the following steps:		
2.8 Initiate Emergency Response Data System (ERDS) transmission by p 2.8.1 Logon to the SRO, BOP or OAC Room business computer of 2.8.2 Click the "ERDS" Icon on the desktop. 2.8.3 Once the ERDS logon window appears, enter the password 2.8.4 Once the ERDS window appears, ensure the "Current Mode" "Disconnect".	on either unit.	
2.8.5 Click on the "Connect (Activate)" button for the unit.		
2.8.6 Click on "Yes" in the message box that appears.		
2.8.7 The value of "Status" for the unit should soon change to "Trate" "Messages Sent" should begin incrementing.	ansmitting Data" and the value of	
2.8.8 IF ERDS transmission will not connect to the NRC, inform the Coordinator will troubleshoot and initiate ERS transmission upon a content of the NRC.		•
Enclosure 4.2, Command and Control Turnover Briefing Form, was revise Turnover Form in AD-EP-ALL-0104, ERO Common Guidelines and Forms	d to align with the Command and C s.	ontrol
Specific Changes are:  Added: "Mode Shutdown Date: Time:"	to each of the Unit Status blocks	
Added: "Take Cover Order: YES NO TIME:"  Added: "Rapid Evacuation: YES NO TIME:"	to each of the offit olding blocks	
Added: "Last ENF Number:"  Added: "Continuous Communications with NRC Established: YES NO"		
Deleted: "[] Stable [] Degrading [] Improving" from each of the Unit Status Deleted: "ERDS Activated: Yes No N/A" from each of the Unit Status between the control of the Unit		

. . . .

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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# << 10 CFR 50.54(q) Screening Evaluation Form >>

anged: "Turnover: (From): [] CR / [] TSC' to "(From): [] CR / [] TSC/ [] EOF" anged: "(TO) [] TSC / [] EOF" to "(TO) [] CR / [] TSC/ [] EOF anged: "Units(s) Affected (circle) [] All [] 1 [] 2 [] 3" to "Units(s) Affected (circle) [] 1 [] 2 [] 3" anged: "Last ENF Sent (time):		<del> </del>			
Enclosure 4.2  Command and Control Turnover Briefing Form  Page 1 of 2  Station: {   CRIS   ( ) MRNS   ( ) ONS   ( ) BRIP   ( ) HRIP   ( ) RRIP   Turnover: (circle)   (From):	nged: "(TO) [] TSC / [] EOF" to "(TO) nged: "Units(s) Affected (circle) [] All nged: "Last ENF Sent (time):" t	[] CR / [] TSC/ [] EOF []1 []2 []3" to "Units(s to " Last Notification co	s) Affected (ci	ircle) []1 []2 []3" ne):"	
Station:   CNIS   CNINS   CONTROL   COMMAND   CONTROL	53 Enclosure 4.2				
Station: (   CNIs ( ) MNIS ( ) GNIS ( ) BNIP ( ) HNIP ( ) RNIP   Turnover: (circle) ( ) GTO   GTSC / GEOF   Unit(s) Affected: (circle) ( ) All ( ) 1 ( ) 2 ( ) 3   GTSC / GEOF   GTSC / GTSC / GEOF   GTSC / GTSC		T 1 40			
Station: ( ) CNIs ( ) MRNS ( ) ONIS ( ) BNIP ( ) HRIP ( ) RNIP ( ) RNIP ( ) Turnover: (circle) (From):			_		03
Unit(s) Affected: (circle) ( ) All ( )1 ( )2 ( )3	Command a	nd Control Turnover Briefi	ng Form	Page 1 of 2	
Unit(s) Affected: (circle)   () All () 4   () 4   () 4   () 4   () 4   () 5   ()	Station: ( ) CNS ( ) MNS ( ) ONS ( ) BNP	()HNP ()RNP	Turr	nover: (circle) (From):	□ C/R / □ TSC
Emergency Classification: Unusual Event declared at	Unit/s) Affected: (circle) ( ) All ( ) 1 ( )2( )3	· · · · · · · · · · · · · · · · · · ·	-	(TO)	
Site Area Emergency declared at		<del> </del>			
Stable   Degrading   Improving   Distable   Degrading   Degradin	Emergency Classification: Unusual Event declared at				
Rx Power   Cont.   Rx Cool   Rx Cool   Rx Cool   Press   Rx Power   Cont.   Rx Power   Con					
Stable   Degrading   Improving   Stable   Degrading   Improving   Stable   Degrading   Improving   Stable   Degrading   Improving   Impr	THE WEST OF THE BETT SERVED FOR THE TOTAL CONTRACT OF THE PROPERTY OF THE				1 30 - 20 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
FPB Status (circle appropriate condition) Fuel Intact Potential Loss Loss RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss Major Equipment Out of Service:  Major Equipment Out of Service:  Evolutions in Progress:  Evolutions in Progress:  Evolutions in Progress:  Evolutions in Progress (optional):  Station Priorities:  Site Assembly: YES NO TIME:  Site Evacuation: YES NO TIME:  Other Agency Involvement:					
FPB Status (circle appropriate condition) Fuel Infact Potential Loss Loss RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss Cont Infact Potential Loss Loss Major Equipment Out of Service:  Major Equipment Out of Service:  Evolutions in Progress:  Evolutions in Progress:  Evolutions in Progress:  Evolutions in Progress (optional):  Station Priorities:  Site Assembly: YES NO TIME:  Site Evacuation: YES NO TIME:  Other Agency Involvement:  Conditional Description of Control Infact Potential Loss Loss RCS Infact Potential Loss					
Fuel Intact Potential Loss Loss RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss RCS Intact Potential Loss RCS In	☐ Stable ☐ Degrading ☐ Improving	☐ Stable ☐ Degrading ☐	Improving	☐ Stable ☐ Degradi	ng D Improving
RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss Cont Intact Potential Loss Loss Major Equipment Out of Service:  Major Equipment Out of Service:  Major Equipment Out of Service:  Evolutions in Progress:  Ev	FPB Status (circle appropriate condition)	FPB Status (circle appropriate c	ondition)	FPB Status (circle appr	opriate condition)
Cont Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:  Major Equipment Out of Service:  Major Equipment Out of Service:  Evolutions in Progress:  Evolut			••	- 2	
Major Equipment Out of Service:  Evolutions in Progress:  Evolutions in					
ERDS Activated: Yes No N/A ERDS Activated: Yes No N/A ERDS Activated: Yes No N/A  Response Procedures in Progress (optional):  Station Priorities:  Site Assembly: YES NOTIME:  Other Agency Involvement:	Major Equipment Out of Service:	Major Equipment Out of Service:		Major Equipment Out of	Service:
ERDS Activated: Yes No N/A ERDS Activated: Yes N					
ERDS Activated: Yes No N/A Response Procedures in Progress (optional):  Station Priorities:  Site Assembly: YES NO TIME:  Other Agency Involvement:	Evolutions in Progress:	Evolutions in Progress:		Evolutions in Progress:	
Response Procedures in Progress (optional):  Station Priorities:  Site Assembly: YES NOTIME:  Site Evacuation: YES NOTIME:  Other Agency Involvement:  DIMEDICAL DIFFICE DILAW ENFORCEMENT DOTHER					
Response Procedures in Progress (optional):  Station Priorities:  Site Assembly: YES NOTIME:  Site Evacuation: YES NOTIME:  Other Agency Involvement:  DIMEDICAL DIFFICE DILAW ENFORCEMENT DOTHER  Additional Information (Indicated)					
Site Assembly: YES NOTIME: Other Agency involvement: Site Evacuation: YES NOTIME: OTHER  Additional Information (Injuries)					No N/A
Site Assembly: YES NOTIME: Other Agency involvement: Site Evacuation: YES NOTIME: OTHER	response Procedures in Progress (optional).	EOPIA	rs as Piogress (opaos	idi].	
Site Assembly: YES NOTIME: Other Agency involvement: Site Evacuation: YES NOTIME: OFFICE OLAW ENFORCEMENT OTHER	Clatina Princitica				,
Site Evacuation: YES NOTIME: OTHER	Summer Profiles.				
Site Evacuation: YES NOTIME: OTHER					
Site Evacuation: YES NOTIME: DEPARTMENT OF THE DEAW ENFORCEMENT OF THE DEAM EN	[a	In	ther Anency lavalue	ment:	
Additional Information Universals		The state of the s	7		IT DOTHER
		A	iditional Information (	(Injuries):	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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ATTACHMENT 4
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# << 10 CFR 50.54(q) Screening Evaluation Form >>

	Enclosure 4		RP/ <b>0</b> /A/5000/003
	Command and Control Turn		Page 2 of 2
Radiological: Emergency Worker	r dose limits approved: YES NO Wh	0	
Release in Progress: YES NO F	rield Monitoring Teams Deployed: YES	NO Number	
Release Pathway:	WIND SPEE	D: WIND DIRECTION:	<del></del>
Offsite PARS Recommended: YES	NO Zones Evacuated:	Zones Sheltered:	
Ki Recommended: YES NO	Current Dose Run Available: YES NO	Have Dose Assessors discussed Tumover	? YES NO
Off-Site Notifications: Last (	ENF Sent (time): Next Et	IF Due (time):	
NRC Communication: Last I	Message Sent (time):		
	nover with acquiring facility Communicators		
Upon the transfer of Command and Event Classification:	d Control, the following will be performe  CR TSC		TOO D EOE
State and Local Notification:		PAR Decision Making:   CR   NRC Notifications:   CR   CR	ŕ
Emergency Exposure Controls		Control of FMTs: ☐ CR ☐ TS	
Dose Assessment:	□ CR □ TSC □ EOF		
Name of Individual turning over Dutie	s:	4	
Additional Information:			
Additional miormation:			
Additional miormation:			
Additional miormation:			
Actuonas mormauon:			
Actuonal mormation:			
Actacional miormation:			
Actacional mormation:		÷	
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# << 10 CFR 50.54(q) Screening Evaluation Form >>

Command	Enclosur and Control T		Briefing Fo	orra			)/A/5000/00 [] of []	3	
I									
Station: BNP CNS HNP MNS	□ ons	□ RNP			Turno	ver:	(From): E	CR / EI TS	C / ED EOF
Unit(s) Affected: 🛛 1 🔲 2 🔲 3				•				CR / D TSC	C / ED EOF
							□ Shift C		
Emergency Classification: Unusual Event Declared	at	EAL#:		Alert D	leclared	1 at:	EAL#:_		
Site Area Emergency Declared	•							EAL#:	
Unit 4					**(\$\frac{1}{2}\);	1	Andreas Strain		W. 1. 18 18 18 18 18 18 18 18 18 18 18 18 18
Rx Power Cont Rx Cool Rx Cool Press Temp Press		Cont. Tess	Rx Cool Temp	Rx Cool I	Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press
Mode Shutdown Date: Time:	Mode	Shutdov	vn Date:	Time:		Mode	Shutdow	n Date:	Time:
FPB Status (circle appropriate condition)	FPB Status (cir	cle appr	opriate condit	ion)		FPB Status	(circle appro	priate conditi	on)
Fuel Intact Potential Loss Loss		Poten		oss				ial Loss Lo	SS
RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss	RCS Intact Cont Intact	Potent		SS SS				ial Loss Lo ial Loss Lo	
Major Equipment Out of Service:	Major Equipme						oment Out of S		33
									•
Evolutions in Progress;	Evolutions in P	rogropp.				Emilitiana	in Progress:		
Lividions III i togress.	LACIDIDOUS III ( )	ogiess.				LVOIDUOIIS	mit logicss.		
	,								
ERDS Activated: Yes No N/A	ERDS Activated	: Yes		N/A	. ,	ERDS Activ			I/A
Response Procedures in Progress (optional):			Emergency/	Abnormai F	тосеан	ires in Progre	ess (optional)	:	
DATE: Defection									
Station Priorities:									

### EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Enclosure 4.2		RP/ <b>0</b> /A/5000/003			
Command and Control Turnover Briefing Form		Page 2 of 3			
Site Assembly:         YES         NO TIME:         Location/Comments:           Site Evacuation:         YES         NO TIME:		nvolvement:  I FIRE I LAW E nation (Injuries):	NFORCE	MENT OTHE	ER .
Radiological: Emergency Worker dose limits approved: YES NO For whom:					
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Num	nber				
Release Pathway: WIND SPEED:	WIND D	IRECTION:	_	_	
Offsite PARS Recommended: YES NO Zones Evacuated:	_ Zones Shelt	ered;			
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose	Assessors discu	ssed Turnover? YE	s no		
Off-Site Notifications: Last Notification Completed (time): Last ENF Number:	Next EN	F Due (fime):			
NRC Communication: Notified (time): Continuous Communications with	NRC Established	i: Yes no			
Have Communicators discussed Turnover with acquiring facility Communicators? YES NO					
Upon the transfer of Command and Control, the following will be performed by:  Event Classification:	CR TSC	<b>□</b> EOF			
State and Local Notification:	CR TSC				
	CR TSC	☐ EOF			
Dose Assessment					
Name of Individual turning over Duties:					
T					
Turnover Complete: YES NO TSC / EOF Activated at (circle) Time Date	Name indivi	dual assuming dutie:	s	-	
Additional Information:					
L				<del></del>	
	t de de de a	radio per mir dis di	s delic s que		
Part II. Activitý Previously Reviewed?		Yes		No	X
Is this activity Fully bounded by an NRC approved 10 CFR 50.90 subm	nittal or	10 CFR 50.5	i4(a)	Continue	to
Alert and Notification System Design Report?		Effectivenes	s i	Attachme	
If you identify he was the country of a sum out as well as a sum of the country o		Evaluation is		10 CFR	
If yes, identify bounding source document number or approval reference ensure the basis for concluding the source document fully bounds the	ronosed	required. Er justification	iter	50.54(q) Screening	n
change is documented below:	propoded i	below and		Evaluatio	
		complete		Form, Pa	rt III
Justification:		Attachment 4 Part V.	4,		
		. air v.			
Bounding document attached (optional)					
Bounding document attached (optional)			Ψ,	2 gr 300g	
<u>ಇದ್ದಾರೆ. ಆರಂಭ ಸಂಪರ್ಧಕ್ಕೆ ಅತ್ಯಾಪ್ತ ಸಾರ್ಕ್ ಸಾರ್ಕ್ ಸ್ಟ್ರಾಪ್ತಿಯ ಪ್ರತಿಕ್ಷೆಗೊಳ್ಳಲ್ಲಿ ಅತ್ಯ ಜಾರ್ಟ್ಗಳ್ಳಿ ಅಪ್ಪೇ ಹೇಳಿಗೆ ಹೆಚ್ಚಿಗೆ ಅತ್ಯ ಸ್ಥಾಪ್ತಿಗಳ ಅಪ್ಪಾಪ್ತಿಗಳ ಅಪ್ಪಾಪ್ತಿಗೆ ಅಪ್ಪಾಪ್ತಿಗೆ ಹೇಳಿಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಚ್ಚಿಗೆ ಹೆಚ್ಚಿಗೆ</u>	and the second	A SECTION OF THE PROPERTY OF	But also		* X ** - X

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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ATTACHMENT 4
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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Part	III. Editorial Change	Yes		No	X
	is activity an editorial or typographical change only, such as formatting, graph numbering, spelling, or punctuation that does not change intent?	10 CFR 50.5 Effectiveness Evaluation is	3	Continue Attachme Part IV an	nt 4, id
Just	ification:	required. En		address n	on
		justification a complete	ınd	editorial changes	
		Attachment 4	ŀ,	onangoo	
		Part V.			
Scre	<ul> <li>IV. Emergency Planning Element and Function Screen (Reference Attachme ening Criteria)</li> </ul>				
11? 1	s this activity involve any of the following, including program elements from Nifanswer is yes, then check box.	UREG-0654/F	EMA	REP-1 Sec	tion
1	10 CFR 50.47(b)(1) Assignment of Responsibility (Organization Control)				
1a	Responsibility for emergency response is assigned.				Χ .
1b	The response organization-has the staff to respond and to augment staff on (24-7 staffing) in accordance with the emergency plan.	a continuing b	asis		
2	10 CFR 50.47(b)(2) Onsite Emergency Organization				
2a	Process ensures that onshift emergency response responsibilities are staffed	d and assigne	d		
2b	The process for timely augmentation of onshift staff is established and maint	ained.			
3	10 CFR 50.47(b)(3) Emergency Response Support and Resources				
3a	Arrangements for requesting and using off site assistance have been made.				
3b	State and local staff can be accommodated at the EOF in accordance with the (NA for CR3)	ne emergency	plan.		
4	10 CFR 50.47(b)(4) Emergency Classification System				entropy water to
4a	A standard scheme of emergency classification and action levels is in use. (Requires final approval of Screen and Evaluation by EP CFAM.)				
5	10 CFR 50.47(b)(5) Notification Methods and Procedures				
5a	Procedures for notification of State and local governmental agencies are cap declared emergency within 15 minutes (60 minutes for CR3) after declaration providing follow-up notification.				
5b	Administrative and physical means have been established for alerting and proto the public within the plume exposure pathway. (NA for CR3)	roviding promp	ot inst	ructions	
5c	The public ANS meets the design requirements of FEMA-REP-10, Guide for Notification Systems for Nuclear Power Plants, or complies with the licensee design report and supporting FEMA approval letter. (NA for CR3)				
				·	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Part I	V. Emergency Planning Element and Function Screen (cont.)	
6	10 CFR 50.47(b)(6) Emergency Communications	
6a	Systems are established for prompt communication among principal emergency response organizations.	
6b	Systems are established for prompt communication to emergency response personnel.	
7	10 CFR 50.47(b)(7) Public Education and Information	
7a	Emergency preparedness information is made available to the public on a periodic basis within the plume exposure pathway emergency planning zone (EPZ). (NA for CR3)	
7b	Coordinated dissemination of public information during emergencies is established.	
8	10 CFR-50.47(b)(8) Emergency Facilities and Equipment	
8a	Adequate facilities are maintained to support emergency response.	
8b	Adequate equipment is maintained to support emergency response.	
9	10 CFR 50.47(b)(9) Accident Assessment	
9a	Methods, systems, and equipment for assessment of radioactive releases are in use.	
10	10 CFR 50.47(b)(10) Protective Response	
10a	A range of public PARs is available for implementation during emergencies. (NA for CR3)	
10b	Evacuation time estimates for the population located in the plume exposure pathway EPZ are available to support the formulation of PARs and have been provided to State and local governmental authorities. (NA for CR3)	
10c	A range of protective actions is available for plant emergency workers during emergencies, including those for hostile action events.	
10d	KI is available for implementation as a protective action recommendation in those jurisdictions that chose to provide KI to the public.	
11	10 CFR 50.47(b)(11) Radiological Exposure Control	
11a	The resources for controlling radiological exposures for emergency workers are established.	
12	10 CFR 50.47(b)(12) Medical and Public Health Support	
12a	Arrangements are made for medical services for contaminated, injured individuals.	
13	10 CFR 50.47(b)(13) Recovery Planning and Post-accident Operations	
13a	Plans for recovery and reentry are developed.	
14	10 CFR 50.47(b)(14) Drills and Exercises	
14a	A drill and exercise program (including radiological, medical, health physics and other program areas) is established.	
14b	Drills, exercises, and training evolutions that provide performance opportunities to develop, maintain, and demonstrate key skills are assessed via a formal critique process in order to identify weaknesses.	
14c	Identified weaknesses are corrected.	
15	10 CFR 50 47(b)(15) Emergency Response Training	
15a	Training is provided to emergency responders.	

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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ATTACHMENT 4
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### << 10 CFR 50.54(q) Screening Evaluation Form >>

16 10 CFR 50.47(b)(16) Emergency Plan Maintenance 16a Responsibility for emergency plan development and review is established. □				
16a Responsibility for emergency plan development and review is established	ī			
16b Planners responsible for emergency plan development and maintenance are properly trained. □	1			
PART IV. Conclusion				
If no Part IV criteria are checked, then provide Justification and complete Part V below.	j			
If any Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV criteria are checked, then complete Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part V and perform a 10 CFR 50.54(q) Effectiveness Evaluation. Program Element 4a requires final approval of Screen and Evaluation by EP CFAM.				
Duke Energy has transitioned to an "always-on" mode of ERDS transmission, making the steps to activate ERDS unnecessary. A Controlled Support Document (CSD) for ERDS troubleshooting has replaced the steps to activate ERDS. Deletion of the ERDS Activation steps does not affect any of the 50.47(b) emergency planning standards, as ERDS is addressed in 10 CFR Appendix E to Part 50 in section VI, Emergency Response Data System, not in the 50.47(b) Planning Standards.				
With regard to 10 CFR Appendix E to Part 50 in section VI, ERDS remains a direct near real-time electronic data link between the licensee's onsite computer system and the NRC Operations Center, and the features listed in Section VI are maintained: the testing method and frequency; the software and hardware; the selected plant parameters; and the transmission rate.				
No further evaluation of the removal of the ERDS steps is required by 50.54(q).				
Part V. Signatures:  EP CFAM Final Approval is required for changes affecting Program Element 4a. If CFAM approval is <u>NOT</u> required, then mark the EP CFAM signature block as not applicable (N/A) to indicate that signature is not required.				
Preparer Name (Print): Staci White  Preparer Signature: See CAS  Date: See CAS				
Reviewer Name (Print): See CAS  Reviewer Signature: See CAS  See CAS  Reviewer Signature: See CAS				
Approver (EP Manager Name (Print): Approver Signature: Date: See CAS See CAS				
Approver (EP CFAM, as required) Name (Print) Approver Signature: Date: N/A N/A				

QA RECORD



#### **ACTION REQUEST - 02256620**

#### **Action Request Assignment Details**

**ASSIGNMENT NUMBER** : 02

SUB :

Type

: EP02

**Due Date** 

: 02/11/2019

Pri Resp Fac

Status

: COMPLETE

Reschedule

Pri Resp Group

Assigned To

: STACI N WHITE

Sec Resp Fac

Subject

: 50.54(Q) EVALUATION

Sec Resp Group :

Aff Facility

: CN

Unit

System

**UCR** 

. CIV

Schedule Ref

Department

: 13650

Discipline

Organization
Est Manhrs

Ext Comp Date :

Description

COMPLETE 50.54(Q) EVALUATION IN ACCORDANCE WITH AD-EP-ALL- 0602.

#### **Action Request Assignment Completion Notes**

I approve the 50.54Q eval for RP/0/A/5000/003 rev 54.

#### **Action Request Assignment Status History**

Updated Date	Updated By	Assgn Status	Assgn Due Date
02/07/2019	144004	INPROG	
02/07/2019	144004		02/11/2019
02/07/2019	144004	NTFY/ASG	
02/07/2019	144004	ACC/ASG	
02/07/2019	144004	AWAIT/C	
02/08/2019	DMBRUNS	ACC/ASG	
02/08/2019	144004	AWAIT/C	
02/08/2019	MEHARE ·	COMPLETE	

#### **Action Request Assignment Attributes**



#### ACTION REQUEST - 02256620

#### **Action Request Assignment Routing/Return Comments**

Routing Comments from the X601 Panel

Minor editorial comments. ~DMB

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

20190208

**DMBRUNS** 

**Updated On** 

**Updated By** 

#### **Action Request Assignment Completion Approval**

Route List : 001

Send

Send Action

Action

Route List Initiator : 144004

Group

Date Time

Taken

Date Time **Last Name** 

**Passport DMBRUNS MEHARE** 

Type Α

02/07/2019 14:03 02/08/2019 14:14

APPROVED 02/08/2019 15:50 HARE

RETURNED 02/08/2019 13:52 BRUNSON

**DMBRUNS** 

Α 02/08/2019 13:56 Α

APPROVED 02/08/2019 14:14 BRUNSON

#### **Action Request Assignment Cause/Action**

#### **Action Request Assignment Reference Documents**

Doc Sub

Minor

Facility Type

Type

**Document** 

Sheet Rev

Rev

Title

### **Action Request Assignment Reference Equipment**

Equip Equip

**Equip** 

**Equip** 

Rev

Unit Facility

System Type

Number

Tag

**Status** 

**Status** Rev

#### **Action Request Assignment Cross References**

Ref Type Ref Nbr

Ref Nbr Sub Type

**Status** 

AS Cls Description

: 02/25/2019 Printed



ACTION REQUEST - 02256620

**Action Request Assignment Appendices** 

**APPENDIX 1** 

Printed : 02/25/2019

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
ETTENTIONS TO CFR 50.54(Q)	Rev. 5

ATTACHMENT 5
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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Screening and Evaluation Number	Applicable S	eliteratural of material and
EREG #: 2256620	BNP	
	CNS	X
	CR3	
	HNP	_
AD #:2214028	MNS	
	ONS	
	RNP	□
Occument and Revision	GO	
RP/0/A/5000/003, Alert, Rev 54 (PRR 2256534)	•	
		EARSTON IN SECURITY VICES
Part I. Description of Proposed Change:		
and a compliant of thoposed offange.		
inclosure 4.2, Command and Control Turnover Briefing Form, is be	eing revised to align with the Common	
ontrol Turnover Form in AD-EP-ALL-0104, ERO Common Guideli	ines and Forms.	a ana
	•	
pecific Changes are:		
dded: "Mode Shutdown Date: Time:	" to each of the Unit Status block	<s td="" ·<=""></s>
dded: "Mode Shutdown Date: Time: dded: "Take Cover Order: YES NO TIME: " dded: "Rapid Evacuation: YES NO TIME: "	" to each of the Unit Status block	(S
Added: "Mode Shutdown Date: Time: Added: "Take Cover Order: YES NO TIME: " Added: "Rapid Evacuation: YES NO TIME: " Added: "Last ENF Number: "		<b>(S</b>
Specific Changes are:  Added: "Mode Shutdown Date: Time:  Added: "Take Cover Order: YES NO TIME: "  Added: "Rapid Evacuation: YES NO TIME: "  Added: "Last ENF Number: "  Added: "Continuous Communications with NRC Established: YES		(S
dded: "Mode Shutdown Date: Time: dded: "Take Cover Order: YES NO TIME: "  dded: "Rapid Evacuation: YES NO TIME: "  dded: "Last ENF Number: "  dded: "Continuous Communications with NRC Established: YES	NO" .	KS
dded: "Mode Shutdown Date: Time: dded: "Take Cover Order: YES NO TIME: " dded: "Rapid Evacuation: YES NO TIME: " dded: "Last ENF Number: " dded: "Continuous Communications with NRC Established: YES eleted: "[] Stable [] Degrading [] Improving" from each of the Unit	NO" .	KS .
added: "Mode Shutdown Date: Time: dded: "Take Cover Order: YES NO TIME: "  added: "Rapid Evacuation: YES NO TIME: "  added: "Last ENF Number: "  added: "Continuous Communications with NRC Established: YES geleted: "[] Stable [] Degrading [] Improving" from each of the Unit	NO" .	KS .
Added: "Mode Shutdown Date: Time: Added: "Take Cover Order: YES NO TIME: " Added: "Rapid Evacuation: YES NO TIME: " Added: "Last ENF Number: " Added: "Continuous Communications with NRC Established: YES  Peleted: "[] Stable [] Degrading [] Improving" from each of the Unit teleted: "ERDS Activated: Yes No N/A" from each of the Unit Stanged: "Turnover: (From): [] CR / [] TSC" to "(From):	NO" Status blocks status blocks	KS .
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	Enclosure	.12						
Command	and Control Tu		ing Form			<b>0</b> /A/5000/0 e 1 of 2	103	
Station: ( ) CNS ( ) MNS ( ) ONS ( ) B				12.				
Heidel Affect of the Control of the	, , , , , ,	( ) RNP		Turne	over: (circle)	(From): (TO)		
1 17.50	-						D Chittich	
Emergency Classification: Unusual Event declared	lat:EAI	L#	Alert E	eclared at		EAL#		
Site Area Emergency declared at:	EAL#:	Gener	i Ememens	Declared				
Unit 1		Unit 2		Documed (	<u> </u>	CAL#:		·
Rx Power Cont. Rx Cool Rx Cool Press Temp Press	Rx Power Co	nt. Rx C		ool Press		Cont	Unit 3 Rx Cool	<del></del>
Temp Press	Pre	ess Ten	P RXC	DOI Press	Rx Power	Press	Temp	Rx Cool Pre
T Stable D D C	<del>                                     </del>							
☐ Stable ☐ Degrading ☐ Improving  FPB Status (circle appropriate condition)	☐ Stable ☐ D				D Stable	☐ Degradir	ng 🛘 Impro	
Fuel Intact Potential Loss Loss	FPB Status (circle		=		FPB Status	circle appr	opriate conditi	ion)
RCS Intact Potential Loss Loss	l l	Potential Loss Potential Loss	Loss				ial Loss Los	ss
Cont Intact Potential Loss Loss	Cont Intact	Potential Loss	Loss Loss				ial Loss Los ial Loss Los	
Major Equipment Out of Service:	Major Equipment C	of Service:				ment Out of S		<u></u>
Evolutions in Progress:	Evolutions in Progr	Prio.			F. 1 F -			
		<b></b>			Evolutions i	n Progress:		
STOPO A. F A.	<del></del>				i			
ERDS Activated: Yes No N/A Response Procedures in Progress (optional):	ERDS Activated:		<u> </u>		ERDS Activ	ated: Yes	No N/A	
**************************************		EOP/AI	s in Progress	(optional)	:			
Station Priorities:								
Site Assembly: YES NO TIME:			her Agency	mera brown	_4_			
Site Evacuation: YES NO TIME:		0	MEDICAL	iivoiveille	nc DIAW FNI	FORCEMENT	DOTHER	
Location/Comments:		I	ditional Inform		- CAN LIN	OLCEMEN	a OTHER	

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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

	Command and	Enclosure 4.2 Control Turnover B	riefing Form	RP/ <b>0</b> /A/5000/003 Page 2 of 2	
Radiological: Emergency	Vorker dose limits approved:	YES NO Who			
Release in Progress: YES					
Release Pathway:			WIND DIREC	CTION:	
Offsite PARS Recommended:	YES NO Zones Evaçuated				
	NO Current Dose Run Availa				
	Last ENF Sent (time):				
	Last Message Sent (time):		· <u>——</u>		
Have Communicators discusse	Turnover with acquiring facility	y Communicators? YES	S NO		
Upon the transfer of Commar	d and Control, the following	will be performed by:			
Event Classification:	CR TS		Decision Making: 🔲 0	CR TSC DEOF	
State and Local Notification Emergency Exposure Cor	·			CR TSC	
Dose Assessment			rol of FMTs: CR	TSC LEOF	
Tumover Complete: YES (circle) (circle) Additional Information:	IO TSC/EOF Activated at:_		dual assuming duties		
. (circle) (circ	IO TSC/EOF Activated at:_		dual assuming duties		
. (circle) (circ	IO TSC/EOF Activated at:_		dual assuming duties		
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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Сопппан	Enclosure 4.2 d and Control Turnover Briefing Form	RP/ <b>0</b> /A/5000/003 Page [] of []
Station:		
Station:   BNP   CNS   HNP   MN  Unit(s) Affected:   1   2   3	IS 🗆 ONS 🗆 RNP	Turnover: (From): [] CR / [] TSC / [] EOF  (TO) [] CR / [] TSC / [] EOF  [] Shift Change
Emergency Classification: Unusual Event Declared	d at:EAL#:Alert D	eclared at: EAL #:
Sile Area Emergency Declar		mergency Declared atEAL#:
Unit 1		Unit3
Rx Power Cont. Rx Cool Rx Cool Press Temp Press	Rx Power Cont. Rx Cool Press Temp Rx Cool P	
Mode Shutdown Date: Time:	Mode Shutdown Date: Time:	Mode Shutdown Date: Time:
PB Status (circle appropriate condition)	FPB Status (circle appropriate condition)	Mode Shutdown Date: Time:  FPB Status (circle appropriate condition)
ruel Intact Potential Loss Loss RCS Intact Potential Loss Loss	Fuel Intact Potential Loss Loss	Fuel Intact Potential Loss Loss
Cont Infact Potential Loss Loss	RCS Infact Potential Loss Loss Cont Infact Potential Loss Loss	RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss
Aajor Equipment Out of Service:	Major Equipment Out of Service:	Major Equipment Out of Service:
Evolutions in Progress:	Evolutions in Progress:	Evolutions in Progress:
RDS Activated: Yes No N/A	ERDS Activated: Yes No N/A	ERDS Activated: Yes No N/A
esponse Procedures in Progress (optional):	Emergency/Abnormal Pro	ocedures in Progress (optional):
tation Priorities:		

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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Command and Control Turnover Briefing Form	RP/0/A/5000/003
Form	Page 2 of
Site Assembly:         YES         NO TIME:         Location/Comments:           Site Evacuation:         YES         NO TIME:	Other Agency Involvement:  D MFDICAL D FIRE D LAW ENFORCEMENT D OTHE Addisonal Information (Injuries):
Radiological: Emergency Worker dose limits approved: YES NO For whom:	
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Nun Release Pathway WIND SPEED:	nber
	Zones Sheltered:
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose A	
Off-Site Notifications: Last Notification Completed (time): Last ENF Number:	
NRC Communication: Notified (time): Continuous Communications with I	
Have Communicators discussed Turnover with acquiring facility Communicators? YES NO	NRC Established: YES NO
Upon the transfer of Command and Control, the following will be performed by:  Event Classification:	CR TSC EOF CR TSC CR TSC
Turnover Complete: YES NO TSC / EOF Activated at:	Name individual assuming duties
achment 6, 10 CFR 50.54(q) Initiating Condition (IC) and Emergency ses Validation and Verification (V&V) Form , is attached (required for rt II. Description and Review of Licensing Basis Affected by the Propo	IC or EAL change) No
rt II. Description and Review of Licensing Basis Affected by the Propo	IC or EAL change) No
oces validation and verification (v&v) Form , is attached (required for	IC or EAL change)  No  Dised Change:
rt II. Description and Review of Licensing Basis Affected by the Proposersing Basis of the ERO e Assignment of Responsibilities is described in the originally approvenuary 1983), sections A.1.b. Concept of Operations, A.1.c. Block Diagrams	osed Change:  ed CNS Emergency Plan, Revision 2 (date from of Organization Interrelationships, ar

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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Command and Control has remained the same. The summation of the incremental changes over time do not reduce the effectiveness of the CNS Emergency Plan when compared to the NRC-approved Plan.

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 2, lists RP/0/A/5000/003, as an implementing procedure. (AD-EP-ALL-0104 had not been created when the CNS Emergency Plan was initially approved by the NRC.)

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 147, lists RP/0/A/5000/003, and AD-EP-ALL-0104 as implementing procedures.

### List Commitments Associated with the Change

A search to identify site specific commitments related to the ERO positions and their assigned responsibilities was performed. No site specific commitments were identified aside from those in the Emergency Plan.

RG 1.219 Guidance on Making Changes to Emergency Plans for Nuclear Power Reactors, Rev 1. (July 2016) 3.5 Emergency Plan

- a. "Emergency plan" means the document(s) that the licensee prepared and maintains that identifies and describes its methods for maintaining emergency preparedness and responding to emergencies. An emergency plan includes the plan that the NRC originally approved and all subsequent changes that the licensee made with and without prior NRC review and approval under 10 CFR 50.54(q). See 10 CFR 50.54(q)(1)(ii) for additional information.
- b. This definition highlights that "emergency plan" includes the documents that describes the programmatic methods that the licensee uses to maintain emergency preparedness and to respond to emergencies. These methods, or program elements, are the implementation aspects of the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50 and generally correspond to the evaluation criteria of NUREG-0654 or approved alternatives that supply specific acceptable methods for complying with the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50. Such programmatic documents are subject to the 10 CFR 50.54(q) change process. Non-programmatic documents, such as training rosters, equipment and maintenance test reports, lesson plans, and other documents that "document the performance" of the program elements, as opposed to those that "establish" the program elements, are not included.
- c. Ordinarily, sub-tier documents such as emergency plan implementing procedures (EPIPs) are not considered to be part of an emergency plan for the purpose of evaluating proposed changes. If a licensee relocates a programmatic description from the emergency plan to a sub-tier document, that programmatic description continues to be subject to the 10 CFR 50.54(q) change process. For example, licensees have relocated the details of emergency classification schemes from the emergency plan to an EPIP or to large wall charts maintained in the control room. Because the EPIP or wall chart is now the means to demonstrate compliance with the planning standards in 10 CFR 50.47(b)(4), these sub-tier documents are subject to 10 CFR 50.54(q). Repeating, as opposed to relocating, program element descriptions in sub-tier documents do not necessarily make the sub-tier documents subject to the 10 CFR 50.54(q) change process. However, the descriptions in the various documents must remain consistent.
- e. This definition also highlights the need to consider the NRC-approved plan and the subsequent changes in reviewing against 10 CFR 50.54(q) to ensure that a series of incremental changes (each determined not to reduce the effectiveness of the plan) do not reduce the effectiveness of the plan when compared to the

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NRC-approved plan.

The differences in approved revisions and the current revisions of the Emergency Plans have been reviewed and they have been determined to meet the regulatory requirements required during revisions. Each revision has been reviewed by the NRC during the inspection process.

Part III. Description of How the Proposed Change Complies with Regulation and Commitments.

If the emergency plan, modified as proposed, no longer complies with planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50, then ensure the change is rejected, modified, or processed as an exemption request under 10 CFR 50.12, Specific Exemptions, rather than under 10 CFR 50.54(q):

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The changes described continue to meet NRC requirements as described in 10 CFR 50.47(b) and 10 CFR 50, Appendix E and Emergency Plan Sections A and P.

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Part IV. Description of Emergency Plan Planning Standards, Functions and Program Elements Affected by the Proposed Change (Address each function identified in Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV of associated Screen):

The following portion of planning standard §50.47(b)(1) is related to the change:

Primary responsibilities for emergency response by the nuclear facility licensee have been assigned, and each principal response organization has staff to augment its initial response on a continuous basis.

The function for §50.47(b)(1) related to this change are:

a. Responsibility for emergency response is assigned.

Appendix E to Part 50 lists the following:

IV. Content of Emergency Plans

A. Organization

The organization for coping with radiological emergencies shall be described, including definition of authorities, responsibilities, and duties of individuals assigned to the licensee's emergency organization and the means for notification of such individuals in the event of an emergency. Specifically, the following shall be included:

- 1. A description of the normal plant operating organization.
- 2. A description of the onsite emergency response organization (ERO) with a detailed discussion of:
  - a. Authorities, responsibilities, and duties of the individual(s) who will take charge during an emergency;

The NUREG-0654 Part II.A elements for §50.47(b)(1) related to this change are:

- A.1.d. Each organization shall identify a specific individual by title who shall be in charge of the emergency response.
- A.2. Each principal organization shall be capable of continuous (24-hour) operations for a protracted period. The individual in the principal organization who will be responsible for assuring continuity of resources (technical, administrative), and material) shall be specified by title.

Part V. Description of Impact of the Proposed Change on the Effectiveness of Emergency Plan Functions:

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The description of the authorities, responsibilities and duties of the individual(s) who will take charge in an emergency is maintained. There is no reduction in effectiveness of the CNS Emergency Plan.

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602 Rev. 5

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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Pa	Part VI. Evaluation Conclusion.				
Answer the following questions about the proposed change.					
1	Does the proposed change comply with 10 CFR 50.47(b) and 10 CFR 50 Appendix E?	Yes X	No □		
2	Does the proposed change maintain the effectiveness of the emergency plan (i.e., no reduction in effectiveness)?	Yes X	No 🗆		
3	Does the proposed change maintain the current Emergency Action Level (EAL) scheme?	Yes X	No 🗆		
4	Choose one of the following conclusions:	Tes A	INOL		
а	The activity does continue to comply with the requirements of 10 CFR 50.47(b) and 10 CFR 50 Appendix E, and the activity does not constitute a reduction in effectiveness or change in the complete Emergency Action Level (EAL) scheme. Therefore, the activity can be implemented without prapproval.		х		
b	The activity does not continue to comply with the requirements of 10 CFR 50.47(b) or 10 C	50			
Par	Part VII. Disposition of Proposed Change Requiring Prior NRC Approval				
Will the proposed change determined to require prior NRC approval be either revised or Yes □ No □					
	If No, then initiate a License Amendment Request in accordance 10 CFR 50.90, AD-LS-ALL-0002, Regulatory Correspondence, and AD-LS-ALL-0015, License Amendment Request and Changes to SLC, TRM, and TS Bases, and include the tracking number:				

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602 Rev. 5

ATTACHMENT 5 Page 10 of 10

### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

The state of the s	y agis ne nanggapa na magalagapa na nagalaga na nagalaga na nagalaga na nagalaga na nagalaga na nagalaga na ma	- Kasa-	-
Part VIII Signatures: ED CEAME: 14		ا مان سيوم م	e en proper Per en
	al is required for changes affecting risk significant plannin evels and Emergency Action Level Bases). If CFAM appr as not applicable (N/A) to indicate that signature is not re		
Preparer Name (Print): Staci White	Preparer Signature: See CAS	Date: 2/7/2	
Reviewer Name (Print): See CAS	Reviewer Signature: See CAS	Date:	
Approver (EP Manager) Name (Print): See CAS	Approver Signature: See CAS	Date:	
Approver (CFAM, as required) Name (Print): N/A	Approver Signature: N/A	Date: N/A	
		7 22 2	ere to proper
	an or implementing procedures, then create two EREG G	eneral	
If required by Section 5.6, Submitting Reports of Assignments.	of Changes to the NRC, then create two EREG General		
	summary of the analysis, or the completed 10 CFR 50.5		x
<ul> <li>One for Licensing to submit the 10 CFR 50 is put in effect.</li> </ul>	.54(q) information to the NRC within 30 days after the cha	ange	X

QA RECORD



ACTION REQUEST - 02256620

Action Request Assignment Details

ASSIGNMENT NUMBER

: 04 SUB :

Type

: GNRL

**Due Date** 

: 02/25/2019

Pri Resp Fac

**Status** 

: ACC/ASG

Reschedule

Pri Resp Group

Assigned To

: STACI N WHITE

Sec Resp Fac

Subject

: PROVIDE 50.54(Q) INFO TO LICENSING FOR NRC 30 DAY

Sec Resp Group

SUBMITTAL

Aff Facility

: CN

Unit

System

**UCR** 

Schedule Ref Department

: 13650

Discipline

Organization Est Manhrs

**Ext Comp Date** 

#### Description

THE REGULATION AT 10 CFR 50.54(Q)(5) REQUIRES THE LICENSEE TO SUBMIT, AS SPECIFIED IN 10 CFR 50.4(B)(5)(II), A REPORT OF EACH CHANGE TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL, INCLUDING A SUMMARY OF ITS ANALYSIS, WITHIN 30 DAYS AFTER THE CHANGE IS PUT IN EFFECT. THE NRC HAS STATED THAT THE SUMMARY REPORT OR A FULL COPY OF THE COMPLETED 50.54(Q) MAY BE SUBMITTED TO SATISFY THIS REQUIREMENT. SUBMIT TO LICENSING, A SUMMARY, AS DESCRIBED IN AD-EP-ALL- 0602, OR THE FULL 50.54(Q) REVIEWING ALL CHANGES TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL FOR SUBMITTAL TO THE NRC'S DOCUMENT CONTROL DESK, WITH A COPY TO THE APPROPRIATE REGIONAL OFFICE, AND A COPY TO THE APPROPRIATE NRC RESIDENT INSPECTOR. IF THE COMMUNICATION IS ON PAPER, THE SUBMISSION TO THE DOCUMENT CONTROL DESK MUST BE THE SIGNED ORIGINAL.

Action Request Assignment Completion Notes

Action Request Assignment Status History

Updated Date 02/07/2019

Updated By

Assgn Status

Assgn Due Date

02/25/2019

144004 144004

**INPROG** 

02/25/2019

02/25/2019

144004

ACC/ASG

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ACTION REQUEST - 02256620

Action Request Assignment Attributes

Request Attribute 1A COMMITTED

Name:

**Values** 

Reqd N

Date

Request Attribute

1B CHANGE BASIS

Name:

Values

Reqd N

Date

Request Attribute

**2A COMMENTS** 

Name:

Values

Reqd

Date

Request Attribute

BENEFIT REALIZED

Name:

Values

Reqd

Date

Request Attribute

FINAL ISSUE

Name:

**Values** 

Reqd

Date

Request Attribute

IMPORTANT TO NRC

Name:

Values

Reqd

**Date** 

Request Attribute

IT LABOR ESTIMATE

Name:

Values

Regd

Date

Request Attribute

LTAM ISSUE ID

Name:

**Values** 

Reqd

Date

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Page

:28



### ACTION REQUEST - 02256620

Request Attribute
PHC DUE DATE

Values

Reqd

Date

Name:

Request Attribute

PLANT HEALTH ISSUE ? Name :

<u>Values</u>

Reqd

Date

Request Attribute

RTTQ Name : Values

Regd N

Date

Request Attribute

T+1 CRITIQUE Name:

Values

Reqd

Date

Request Attribute

WBS Name : **Values** 

Reqd

Date

**Action Request Assignment Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Updated On

**Updated By** 

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

Action Request Assignment Completion Approval

Action Request Assignment Cause/Action

Printed

: 02/25/2019

Page

: 29



### ACTION REQUEST - 02256620

Action Request Assignment Reference Documents

Doc

Sub

Minor

Facility Type Type Document

Sheet Rev Rev Title

Action Request Assignment Reference Equipment

Equip Equip

Equip

Equip

Rev

Facility Unit

System Type

Number

Tag

Status

Rev Status

Action Request Assignment Cross References

Ref

Ref

Ref Ref Nbr

Limit

Type Nbr

Sub Type

**Status** 

AS CIs Description

Action Request Assignment Appendices

**Action Request Assignment Details** 

ASSIGNMENT NUMBER : 05

SUB :

: GNRL

**Due Date** 

: 03/10/2019

Pri Resp Fac

Type **Status** 

: NTFY/ASG

Reschedule

Pri Resp Group

**Assigned To** 

: TONYA S LOWERY

Sec Resp Fac

Subject

: LICENSING SUBMIT 50.54(Q) TO NRC WITHIN 30 DAYS OF

Sec Resp Group

**CHANGE** 

Aff Facility

: CN

Unit

**System** 

**UCR** 

Schedule Ref

Organization

Department

:10380

Discipline

**Est Manhrs** Ext Comp Date :

Description

THE REGULATION AT 10 CFR 50.54(Q)(5) REQUIRES THE LICENSEE TO SUBMIT, AS SPECIFIED IN 10 CFR 50.4(B)(5)(II), A REPORT OF EACH CHANGE TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL, INCLUDING A SUMMARY OF ITS ANALYSIS, WITHIN 30 DAYS AFTER THE CHANGE IS PUT IN EFFECT. THE NRC HAS STATED THAT THE SUMMARY REPORT OR A FULL COPY OF THE COMPLETED 50.54(Q) MAY BE

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### ACTION REQUEST - 02256620

SUBMITTED TO SATISFY THIS REQUIREMENT. SUBMIT, WITHIN 30 DAYS OF IMPLEMENTING THE CHANGE, THE FULL 50.54(Q) OR SUMMARY (AS DESCRIBED IN AD-EP-ALL-0602) FOR ALL CHANGES TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL TO THE NRC'S DOCUMENT CONTROL DESK, WITH A COPY TO THE APPROPRIATE REGIONAL OFFICE, AND A COPY TO THE APPROPRIATE NRC RESIDENT INSPECTOR. IF THE COMMUNICATION IS ON PAPER, THE SUBMISSION TO THE DOCUMENT CONTROL DESK MUST BE THE SIGNED ORIGINAL

Action	Request As:	signment	Completion	Notes

### Action Request Assignment Status History

**Updated Date** 

**Updated By** 

Assgn Status

Assgn Due Date

02/07/2019 02/25/2019

02/25/2019

144004 144004

144004

NTFY/ASG

**INPROG** 

03/10/2019

### **Action Request Assignment Attributes**

Request Attribute

1A COMMITTED

Name:

Name:

**Values** 

Reqd

Date

Request Attribute

1B CHANGE BASIS

**Values** 

Reqd

Date

Request Attribute

2A COMMENTS

**Values** 

Reqd

Date

Name:

Name:

Request Attribute

BENEFIT REALIZED

**Values** 

Reqd Ν

**Date** 

Request Attribute

**Values** 

Reqd

Date

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#### ACTION REQUEST - 02256620

FINAL ISSUE

Name:

Ν

Request Attribute

IMPORTANT TO NRC

Name:

Reqd

Date

Request Attribute

IT LABOR ESTIMATE

Name :

Reqd

Date

Request Attribute

LTAM ISSUE ID

Name:

Values

**Values** 

**Values** 

Reqd

<u>Date</u>

Request Attribute

PHC DUE DATE

Name:

**Values** 

Reqd

<u>Date</u>

Request Attribute

PLANT HEALTH ISSUE?

Name:

Reqd N

Date

Request Attribute

RTTQ

Name:

**Values** 

**Values** 

Reqd

Date

Request Attribute

T+1 CRITIQUE

Name :

Values

Reqd N

<u>Date</u>

Request Attribute

WBS

Name :

Values

Reqd

<u>Date</u>

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: 02/25/2019

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: 32



ACTION REQUEST - 02256620

Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Updated On

Updated By

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

**Action Request Assignment Completion Approval** 

Action Request Assignment Cause/Action

Action Request Assignment Reference Documents

Doc

Sub

Type Document Minor

Sheet Rev Rev Title

Action Request Assignment Reference Equipment

Equip Equip

Equip

Equip

Rev

Facility Unit

Facility Type

System Type

Number

Sub

Tag

**Status** 

Rev **Status** 

Action Request Assignment Cross References

Ref Type

Ref Nbr

Ref Ref Nbr Type

Status

Limit

AS Cls Description

**Action Request Assignment Appendices** 

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Page : 33

# \*\*\*END OF REPORT\*\*\*

201



#### **ACTION REQUEST - 02256648**

#### **Action Request Details**

Type .

: EREG

Orig Date : 02/07/2019 12:20

Discovery Date :

Subject

: RP/0/A/5000/004 rev 57

Description

CONTACT SITE EP SUPERVISOR FOR ASSISTANCE IN PREPARING EP01, EP02, AND EP03. ENSURE EREG IS CROSS-REFERENCED TO THE REG AR WHICH INITIATED IT. Perform 50.54(q) screen and evaluation

**Notes** 

**Priority** 

Report To

Status: APPROVED 02/07/2019

Severity

**Due Date** 

: 03/10/2019

**Event Date** 

Originator **Facility** 

: 144004

**Originator Group** 

: 13650

Organization

Owed To

: CN

**Owed To Group** 

: QUALREVW

Owed To Fac : CN \_\_\_

Department

Department

Discipline

#### **Action Request Status History**

Updated Date	Updated By	AR Status	AR Due Date
02/07/2019	144004	INPROG	02/11/2019
02/07/2019	I44004	APPROVED	
02/25/2019	144004		02/25/2019
02/25/2019	144004		03/10/2019

#### **Action Request Attributes**

Request Attribute **BOUNDED EREG AR**  Values Ν

Reqd

Date 02/07/2019

Name : STACI N WHITE

Request Attribute

**Values** 

Ν

Regd

Date

**EREG AR CROSS XREF** 

Name: STACI N WHITE

02/07/2019

Request Attribute

**REG AR CROSS XREF** 

**Values** 

Reqd

**Date** 02/07/2019

Name: STACI N WHITE

Printed : 02/25/2019 Page



**ACTION REQUEST - 02256648** 

**Action Request Notes** 

**Action Request Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

**Updated On** 

**Updated By** 

**Action Request Approval Review** 

Fac Group

Route List : 001

Passport

Send Date

Type

Send Time

**Action** Taken Route List Initiator :

Time

Action Date

**Last Name** 

**Action Request Trend/Cause** 

**Action Request Keywords** 

Keyword

**Keyword Description** 

**Action Request Reference Documents** 

Doc

Sub

Type Document Minor

Sheet Rev Rev Title

**Action Request Reference Equipment** 

Equip Equip

Equip

**Equip** 

Rev

Facility Unit

Facility Type

System Type

Number

Tag

Status

**Status** 

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Page



ACTION REQUEST - 02256648

#### **Action Request Cross References**

Ref	Ref	Ref	Ref Nbr		Limit	
Type	Nbr	Sub	Type	Status	AR C	Is Description
AR	02214108		5AD	COMP-NA	N	RP/0/A/5000/004 - 0000215964 SITE AREA
						EMERGENCY
AR	02256535		PRR	COMPLETE	N	RP/0/A/5000/004 rev 057
AS	02187203	1900	GNRL	COMPLETE	N	EP Excellence Plan - Action SD-EP-4.2
AS	02194997	0200	PI	COMPLETE	N	Revise AD-EP-ALL-0602 to improve
						templates to focus on why a

#### **Action Request Assignment Details**

ASSIGNMENT NUMBER : 01 SUB :

Status : COMPLETE Reschedule : Pri Resp Group

Assigned To : STACI N WHITE Sec Resp Fac : Subject : 50.54(Q) SCREEN Sec Resp Group :

Aff Facility : CN Unit : System

UCR : Schedule Ref :

Organization : Department : 13650 Discipline :

Est Manhrs : Ext Comp Date :

Description

COMPLETE 50.54(Q) SCREEN IN ACCORDANCE WITH AD-EP-ALL-0602.

#### **Action Request Assignment Completion Notes**

I approve the 50.54Q screening for RP/0/A/5000/004 rev 57.

#### **Action Request Assignment Status History**

<b>Updated Date</b>	<b>Updated By</b>	Assgn Status	Assgn Due Date
02/07/2019	144004	INPROG	
02/07/2019	144004		02/11/2019
02/07/2019	144004	NTFY/ASG	
02/07/2019	144004	ACC/ASG	



#### ACTION REQUEST - 02256648

02/07/2019 02/08/2019

144004 **MEHARE**  AWAIT/C **COMPLETE** 

**Action Request Assignment Attributes** 

Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

**Updated On** 

**Updated By** 

Updated On

**Updated By** 

**Action Request Assignment Completion Approval** 

Route List : 001

Send

Date

Send

Action

Route List Initiator : 144004 **Action** 

Passport

Group Fac

Type

Time

Taken

Date Time **Last Name** 

DMBRUNS .

Α

02/07/2019 14:14

APPROVED 02/08/2019 14:15

**BRUNSON** 

MEHARE 1

Α

02/08/2019 14:15

APPROVED 02/08/2019 15:52 HARE

Action Request Assignment Cause/Action

Action Request Assignment Reference Documents

Doc Type

Sub Type

Document

Minor

Title Sheet Rev

Action Request Assignment Reference Equipment

Equip Equip

**Equip** 

Equip

Rev

Facility Unit

Facility

System Type

Number

Tag

**Status** 

**Status** Rev

**Printed** 

: 02/25/2019

Page



**ACTION REQUEST - 02256648** 

**Action Request Assignment Cross References** 

Ref Ref

Ref Ref Nbr

Limit

Type Nbr

Sub Type

Status

**AS CIs Description** 

**Action Request Assignment Appendices** 

**APPENDIX 1** 

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: 02/25/2019

# EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q) Rev. 5

ATTACHMENT 4 Page 1 of 8

#### << 10 CFR 50.54(q) Screening Evaluation Form >>

A CONTRACT OF THE PROPERTY OF		-
Screening and Evaluation Number	Applicable Sites	o alka sakeeliji ogi Kaasoosa Sacal
	BNP	
EREG #:	CNS	Х
	CR3	
-	HNP	
	MNS	
5AD #:_2214108	ONS	
	RNP	
	GO	
Document and Revision RP/0/A/5000/004, Site Area Emergency, Rev 57 (PRR 2256535)		and the second to
不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不可以不		A Transport
Part I. Description of Activity Being Reviewed (event or action, or series	of actions that may result in a change	to the
emergency plan or affect the implementation of the emergency plan):		
Deleted the following steps:		
2.8 Initiate Emergency Response Data System (ERDS) transmission by 2.8.1 Logon to the SRO, BOP or OAC Room business computer 2.8.2 Click the "ERDS" Icon on the desktop. 2.8.3 Once the ERDS logon window appears, enter the passwor 2.8.4 Once the ERDS window appears, ensure the "Current Mod"Disconnect".	on either unit.	
2.8.5 Click on the "Connect (Activate)" button for the unit.		
2.8.6 Click on "Yes" in the message box that appears.     2.8.7 The value of "Status" for the unit should soon change to "T "Messages Sent" should begin incrementing.     2.8.8 IF ERDS transmission will not connect to the NRC, inform	-	
Coordinator will troubleshoot and initiate ERS transmission upor		
Enclosure 4.3, Command and Control Turnover Briefing Form, was revis Turnover Form in AD-EP-ALL-0104, ERO Common Guidelines and Forn	ed to align with the Command and Cons.	ntrol
Specific Changes are:  Added: "Mode Shutdown Date: Time:  Added: "Take Cover Order: YES NO TIME: "  Added: "Rapid Evacuation: YES NO TIME: "  Added: "Last ENF Number: "  Added: "Continuous Communications with NRC Established: YES NO"		
Deleted: "[] Stable [] Degrading [] Improving" from each of the Unit Status Deleted: "ERDS Activated: Yes No N/A" from each of the Unit Status		

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4 Page 2 of 8

### << 10 CFR 50.54(q) Screening Evaluation Form >>

anged: "Turnover: (From): [] CR / [] anged: "(TO) [] TSC / [] EOF" to "(To anged: "Units(s) Affected (circle) [] A anged: "Last ENF Sent (time): anged: "Last Message Sent (time):_v 56 Enclosure 4.3	O) [] CR / [] TSC/ [] EOF All []1 []2 []3" to "Units(s) Affec " to " Last Notification complete	ted (circle) []1 []2 []3ed (time):	
· · · · · · · · · · · · · · · · · · ·	Enclosure 4.3 ommand and Control Turnover Briefin	g Form	RP/ <b>0</b> /A/5000/004 Page 1 of 1
Station: ( ) CNS ( ) MNS ( ) OHS ( ) BNI	()Hill ()RNP	Turnover: (circle) (From):	•
Unit(s) Affected: (circle) ( ) All ( ) 1 ( )2( )	3	(10)	☐ TSC / ☐ EOF ☐ Shift Change
Site Area Emergency declared at	Cont   Pr Cont		
☐ Stable ☐ Degrading ☐ Improving	☐ Stable ☐ Degrading ☐ Improving	☐ Stable ☐ Degra	
FPB Status (circle appropriate condition)  Fuel Intact Potential Loss Loss  RCS Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:	FPB Status (circle appropriate condition)  Fuel Intact Potential Loss Loss  RCS Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:	RCS Intact Pote	ntial Loss Loss ntial Loss Loss ntial Loss Loss
Eyolutions în Progress:	Evolutions in Progress:	Evolutions in Progress:	
ERDS Activated: Yes No N/A	ERDS Activated: Yes No N/A	ERDS Activated: Yes	No N/A
Response Procedures in Progress (optional):	EOP/APs in Progress	(optional):	
Station Priorities:			

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4 Page 3 of 8

### << 10 CFR 50.54(q) Screening Evaluation Form >>

Com	Enclosure 4.3 nmand and Control Turnover Briefing Form	RP/ <b>0</b> /A/5000/004 Page 2 of 1
	mand and Control Inthover Diseased Form	Page 2 01 1
Site Assembly: YES NO TIME: Site Evacuation: YES NO TIME: Location/Comments:	Other Agency Involvement:  D MEDICAL D FIRE D LAW ENFORCEME Additional Information (Injuries):	NT DOTHER
Padialogicals Engreenes Marker dans Seite engreund	YES NO Who	
Release in Progress: YES NO Field Monitoring Teams I	Deployed: YES NO Number	
Release Pathway:	WIND SPEED: WIND DIRECTION:	-
Offsite PARS Recommended: YES NO Zones Evacuate	ed: Zones Sheltered:	
	lable: YES NO Have Dose Assessors discussed Turnover? YES NO	
Off-Site Notifications: Last ENF Sent (time):	Next ENF Due (time):	1117,1
NRC Communication: Last Message Sent (time):	· · · · · · · · · · · · · · · · · · ·	
Have Communicators discussed Turnover with acquiring facil	<u>:</u> :	
Upon the transfer of Command and Control, the following Event Classification:		
	· _	,
State and Local Notification:   CR TS		
Emergency Exposure Controls & KI:  CR TS  Dose Assessment:  CR TS		
Name of Individual turning over Duties:		
	<del></del>	
Turnover Complete: YES NO TSC / EOF Activated at:		_
Turnover Complete: YES NO TSC / EOF Activated at:		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time		
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
umover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	
Turnover Complete: YES NO TSC / EOF Activated at: (circle) (circle) Time	Date Mame individual assuming duties	

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: 02/25/2019

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
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ATTACHMENT 4 Page 4 of 8

### << 10 CFR 50.54(q) Screening Evaluation Form >>

·	Encloss ommand and Control T		RP/ <b>O</b> /A/5000/004 Page <b>□</b> of <b>2</b>
Station: 🗆 BNP 🗆 CNS 🗀 HNP 🗆 MNS		Tur	
	dared at:EAL #	General E	dared at:EAL#:EAL#:EAL#:
Unit 1		Rx Cool Rx Cool Pres	SS Rx Power Cont. Press Rx Cool Press Rx Cool Press
Mode <u>Shuldovin</u> Date: Time:	Mode Shuldown		Mode <u>Shutdavan</u> Date:Time:
FPB Status (circle appropriate condition)  Fuel Intact Potential Loss Loss  RCS Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:	FPB Status (circle appropriate Intact Potential RCS Intact Potential Cont Intact Potential Major Equipment Out of Ser	Loss Loss LossLoss LossLoss	FPB Status (circle appropriate condition)  Fuel Intact Potential Loss Loss  RCS Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:
Evolutions in Progress:	Evolutions in Progress:		Evolutions in Progress:
ERDS Activated: Yes No N/A Response Procedures in Progress (optional):		Nn N/A Imergency/Abnormal Proce	ERDS Activated: Yes No N/A edures in Progress (optional):
Station Priorities:			

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EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4
Page 5 of 8

### << 10 CFR 50.54(q) Screening Evaluation Form >>

		<del></del>		
Enclosure 4.3	/5000/00A			
Command and Control Turnover Briefing Form		RP/ <b>0</b> /A/5000/004 Page <b>2</b> of <b>2</b>		
Site Assembly: YES NO TIME: Location/Comments: Other Agency In Site Evacuation: YES NO TIME: DIMEDICAL	ivolvement: D FIRE D LAW ENFORCE	MENT DOTHER		
Take Cover Order: YES NO TIME: Additional Inform		MENT 20 MEN		
Rapid Evacuation: YES NO TIME:				
Radiological: Emergency Worker dose limits approved: YES NO For whom:				
Release in Progress:YES NO Field Monitoring Teams Deployed: YES NO Number				
Release Pathway: WIND SPEED: WIND DI	RECTION:			
· · · · · · · · · · · · · · · · · · ·	red:	<del></del>		
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose Assessors discussed				
Off-Site Notifications: Last Notification Completed (lime): Last ENF Number: Next ENF Du	e (time):			
NRC Communication: Notified (time): Continuous Communications with NRC Established:	YES NO			
Have Communicators discussed Turnover with acquiring facility Communicators? YES NO				
Upon the transfer of Command and Control, the following will be performed by:	_			
Event Classification:	<b>.</b> d EOF			
State and Local Notification:				
Site Emergency Exposure Controls & Kit: CR TSC Control of FMTs: CR TSC	<b>⊒</b> EOF			
Dose Assessment: CR CR TSC EOF				
Name of Individual turning over Duties:		İ		
Turnover Complete: YES NO TSC/EOF Activated at				
( <u>circle)</u> (circle) Time Date Name individ	lual assuming duties			
	and the state of t			
Part II. Activity Previously Reviewed?	Yes □	No X		
Is this activity Fully bounded by an NRC approved 10 CFR 50.90 submittal or	10 CFR 50.54(q)	Continue to		
Alert and Notification System Design Report?	Effectiveness	Attachment 4,		
·	Evaluation is not	10 CFR		
If yes, identify bounding source document number or approval reference and	required. Enter	50.54(q)		
ensure the basis for concluding the source document fully bounds the proposed	justification	Screening		
change is documented below:	below and	Evaluation		
	complete	Form, Part III		
Justification:	Attachment 4,			
	Part V.			
Bounding document attached (optional)				
The first through the trade of the principle is the principle of the trade of the trade of the trade of the principle of the trade of the principle of the trade of the principle of the principl	E BORNOUS BOLLOWERS SO, SAND BORNOUS SO.	A CONTRACTOR OF THE CONTRACTOR		

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EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602		
	Rev. 5		
1			

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Part III. Editorial Change	Yes		No	Х
Is this activity an editorial or typographical change only, such as formatting, paragraph numbering, spelling, or punctuation that does not change intent?  Justification:	10 CFR 50.54(q) Effectiveness Evaluation is not required. Enter justification and complete Attachment 4,		Continue to Attachment 4, Part IV and address non editorial changes	
	Part V.			and the department of the
Part IV. Emergency Planning Element and Function Screen (Reference Attachme Screening Criteria)  Does this activity involve any of the following, including program elements from NIII? If answer is yes, then check box.	nt 1, Consider			_
1 10 CFR 50.47(b)(1) Assignment of Responsibility (Organization Control)				
1a Responsibility for emergency response is assigned.				Х
The response organization has the staff to respond and to augment staff on a continuing basis (24-7 staffing) in accordance with the emergency plan.				
2 10 CFR 50.47(b)(2) Onsite Emergency Organization				
2a Process ensures that onshift emergency response responsibilities are staffed	Process ensures that onshift emergency response responsibilities are staffed and assigned			
2b The process for timely augmentation of onshift staff is established and maintained.				
3 10 CFR 50:47(b)(3) Emergency Response Support and Resources				
3a Arrangements for requesting and using off site assistance have been made.				
State and local staff can be accommodated at the EOF in accordance with the emergency plan. (NA for CR3)				
4 10 CFR 50:47(b)(4) Emergency Classification System				
A standard scheme of emergency classification and action levels is in use. (Requires final approval of Screen and Evaluation by EP CFAM.)				
5 10 CFR 50.47(b)(5) Notification Methods and Procedures		in vario Kanara		
Procedures for notification of State and local governmental agencies are capable of alerting them of the declared emergency within 15 minutes (60 minutes for CR3) after declaration of an emergency and providing follow-up notification.			m of the and	
Administrative and physical means have been established for alerting and providing prompt instructions to the public within the plume exposure pathway. (NA for CR3)				
The public ANS meets the design requirements of FEMA-REP-10, Guide for Evaluation of Alert and Notification Systems for Nuclear Power Plants, or complies with the licensee's FEMA-approved ANS design report and supporting FEMA approval letter. (NA for CR3)				

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Part I	V. Emergency Planning Element and Function Screen (cont.)	
6	10 CFR 50.47(b)(6) Emergency Communications	
6a	Systems are established for prompt communication among principal emergency response organizations.	
6b	Systems are established for prompt communication to emergency response personnel.	
7	10 CFR 50.47(b)(7) Public Education and Information	
7a	Emergency preparedness information is made available to the public on a periodic basis within the plume exposure pathway emergency planning zone (EPZ). (NA for CR3)	
7b	Coordinated dissemination of public information during emergencies is established.	
8	10 CFR 50.47(b)(8) Emergency, Facilities and Equipment	
8a	Adequate facilities are maintained to support emergency response.	
8b	Adequate equipment is maintained to support emergency response.	
9	10 CFR 50 47(b)(9) Accident Assessment	
9a	Methods, systems, and equipment for assessment of radioactive releases are in use.	
10	10.CFR 50.47(b)(10) Protective Response	
10a	A range of public PARs is available for implementation during emergencies. (NA for CR3)	
10b	Evacuation time estimates for the population located in the plume exposure pathway EPZ are available to support the formulation of PARs and have been provided to State and local governmental authorities. (NA for CR3)	
10c	A range of protective actions is available for plant emergency workers during emergencies, including those for hostile action events.	
10d	KI is available for implementation as a protective action recommendation in those jurisdictions that chose to provide KI to the public.	
11	.10 CFR 50:47(b)(11) Radiological Exposure Control	
11a	The resources for controlling radiological exposures for emergency workers are established.	
12	10 CFR 50.47(b)(12) Medical and Public Health Support	
12a	Arrangements are made for medical services for contaminated, injured individuals.	
13	10 CFR 50:47(b)(13) Recovery Planning and Post-accident Operations	1.1
13a	Plans for recovery and reentry are developed.	
14	10 CFR 50:47(b)(14) Drills and Exercises	
14a	A drill and exercise program (including radiological, medical, health physics and other program areas) is established.	
14b	Drills, exercises, and training evolutions that provide performance opportunities to develop, maintain, and demonstrate key skills are assessed via a formal critique process in order to identify weaknesses.	
14c	Identified weaknesses are corrected.	
15	10 CFR 50:47(b)(15) Emergency Response Training	
15a	Training is provided to emergency responders.	

EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Part I	V. Emergency Planning Element and Function	Screen (cont.)			
16:	10 CFR 50.47(b)(16) Emergency Plan Mainter	nance		eNote S	
16a	Responsibility for emergency plan development and review is established.				
16b Planners responsible for emergency plan development and maintenance are properly trained.					
PART IV. Conclusion					
If no Part IV criteria are checked, then provide Justification and complete Part V below.					
If any Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV criteria are checked, then complete Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part V and perform a 10 CFR 50.54(q) Effectiveness Evaluation. Program Element 4a requires final approval of Screen and Evaluation by EP CFAM.					
	hanges to the Command and Control Turnover tiveness Evaluation.	Briefing Form will be further evaluated in an			
Duke Energy has transitioned to an "always-on" mode of ERDS transmission, making the steps to activate ERDS unnecessary. A Controlled Support Document (CSD) for ERDS troubleshooting has replaced the steps to activate ERDS. Deletion of the ERDS Activation steps does not affect any of the 50.47(b) emergency planning standards, as ERDS is addressed in 10 CFR Appendix E to Part 50 in section VI, Emergency Response Data System, not in the 50.47(b) Planning Standards.			Х		
With regard to 10 CFR Appendix E to Part 50 in section VI, ERDS remains a direct near real-time electronic data link between the licensee's onsite computer system and the NRC Operations Center, and the features listed in Section VI are maintained: the testing method and frequency; the software and hardware; the selected plant parameters; and the transmission rate. No further evaluation of the removal of the ERDS steps is required by 50.54(q).					
Part V. Signatures:  EP CFAM Final Approval is required for changes affecting Program Element 4a. If CFAM approval is <u>NOT</u> required, then mark the EP CFAM signature block as not applicable (N/A) to indicate that signature is not required.					
Prepa	arer Name (Print):	Preparer Signature:	Date:		
	White	See CAS	See CAS		
See C	ewer Name (Print): CAS	Reviewer Signature: See CAS	Date: See CAS		
	over (EP Manager Name (Print):	Approver Signature: See CAS	Date: See CAS		
Appro N/A	over (EP CFAM, as required) Name (Print)	Approver Signature:	Date:		

**QA RECORD** 



#### **ACTION REQUEST - 02256648**

#### **Action Request Assignment Details**

ASSIGNMENT NUMBER : 02 SUB :

Type

: EP02

**Due Date** 

: 02/11/2019 1

Pri Resp Fac

**Status** 

: COMPLETE

Reschedule

Pri Resp Group

Assigned To

: STACI N WHITE

Sec Resp Fac

Subject

: 50.54(Q) EVALUATION

Sec Resp Group

Aff Facility

: CN

Unit

System

UCR

Schedule Ref

Organization

Department

: 13650

Discipline

**Est Manhrs** 

Ext Comp Date :

Description

COMPLETE 50.54(Q) EVALUATION IN ACCORDANCE WITH AD-EP-ALL- 0602.

#### **Action Request Assignment Completion Notes**

I approve the 50.54Qeval for RP/0/A/5000/004 rev 57.

#### **Action Request Assignment Status History**

Updated Date	Updated By	Assgn Status
02/07/2019	144004	INPROG
02/07/2019	144004	
02/07/2019	144004	NTFY/ASG
02/07/2019	144004	ACC/ASG
02/07/2019	144004	AWAIT/C
02/08/2019	DMBRUNS	ACC/ASG
02/08/2019	144004	AWAIT/C
02/08/2019	MEHARE	COMPLETE

#### **Assgn Due Date**

02/11/2019

### **Action Request Assignment Attributes**

Printed : 02/25/2019



ACTION REQUEST - 02256648

#### Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

Minor editorial comments. ~DMB

Updated On

**Updated By** 

20190208

**DMBRUNS** 

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

#### **Action Request Assignment Completion Approval**

Route List : 001

Route List Initiator : 144004

Group Type

Send Send Date Time

Action **Action** Taken

Date Time **Last Name** 

**Passport DMBRUNS MEHARE** 

**DMBRUNS** 

Α Α

Α

02/07/2019 14:18 02/08/2019 14:15

02/08/2019 14:01

RETURNED 02/08/2019 13:53 APPROVED 02/08/2019 15:55 APPROVED 02/08/2019 14:15

**BRUNSON HARE** 

BRUNSON

Action Request Assignment Cause/Action

Action Request Assignment Reference Documents

Doc

Sub

Minor

Facility Type

Type

Document

Sheet Rev

Rev

Title

Action Request Assignment Reference Equipment

Equip Equip

Equip

**Equip** 

Rev

Unit Facility

System Type

Number

Tag

Status

Rev Status

**Action Request Assignment Cross References** 

Ref Type Ref Nbr

Ref Ref Nbr

Type

Sub

Status

Limit

AS CIs Description

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Page



**ACTION REQUEST - 02256648** 

**Action Request Assignment Appendices** 

APPENDIX 1

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EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	AD-EP-ALL-0602
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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Screening and Evaluation Number.	Applicable Sites	
	BNP	
EREG #:2256648	CNS	Х
-	CR3	
	HNP	
	MNS	
5AD #:2214108	ONS	
	RNP	
	GO	
Document and Revision	<del></del>	<u> </u>
RP/0/A/5000/004, Site Area Emergency, Rev 57 (PRR 2256535)		
THE THE THE STATE OF THE STATE	garland of a signature of the contract of the signature o	- very low u
Part I. Description of Proposed Change:		
Enclosure 4.3, Command and Control Turnover Briefing Form, is being revised to all Control Turnover Form in AD-EP-ALL-0104, ERO Common Guidelines and Forms.	ign with the Command an	d
Control Purifice in Similar AD-LF-ALL-0104, LNO Confinion Guidelines and Forms.		
Specific Changes are:		
Added: "Mode Shutdown Date: Time: " to each of	f the Unit Status blocks	
Added: "Take Cover Order: YES NO TIME:"		
Added: "Rapid Evacuation: YES NO TIME:"		
Added: "Last ENF Number:"		
Added: "Continuous Communications with NRC Established: YES NO"		
Deleted: "[] Stable [] Degrading [] Improving" from each of the Unit Status blocks		
Deleted: "ERDS Activated: Yes No N/A" from each of the Unit Status blocks		
Changed: "Turnover: (From): [] CR / [] TSC" to "(From): [] CR / [] TSC/ [] EOF"		
Changed: "(TO) [] TSC / [] EOF" to "(TO) [] CR / [] TSC / [] EOF  Changed: "  Initials) Afforded (circle) II All III III III III III III III III		
Changed: "Units(s) Affected (circle) [] All []1 []2 []3" to "Units(s) Affected (circle) [] Changed: "Last ENF Sent (time):" to "Last Notification completed (time):		
Changed: "Last Message Sent (time):" to "Notified (time):"		
Change Last message Sont (anto) to Meaned (anto)		

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

		Co	ommand a	,	losure 4.3 ol Turnover	Briefing F	Form			RP/0/A/50 Page 1 of	
Station: ( ) CNS ( ) N Unit(s) Affected: (circle)	() All ()1	( ) BNP		? :()RM	ĮP	1	Turnover:	(circle)	(From): (TO)	☐ C/R / I ☐ TSC / I ☐ Shift Cha	D EOF
Emergency Classification	: Unusual Event o	leclared at	·	EAL#:		Alert Declar	ed at:		EAL#:		
	Emergency declare					ergency Deck	* **:				
Rx Power Cont. Press	Rx Cool R	x Cool Press	Rx Power	Cont. Press	Unit 2 Rx Cool Temp	Rx Cool Pa		Power	Cont. Press	Unit 3  Rx Cool  Temp	Rx Cool Press
					I						
FPB Status (circle appropress) Fuel Intact Potential RCS Intact Potential Cont Intact Potential Major Equipment Out of Se Evolutions in Progress:	Loss Loss Loss Loss		Fuel In RCS In Cont In Major Equi	act Pole	ntial Loss L	ition) óss oss oss	Fu RC Co Ma	el Int S Int nt Int jor Equip	act Potent act Potent	opriate conditi ial Loss Lo ial Loss Lo ial Loss Lo Service:	ss ss
ERDS Activated: Yes	No N/A		ERDS Activ	rated: Yes	No N/A		ER	DS Activ	ated: Yes	No N/A	
Response Procedures in Pr	ogress (optional):				EOP/APs in	Progress (cp	tional):				•
Station, Priorities:				1							
÷								ŕ			

EMERGENCY PLAN CHANGE SCREENING AND		AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	٠.,	Rev. 5
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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

	Сотщав	Enclosure 4.3 and Control Turnover Briefing Form	RP/ <b>0</b> /A/5000/004 Page 2 of 1
Site Assembly: YES Site Evacuation: YES Location/Comments:	NO TIME: NO TIME:	Other Agency Involvement:  I MEDICAL I FIRE I LAW EN Additional Information (Injuries):	
Radiological: Emerge	ency Worker dose limits approved: YES	S NO Who	
Release in Progress: YE	S NO Field Monitoring Teams Deploy	yed: YES NO Number	•
	₹*	WIND SPEED: WIND DIRECTION:	<u> </u>
Offsite PARS Recommen	ided: YES NO Zones Evacuated:	Zones Sheltered:	
	*	YES NO Have Dose Assessors discussed Turnover? YE	
Off-Site Notifications:	Last ENF Sent (time):	Next ENF Due (time):	
NRC Communication:	Last Message Sent (time):		
Have Communicators dis	cussed Turnover with acquiring facility Co	ommunicators? YES NO	
State and Local Notif	fication: DCD DTCC C	DEOF NRC Notifications: DCR DTSC	
Dose Assessment:	e Controls & KI: CR CR TSC CR CR TSC CR CR TSC CR CR CR CR TSC CR	Control of FMTs: CR CR TSC CR	
Dose Assessment:	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	
Dose Assessment:  Name of Individual tuming  Turnover Complete: YE  (circle)	e Controls & KI: CR TSC CR TSC TSC G  g over Duties: S NO TSC / EOF Activated at: (circle) Time Date	Control of FMTs: CR CT TSC CT	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

			C	ommand :		osure 4.3 ol Turnovei	r Briefing F	orm &	,	RP/O/A/5	
[										·	
Station: 🗀 1	BNP DC	NS DHNP	DMNS	EI ON:	S DRNF		T	umover:	_	CR / D TS	
Unit(s) Affe	cted:	01 0	2 🗆 3							□ CR / □ <u>TS</u> Change	
Emergency	Classification	: Unusual Ev	ent Declared a	t	EAL <u>#</u>		Alert De	edared at:	EAL#:		•
		Site Area Fr	nergency Dec	lared at	FA	i #-	General	Fmemency N	eclared at:	EAL#	_
. 1. 9 · 9 ·	:41	nit 1				Unit 2		THE STATE OF THE S		Unit 3	<del></del>
Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press	Rx Pover	Cont. Press	Rx Cool Temp	Rx Cool Pro	ess Rx Pow	er Cont.	Rx Cool Temp	Rx Cool Press
Mode	Shuldown	Date: Tin	ne:	Mode	Shuldov	n. Date:	Time:	Mode	Shuldov	m Date:	Time:
FPB Status	(circle approp	riate condition	, -			opriate cond	lition)		atus (circle appr		
Fuel <u>Inta</u>	ct Polentia	Loss Loss		Fuel <u>In</u>	<u>fact</u> Poten	tial Loss L	-083		Intact Poteni	•	•
		Loss Loss				fiai LossL		RCS		fial Loss <u>Lo</u>	
	ment Out of Se				pment Out of	fial LossL Service:	.055	Cont Major E	Intact Potent quipment Out of	fial LossLo Service:	55
	_							i i			
Evolutions in	Progress:			Evolutions	in Progress:			Evolution	ns in Progress:		
ERDS Activa	ited: Yes	No N/A		ERDS Acti	vated: Yes	No.	N/A	ERDS A	ctivated: Yes	No I	N/A
Response P	rocedures in P	rogress (optiona	1):			Emergency	/Abnormal Pro	cedures in Pro	gress (optional):		
Station Prior	ities:					<u>L</u>		<del></del>			

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Enclosure 4.3	RP/ <b>0</b> /A/5000/004
Command and Control Turnover Briefing	
Site Assembly: YES NO TIME: Location/Comments:	Other Agency Involvement:
	D MEDICAL D FIRE D LAW ENFORCEMENT D OTHER
Take Cover Order: YES NO TIME:	Additional Information (Injuries):
Rapid Evacuation: YES NO TIME:	
Radiological: Emergency Worker dose limits approved: YES NO For whom:	
Release in Progress: <u>YES</u> NO Field Monitoring Teams Deployed: YES NO Number	er
Release Pathway: WIND SPEED:	WIND DIRECTION:
Offsite PARS Recommended: YES NO Zones Evacuated:	Zones Sheltered:
KI Recommended: YES NO Have Dose Assessment Available: YES NO Have Dose Ass	
Off-Site Notifications: Last Notification Completed (lime): Last ENF Number:	
NRC Communication: Notified (time): Continuous Communications with NRC	C Established: YES NO
Have Communicators discussed Turnover with acquiring facility Communicators?  YES NO	
Upon the transfer of Command and Control, the following will be performed by:	
Event Classification:	
	CR TSC
Site Emergency Exposure Controls & KI: CR TSC Control of FMTs:	CR TSC EOF
Dose Assessment: ☐ CR ☐ TSC ☐ EOF	
Name of Individual furning over Duties:	
Turnover Complete: YES NO TSC/EOF Activated at:	· .
( <u>circle)</u> (circle) Time Date	Name individual assuming duties
Additional Information:	
	•
Attachment 6 10 CED 50 54(a) Initiating Condition (IC) and Emparage	(Astion Lovel/CAL) and CAL
Attachment 6, 10 CFR 50.54(q) Initiating Condition (IC) and Emergency Bases Validation and Verification (V&V) Form, is attached (required for	- IO EAL
The second variation and verification (vav) form; is attached (required for	r IC or EAL change) No X
Part II. Description and Review of Licensing Basis Affected by the Property	osed Change:
II I D I III MBO	
Licensing Basis of the ERO	
The Assignment of Responsibilities is described in the originally approve	ed CNS Emergency Plan, Revision 2 (dated
January 1983), sections A.1.b, Concept of Operations, A.1.c, Block Diag	gram of Organization Interrelationships, and
A.1.d, Key Decision Making.	
The current licensing basis regarding Assignment of Responsibility is de	escribed in CNS Emergency Plan Section A,
Revision 150 (dated September 2017) sections A.1.b, Concept of Opera	ations, A.1.C, Block Diagram of
Organization Interrelationships, and A.1.d, Key Decision Making.	
During revisions to these sections, the titles of some of the Eme	ergency Response personnel and facilities
have changed (i.e., Shift Supervisor to Shift Manager, Crisis Ma	anagement Center to Emergency
Operations Facility), but the individuals responsible for Comman	
Command and Control has remained the same. The summation	of the incremental changes over time do

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: 02/25/2019

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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

not reduce the effectiveness of the CNS Emergency Plan when compared to the NRC-approved Plan.

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 2, lists RP/0/A/5000/004, as an implementing procedure. (AD-EP-ALL-0104 had not been created when the CNS Emergency Plan was initially approved by the NRC.)

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 147, lists RP/0/A/5000/004, and AD-EP-ALL-0104 as implementing procedures.

#### List Commitments Associated with the Change

A search to identify site specific commitments related to the ERO positions and their assigned responsibilities was performed. No site specific commitments were identified aside from those in the Emergency Plan.

RG 1.219 Guidance on Making Changes to Emergency Plans for Nuclear Power Reactors, Rev 1. (July 2016) 3.5 Emergency Plan

- a. "Emergency plan" means the document(s) that the licensee prepared and maintains that identifies and describes its methods for maintaining emergency preparedness and responding to emergencies. An emergency plan includes the plan that the NRC originally approved and all subsequent changes that the licensee made with and without prior NRC review and approval under 10 CFR 50.54(q). See 10 CFR 50.54(q)(1)(ii) for additional information.
- b. This definition highlights that "emergency plan" includes the documents that describes the programmatic methods that the licensee uses to maintain emergency preparedness and to respond to emergencies. These methods, or program elements, are the implementation aspects of the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50 and generally correspond to the evaluation criteria of NUREG-0654 or approved alternatives that supply specific acceptable methods for complying with the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50. Such programmatic documents are subject to the 10 CFR 50.54(q) change process. Non-programmatic documents, such as training rosters, equipment and maintenance test reports, lesson plans, and other documents that "document the performance" of the program elements, as opposed to those that "establish" the program elements, are not included.
- c. Ordinarily, sub-tier documents such as emergency plan implementing procedures (EPIPs) are not considered to be part of an emergency plan for the purpose of evaluating proposed changes. If a licensee relocates a programmatic description from the emergency plan to a sub-tier document, that programmatic description continues to be subject to the 10 CFR 50.54(q) change process. For example, licensees have relocated the details of emergency classification schemes from the emergency plan to an EPIP or to large wall charts maintained in the control room. Because the EPIP or wall chart is now the means to demonstrate compliance with the planning standards in 10 CFR 50.47(b)(4), these sub-tier documents are subject to 10 CFR 50.54(q). Repeating, as opposed to relocating, program element descriptions in sub-tier documents do not necessarily make the sub-tier documents subject to the 10 CFR 50.54(q) change process. However, the descriptions in the various documents must remain consistent.
- e. This definition also highlights the need to consider the NRC-approved plan and the subsequent changes in reviewing against 10 CFR 50.54(q) to ensure that a series of incremental changes (each determined not to reduce the effectiveness of the plan) do not reduce the effectiveness of the plan when compared to the

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

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: 23

#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

NRC-approved plan.

The differences in approved revisions and the current revisions of the Emergency Plans have been reviewed and they have been determined to meet the regulatory requirements required during revisions. Each revision has been reviewed by the NRC during the inspection process.

Part III. Description of How the Proposed Change Complies with Regulation and Commitments.

If the emergency plan, modified as proposed, no longer complies with planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50, then ensure the change is rejected, modified, or processed as an exemption request under 10 CFR 50.12, Specific Exemptions, rather than under 10 CFR 50.54(q):

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The changes described continue to meet NRC requirements as described in 10 CFR 50.47(b) and 10 CFR 50, Appendix E and Emergency Plan Sections A and P.

Printed : 02/25/2019

# EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q) Rev. 5

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#### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Part IV. Description of Emergency Plan Planning Standards, Functions and Program Elements Affected by the Proposed Change (Address each function identified in Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV of associated Screen):

The following portion of planning standard §50.47(b)(1) is related to the change:

Primary responsibilities for emergency response by the nuclear facility licensee have been assigned, and each principal response organization has staff to augment its initial response on a continuous basis.

The function for §50.47(b)(1) related to this change are:

a. Responsibility for emergency response is assigned.

Appendix E to Part 50 lists the following:

IV. Content of Emergency Plans

A. Organization

The organization for coping with radiological emergencies shall be described, including definition of authorities, responsibilities, and duties of individuals assigned to the licensee's emergency organization and the means for notification of such individuals in the event of an emergency. Specifically, the following shall be included:

- 1. A description of the normal plant operating organization.
- 2. A description of the onsite emergency response organization (ERO) with a detailed discussion of:
  - a. Authorities, responsibilities, and duties of the individual(s) who will take charge during an emergency;

The NUREG-0654 Part II.A elements for §50.47(b)(1) related to this change are:

- A.1.d. Each organization shall identify a specific individual by title who shall be in charge of the emergency response.
- A.2. Each principal organization shall be capable of continuous (24-hour) operations for a protracted period. The individual in the principal organization who will be responsible for assuring continuity of resources (technical, administrative, and material) shall be specified by title.

Part V. Description of Impact of the Proposed Change on the Effectiveness of Emergency Plan Functions:

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The description of the authorities, responsibilities and duties of the individual(s) who will take charge in an emergency is maintained. There is no reduction in effectiveness of the CNS Emergency Plan.

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Pa	art VI. Evaluation Conclusion.					
An	swer the following questions about the proposed change.					
1	Does the proposed change comply with 10 CFR 50.47(b) and 10 CFR 50 Appendix E?	Yes X	No □			
2	Does the proposed change maintain the effectiveness of the emergency plan (i.e., no reduction in effectiveness)?	Yes X	No 🗆			
3	Does the proposed change maintain the current Emergency Action Level (EAL) scheme?	Yes X	No □			
4	Choose one of the following conclusions:					
a The activity does continue to comply with the requirements of 10 CFR 50.47(b) and 10 CFR 50, Appendix E, and the activity does not constitute a reduction in effectiveness or change in the current Emergency Action Level (EAL) scheme. Therefore, the activity can be implemented without prior NRC approval.						
b The activity does not continue to comply with the requirements of 10 CFR 50.47(b) or 10 CFR 50 Appendix E or the activity does constitute a reduction in effectiveness or EAL scheme change. Therefore, the activity cannot be implemented without prior NRC approval.						
Part VII. Disposition of Proposed Change Requiring Prior NRC Approval						
Will the proposed change determined to require prior NRC approval be either revised or rejected? Yes □ No □						
If No, then initiate a License Amendment Request in accordance 10 CFR 50.90, AD-LS-ALL-0002, Regulatory Correspondence, and AD-LS-ALL-0015, License Amendment Request and Changes to SLC, TRM, and TS Bases, and include the tracking number:						

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

			* *		
10 CFR 50.47(b)(4) (i.e., Emergency Action Le	al is required for changes affecting risk significant planning evels and Emergency Action Level Bases). If CFAM appro as not applicable (N/A) to indicate that signature is not re	oval is <u>N</u>	rd <b>IOT</b>		
Preparer Name (Print): Staci White	Preparer Signature: See CAS	Date: 2/7/20	19		
Reviewer Name (Print): See CAS	Reviewer Signature: See CAS	Date: See C	AS		
Approver (EP Manager) Name (Print): See CAS	Approver Signature: See CAS	Date: See C	:AS		
Approver (CFAM, as required) Name (Print): N/A	Approver Signature: N/A	Date: N/A			
			-		
If the proposed activity is a change to the E-Plan or implementing procedures, then create two EREG General Assignments.  If required by Section 5.6, Submitting Reports of Changes to the NRC, then create two EREG General Assignments.					
One for EP to provide the 10 CFR 50.54(q) summary of the analysis, or the completed 10 CFR 50.54(q), to Licensing.					
One for Licensing to submit the 10 CFR 50.54(q) information to the NRC within 30 days after the change is put in effect.					

QA RECORD



**ACTION REQUEST - 02256648** 

#### Action Request Assignment Details

ASSIGNMENT NUMBER : 04

Type

: GNRL

**Due Date** 

SUB :

: 02/25/2019

Pri Resp Fac

Status

: NTFY/ASG

Pri Resp Group

Reschedule

Assigned To

: STACI N WHITE

Sec Resp Fac

**Subject** 

Sec Resp Group

: PROVIDE 50.54(Q) INFO TO LICENSING FOR NRC 30 DAY SUBMITTAL

System

Aff Facility

**UCR** 

: CN

Unit

Organization

Schedule Ref Department

: 13650

Discipline

**Est Manhrs** 

Ext Comp Date

#### Description

THE REGULATION AT 10 CFR 50.54(Q)(5) REQUIRES THE LICENSEE TO SUBMIT, AS SPECIFIED IN 10 CFR 50.4(B)(5)(II), A REPORT OF EACH CHANGE TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL, INCLUDING A SUMMARY OF ITS ANALYSIS, WITHIN 30 DAYS AFTER THE CHANGE IS PUT IN EFFECT. THE NRC HAS STATED THAT THE SUMMARY REPORT OR A FULL COPY OF THE COMPLETED 50.54(Q) MAY BE SUBMITTED TO SATISFY THIS REQUIREMENT. SUBMIT TO LICENSING, A SUMMARY, AS DESCRIBED IN AD-EP-ALL- 0602, OR THE FULL 50.54(Q) REVIEWING ALL CHANGES TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL FOR SUBMITTAL TO THE NRC'S DOCUMENT CONTROL DESK, WITH A COPY TO THE APPROPRIATE REGIONAL OFFICE, AND A COPY TO THE APPROPRIATE NRC RESIDENT INSPECTOR. IF THE COMMUNICATION IS ON PAPER, THE SUBMISSION TO THE DOCUMENT CONTROL DESK MUST BE THE SIGNED ORIGINAL.

#### **Action Request Assignment Completion Notes**

#### Action Request Assignment Status History

**Updated Date** 02/07/2019

**Updated By** 

Assgn Status

Assgn Due Date

02/25/2019

144004 144004 **INPROG** 

02/25/2019

02/25/2019

144004

NTFY/ASG

Page Printed : 02/25/2019



ACTION REQUEST - 02256648

#### **Action Request Assignment Attributes**

**Request Attribute** 1A COMMITTED

**Values** 

Reqd

Date

Request Attribute

**1B CHANGE BASIS** 

**Values** 

Reqd

Date

Name:

Name:

Request Attribute **2A COMMENTS** 

Name:

Values

Reqd

Date

Request Attribute

**BENEFIT REALIZED** 

**Values** 

Reqd

**Date** 

Name:

Request Attribute

**FINAL ISSUE** 

Name:

**Values** 

Reqd

Date

Request Attribute

**IMPORTANT TO NRC** 

Name :

**Values** 

Reqd

Date

Request Attribute

IT LABOR ESTIMATE

Name :

**Values** 

Reqd Ν

**Date** 

Request Attribute

LTAM ISSUE ID

Name:

**Values** 

Reqd

Date

Printed

: 02/25/2019

Page



#### **ACTION REQUEST - 02256648**

Request Attribute
PHC DUE DATE

**Values** 

Reqd

Date

Name :

Request Attribute
PLANT HEALTH ISSUE?

Values

Reqd

Date

Name :

Request Attribute

Request Attribute
T+1 CRITIQUE

**Values** 

Reqd N Date

RTTQ

Name:

Values

Reqd

Date

Name :

Request Attribute

Values

Reqd

<u>Date</u>

WBS

Name :

**Action Request Assignment Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Updated On

Updated By

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

**Action Request Assignment Completion Approval** 

Action Request Assignment Cause/Action

Printed : 02/25/2019

Page



#### **ACTION REQUEST - 02256648**

**Action Request Assignment Reference Documents** 

Doc

Sub

Minor

**Document** Type Type

Rev Sheet Rev

Title

Action Request Assignment Reference Equipment

Equip Equip

**Equip** 

Equip

Rev

Facility Unit

Facility

System Type

Number

Sub

Tag

Status

**Status** 

**Action Request Assignment Cross References** 

Ref Type Ref Nbr Ref Ref Nbr

Status Type

Limit

**AS Cls Description** 

Action Request Assignment Appendices

**Action Request Assignment Details** 

ASSIGNMENT NUMBER : 05

SUB :

: GNRL

Due Date

: 03/10/2019

Pri Resp Fac

Type **Status** 

: ACC/ASG

Reschedule

Pri Resp Group

**Assigned To** 

: TONYA S LOWERY

Sec Resp Fac

Subject

: LICENSING SUBMIT 50.54(Q) TO NRC WITHIN 30 DAYS OF

Sec Resp Group

**CHANGE** 

Aff Facility

: CN

Unit

**System** 

**UCR** 

Schedule Ref

Organization

Department

: 10380

Discipline

**Est Manhrs** 

Ext Comp Date :

Description

THE REGULATION AT 10 CFR 50.54(Q)(5) REQUIRES THE LICENSEE TO SUBMIT, AS SPECIFIED IN 10 CFR 50.4(B)(5)(II), A REPORT OF EACH CHANGE TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL, INCLUDING A SUMMARY OF ITS ANALYSIS, WITHIN 30 DAYS AFTER THE CHANGE IS PUT IN EFFECT. THE NRC HAS STATED THAT THE SUMMARY REPORT OR A FULL COPY OF THE COMPLETED 50.54(Q) MAY BE

: 02/25/2019 Printed

Page



Name :

# **Duke Energy**

#### **ACTION REQUEST - 02256648**

SUBMITTED TO SATISFY THIS REQUIREMENT. SUBMIT, WITHIN 30 DAYS OF IMPLEMENTING THE CHANGE, THE FULL 50.54(Q) OR SUMMARY (AS DESCRIBED IN AD-EP-ALL-0602) FOR ALL CHANGES TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL TO THE NRC'S DOCUMENT CONTROL DESK, WITH A COPY TO THE APPROPRIATE REGIONAL OFFICE, AND A COPY TO THE APPROPRIATE NRC RESIDENT INSPECTOR. IF THE COMMUNICATION IS ON PAPER, THE SUBMISSION TO THE DOCUMENT CONTROL DESK MUST BE THE SIGNED ORIGINAL.

#### **Action Request Assignment Status History**

 Updated Date
 Updated By
 Assgn Status
 Assgn Due Date

 02/07/2019
 144004
 INPROG

 02/25/2019
 144004
 NTFY/ASG

 02/25/2019
 144004
 NTFY/ASG

02/25/2019 144004 NTFY/ASG 02/25/2019 TSLOWER ACC/ASG

#### **Action Request Assignment Attributes**

Request Attribute Values Required N

Request Attribute Values Required N

Request Attribute Values Required N

Name:



#### **ACTION REQUEST - 02256648**

Request Attribute -

\_

Reqd N Date

Name :

Request Attribute

IMPORTANT TO NRC

Name:

<u>Values</u>

**Values** 

**Values** 

Reqd

<u>Date</u>

Request Attribute

IT LABOR ESTIMATE

Name:

Reqd N Date

Request Attribute

LTAM ISSUE ID

Name:

Values

Reqd

Date

Request Attribute

PHC DUE DATE

Name:

Values

Reqd

Date

**Request Attribute** 

PLANT HEALTH ISSUE?

Name:

Values

**Values** 

Reqd

Date

Request Attribute

RTTQ

Name :

Reqd

<u>Date</u>

Request Attribute

T+1 CRITIQUE

Name :

Values

 $\frac{\text{Reqd}}{\text{N}}$ 

Date

Request Attribute

WBS

Name :

Values

Reqd

Date

Printed: 02/25/2019

Page



**ACTION REQUEST - 02256648** 

**Action Request Assignment Routing/Return Comments** 

Routing Comments from the X601 Panel

**Updated On** 

**Updated By** 

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

**Updated On** 

Updated By

**Action Request Assignment Completion Approval** 

Action Request Assignment Cause/Action

**Action Request Assignment Reference Documents** 

Doc

Facility Type

Sub

**Document** Type

Minor

Sheet Rev Rev

Title

**Action Request Assignment Reference Equipment** 

Equip Equip

Equip

**Equip** 

Rev

Facility Unit

System Type

Number

Tag

**Status** 

Status

**Action Request Assignment Cross References** 

Ref Type

Ref Nbr

Ref Nbr Ref

Sub Type **Status** 

Limit

**Action Request Assignment Appendices** 

AS CIs Description

: 02/25/2019 **Printed** 

Page

# \*\*\*END OF REPORT\*\*\*



#### **ACTION REQUEST - 02256656**

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Action	D		$\Box$	stoile.
ACTION	Ren	uesi	DE	:Lalio
<i>,</i> (O(1O11				

Type

: EREG

Orig Date : 02/07/2019 12:51

Discovery Date :

**Subject** 

: RP/0/A/5000/005

**Description** 

CONTACT SITE EP SUPERVISOR FOR ASSISTANCE IN PREPARING EP01, EP02, AND EP03. ENSURE EREG IS CROSS-REFERENCED TO THE REG AR WHICH INITIATED IT. Perform 50.54(q) screen and evaluation

**Notes** 

**Priority** Severity

Report To

**Due Date** 

: 03/10/2019

Status : APPROVED 02/07/2019

**Event Date** 

Originator

**Facility** 

: 144004

: CN ...

**Originator Group** Department

: 13650

Organization

Owed To

**Owed To Group** 

: QUALREVW Department

Discipline

Action Request Status History

**Updated Date** 02/07/2019 02/07/2019

Owed To Fac : CN

Updated By 144004 144004

**AR Status** INPROG **APPROVED**  **AR Due Date** 02/11/2019

02/25/2019 02/25/2019 144004 144004

02/25/2019 03/10/2019

**Action Request Attributes** 

Request Attribute **BOUNDED EREG AR** 

Request Attribute

Values

Reqd

**Date** 02/07/2019

Name : STACI N WHITE

**Values** 

Reqd

**Date** 

**EREG AR CROSS XREF** 

Name : STACI N WHITE

Ν

02/07/2019

Request Attribute

**REG AR CROSS XREF** 

**Values** 

Reqd

**Date** 02/07/2019

Name: STACI N WHITE

: 02/25/2019 Printed

Page



**ACTION REQUEST - 02256656** 

**Action Request Notes** 

Action Request Routing/Return Comments

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

**Updated By** Updated On

**Updated By Updated On** 

**Action Request Approval Review** 

Route List : 001

Send

Send

Route List Initiator Action

**Action** 

Date Time **Last Name** Time Taken Date Type **Passport** Group

**Action Request Trend/Cause** 

Action Request Keywords

Keyword

Facility

**Keyword Description** 

**Action Request Reference Documents** 

Doc Type Sub

Type Document Minor

Title Sheet Rev Rev

Action Request Reference Equipment

**Equip** Equip

Equip

Equip

Rev

Facility Unit

System Type

Number

Tag

**Status** 

Status Rev

: 02/25/2019 Printed

Page



**ACTION REQUEST - 02256656** 

#### **Action Request Cross References**

Ref	Ref	Ref Ref Nbr		Limit	
Туре	Nbr	Sub Type	Status	AR CI	s Description
AR	02214116	5AD	COMP-NA	N	RP/0/A/5000/005 - 0000215965 GENERAL
	-				EMERGENCY
AR	02256536	PRR	COMPLETE	N	RP/0/A/5000/005 rev 060
AS	02187203	1900 GNRL	COMPLETE	Ν	EP Excellence Plan - Action SD-EP-4.2
AS	02194997	0200 PI	COMPLETE	Ν	Revise AD-EP-ALL-0602 to improve
, .0	02104007				templates to focus on why a

### **Action Request Assignment Details**

SUB : ASSIGNMENT NUMBER : 01

Type

: EP01

: COMPLETE

: STACI N WHITE Assigned To

Subject

**Status** 

: 50.54(Q) SCREEN

**Due Date** : 02/11/2019

Reschedule

Pri Resp Fac Pri Resp Group

Sec Resp Fac Sec Resp Group

Aff Facility

UCR

: CN

Unit

Schedule Ref

Department Organization

: 13650 Ext Comp Date :

**System** 

Discipline

Description

**Est Manhrs** 

COMPLETE 50.54(Q) SCREEN IN ACCORDANCE WITH AD-EP-ALL-0602.

#### Action Request Assignment Completion Notes

I approve the 50.54Q screen for RP/0/A/5000/005.

#### **Action Request Assignment Status History**

Updated Date	Updated By	Assgn Status INPROG	Assgn Due Date
02/07/2019	144004	NITEV//ACC	02/11/2019
02/07/2019 02/07/2019	144004 144004	NTFY/ASG ACC/ASG	

: 02/25/2019 Printed

Page



#### ACTION REQUEST - 02256656

02/07/2019

144004

AWAIT/C

02/08/2019

MEHARE

**COMPLETE** 

#### Action Request Assignment Attributes

### **Action Request Assignment Routing/Return Comments**

Routing Comments from the X601 Panel

Updated On

Updated By

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

Updated On

Updated By

\*\*\* No Return Comments Found \*\*\*

### Action Request Assignment Completion Approval

Route List : 001

Route List Initiator : 144004

Group **Passport** Fac

Send Date

Action

Date

Action

Last Name

**DMBRUNS** 

Type

Time 02/07/2019 14:21

Send

Taken APPROVED 02/08/2019 14:16

/ Time **BRUNSON** 

APPROVED 02/08/2019 15:57 HARE 02/08/2019 14:16 **MEHARE** 

### Action Request Assignment Cause/Action

#### **Action Request Assignment Reference Documents**

Doc

Sub

Minor

Facility

Type

Document Type

Title Sheet Rev Rev

### Action Request Assignment Reference Equipment

Equip Equip

Equip

Equip

Rev

Facility Unit

System Type

Number

Tag

Status

Status Rev



ACTION REQUEST - 02256656

**Action Request Assignment Cross References** 

Ref

Ref

Ref Ref Nbr

Limit

Type Nbr

Sub Type

Status

AS Cls Description

**Action Request Assignment Appendices** 

APPENDIX 1

Page : 5

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 4 Page 1 of 8

Screening and Evaluation Number	Applicable Sites	A
െ പ്രവാദ്യാത്രത്ത് ക്രോഷ്ട്രൻ എന്നു. അത്ത്യാത്യാത്ത് വാധ്യാവി വിവാദ്യാവി വാധ്യാവി വിവാദ്യാവി വിവാദ്യാവി വിവാദ്യ	BNP	
EREG #:2256656	CNS	X
	CR3	
	HNP	
	MNS	
5AD #:_2214116	ONS	
	RNP	
	GO	
Document and Revision RP/0/A/5000/005, General Emergency, Rev 60 (PRR 2256536)		
	and a stime that may requit in a char	nge to the
Part I. Description of Activity Being Reviewed (event or action, of emergency plan or affect the implementation of the emergency	plan):	ige to the
Deleted the following steps:		
2.8 Initiate Emergency Response Data System (ERDS) transm 2.8.1 Logon to the SRO, BOP or OAC Room business 2.8.2 Click the "ERDS" Icon on the desktop. 2.8.3 Once the ERDS logon window appears, enter the 2.8.4 Once the ERDS window appears, ensure the "Cu "Disconnect". 2.8.5 Click on the "Connect (Activate)" button for the ur 2.8.6 Click on "Yes" in the message box that appears. 2.8.7 The value of "Status" for the unit should soon cha "Messages Sent" should begin incrementing. 2.8.8 IF ERDS transmission will not connect to the NRO	computer on either unit.  password (erds).  rrent Mode" value for the affected unit is  nit.  ange to "Transmitting Data" and the value or	
Coordinator will troubleshoot and initiate ERS transmis	sion upon arrival in the TSC.	
Enclosure 4.5, Command and Control Turnover Briefing Form, Turnover Form in AD-EP-ALL-0104, ERO Common Guidelines	was revised to align with the Command and and Forms.	d Control
Specific Changes are:  Added: "Mode Shutdown Date: Time:  Added: "Take Cover Order: YES NO TIME: "  Added: "Rapid Evacuation: YES NO TIME: "  Added: "Last ENF Number: "  Added: "Continuous Communications with NRC Established:		. <b>S</b>
Deleted: "[] Stable [] Degrading [] Improving" from each of the Deleted: "ERDS Activated: Yes No N/A" from each of the U	Unit Status blocks  Init Status blocks	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
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ATTACHMENT 4
Page 2 of 8

### << 10 CFR 50.54(q) Screening Evaluation Form >>

nanged: "Turnover: (From): [] CR / [] Tanged: "(TO) [] TSC / [] EOF" to "(TO) nanged: "Units(s) Affected (circle) [] Al nanged: "Last ENF Sent (time):" nanged: "Last Message Sent (time):"	) [] CR / [] TSC/ [] I []1 []2 []3" to "U to " Last Notificat	EOF Inits(s) Affecte ion completed	ed (cir I (time	cle) []1 [ e):	]2 []3" ——"		
ev 59 Enclosure 4.5							
							70
	Enclos	aré 4.5				RP/0/A/500	00/005
.Co	ommand and Control	Turnover Briefin	g Form			Page 1 of 2	
Station: ( ) CNS ( ) MNS ( ) ONS ( ) BNP	()HNP ()RNP		Turnov	ver: (circle)	(From):	D C/R / I	
Unit(s) Affected: (circle) ( ) All ( ) 1 ( )2( )3			1		(TO)	☐ TSC / ☐ ☐ Shift Chai	
		Aleri Dec	lared at:		EAL#:		_
Emergency Classification: Unusual Event declared at		<del></del>			EAL#_		
Site Area Emergency declared at		nit 2	-			Unit 3	
Du Person Cont. Rx Cool Rx Cool	Rx Power Press	Rx Cool Temp Rx Coo	l Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press
Press Temp Press	1100				_		
☐ Stable ☐ Degrading ☐ Improving	☐ Stable ☐ Degrading	lmproving □		☐ Stable	□ Degrad	ng 🛘 Impro	ving
FPB Status (circle appropriate condition)	FPB Status (circle appro	priate condition)				opriate conditi	
Fuel Intact Polential Loss Loss	Fuel Intact Potentia RCS Intact Potentia	. '		Fuel Intac RCS Intac		tial Loss Los tial Loss Los	ss
RCS Intact Potential Loss Loss Cont Intact Potential Loss Loss	Cont Intact Potentia	Loss Loss		Cont Intac		tial Loss Los Service:	<u> </u>
Major Equipment Out of Service:	Major Equipment Out of Service:			Major Equipment Out of Service:			
1					D		
Evolutions in Progress:	Evolutions in Progress:			Evolutions in	Progress:		
	5000 A.H	No N/A		ERDS Activa	tert Yes	No N/A	
ERDS Activated: Yes No N/A	ERDS Activated: Yes	EOP/APs in Progress	(optiona				
Response Procedures in Progress (optional):		—		•		<i>f</i>	
Station Priorities:				<u> </u>			
		_					

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

		osure 4.5	RP/ <b>0</b> /A/5000/005 Page 2 of 2
•	Command and Contro	ol Turnover Briefing Form	Lage 2 Of 2
ite Evacuation: YES NOTIME		Other Agency Involvement:  Di MEDICAL DI FIRE DI LAW ENFO Additional Information (Injuries):	RÉEMENT D'OTHER
Radiological: Emergency Worker dose	limits approved: YES NO Who_		
Release in Progress: YES NO Field M	fonitoring Teams Deployed: YES N	O Number	
Release Pathway:	WIND SPEED:	WIND DIRECTION:	
The state of the s		Zones Sheffered:	<del></del> ,
		lave Dose Assessors discussed Turnover? YES	
Off-Site Notifications: Last ENF S	Sent (time): Next ENF	Due (time):	
•	nge Sent (time).		
Have Communicators discussed Turnover	with acquiring facility Communicators?	YES NO	
Upon the transfer of Command and Con	trol, the following will be performed b	ÿ:	Tros
Event Classification:		PAR Decision Making:   CR TSC Notifications:   CR TSC CONTROL OF C	<b>■</b> EOF
State and Local Notification:		NRC Notifications:	OF '
Emergency Exposure Controls & K	CRUTSC LEOF	COMINGO FINTS: LICK LINES LIST	<del></del>
Dose Assessment:	ack a 150 a Loi		
Additional Information:	· ·		
	· .		
*		·	
		i	
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		·	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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## << 10 CFR 50.54(q) Screening Evaluation Form >>

					Enclo	sure 4.5					RP/0/A/50	000/005
	•		C	ommand :	and Control	Turnover 1	Briefing Fo	rm			Page 2 of	4
Station:  BNP	□ CNS	II HNP	☐ MNS	□ ONS	☐ RNP		T	nLUOA	er:		CR / 🗆 TS	
Jnit(s) Affected:	<b>1</b>	<b>□2</b>	□3		-					(TO) D D Shift C	ICR/DTS	C / EI EOF
mergency Classi	ication: 1	Unusual Eve	ent Declared a	t	EAL#:		Alert Dec	clared	aț:	EAL,#:_		
	Site /	Area Emerge	ency Declared								EAL#:	
Rx Power Co	nt. R	tx Cool	Rx Cool	RxPower	Cont	RxCool	Rx Cool Pr		RxPower	Cont. Press	Unit 3 Rx Cool Temp	Rx Cool Press
Pre Pre	ss	Temp	Press		Press	Temp			_	Fiess	Temp	
 Mode Sh	utdown Date	 e:Tir	ne:	Mode	Shutdov	vn Date:	Time:	_ 1	Mode	Shutdow	m Date:	Time:
FPB Status (circle				FPB Status	(circle appr	opriate condi	tion)		FPB Status	(circle appro	opriate condi	tion)
	Potential Los			Fuel in	tact Poten	tial Loss L	oss					oss
•	Potential Los	s Loss			tact Poten		oss					oss oss
	Potential Los						098			tact Potent pment Out of:		.055
Major Equipment (	out of Service	<b>9</b> :		Major Equi	pment Out of	Service.				pinicini Galior		
Evolutions in Prog	ress:			Evolutions	in Progress:				Evolutions	in Progress:		•
ERDS Activated: \	es No	N/A		ERDS Acti	vated: Yes	No	N/A			vated: Yes	No	N/A
Response Proced	ures in Prog	ress (option	ial):			Emergency	/Abnormal Pr	rocedu	ires in Progr	ess (optional	):	

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#### EMERGENCY PLAN CHANGE SCREENING AND EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)

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Enclosure 4.5  Command and Control Turnover Briefing	Form		)/A/500 : [] of []	0/005	
Site Assembly: YES NO TIME: Location/Comments.	Other Agency Involved MEDICAL DEFINATION Additional Information	RE LAW ENFOR	RCEMEN	T D OTHER	
Radiological: Emergency Worker dose limits approved: YES NO For whom:					
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Num	ber				
Release Pathway: WIND SPEED:	WIND DIREC	CTION:			
Offsite PARS Recommended: YES NO Zones Evacuated:	Zones Sheltered	:			
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose A	ssessors discussed	Turnover? YES	ио		
Off-Site Notifications: Last Notification Completed (time): Last ENF Number:	Next ENF D	ıe (time):	-		
NRC Communication: Notified (time): Continuous Communications with N	NRC Established: \	ES NO			
Have Communicators discussed Turnover with acquiring facility Communicators? YES NO					
Upon the transfer of Command and Control, the following will be performed by:	CR TSC	50E			
Event Classification:	CR TSC	ZOF			1
State and Local Notification.	CR TSC	FOF			1
Site Emergency Exposure Controls & KI:		201			-
Turnover Complete: YES NO TSC / EOF Activated at	Name individua	l assuming duties	_		
			T1		T
art II. Activity Previously Reviewed?		Yes		No	1
this activity Fully bounded by an NRC approved 10 CFR 50.90 sub lert and Notification System Design Report?  yes, identify bounding source document number or approval reference insure the basis for concluding the source document fully bounds the change is documented below:	nce and	10 CFR 50.5 Effectivenes Evaluation is required. Er justification below and complete Attachment	s not nter	Continue Attachme 10 CFR 50.54(q) Screenir Evaluatio Form, Pa	ent ng on
ustification:		Part V.			

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	. Rev. 5

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Boun	ding document attached (optional)	and the same with the same at the same and	Editor in Exper			
	II Editorial Change	Yes		No	Х	
Part III. Editorial Change Is this activity an editorial or typographical change only, such as formatting, paragraph numbering, spelling, or punctuation that does not change intent?  Justification:  10 CFR 50.54(q) Effectiveness Evaluation is not required. Enter justification and complete Attachment 4, Part V.  Part V.						
		***				
Scre	IV. Emergency Planning Element and Function Screen (Reference Attachme ening Criteria) this activity involve any of the following, including program elements from N answer is yes, then check box.					
1.	10 CFR 50.47(b)(1) Assignment of Responsibility (Organization Control)					
1a	Responsibility for emergency response is assigned.				<u>X</u> _	
1b	The response organization has the staff to respond and to augment staff on a continuing basis (24-7 staffing) in accordance with the emergency plan.					
2	10 CFR 50.47(b)(2) Onsite Emergency Organization					
2a	Process ensures that onshift emergency response responsibilities are staffe	ed and assigne	ed			
2b	The process for timely augmentation of onshift staff is established and main	tained.	wood in the time			
3	10 CFR 50.47(b)(3) Emergency Response Support and Resources				ı	
За	Arrangements for requesting and using off site assistance have been made					
3b	State and local staff can be accommodated at the EOF in accordance with (NA for CR3)	the emergency	y plan	1.		
4	10 CFR 50.47(b)(4) Emergency Classification System				AurA	
4a	A standard scheme of emergency classification and action levels is in use. (Requires final approval of Screen and Evaluation by EP CFAM.)					
5	10 CFR 50.47(b)(5) Notification Methods and Procedures					
5a	Procedures for notification of State and local governmental agencies are ca declared emergency within 15 minutes (60 minutes for CR3) after declaration providing follow-up notification.	on of an emer	gency 	/ and 	<u>                                     </u>	
5b	Administrative and physical means have been established for alerting and p to the public within the plume exposure pathway. (NA for CR3)					
5c	The public ANS meets the design requirements of FEMA-REP-10, Guide for Notification Systems for Nuclear Power Plants, or complies with the license design report and supporting FEMA approval letter. (NA for CR3)	or Evaluation o ee's FEMA-app	of Alei prove	rt and d ANS		

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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Part I\	/. Emergency Planning Element and Function Screen (cont.)			
	10 CFR 50.47(b)(6) Emergency/Communications			
6a	Systems are established for prompt communication among principal emergency response organizations.			
6b	Systems are established for prompt communication to emergency response personnel.			
7	10 CFR 50:47(b)(7) Public Education and Information			
7a	Emergency preparedness information is made available to the public on a periodic basis within the plume exposure pathway emergency planning zone (EPZ). (NA for CR3)			
7b ·	Coordinated dissemination of public information during emergencies is established.			
8	10 CFR 50.47(b)(8) Emergency Facilities and Equipment	T		
8a	Adequate facilities are maintained to support emergency response.			
8b	Adequate equipment is maintained to support emergency response.			
9	10 CFR 50:47(b)(9) Accident Assessment			
9a	Methods, systems, and equipment for assessment of radioactive releases are in use.			
10	10 CFR 50:47(b)(10) Protective Response			
10a	A range of public PARs is available for implementation during emergencies. (NA for CR3)			
10b	Evacuation time estimates for the population located in the plume exposure pathway EPZ are available to support the formulation of PARs and have been provided to State and local governmental authorities. (NA for CR3)			
10c	A range of protective actions is available for plant emergency workers during emergencies, including those for hostile action events.			
10d	KI is available for implementation as a protective action recommendation in those jurisdictions that chose to provide KI to the public.			
110	10 CFR 50:47(b)(11) Radiological Exposure Control			
11a	The resources for controlling radiological exposures for emergency workers are established.			
12	10 CFR 50.47(b)(12) Medical and Public Health Support			
12a	Arrangements are made for medical services for contaminated, injured individuals.			
13	10 CFR 50.47(b)(13) Recovery Planning and Post-accident Operations			
13a	Plans for recovery and reentry are developed.			
	10 CFR 50 47(b)(14) Drills and Exercises	***		
14a	A drill and exercise program (including radiological, medical, health physics and other program areas) is established.			
14b	Drills, exercises, and training evolutions that provide performance opportunities to develop, maintain, and demonstrate key skills are assessed via a formal critique process in order to identify weaknesses.			
14c	Identified weaknesses are corrected.	TO CARDING COLOR 2 NO		
15	10 CFR 50.47(b)(15) Emergency Response Training			
15a	Training is provided to emergency responders.			

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### << 10 CFR 50.54(q) Screening Evaluation Form >>

Part IV. Emergency Planning Element and Function Screen (cont.)					
16 10 CFR 50.47(b)(16) Emergency Plan Maintenance					
16a	Responsibility for emergency plan development	t and review is established.			
16b Planners responsible for emergency plan development and maintenance are properly trained.					
PART IV. Conclusion If no Part IV criteria are checked, then provide Justification and complete Part V below.					
If any Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV criteria are checked, then complete Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part V and perform a 10 CFR 50.54(q) Effectiveness Evaluation. Program Element 4a requires final approval of Screen and Evaluation by EP CFAM.					
The o	changes to the Command and Control Turnover I tiveness Evaluation.	Briefing Form will be further evaluated in an			
Duke Energy has transitioned to an "always-on" mode of ERDS transmission, making the steps to activate ERDS unnecessary. A Controlled Support Document (CSD) for ERDS troubleshooting has replaced the steps to activate ERDS. Deletion of the ERDS Activation steps does not affect any of the 50.47(b) emergency planning standards, as ERDS is addressed in 10 CFR Appendix E to Part 50 in section VI, Emergency Response Data System, not in the 50.47(b) Planning Standards.					
With regard to 10 CFR Appendix E to Part 50 in section VI, ERDS remains a direct near real-time electronic data link between the licensee's onsite computer system and the NRC Operations Center, and the features listed in Section VI are maintained: the testing method and frequency; the software and hardware; the selected plant parameters; and the transmission rate. No further evaluation of the removal of the ERDS steps is required by 50.54(q).					
Part V. Signatures:  EP CFAM Final Approval is required for changes affecting Program Element 4a. If CFAM approval is <u>NOT</u> required, then mark the EP CFAM signature block as not applicable (N/A) to indicate that signature is not required.					
	arer Name (Print): i White	Preparer Signature: See CAS	Date: See CAS		
Revi	ewer Name (Print): CAS	Reviewer Signature: See CAS	Date: See CAS		
	rover (EP Manager Name (Print): CAS	Approver Signature: See CAS	Date: See CAS		
Appr N/A	over (EP CFAM, as required) Name (Print)	Approver Signature: N/A	Date: N/A		

**QA RECORD** 



### **ACTION REQUEST - 02256656**

#### **Action Request Assignment Details**

ASSIGNMENT NUMBER : 02

SUB :

Type

: EP02

Due Date

: 02/11/2019

Pri Resp Fac

**Status** 

: COMPLETE

Reschedule

Pri Resp Group

Assigned To

: STACI N WHITE

Sec Resp Fac

:14

Subject

: 50.54(Q) EVALUATION

Sec Resp Group

Aff Facility

: CN

Unit

System

UCR

Schedule Ref

: 13650

Discipline

Organization **Est Manhrs** 

Department Ext Comp Date :

Description

COMPLETE 50.54(Q) EVALUATION IN ACCORDANCE WITH AD-EP-ALL- 0602.

## **Action Request Assignment Completion Notes**

I approve the 50.54Q eval for RP/0/A/5000/005.

### Action Request Assignment Status History

Updated Date	Updated By	Assgn Status
02/07/2019	144004	INPROG
02/07/2019	144004	
02/07/2019	144004	NTFY/ASG
02/07/2019	144004	ACC/ASG
02/07/2019	144004	AWAIT/C
02/08/2019	DMBRUNS	ACC/ASG
02/08/2019	144004	AWAIT/C
02/08/2019	MEHARE	COMPLETE

#### Assgn Due Date

02/11/2019

**Action Request Assignment Attributes** 

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#### ACTION REQUEST - 02256656

## Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

Minor editorial comments. ~DMB

Updated On

**Updated By** 

20190208

**DMBRUNS** 

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

**Updated On** 

**Updated By** 

### Action Request Assignment Completion Approval

Route List : 001

Route List Initiator : 144004

Send

Send Time

Action Taken

Date Time **Last Name** 

Passport **DMBRUNS**  Group

Date **Type** 02/07/2019 14:24 Α 02/08/2019 14:16 Α

RETURNED 02/08/2019 13:54 APPROVED 02/08/2019 15:58

**BRUNSON** HARE

**MEHARE DMBRUNS** 

02/08/2019 14:09 Α

APPROVED 02/08/2019 14:16 BRUNSON

Action

Action Request Assignment Cause/Action

**Action Request Assignment Reference Documents** 

Doc Type Sub

Minor

Facility

Type

**Document** 

Sheet Rev Rev

Title

Action Request Assignment Reference Equipment

Equip Equip

**Equip** 

Equip

Rev

Facility Unit

System Type

Number

Sub

Tag

Status

**Status** Rev

Action Request Assignment Cross References

Ref Type Ref Nbr

Ref Nbr Type

Status

Limit

**AS Cls Description** 

Printed

:02/25/2019

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**ACTION REQUEST - 02256656** 

**Action Request Assignment Appendices** 

APPENDIX 1

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

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Screening and Evaluation Number	BNP	
	CNS	<u> </u>
EREG #:2256656	CR3	十音
	HNP	ᅥ吉
	MNS	-   급
	ONS	<del>-   -</del> -
5AD #:2214116	RNP	一一
	GO	+-
Document and Revision RP/0/A/5000/005, General Emergency, Rev 60 (PRR 2256536)		
·		
Description of Description of Changes	San Start Marie Mari	A STATE OF THE PARTY OF THE PAR
Part I. Description of Proposed Change:		
Specific Changes are:  Added: "Mode Shutdown Date: Time: " to ea Added: "Take Cover Order: YES NO TIME: "  Added: "Rapid Evacuation: YES NO TIME: "  Added: "Last ENF Number: "  Added: "Continuous Communications with NRC Established: YES NO"  Deleted: "[] Stable [] Degrading [] Improving" from each of the Unit Status blocks	\ ks	
Changed: "Turnover: (From): [] CR / [] TSC" to "(From): [] CR / [] TSC/ [] EOF" Changed: "(TO) [] TSC / [] EOF" to "(TO) [] CR / [] TSC/ [] EOF Changed: "Units(s) Affected (circle) [] All []1 []2 []3" to "Units(s) Affected (circle Changed: "Last ENF Sent (time):" to "Last Notification completed (time):" to "Notified (time):"	∋) []1 []2 []3" "	

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
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Cả	Enclos mmand and Control	*	Form	RP/ <b>0</b> /A/5000/005 Page 1 of 2
Station: ( ) CNS ( ) MNS ( ) ONS ( ) BNP Unit(s) Affected: (circle) ( ) All ( ) 1 ( )2( )3			Turnover: (circle) (From): (TO)	□ C/R / □ TSC □ TSC / □ EOF □ Shift Change
Emergency Classification: Unusual Event declared at Site Area Emergency declared at:	EAL#	General Emergency De	dared atEAL#	
Rx Power Cont. Rx Cool Rx Cool Press Temp Press	Rx Power Cont. Press	Rx Cool Temp Rx Cool	Cont	Rx Cool Pre Temp Rx Cool Pre
□ Stable □ Degrading □ Improving  FPB Status (circle appropriate condition)  Fuel Intact Potential Loss Loss  RCS Intact Potential Loss Loss  Cont Intact Potential Loss Loss  Major Equipment Out of Service:  Evolutions in Progress:	Cont Intact Potential Major Equipment Out of St.	priate condition) al Loss Loss al Loss Loss al Loss Loss		ropriate condition)  tial Loss Loss  tial Loss Loss  tial Loss Loss
ERDS Activated: Yes No N/A Response Procedures in Progress (optional):	ERDS Activated: Yes	No N/A EOP/APs in Progress	ERDS Activated: Yes (optional):	No N/A

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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	Enclosure 4.5		RP/ <b>0</b> /A/5000/005 Page 2 of 2
	Command and Control Turnov	er Ditennä earm	1020 - 01 -
Site Assembly: YES NO TIME:	- low	er Agency Involvement: AEDICAL OFFIRE OF LAW ENFORCEMEN Intional Information (Injuries):	T DÖTHER
Radiological: Emergency Worker dose limits a	proved: YES NO Who		
Release in Progress: YES NO Field Monitorin	Teams Deployed: YES NO Number_		
Release Pathway.	WIND SPEED:	WIND DIRECTION:	•
Offsite PARS Recommended: YES NO Zone	<del></del>		
			<del></del>
KI Recommended: YES NO Current Dose			
·	e): Next ENF Due (time): _		
NRC Communication: Last Message Sen	(time):		
Have Communicators discussed Turnover with acc	uring facility Communicators? YES	NO	
Upon the transfer of Command and Control, the	following will be performed by:		
Event Classification:	R D TSC PAR Deci	ision Making: CR TSC EOF	
State and Local Notification:	R 🗆 TSC 🗖 EOF NRC Noti	fications:	•
Emergency Exposure Controls & KI: 🚨 C		FMTs: CR TSC EOF	
Dose Assessment:			
Turnover Complete: YES NO TSC/EOF A	tivated at:	assuming duties	_
(energy femore)	tivaled at	assuming duties	_
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir	tivaled at	assuming duties	
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir	tivaled at	assuming duties	
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir	tivaled at	assuming dutięs	
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir	tivaled at	assuming duties	
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		
Turnover Complete: YES NO TSC / EOF A (circle) (circle) Tir Additional Information:	tivaled at		

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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## << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

ation:   BNP CNS HNP MNS  it(s) Affected:   1	□ ONS □ RNP	Turnover:	(From): □ CR / □ TSC / □ EOF (TO) □ CR / □ TSC / □ EOF
		1	☐ Shift Change
	EAL#:	Alert Declared at:	
Unit 1		Rx Cool Press Rx Power	Unit 3
B Status (circle appropriate condition)  le Intact Potential Loss Loss  CS Intact Potential Loss Loss  ont Intact Potential Loss Loss	RCS Intact Potential Loss L	tion) FPB Status oss Fuel Int oss RCS Int oss Cont Int	Shutdown Date:Time:
volutions in Progress:	Evolutions in Progress:	Evolutions	in Progress:
RDS Activated: Yes No N/A esponse Procedures in Progress (optional):	ERDS Activated: Yes No Emergency	N/A ERDS Activ //Abnormal Procedures in Progra	rated: Yes No N/A ess (optional):

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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## << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Con	Enclosure 4.5 mmand and Control Turnover Briefin	RP/ <b>0</b> /A/5000/00 ng Form Page ∰ of ∰	)5
Site Assembly:         YES         NO TIME:	Location/Comments:	Other Agency Involvement:  D MEDICAL D FIRE D LAW ENFORCEMENT D Additional Information (Injuries):	OTHER
Radiological: Emergency Worker dose limits approved:	YES NO For whom:		
Release in Progress: YES NO Field Monitoring	Teams Deployed: YES NO Nu	mber	
Release Pathway.			
Offsite PARS Recommended: YES NO Zones E		Zones Shellered:	_
		Assessors discussed Turnover? YES NO	
		Next ENF Due (time):	_
	Continuous Communications with		
Have Communicators discussed Turnover with acquiring fac			
Upon the transfer of Command and Control, the following w	vill be performed by:		
Event Classification:	i At Decision making.	CR TSC EOF	
State and Local Modification.	EOF NRC Notifications:	CR TSC EOF	
Site Emergency Exposure Controls & KI: CR TSC		CR CI ISC CI EOF	
Dose Assessment ☐ CR ☐ TSC	<u> </u>		
Name of Individual turning over Duties:			
Turnover Complete: YES NO TSC / EOF Act (circle) (circle)  Additional Information:	tivated at Date	Name individual assuming duties	
tachment 6, 10 CFR 50.54(q) Initiating	Condition (IC) and Emerge	ncy Action Level (EAL) and EAL	Yes
validation and Verification (V&V)	Form , is attached (required	for IC or EAL change)	No
ases valuation and verification (1997)			
art II. Description and Review of Licens	sing Basis Affected by the P	roposed Change:	
	•		
censing Basis of the ERO		LONG Francisco Plan Povisi	ion 2 (do
ne Assignment of Responsibilities is de anuary 1983), sections A.1.b, Concept 1.d, Key Decision Making.	of Operations, A.1.c, Block	Diagram of Organization Interrelation	nsnips, a
he current licensing basis regarding As evision 150 (dated September 2017) s rganization Interrelationships, and A.1	ections A.1.b, Concept of O	is described in CNS Emergency Plar perations, A.1.C, Block Diagram of	า Sectior

During revisions to these sections, the titles of some of the Emergency Response personnel and facilities

Operations Facility), but the individuals responsible for Command and Control and the transfer process for Command and Control has remained the same. The summation of the incremental changes over time do

have changed (i.e., Shift Supervisor to Shift Manager, Crisis Management Center to Emergency

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EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
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### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

not reduce the effectiveness of the CNS Emergency Plan when compared to the NRC-approved Plan.

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 2, lists RP/0/A/5000/005, as an implementing procedure. (AD-EP-ALL-0104 had not been created when the CNS Emergency Plan was initially approved by the NRC.)

Section P, Responsibility for the Planning Effort, in the CNS Emergency Plan, Revision 147, lists RP/0/A/5000/005, and AD-EP-ALL-0104 as implementing procedures.

#### List Commitments Associated with the Change

A search to identify site specific commitments related to the ERO positions and their assigned responsibilities was performed. No site specific commitments were identified aside from those in the Emergency Plan.

RG 1.219 Guidance on Making Changes to Emergency Plans for Nuclear Power Reactors, Rev 1. (July 2016) 3.5 Emergency Plan

- a. "Emergency plan" means the document(s) that the licensee prepared and maintains that identifies and describes its methods for maintaining emergency preparedness and responding to emergencies. An emergency plan includes the plan that the NRC originally approved and all subsequent changes that the licensee made with and without prior NRC review and approval under 10 CFR 50.54(q). See 10 CFR 50.54(q)(1)(ii) for additional information.
- b. This definition highlights that "emergency plan" includes the documents that describes the programmatic methods that the licensee uses to maintain emergency preparedness and to respond to emergencies. These methods, or program elements, are the implementation aspects of the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50 and generally correspond to the evaluation criteria of NUREG-0654 or approved alternatives that supply specific acceptable methods for complying with the planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50. Such programmatic documents are subject to the 10 CFR 50.54(q) change process. Non-programmatic documents, such as training rosters, equipment and maintenance test reports, lesson plans, and other documents that "document the performance" of the program elements, as opposed to those that "establish" the program elements, are not included.
- c. Ordinarily, sub-tier documents such as emergency plan implementing procedures (EPIPs) are not considered to be part of an emergency plan for the purpose of evaluating proposed changes. If a licensee relocates a programmatic description from the emergency plan to a sub-tier document, that programmatic description continues to be subject to the 10 CFR 50.54(q) change process. For example, licensees have relocated the details of emergency classification schemes from the emergency plan to an EPIP or to large wall charts maintained in the control room. Because the EPIP or wall chart is now the means to demonstrate compliance with the planning standards in 10 CFR 50.47(b)(4), these sub-tier documents are subject to 10 CFR 50.54(q). Repeating, as opposed to relocating, program element descriptions in sub-tier documents do not necessarily make the sub-tier documents subject to the 10 CFR 50.54(q) change process. However, the descriptions in the various documents must remain consistent.
- e. This definition also highlights the need to consider the NRC-approved plan and the subsequent changes in reviewing against 10 CFR 50.54(q) to ensure that a series of incremental changes (each determined not to reduce the effectiveness of the plan) do not reduce the effectiveness of the plan when compared to the

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
·	

ATTACHMENT 5
Page 7 of 10

### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

NRC-approved plan.

The differences in approved revisions and the current revisions of the Emergency Plans have been reviewed and they have been determined to meet the regulatory requirements required during revisions. Each revision has been reviewed by the NRC during the inspection process.

Part III. Description of How the Proposed Change Complies with Regulation and Commitments.

If the emergency plan, modified as proposed, no longer complies with planning standards in 10 CFR 50.47(b) and the requirements in Appendix E to 10 CFR Part 50, then ensure the change is rejected, modified, or processed as an exemption request under 10 CFR 50.12, Specific Exemptions, rather than under 10 CFR 50.54(q):

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The changes described continue to meet NRC requirements as described in 10 CFR 50.47(b) and 10 CFR 50, Appendix E and Emergency Plan Sections A and P.

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
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ATTACHMENT 5
Page 8 of 10

### << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

Part IV. Description of Emergency Plan Planning Standards, Functions and Program Elements Affected by the Proposed Change (Address each function identified in Attachment 4, 10 CFR 50.54(q) Screening Evaluation Form, Part IV of associated Screen):

The following portion of planning standard §50.47(b)(1) is related to the change:

Primary responsibilities for emergency response by the nuclear facility licensee have been assigned, and each principal response organization has staff to augment its initial response on a continuous basis.

The function for §50.47(b)(1) related to this change are:

a. Responsibility for emergency response is assigned.

Appendix E to Part 50 lists the following:

IV. Content of Emergency Plans

A. Organization

The organization for coping with radiological emergencies shall be described, including definition of authorities, responsibilities, and duties of individuals assigned to the licensee's emergency organization and the means for notification of such individuals in the event of an emergency. Specifically, the following shall be included:

- 1. A description of the normal plant operating organization.
- 2. A description of the onsite emergency response organization (ERO) with a detailed discussion of:
  - a. Authorities, responsibilities, and duties of the individual(s) who will take charge during an emergency;

The NUREG-0654 Part II.A elements for §50.47(b)(1) related to this change are:

- A.1.d. Each organization shall identify a specific individual by title who shall be in charge of the emergency response.
- A.2. Each principal organization shall be capable of continuous (24-hour) operations for a protracted period. The individual in the principal organization who will be responsible for assuring continuity of resources (technical, administrative, and material) shall be specified by title.

Part V. Description of Impact of the Proposed Change on the Effectiveness of Emergency Plan Functions:

The changes made to the Command and Control Turnover Briefing Form continue to support the assignment of responsibility by aligning the Command and Control Turnover Briefing Form between the two procedures currently used by the Shift Manager, TSC Emergency Coordinator and EOF Director. Aligning the content of these two forms to be identical contributes to each individual understanding the status of the emergency in an efficient manner, and reduces the potential for human error during the turnover process.

The description of the authorities, responsibilities and duties of the individual(s) who will take charge in an emergency is maintained. There is no reduction in effectiveness of the CNS Emergency Plan.

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5

ATTACHMENT 5 Page 9 of 10

	t VI. Evaluation Conclusion.		ļ
Answer the following questions about the proposed change.  Yes X			
1	Does the proposed change comply with 10 CFR 50.47(b) and 10 CFR 50 Appendix E?		No II
2	2 Does the proposed change maintain the effectiveness of the emergency plan (i.e., no reduction in effectiveness)?		No 🗆
3	Does the proposed change maintain the current Emergency Action Level (EAL) scheme?	Yes X	No 🗆
4	Choose one of the following conclusions:		
a The activity does continue to comply with the requirements of 10 CFR 50.47(b) and 10 CFR 50, Appendix E, and the activity does not constitute a reduction in effectiveness or change in the current Emergency Action Level (EAL) scheme. Therefore, the activity can be implemented without prior NRC approval.		x	
b The activity does not continue to comply with the requirements of 10 CFR 50.47(b) or 10 CFR 50 Appendix E or the activity does constitute a reduction in effectiveness or EAL scheme change.  Therefore, the activity cannot be implemented without prior NRC approval.			
7. TO	Therefore, the doubley control of the control of th	,	
Pa	art VII. Disposition of Proposed Change Requiring Prior NRC Approval		
Will the proposed change determined to require prior NRC approval be either revised or rejected?			
If No, then initiate a License Amendment Request in accordance 10 CFR 50.90, AD-LS-ALL-0002, Regulatory Correspondence, and AD-LS-ALL-0015, License Amendment Request and Changes to SLC, TRM, and TS Bases, and include the tracking number:			
التنساء			

EMERGENCY PLAN CHANGE SCREENING AND	AD-EP-ALL-0602
EFFECTIVENESS EVALUATIONS 10 CFR 50.54(Q)	Rev. 5
,	

ATTACHMENT 5 Page 10 of 10

## << 10 CFR 50.54(q) Effectiveness Evaluation Form >>

1 40 OED 50 47/b)/4) /i o Emergency Action I e	I is required for changes affecting risk significant planning vels and Emergency Action Level Bases). If CFAM appro as not applicable (N/A) to indicate that signature is not re	7Vai 13 1401
Preparer Name (Print): Staci White	Preparer Signature: See CAS	Date: 2/7/2019
Reviewer Name (Print): See CAS	Reviewer Signature: See CAS	Date: See CAS
I Approver (ED Manager) Name (Print). I Approvel Signature.		Date: See CAS
Approver (CFAM, as required) Name (Print): N/A	Approver Signature: N/A	Date: N/A
Assignments. If required by Section 5.6, Submitting Reports Assignments.	an or implementing procedures, then create two EREG G of Changes to the NRC, then create two EREG General	
One for EP to provide the 10 CFR 50.54(c) to Licensing.	a) summary of the analysis, or the completed 10 CFR 50.5	
One for Licensing to submit the 10 CFR 5 is put in effect.	0.54(q) information to the NRC within 30 days after the ch	nange X

### QA RECORD



#### ACTION REQUEST - 02256656

#### Action Request Assignment Details

ASSIGNMENT NUMBER

SUB: : 04

Type

: GNRL

**Due Date** 

: 02/25/2019

Pri Resp Fac

**Status** 

: NTFY/ASG

Reschedule

Pri Resp Group

Assigned To

Sec Resp Fac

Subject

: STACI N WHITE

: PROVIDE 50.54(Q) INFO TO LICENSING FOR NRC 30 DAY

Sec Resp Group

SUBMITTAL

**Aff Facility** 

: CN

Unit

System

**UCR** Organization Schedule Ref Department

: 13650

Discipline

**Est Manhrs** 

Ext Comp Date :

Description

THE REGULATION AT 10 CFR 50.54(Q)(5) REQUIRES THE LICENSEE TO SUBMIT, AS SPECIFIED IN 10 CFR 50.4(B)(5)(II), A REPORT OF EACH CHANGE TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL, INCLUDING A SUMMARY OF ITS ANALYSIS, WITHIN 30 DAYS AFTER THE CHANGE IS PUT IN EFFECT. THE NRC HAS STATED THAT THE SUMMARY REPORT OR A FULL COPY OF THE COMPLETED 50.54(Q) MAY BE SUBMITTED TO SATISFY THIS REQUIREMENT. SUBMIT TO LICENSING, A SUMMARY, AS DESCRIBED IN AD-EP-ALL- 0602, OR THE FULL 50.54(Q) REVIEWING ALL CHANGES TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL FOR SUBMITTAL TO THE NRC'S DOCUMENT CONTROL DESK, WITH A COPY TO THE APPROPRIATE REGIONAL OFFICE, AND A COPY TO THE APPROPRIATE NRC RESIDENT INSPECTOR. IF THE COMMUNICATION IS ON PAPER, THE SUBMISSION TO THE DOCUMENT CONTROL DESK MUST BE THE SIGNED ORIGINAL.

### **Action Request Assignment Completion Notes**

### Action Request Assignment Status History

**Updated Date** 02/07/2019

Updated By 144004

Assgn Status

Assgn Due Date

02/25/2019

144004

**INPROG** 

02/25/2019

02/25/2019

144004

NTFY/ASG

: 02/25/2019 Printed

Page



**ACTION REQUEST - 02256656** 

Action F	Request	Assignment	Attributes
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Request Attribute

1A COMMITTED

Name :

**Values** 

Reqd

Date

Ν

Request Attribute

1B CHANGE BASIS

Name :

**Values** 

Reqd

Date

Request Attribute

**2A COMMENTS** 

Name :

**Values** 

Reqd N

Date

Request Attribute

BENEFIT REALIZED

Name:

**Values** 

Reqd

Date

Request Attribute

FINAL ISSUE

Name:

**Values** 

Reqd

Date

Request Attribute

IMPORTANT TO NRC

Name :

**Values** 

Reqd

**Date** 

Request Attribute

IT LABOR ESTIMATE

Name :

**Values** 

Reqd

Date

Request Attribute

LTAM ISSUE ID

Name :

Values

Reqd

Date

Printed

: 02/25/2019

Page



#### **ACTION REQUEST - 02256656**

Request Attribute PHC DUE DATE

**Values** 

Reqd

Date

Name :

Request Attribute PLANT HEALTH ISSUE? Values

Reqd

Date

Name:

Request Attribute

**Values** 

Reqd

Date

RTTQ

Name :

Request Attribute

T+1 CRITIQUE

**Values** 

Reqd

Date

Name :

Request Attribute

Values

Reqd

Date

WBS

Name:

**Action Request Assignment Routing/Return Comments** 

Routing Comments from the X601 Panel

\*\*\* No Routing Comments Found \*\*\*

Updated On

**Updated By** 

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

**Updated On** 

**Updated By** 

**Action Request Assignment Completion Approval** 

Action Request Assignment Cause/Action

Printed

: 02/25/2019

Page



#### **ACTION REQUEST - 02256656**

Action Request Assignment Reference Documents

Doc

Sub Type Minor

Facility Type

**Document** 

Rev Sheet Rev

Title

Action Request Assignment Reference Equipment

Equip Equip

Equip

Equip

Rev

Facility Unit

System Type

Number

Tag

**Status** 

**Status** Rev

**Action Request Assignment Cross References** 

Ref

Ref

Ref Nbr

Limit

Nbr Type

Sub Type

Status

AS CIs Description

**Action Request Assignment Appendices** 

**Action Request Assignment Details** 

ASSIGNMENT NUMBER : 05

SUB :

Type

: GNRL

Due Date

: 03/10/2019

Pri Resp Fac

Status

: NTFY/ASG

**CHANGE** 

Reschedule

Pri Resp Group

Assigned To

: TONYA S LOWERY

Sec Resp Fac

Sec Resp Group

**Subject** 

: LICENSING SUBMIT 50.54(Q) TO NRC WITHIN 30 DAYS OF

**System** 

Aff Facility

: CN

Unit

**UCR** 

Schedule Ref

: 10380

Discipline

Organization **Est Manhrs** 

Department

Ext Comp Date :

Description

THE REGULATION AT 10 CFR 50.54(Q)(5) REQUIRES THE LICENSEE TO SUBMIT, AS SPECIFIED IN 10 CFR 50.4(B)(5)(II), A REPORT OF EACH CHANGE TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL, INCLUDING A SUMMARY OF ITS ANALYSIS, WITHIN 30 DAYS AFTER THE CHANGE IS PUT IN EFFECT. THE NRC HAS STATED THAT THE SUMMARY REPORT OR A FULL COPY OF THE COMPLETED 50.54(Q) MAY BE

Printed : 02/25/2019 Page : 30



#### **ACTION REQUEST - 02256656**

SUBMITTED TO SATISFY THIS REQUIREMENT. SUBMIT, WITHIN 30 DAYS OF IMPLEMENTING THE CHANGE, THE FULL 50.54(Q) OR SUMMARY (AS DESCRIBED IN AD-EP-ALL-0602) FOR ALL CHANGES TO THE EMERGENCY PLAN MADE WITHOUT PRIOR NRC APPROVAL TO THE NRC'S DOCUMENT CONTROL DESK, WITH A COPY TO THE APPROPRIATE REGIONAL OFFICE, AND A COPY TO THE APPROPRIATE NRC RESIDENT INSPECTOR. IF THE COMMUNICATION IS ON PAPER, THE SUBMISSION TO THE DOCUMENT CONTROL DESK MUST BE THE SIGNED ORIGINAL.

Action Request Assignment Completion Note
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## Action Request Assignment Status History

**Updated Date** 

Updated By

Assgn Status

Assgn Due Date

02/07/2019

144004

**INPROG** 

03/10/2019

02/25/2019 02/25/2019 144004 144004

NTFY/ASG

### Action Request Assignment Attributes

Request Attribute =

**Values** 

Regd Ν

Date

1A COMMITTED Name:

Request Attribute

**1B CHANGE BASIS** 

Name:

Values

Reqd

Date

Request Attribute

2A COMMENTS

**Values** 

Reqd

Date

Name :

Request Attribute

BENEFIT REALIZED

Name :

**Values** 

Reqd

Date

Request Attribute

**Values** 

Reqd

**Date** 

: 02/25/2019 Printed

Page



#### **ACTION REQUEST - 02256656**

FINAL ISSUE

Name :

Ν

Request Attribute

**IMPORTANT TO NRC** 

Name :

**Values** 

Reqd N <u>Date</u>

Request Attribute

IT LABOR ESTIMATE

Name:

<u>Values</u>

Reqd

Date

Request Attribute

LTAM ISSUE ID

Name:

**Values** 

Reqd N <u>Date</u>

Request Attribute

PHC DUE DATE

Name :

Values

Values

Reqd

Date

Request Attribute

PLANT HEALTH ISSUE?

Name:

Reqd Date

Ν

Request Attribute

RTTQ

Name :

**Values** 

Reqd N Date

Request Attribute

T+1 CRITIQUE

Name :

Values

Reqd

**Date** 

Request Attribute

WBS

Name :

Values

Reqd

<u>Date</u>

Printed

: 02/25/2019

Page



#### **ACTION REQUEST - 02256656**

Action Request Assignment Routing/Return Comments

Routing Comments from the X601 Panel

**Updated On** 

**Updated By** 

\*\*\* No Routing Comments Found \*\*\*

Routing Comments from the X602 Panel

\*\*\* No Return Comments Found \*\*\*

Updated On

**Updated By** 

Action Request Assignment Completion Approval

**Action Request Assignment Cause/Action** 

**Action Request Assignment Reference Documents** 

Sub Doc

Minor

Facility Type

**Document** Type

Title Rev Sheet Rev

Action Request Assignment Reference Equipment

Equip Equip

**Equip** 

**Equip** 

Rev

Facility Unit

System Type

Number

Tag

Status

**Status** 

Action Request Assignment Cross References

Ref

Ref

Ref Nbr Ref

Limit

Nbr Type

Type Sub

Status

AS CIs Description

**Action Request Assignment Appendices** 

: 02/25/2019 Printed

Page

# \*\*\*END OF REPORT\*\*\*

Duke Energy	Procedure No.
Catawba Nuclear Station	RP/ <b>0</b> /A/5000/002
	Revision No.
<b>Notification of Unusual Event</b>	049
	·
Reference Use	Electronic Reference No
	CN005GNL

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#### REVISION REMARKS Rev 049

Reference AR(s): 02256533

Revised Enclosure 4.2 (Command and Control Turnover Briefing Form) to match AD-EP-ALL-0104.

Specific changes for Enclosure 4.2

Deleted ALL from Units affected block

Unit Status blocks:

deleted stable, degrading and improving

added shutdown date and time

Procedures in progress box:

replaced EOP/APs with Emergency/Abnormal Procedures

Site assembly block:

Added Take Cover Order (yes/no) and time

Added Rapid Evacuation (yes/no) and time.

Radiological block:

Replaced current dose run with dose assessment

Notification / Communications block

Replaced ENF Sent with Notification Completed and Last ENF Number\_\_\_\_\_

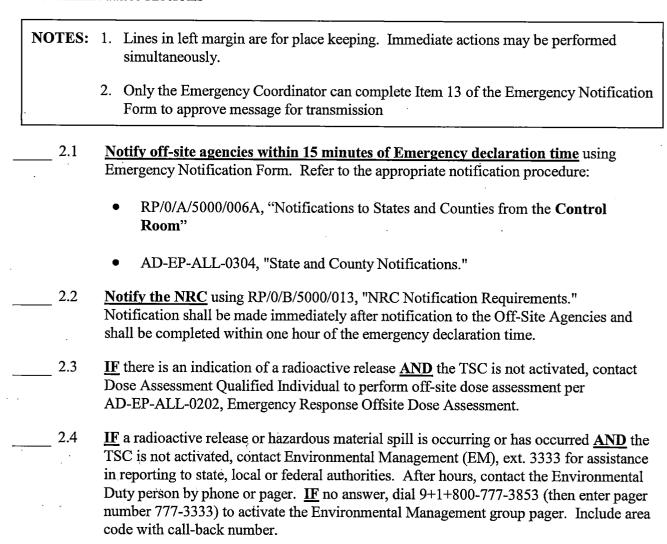
Added Continuous communications with NRC Established (yes/no)

#### **Notification of Unusual Event**

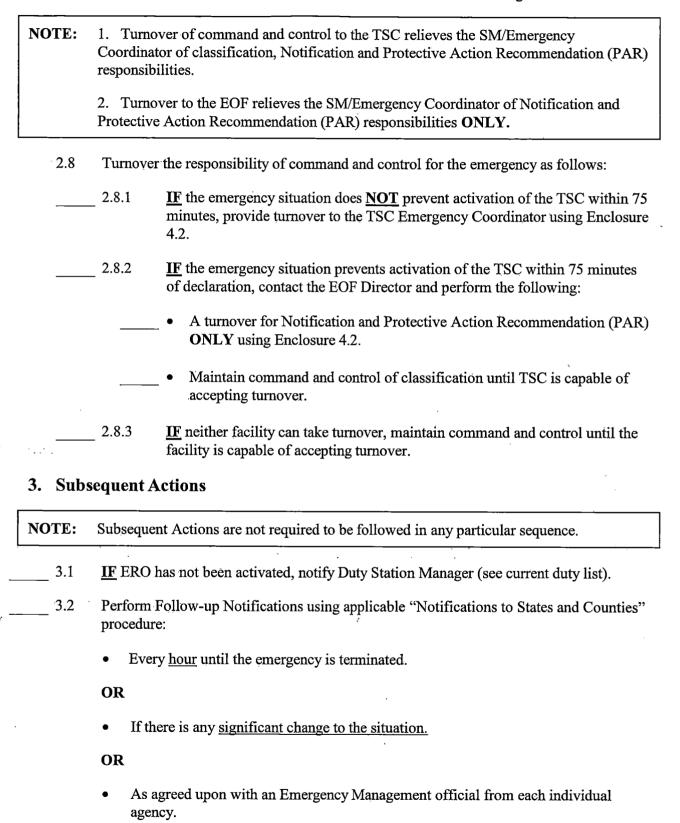
#### 1. Symptoms

1.1 This condition exists when events are in process or have occurred which indicate a <u>potential</u> degradation of the level of safety of the plant or indicate a security threat to facility protection has been initiated.

#### 2. Immediate Actions



2.5	<b><u>IF</u></b> a Security Event exists, perform the following:				
	<ul> <li>Discuss the need to make the following announcement over the PA system with Security at extension 5364:</li> </ul>				
	"This is the Shift Manager. A Security Event is in progress. Do not move about the site. Remain at your present location until further notice. Report any suspicious activities to the SAS at extension 5765 or 5766." Repeat announcement.				
	• <u>IF</u> the security event involves a <b>CREDIBLE THREAT</b> to the site, implement 2-person rule for access to all vital areas.				
NOTE:	Normally the Emergency Response Organization (ERO) is not activated at the Unusual Event (UE) classification; however, the Shift Manager or Station Manager may decide to activate at the UE classification.				
2.6	<b>IF</b> a decision is made to activate the Emergency Response Organization (ERO), consider the following prior to activating the ERO:				
	2.6.1 <u>IF</u> Security has closed access to the site, activate the ERO per RP/0/B/5000/026, Enclosure 4.3.				
	2.6.2 <u>IF</u> access to the site is permitted, perform the following:				
	A. Notify site personnel to staff the TSC, OSC and EOF by making the following announcement <u>twice</u> over the public address system:				
	"This is the Shift Manager. A notification of unusual event has been declared. Units(s) is (are) affected. Activate the TSC, OSC and EOF."				
NOTE:	Enclosure 4.1 is formatted to allow step performance in sequence or simultaneously based on available resources (one activation method per page).				
	B. Activate the Emergency Response Organization per Enclosure 4.1 of this procedure.				
2.7	IF the ERO is NOT activated, notify the Public Affairs duty person by pager.				



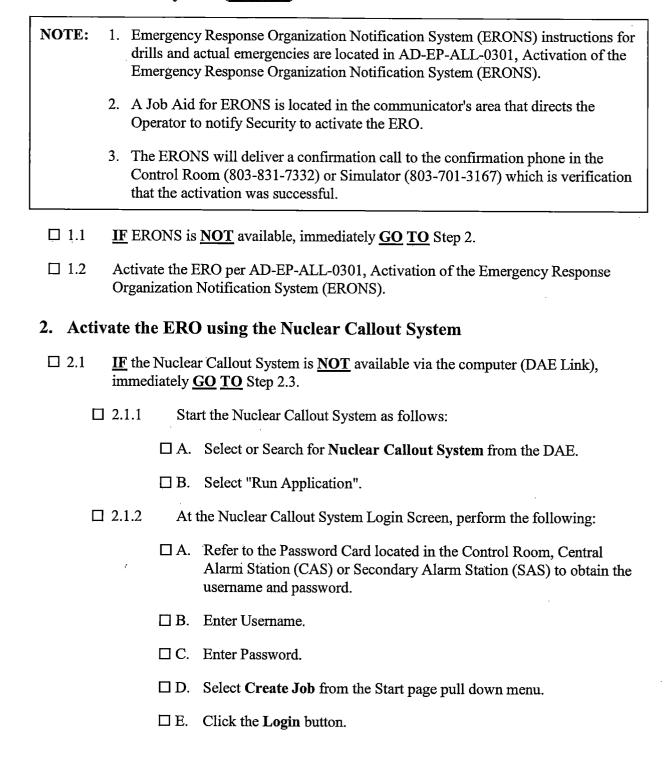
	3.3	<u>IF</u> Security Event announcement, discussed above, was made over the PA system, make the following announcement over the PA system after the Security Event has been terminated:
		"This is the Shift Manager. The Security Event has been terminated. Return to normal work activity." Repeat announcement.
	3.4	Augment shift resources to assess and respond to the emergency situation as needed.
	3.5	Close out the Emergency by a verbal summary to county and state authorities. Document this summary using Enclosure 4.3.
-	3.6	Assign an individual to provide a written summary to state and county authorities within thirty days. This report could be an LER or written report if an LER is not required.
		Person assigned responsibility
4.	Encl	osures
	4.1	Emergency Organization Activation
	4.2	Command and Control Turnover Briefing Form
	4.3	Unusual Event Close Out Briefing with States and Counties

RP/**0**/A/5000/002

#### **Emergency Organization Activation**

Page 1 of 3

1. Activate the ERO using the Emergency Response Organization Notification System (ERONS)



RP/**0**/A/5000/002

## **Emergency Organization Activation**

Page 2 of 3

С		ect the appropriate message to be sent from the Select Template/Saved drop down menu as follows:
	□ A.	For an ERO Drill, select !5 CNS Drill.
	□ B.	For an actual Emergency event, select !6 CNS Emergency.
	<sup>1</sup> □ C.	Click the Review & Send button at the bottom of the page.
	□ D.	Click the <b>Submit</b> button at the bottom of the page.
NOTE:		allout system will deliver a call to the confirmation phone in the (803-831-7332) or Simulator (803-701-3167) which is verification that was successful.
	<u></u>	

☐ 2.2 Verify the Nuclear Callout System activation is successful.

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## **Emergency Organization Activation**

□ 2.3				r Callout system activation via the computer was <b>NOT</b> successful, tivation via the telephone (VoiceREACH) per the following:				
□ 2.3		2.3.1	Cal	866-515-0663 (The system will play the VoiceREACH greeting).				
			□ A.	Refer to the Password Card located in the Control Room, Central Alarm Station (CAS), or Secondary Alarm Station (SAS) to obtain the user number and numeric password.				
			□ B.	Enter the User Number followed by the # key.				
			□ C.	Enter the Numeric Password followed by the # key.				
			□ D.	You will be prompted to "wait while we verify your ID and Password."				
			□ E.	Press 1 to create a message.				
			□ F.	Press 1 to enter a list distribution number.				
		.*	□ G.	Enter 4 (Distribution List Number) followed by the # key.				
• ,			□ Н.	Press 1 to confirm your list distribution number.				
			□ I.	Press 2 to select your message.				
			□ J.	Press # to play the same message for both live and answering machine recipients.				
			□ K.	Press 2 to specify your script.				
			□L.	Press 1 to select a script number.				
• :		2.3.2	Sel	ect the appropriate message to be sent:				
			- □ A.	For an ERO Drill, press 5.				
			□ B.	For an actual <b>Emergency</b> event, press 6.				
		2.3.3	Pre	ss 1 to confirm.				
		2.3.4		ss 1 for immediate delivery (The system will give you a job number. It y take $\sim$ 20 seconds.).				
		2.3.5	Pre	ss 9 to end the call and send the voice broadcast.				

# Enclosure 4.2 Command and Control Turnover Briefing Form

RP/**0**/A/5000/002 Page 1 of 2

Station: □ E	BNP □ C	NS □ HN	NP I MNS	□ ONS	□ RNF	)	Turno	over:	(From):	CR / I TS	C / D EOF
Unit(s) Affec	eted:	<b>1</b>	<b>1</b> 2 <b>1</b>	3					(TO) ☐ ☐ Shift	☐ CR / ☐ TS Change	C / 🗆 EOF
Emergency Classification: Unusual Event Declared a				it: EAL #: Alert Decla			Alert Declare	red at: EAL #:			<u> </u>
			Emergency Dec	clared at:	EA	\L #:	_ General Eme	ergency Decla	red at:	EAL #	:
		nit d				Unit 2					
Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press
Mode Shutdown Date: Time:				Mode Shutdown Date: Time: Mode Shutdown Date: Time:			Time:				
FPB Status (circle appropriate condition)				FPB Status (circle appropriate condition)			FPB Status (circle appropriate condition)				
Fuel Intact Potential Loss Loss				Fuel Intact Potential Loss Loss				Fuel Intact Potential Loss Loss			
RCS Intact Potential Loss Loss				RCS Intact Potential Loss Loss			RCS Intact Potential Loss Loss				
Cont Intact Potential Loss Loss				Cont   Intact   Potential Loss   Loss   Major Equipment Out of Service:				Cont   Intact   Potential Loss   Loss     Major Equipment Out of Service:			
Major Equipment Out of Service:				iviajor Equipment Out of Service.				г мајог Ефир	ment out of a	service.	
Evolutions in Progress:				Evolutions in Progress:			Evolutions in Progress:				
ERDS Activat	ed: Yes N	No N/A	4	ERDS Activa	ted: Yes	No	N/A	ERDS Activa	ated: Yes	No N	I/A
Response Pro	ocedures in Pr	ogress (optiona	al):			Emergency/A	bnormal Procedur	es in Progres	s (optional):		
Station Prioriti	es:			<del></del>					· · · · · ·		
			•								

# Enclosure 4.2 Command and Control Turnover Briefing Form

RP/**0**/A/5000/002 Page 2 of 2

Site Assembly: YES NO TIME: Location/Comments:  Site Evacuation: YES NO TIME: Location/Comments:  Take Cover Order: YES NO TIME: Rapid Evacuation: YES NO TIME: Location/Comments:	Other Agency Involvement:  MEDICAL FIRE LAW ENFORCEMENT OTHER Additional Information (Injuries):					
Radiological: Emergency Worker dose limits approved: YES NO For whom:						
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Number						
Release Pathway: WIND SPEED: WIND DIRECTION:						
Offsite PARS Recommended: YES NO Zones Evacuated: Zones Sheltered:						
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose Assessors discussed Turnover? YES NO						
Off-Site Notifications: Last Notification Completed (time): Last ENF Number: Next ENF Due (time):						
NRC Communication: Notified (time): Continuous Communications with NRC Established: YES NO						
Have Communicators discussed Turnover with acquiring facility Communicators?  YES  NO						
Upon the transfer of Command and Control, the following will be performed by:						
Event Classification:	CR TSC EOF					
State and Local Notification: GR GR TSC GEOF NRC Notifications:	CR TSC					
Site Emergency Exposure Controls & KI:	CR TSC EOF					
Dose Assessment: ☐ CR ☐ TSC ☐ EOF						
Name of Individual turning over Duties:						
Turnover Complete: YES NO TSC / EOF Activated at:						

### Unusual Event Close Out Briefing with States and Counties

RP/**0**/A/5000/002 Page 1 of 1

Person Providing Verbal Summary:						
Brief Event Description	:					
Agency	Person Contacted	Date/Time				
South Carolina						
North Carolina		/				
York County						
Gaston County						
Mecklenburg County		/				
	om States and Counties:					
	, , , , , , , , , , , , , , , , , , ,					

Duke Energy	Procedure No.
Catawba Nuclear Station	RP/ <b>0</b> /A/5000/003
	Revision No.
Alert	054
Reference Use	Electronic Reference No.
	CN005GNM

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#### **REVISION REMARKS Rev 054**

Reference AR(s) 02256534; 02223554

Deleted step 2.8 for initiating ERDS

Revised Enclosure 4.2 (Command And Control Turnover Briefing Form) to Match AD-EP-ALL-0104 Attachment 2 (Command And Control Turnover Briefing Form)

Enclosure 4.2 changes:

Deleted ALL from Units affected block

Unit Status blocks:

deleted stable, degrading and improving

added shutdown date and time

Procedures in progress box:

replaced EOP/APs with Emergency/Abnormal Procedures

Site assembly block:

Added Take Cover Order (yes/no) and time

Added Rapid Evacuation (yes/no) and time.

Radiological block:

Replaced current dose run with dose assessment

Notification / Communications block

Replaced ENF Sent with Notification Completed and Last ENF Number

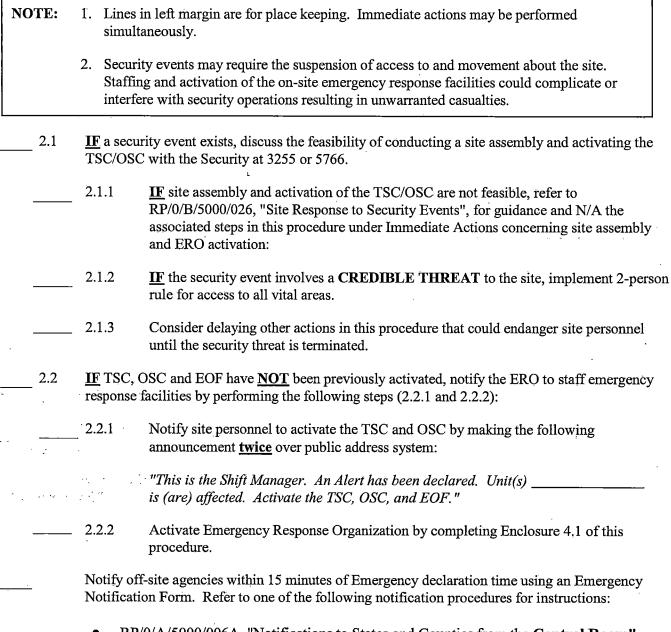
Added Continuous communications with NRC Established (yes/no)

#### **Alert**

#### 1. Symptoms

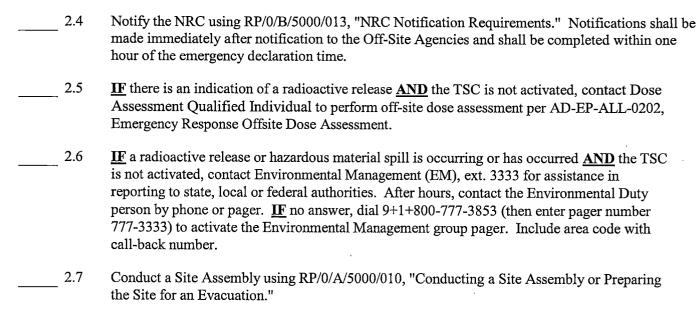
1.1 Events are in process or have occurred which involve an <u>actual</u> or <u>potential</u> substantial degradation of the level of safety of the plant or a security event that involves probable life threatening risk to site personnel or damage to site equipment because of **HOSTILE ACTION**.

#### 2. Immediate Actions



- RP/0/A/5000/006A, "Notifications to States and Counties from the Control Room"
- AD-EP-ALL-0304, "State and County Notifications"

## RP/**0**/A/5000/003 Page 4 of 7



## 3. Subsequent Actions

NOTE:	Subsequent Actions are not required to be followed in any particular sequence.
3.1	<b>IF</b> a security event has occurred, perform the following to account for site personnel:
	3.1.1 <u>WHEN</u> Security notifies the SM that the security threat has been terminated, make the following announcement <u>twice</u> over the public address system:
	"This is the Shift Manager. The security event has been terminated. The security event has been terminated."
	3.1.2 Conduct a site assembly per RP/0/A/5000/10, "Conducting a Site Assembly or Preparing the Site for an Evacuation."
3.2	Ensure RP has dispatched On-Site monitoring and Off-Site Monitoring Teams with associated communications equipment per AD-EP-ALL-0106, "Activation and Operation of the Operations Support Center".
3.3	Perform Follow-up Notifications using applicable "Notifications to States and Counties" procedure.
	• Every <u>hour</u> until the emergency is terminated.
	OR
	• If there is any significant change to the situation.
	OR
	As agreed upon with an Emergency Management official from each individual agency.
3.4	AD-EP-ALL-0205, "Emergency Exposure Controls" shall be used to authorize emergency worker doses expected to exceed normal occupational exposure limits during a declared emergency event or exceed blanket dose extension limits authorized by the Radiation Protection Manager.
3.5	Augment shift resources to assess and respond to the emergency situation as needed.
3.6	Announce over the plant public address system the current emergency classification level and summary of plant status.

3.7	Assess emergency conditions and the corresponding emergency classification. See RP/0/A/5000/001, "Classification of Emergency," then:
	Remain in an Alert.
	<u>OR</u>
	Escalate to a more severe emergency classification.
	<u>OR</u>
	Reduce to a less severe emergency classification.
	(Refer to Enclosure 4.3)
	<u>OR</u>
	Terminate the emergency (Refer to AD-EP-ALL-0101, "Emergency Classification").
3.8	Announce any emergency classification level changes over the plant public address system, including a summary of plant status.
NOTE:	1. Turnover of command and control to the TSC relieves the SM/Emergency Coordinator of Classification, Notification and Protective Action Recommendation (PAR) responsibilities.
	2. Turnover to the EOF relieves the SM/Emergency Coordinator of Notification and Protective Action Recommendation (PAR) responsibilities <b>ONLY</b> .
3.9	Turnover the responsibility of command and control for the emergency as follows:
	3.9.1 <u>IF</u> the emergency situation does <u>NOT</u> prevent activation of the TSC within 75 minutes, provide turnover to the TSC Emergency Coordinator using Enclosure 4.2.
-	3.9.2 <u>IF</u> the emergency situation prevents activation of the TSC within 75 minutes of declaration, contact the EOF Director and perform the following:
	<ul> <li>A turnover for Notifications and Protective Action Recommendation (PAR)</li> <li>ONLY using Enclosure 4.2.</li> </ul>
	<ul> <li>Maintain command and control of classification until TSC is capable of accepting turnover.</li> </ul>
	3.9.3 <u>IF</u> neither facility can take turnover, maintain command and control until the facility is capable of accepting turnover.

## RP/**0**/A/5000/003 Page 7 of 7

	3.10	In the event that a worker's behavior or actions contributed to an actual or potential substantial degradation of the level of safety of the plant (incidents resulting in an Alert or higher emergency declaration), the supervisor must consider and establish whether or not a for cause drug/alcohol screen is required. The FFD Program Administrator or designee is available to discuss/assist with the incident.
	3.11	Close out the emergency with a verbal summary to county and state authorities. Document this summary using Enclosure 4.4.
•	3.12	Assign an individual to provide a written report to county and state authorities within thirty days. This report could be an LER or a written report if an LER is not required.
		Person assigned responsibility
4.	Enclo	osures
	4.1	Emergency Organization Activation
	4.2	Command and Control Turnover Briefing Form
	4.3	Criteria for Downgrading an Emergency Level

Alert Close Out Briefing with States and Counties

4.4

## **Emergency Organization Activation**

RP/**0**/A/5000/003 Page 1 of 3

# 1. Activate the ERO using the Emergency Response Organization Notification System (ERONS)

NOTE:	a	Emergency Response Organization Notification System (ERONS) instructions for Drills and actual Emergencies are located in AD-EP-ALL-0301, Activation of the Emergency Response Organization Notification System (ERONS).					
		A Job Aid for ERONS is located in the communicator's area that directs the Operator to notify Security to activate the ERO.					
	F		deliver a confirmation call to the confirmation phone in the Control 7332) or Simulator (803-701-3167) which is verification that the ccessful.				
□ 1.1	<u>IF</u> t	ne ERONS is <u>N</u>	OT available, immediately GO TO Step 2.				
□ 1.2			er AD-EP-ALL-0301, Activation of the Emergency Response cation System (ERONS).				
2. Activ	vate 1	he ERO usin	g the Nuclear Callout System				
□ 2.1	☐ 2.1 <u>IF</u> the Nuclear Callout System is <u>NOT</u> available via the computer (DAE Link), immediately <u>GO</u> <u>TO</u> Step 2.3.						
. ,	2.1.	Start the 1	Nuclear Callout System as follows:				
		□ A. Selec	t or Search for Nuclear Callout System from the DAE.				
		□ B. Selec	t "Run Application".				
. 🗆	2.1.2	At the Nu	clear Callout System Login Screen, perform the following:				
		1	to the Password Card located in the Control Room, Central Alarm on (CAS) or Secondary Alarm Station (SAS) to obtain the username and word.				
		☐ B. Enter	Username.				
		☐ C. Enter	Password.				
		□ D. Selec	t Create Job from the Start page pull down menu.				
		□ E. Click	the Login button.				

## **Emergency Organization Activation**

RP/**0**/A/5000/003 Page 2 of 3

	☐ 2.1.3 Select the appropriate message to be sent from the <b>Select Template/Saved Job</b> drop down menu as follows:		
	□ A.	For an ERO Drill, select !5 CNS Drill.	
	□ B.	For an actual Emergency event, select !6 CNS Emergency.	
	□ C.	Click the Review & Send button at the bottom of the page.	
	□ D.	Click the <b>Submit</b> button at the bottom of the page.	
ļ		Callout system will deliver a call to the confirmation phone in the Control Room 2) or Simulator (803-701-3167) which is verification that the activation was	
□ 2.2	Verify the Nu	uclear Callout System activation is successful.	
□ 2.3	IF the Nuclea	ar Callout system activation via the computer was <u>NOT</u> successful, perform an the telephone (VoiceREACH) per the following:	
	2.3.1 Ca	ll 866-515-0663 (The system will play the VoiceREACH greeting).	
	□ A.	Refer to the Password Card location in the Control Room, Central Alarm Station (CAS) or Secondary Alarm Station (SAS) to obtain the user number and numeric password.	
	□ B.	Enter the User Number followed by the # key.	
	□ C.	Enter the Numeric Password followed by the # key.	
	□ D.	You will be prompted to "wait while we verify your ID and Password."	
	□ E.	Press 1 to create a message.	
	□ F.	Press 1 to enter a list distribution number.	
	□ G.	Enter 4 (Distribution List Number) followed by the # key.	
	□ H.	Press 1 to confirm your list distribution number.	
	□ I.	Press 2 to select your message.	
	□ J.	Press # to play the same message for both live and answering machine recipients.	
	□ K.	Press 2 to specify your script.	
	□L.	Press 1 to select a script number.	

## **Emergency Organization Activation**

RP/**0**/A/5000/003 Page 3 of 3

□ 2.3.2	Select the appropriate message to be sent:
	☐ A. For an ERO Drill, press 5.
	$\square$ B. For an actual <b>Emergency</b> event, press <b>6</b> .
□ 2.3.3	Press 1 to confirm.
□ 2.3.4	Press 1 for immediate delivery (The system will give you a job number. It may take $\sim$ 20 seconds.).
□ 2.3.5	Press 9 to end the call and send the voice broadcast.

## Command and Control Turnover Briefing Form

## RP/**0**/A/5000/003 Page 1 of 2

Station: 🏻 Unit(s) Affe		CNS HN	P		□ RNF		Turne	over:	` ,	I CR / □ TS I CR / □ TS Change	
Emergency	/ Classificatio	n: Unusual E	vent Declared a	at:	EAL #:		Alert Declare	ed at:	EAL #:_		: -
			Emergency Dec	lared at:	EA	AL #:	General Em	ergency Decla	red at:	EAL #	:
	Ú	Jnit 1				Unit 2				Unit 3	
Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press
Mode	Shutdown	Date:T	me:	Mode	Shutdow	vn Date:	Time:	Mode	Shutdowr	n Date:	Time:
FPB Status	(circle appro	priate condition	n)	FPB Status (circle appropriate condition)			FPB Status (circle appropriate condition)				
Fuel inta	act Potentia	al Loss Loss		Fuel Intact Potential Loss Loss			Fuel Intact Potential Loss Loss				
RCS Intact Potential Loss Loss			RCS Intact Potential Loss Loss			RCS Intact Potential Loss Loss					
Cont Inta				Cont         Intact         Potential Loss         Loss         Cont         Intact         Potential Loss         Loss           Major Equipment Out of Service:         Major Equipment Out of Service:			ss				
Major Equipment Out of Service:				iviajor Equipment Out of Service.			ervice:				
Evolutions in Progress: Evolut				Evolutions in	n Progress:			Evolutions i	n Progress:		
ERDS Activa	ated: Yes	No N/A		ERDS Activa	ated: Yes	No	N/A	ERDS Activ	ated: Yes	No . N	J/A
Response Pr	Response Procedures in Progress (optional):  Emergency/Abnormal Procedures in Progress (optional):										
Station Priori	ities:										

## Command and Control Turnover Briefing Form

RP/**0**/A/5000/003 Page 2 of 2

Site Assembly: YES NO TIME: Location/Comments:  Site Evacuation: YES NO TIME:  Take Cover Order: YES NO TIME:  Rapid Evacuation: YES NO TIME:	Other Agency Involvement:  MEDICAL FIRE LAW ENFORCEMENT OTHER Additional Information (Injuries):			
Radiological: Emergency Worker dose limits approved: YES NO For whom:				
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Num	nber			
Release Pathway: WIND SPEED:	WIND DIRECTION:			
Offsite PARS Recommended: YES NO Zones Evacuated:	Zones Sheltered:			
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose A	Assessors discussed Turnover? YES NO			
Off-Site Notifications: Last Notification Completed (time): Last ENF Number:	Next ENF Due (time):			
NRC Communication: Notified (time): Continuous Communications with Na	RC Established: YES NO			
Have Communicators discussed Turnover with acquiring facility Communicators?  YES  NO				
Upon the transfer of Command and Control, the following will be performed by:				
Event Classification:	CR TSC EOF			
State and Local Notification:	CR TSC			
Site Emergency Exposure Controls & KI:	CR TSC EOF			
Dose Assessment:				
Name of Individual turning over Duties:				
Turnover Complete: YES NO TSC / EOF Activated at:	Name individual assuming duties			
Additional Information:	Name muividual assuming dudes			

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## Criteria for Downgrading an Emergency Level

Date	
Initial/Time	
	1. The probability that plant conditions will continue to improve is evident.
	2. All emergency action level notifications have been completed.
	3 Emergency response facility staffing may be reduced.
	4. The criteria established for the emergency classification has been evaluated. Conditions warrant a lower emergency action level.
	5. The event related release of radioactive material to the environment is terminated.
	6. The control of any fire, flood, earthquake or similar emergency condition is acceptable.
	7. Any corrective actions specified by the Emergency Coordinator to place the plant in a safe condition have been completed and the plant has been placed in the appropriate operating mode.
	8. The Emergency Coordinator has evaluated the plant status with respect to the Emergency Action Levels and recommends downgrading the emergency classification.
	9. Emergency classification level downgraded to
	<ol> <li>Brief the Offsite Agencies at the Emergency Operations Facility (EOF) or by phone if necessary.</li> </ol>
	York County
	Mecklenburg County
	Gaston County
	South Carolina
	North Carolina

## **Alert Close Out Briefing** with States and Counties

Person Providing Verbal Summary:		
	otion:	
Agency	Person Contacted	<u>Date/Time</u>
South Carolina		
North Carolina		
Gaston County		
	у	
Comments/Question	ns from States and Counties:	
1		
·		

Duke Energy Catawba Nuclear Station	Procedure No.  RP/ <b>0</b> /A/5000/004
	Revision No.
Site Area Emergency	057
Reference Use	Electronic Reference No.
	CN005GNN

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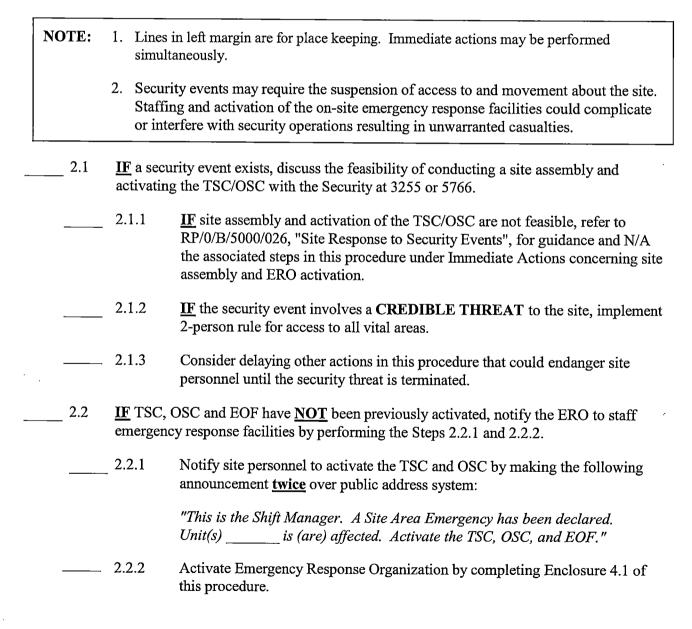
	REVISION REMARKS
Rev 57	Reference AR(s) 02256535; 02223555
	Deleted step 2.8 for initiating ERDS
	Revised Enclosure 4.3 (Command And Control Turnover Briefing Form) to Match AD-EP-ALL-0104 Attachment 2 (Command And Control Turnover Briefing Form)
	Specific changes for Enclosure 4.3
	Enclosure 4.3 changes:
	Deleted ALL from Units affected block
	Unit Status blocks: deleted stable, degrading and improving added shutdown date and time
	Procedures in progress box: replaced EOP/APs with Emergency/Abnormal Procedures
	Site assembly block: Added Take Cover Order (yes/no) and time Added Rapid Evacuation (yes/no) and time.
	Radiological block: Replaced current dose run with dose assessment
,	Notification / Communications block Replaced ENF Sent with Notification Completed and Last ENF Number Added Continuous communications with NRC Established (yes/no)

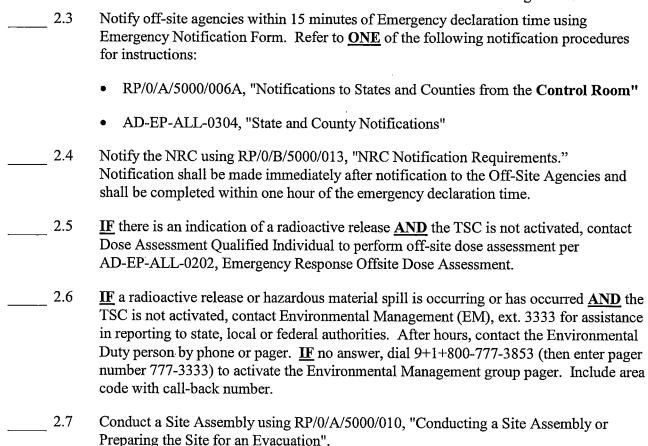
## Site Area Emergency

## 1. Symptoms

1.1 Events are in process or have occurred which involve actual or likely major failures of plant functions needed for protection of the public or **HOSTILE ACTION** that results in intentional damage or malicious acts; (1) toward site personnel or equipment that could lead to the likely failure of or; (2) that prevent effective access to equipment needed for the protection of the public.

## 2. Immediate Actions





## 3. Subsequent Actions

	NOTE:	Subsequent Actions are not required to be followed in any particular sequence.
_	3.1	<b>IF</b> a security event has occurred, perform the following to account for site personnel:
		3.1.1 <u>WHEN</u> Security notifies the OSM that the security threat has been terminated, make the following announcement <u>twice</u> over the public address system:
		"This is the Shift Manager. The security event has been terminated. The security event has been terminated."
		Conduct a site assembly per RP/0/A/5000/10, "Conducting a Site Assembly or Preparing the Site for an Evacuation".
-	3.2	Ensure RP has dispatched On-Site Monitoring and Off-Site Field Monitoring Teams with associated communications equipment per AD-EP-ALL-0106, "Activation and Operation of the Operations Support Center".
	3.3	Perform Follow-up Notifications using applicable "Notifications to States and Counties" procedure:
		• Every <u>hour</u> until the emergency is terminated.
		<u>OR</u>
		• If there is any significant change to the situation.
		<u>OR</u>
		<ul> <li>As agreed upon with an Emergency Management official from each individual agency.</li> </ul>
	3.4	Make follow-up Protective Actions on-site as needed.
		Consider evacuation of nonessential station personnel using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation".
		Consider relocating affected personnel to a safe location on site by directing them using the public address system.
_	3.5	AD-EP-ALL-0205, "Emergency Exposure Controls" shall be used to authorize emergency worker doses expected to exceed normal occupational exposure limits during a declared emergency event or exceed blanket dose extension limits authorized by the Radiation Protection Manager.
	3.6	Augment shift resources to assess and respond to the emergency situation as needed.

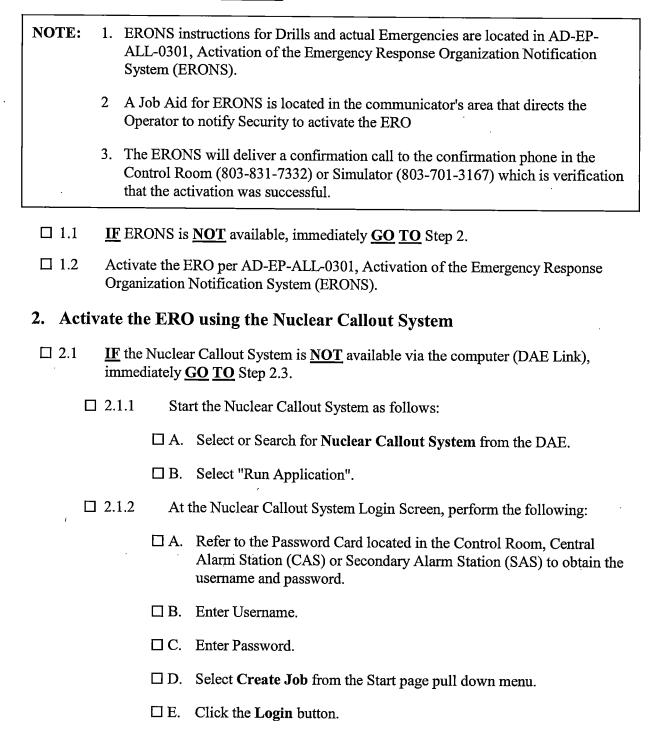
3.7	Announce over the plant public address system the current emergency classification lev and summary of plant status.					
3.8	Assess the emergency conditions and the corresponding emergency classification. Se RP/0/A/5000/001, "Classification of Emergency", then:					
	Remain in a Site Area Emergency.					
	<u>OR</u>					
	Escalate to a more severe emergency classification.					
	<u>OR</u>					
	Reduce to a less severe emergency classification (Refer to Enclosure 4.2).					
	<u>OR</u>					
	Terminate the emergency (Refer to AD-EP-ALL-0101, "Emergency Classification".)					
3.9	Announce any emergency classification level changes over the plant PA, including a summary of plant status.					
NOTE:	<ol> <li>Turnover of command and control to the TSC relieves the SM/Emergency Coordinator of classification, Notification and Protective Action Recommendation (PAR) responsibilities.</li> </ol>					
	2. Turnover to the EOF relieves the SM/Emergency Coordinator of Notification and Protective Action Recommendation (PAR) responsibilities ONLY.					
3.10	Turnover the responsibility of command and control for the emergency as follows:					
	3.10.1 <u>IF</u> the emergency situation does <u>NOT</u> prevent activation of the TSC within 75 minutes, provide turnover to the TSC Emergency Coordinator using Enclosure 4.3.					
	3.10.2 <u>IF</u> the emergency situation prevents activation of the TSC within 75 minutes of declaration, contact the EOF Director and perform the following:					
	<ul> <li>A turnover of Notifications and Protective Action Recommendation (PAR) ONLY using Enclosure 4.3.</li> </ul>					
	<ul> <li>Maintain command and control of classification until TSC is capable of accepting turnover.</li> </ul>					

		3.10.3 <u>IF</u> neither facility can take turnover, maintain command and control until the facility is capable of accepting turnover.
	3.11	In the event that a worker's behavior or actions contributed to an actual or potential substantial degradation of the level of safety of the plant (incidents resulting in an Alert or higher emergency declaration), the supervisor must consider and establish whether on the a for cause drug/alcohol screen is required. The FFD Program Administrator or designee is available to discuss/assist with the incident.
	3.12	Close out of the emergency with a verbal summary to State and Country authorities. Document the close out briefing using Enclosure 4.4.
	3.13	Assign an individual to provide a written report within thirty days. This report could be an LER or a written report if an LER is not required.
-	3.14	Person Assigned Responsibility
4.	Enclo	osures
	4.1	Emergency Organization Activation
	4.2	Criteria For Downgrading An Emergency Level
	4.3	Command and Control Turnover Briefing Form
	4.4	Site Area Emergency Close Out Briefing with States and Counties

## **Emergency Organization Activation**

Page 1 of 3

1. Activate the ERO using the Emergency Response Organization Notification System (ERONS)



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## **Emergency Organization Activation**

	□ 2.1.3		ect the appropriate message to be sent from the Select Template/Saved of drop down menu as follows:
		□ A.	For an ERO Drill, select !5 CNS Drill.
		□В.	For an actual Emergency event, select !6 CNS Emergency.
		□ C.	Click the Review & Send button at the bottom of the page.
	_	□ D.	Click the <b>Submit</b> button at the bottom of the page.
NOTE:	Contro	l Room	callout system will deliver a call to the confirmation phone in the (803-831-7332) or Simulator (803-701-3167) which is verification that was successful.
□ 2.2	Verify	the Nu	clear Callout System activation is successful.
□ 2.3			r Callout system activation via the computer was <b>NOT</b> successful, tivation via the telephone (VoiceREACH) per the following:
	□ 2.3.1	Cal	ll 866-515-0663 (The system will play the VoiceREACH greeting).
		□ A.	Refer to the Password Card located in the Control Room, Central Alarm Station (CAS) or Secondary Alarm Station (SAS) to obtain the user number and numeric password.
		□ B.	Enter the User Number followed by the # key.
		□ C.	Enter the Numeric Password followed by the # key.
		□ D.	You will be prompted to "wait while we verify your ID and Password."
		□ E.	Press 1 to create a message.
		□ F.	Press 1 to enter a list distribution number.
		□ G.	Enter 4 (Distribution List Number) followed by the # key.
		□ Н.	Press 1 to confirm your list distribution number.
		□ I.	Press 2 to select your message.
		□ J.	Press # to play the same message for both live and answering machine recipients.

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#### **Emergency Organization Activation**

□ K. Press 2 to specify your script.
□ L. Press 1 to select a script number.
□ 2.3.2 Select the appropriate message to be sent:
□ A. For an ERO Drill, press 5.
□ B. For an actual Emergency event, press 6.
□ 2.3.3 Press 1 to confirm
□ 2.3.4 Press 1 for immediate delivery (The system will give you a job number. It may take ~20 seconds.).
□ 2.3.5 Press 9 to end the call and send the voice broadcast.

RP/**0**/A/5000/004

Page 1 of 1

## Criteria for Downgrading an Emergency Level

Date Initial/Time 1. The probability that plant conditions will continue to improve is evident. 2. All emergency action level notifications have been completed. 3. Emergency response facility staffing may be reduced. The criteria established for the emergency classification has been evaluated. Conditions warrant a lower emergency action level. The event related release of radioactive material to the environment is terminated. 5. 6. The control of any fire, flood, earthquake or similar emergency condition is acceptable. Any corrective actions specified by the Emergency Coordinator to place the plant in 7. a safe condition have been completed and the plant has been placed in the appropriate operating mode. The Emergency Coordinator has evaluated the plant status with respect to the Emergency Action Levels and recommends downgrading the emergency classification. Emergency classification level downgraded to \_\_\_\_\_\_ \_10. Brief the Off-site Agencies at the Emergency Operations Facility (EOF) or by phone, if necessary York County Mecklenburg County **Gaston County** South Carolina North Carolina

# Enclosure 4.3 Command and Control Turnover Briefing Form

RP/**0**/A/5000/004 Page 1 of 2

Station: □	BNP 🗆	CNS 🗆	HNP	□ MNS	□ ONS	□ RNF	)	Tur	rnover:	(From):[	CR / D TS	C / 🗆 EOF
Unit(s) Affe	ected:	<b>□</b> 1	□ 2		3					, ,	CR / 🗖 TS	C / 🗆 EOF
<u> </u>					·	_				☐ Shift	Change	
Emergency	/ Classification	on: Unusu	al Event	Declared a	nt:	EAL #:	<del></del>	Alert Decla	lared at:	EAL #:		
 					lared at:	EA	L#:	. General E	Emergency Decla	ared at:	EAL #	<u> </u>
	1. 12. 12.	Jņit 1 🕬 🐪					Unit 2				Unit 3	er Penjahija
Rx Power	Cont. Press	Rx Cool Temp		Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Pres		Cont. Press	Rx Cool Temp	Rx Cool Press
ļ.												
Mode	Shutdown	Date:	_ Time:_		Mode Shutdown Date: Time:			Mode	Mode Shutdown Date: Time:			
FPB Status	(circle appro	priate cond	tion)		FPB Status (circle appropriate condition) FPB Status (circle appropriate condition)			ion)				
Fuel Inta	act Potentia	al Loss L	oss	ļ	Fuel Intact Potential Loss Loss Fuel In			Fuel Inta	Intact Potential Loss Loss			
RCS Inta			oss	٠,	RCS Intact Potential Loss Loss RCS Intact Potential Loss Loss			ss				
Cont Inta			oss		Cont         Intact         Potential Loss         Loss           Major Equipment Out of Service:         Major Equipment Out of Service:			ss				
Major Equipr	ment Out of S	ervice:			wajor ⊨quip	ment Out of 8	Service:		Major Equip	ment Out of S	Service:	
Evolutions in	Progress:				Evolutions in Progress:			Evolutions in	Evolutions in Progress:			
ERDS Activa	ited: Yes	No ·	N/A		ERDS Activa	ated: Yes	No 1	V/A	ERDS Activa	ated: Yes	No N	/A
Response Procedures in Progress (optional):						Emergency/A	bnormal Proced	dures in Progres	s (optional):			
Station Driam												
Station Priorities:												

# Enclosure 4.3 Command and Control Turnover Briefing Form

RP/**0**/A/5000/004 Page 2 of 2

Site Assembly: YES NO TIME: Location/Comments:  Site Evacuation: YES NO TIME: Location/Comments:  Take Cover Order: YES NO TIME: Rapid Evacuation: YES NO TIME: Location/Comments:	Other Agency Involvement:
Radiological: Emergency Worker dose limits approved: YES NO For whom:	
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Num	ber
Release Pathway: WIND SPEED:	WIND DIRECTION:
Offsite PARS Recommended: YES NO Zones Evacuated:	Zones Sheltered:
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose A	ssessors discussed Turnover? YES NO
Off-Site Notifications: Last Notification Completed (time): Last ENF Number:	Next ENF Due (time):
NRC Communication: Notified (time): Continuous Communications with NI	RC Established: YES NO
Have Communicators discussed Turnover with acquiring facility Communicators? YES NO	
Upon the transfer of Command and Control, the following will be performed by:	
Event Classification:	CR TSC EOF
State and Local Notification:   CR TSC EOF NRC Notifications:	CR TSC
Site Emergency Exposure Controls & KI:	
Site Emergency Exposure Controls & Nr. — Cr. Control of Figure 2	CR TSC EOF
Dose Assessment:	CR TSC EOF
	LICR LITSC LIEOF
Dose Assessment:	

## **Enclosure No. 4.4**

## Site Area Emergency Close Out Briefing with States and Counties

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Person Providing Verbal Summary:					
Agency	Person Contacted	<u>Date/Time</u>			
South Carolina		/			
North Carolina		/			
York County					
Gaston County	<del></del>				
Mecklenburg County					
	•				
Comments/Questions fi	rom States and Counties:				
·		•			
· ·					
		<del></del>			
	<u> </u>				
<i>f</i>		(			

Duke Energy Catawba Nuclear Station	Procedure No.  RP/ <b>0</b> /A/5000/005
	Revision No.
General Emergency	060
Reference Use	Electronic Reference No. CN005GNO

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#### **REVISION REMARKS Rev 060**

Reference AR(s): 02256536; 02223556

Deleted Step 2.10 to initiate ERDS

Revised Enclosure 4.5 (Command and Control Turnover Briefing Form) to match AD-EP-ALL-0104.

Specific changes for Enclosure 4.5

Deleted ALL from Units affected block

Unit Status blocks:

deleted stable, degrading and improving

added shutdown date and time

Procedures in progress box:

replaced EOP/APs with Emergency/Abnormal Procedures

Site assembly block:

Added Take Cover Order (yes/no) and time

Added Rapid Evacuation (yes/no) and time.

Radiological block:

Replaced current dose run with dose assessment

Notification / Communications block

Replaced ENF Sent with Notification Completed and Last ENF Number\_

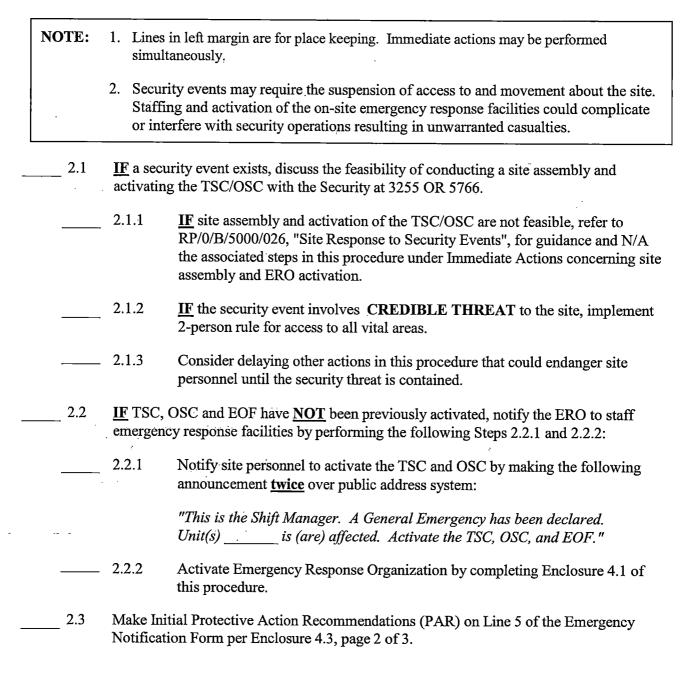
Added Continuous communications with NRC Established (yes/no)

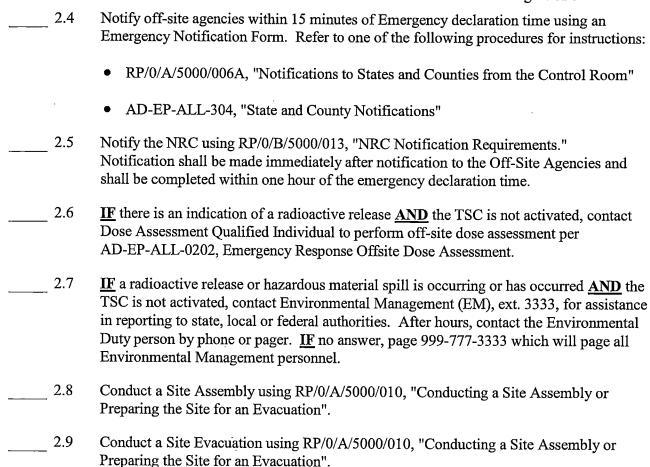
## General Emergency

## 1. Symptoms

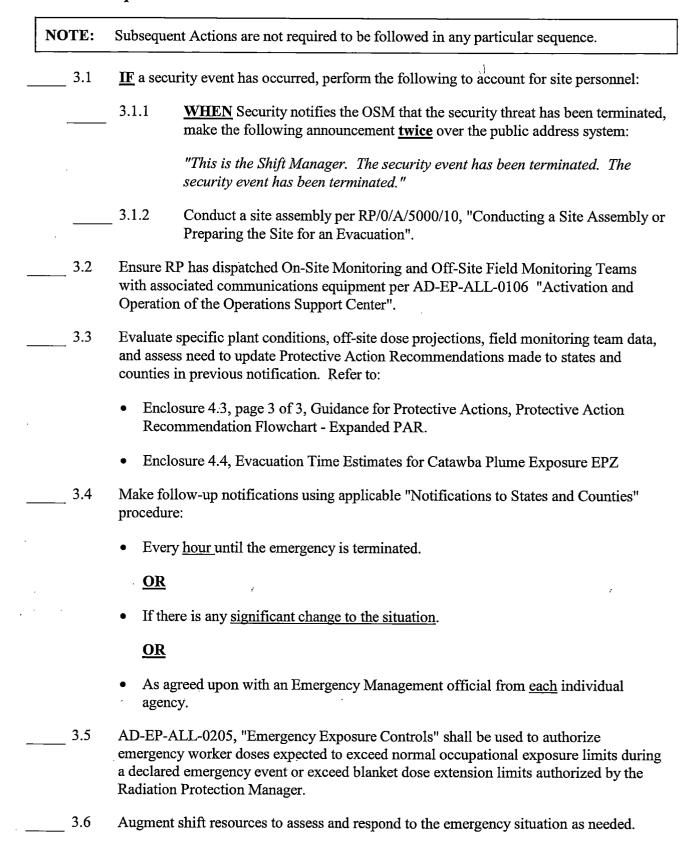
1.1 Events are in process or have occurred which involve <u>actual</u> or <u>imminent</u> substantial core degradation or melting with potential for loss of containment integrity or **HOSTILE**ACTION that results in an actual loss of physical control of the facility.

#### 2. Immediate Actions





## 3. Subsequent Actions



3.7	Announce over the plant public address system the current emergency classification and summary of plant status.					
3.8	Assess the emergency conditions and the corresponding emergency classification. See RP/0/A/5000/001, "Classification of Emergency", then:					
	Remain in a General Emergency.					
	<u>OR</u>					
	• Terminate the emergency (Refer to AD-EP-ALL-0101, "Emergency Classification").					
3.9	Announce any emergency classification level changes over the plant public address system, including a summary of plant status.					
NOTE:	1. Turnover of command and control to the TSC relieves the SM/Emergency Coordinator of classification, Notification and Protective Action Recommendation (PAR) responsibilities.					
	2. Turnover to the EOF relieves the SM/Emergency Coordinator of Notification, and Protective Action Recommendation (PAR) responsibilities <b>ONLY</b> .					
3.10	Turnover the responsibility of command and control for the emergency as follows:					
	3.10.1 <u>IF</u> the emergency situation does <u>NOT</u> prevent activation of the TSC within 75 minutes, provide turnover to the TSC Emergency Coordinator using Enclosure 4.5.					
-	3.10.2 <u>IF</u> the emergency situation prevents activation of the TSC within 75 minutes of declaration, contact the EOF Director and perform the following:					
. · •	<ul> <li>A turnover for Notifications and Protective Action Recommendation (PAR) ONLY using Enclosure 4.5.</li> </ul>					
	<ul> <li>Maintain command and control of classification until TSC is capable of accepting turnover.</li> </ul>					
	3.10.3 <u>IF</u> neither facility can take turnover, maintain command and control until the facility is capable of accepting turnover.					
3.11	In the event that a worker's behavior or actions contributed to an actual or potential substantial degradation of the level of safety of the plant (incidents resulting in an Alert or higher emergency declaration), the supervisor must consider and establish whether or not a for cause drug/alcohol screen is required. The FFD Program Administrator is available to discuss/assist with the incident.					

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	<u> </u>
3.12	Terminate the emergency and recommend entry into Recovery by briefing the off-site authorities at the Emergency Operations Facility or if necessary by phone. Document the termination briefing using Enclosure 4.6.
3.13	Assign an individual to provide a written report within thirty days. This report could be an LER or a written report if an LER is not required.
	Person Assigned Responsibility

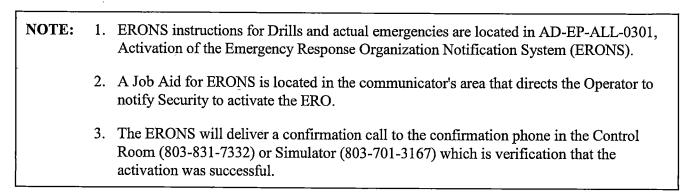
#### 4. Enclosures

- 4.1 Emergency Organization Activation
- 4.2 10 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables
- 4.3 Guidance for Protective Actions
  - Page 1 of 3, Protective Action Guides
  - Page 2 of 3, Protective Action Recommendation Flowchart Initial PAR
  - Page 3 of 3, Protective Action Recommendation Flowchart Expanded PAR
- 4.4 Evacuation Time Estimates for Catawba Plume Exposure EPZ
- 4.5 Command and Control Turnover Briefing Form
- 4.6 General Emergency Termination Briefing with States and Counties

#### **Emergency Organization Activation**

Page 1 of 4

## 1. Activate the ERO using the Emergency Response Organization Notification System (ERONS)



- $\square$  1.1 <u>IF</u> ERONS is <u>NOT</u> available, immediately <u>GO TO</u> Step 2.
- ☐ 1.2 Activate the ERO per AD-EP-ALL-0301, Activation of the Emergency Response Organization Notification System (ERONS).

## 2. Activate the ERO using the Nuclear Callout System

- ☐ 2.1 <u>IF</u> the Nuclear Callout System is <u>NOT</u> available via the computer (DAE Link), immediately <u>GO TO</u> Step 2.3.
  - $\square$  2.1.1 Start the Nuclear Callout System as follows:
    - $\square$  2.1.1.1 Select or Search for **Nuclear Callout System** from the DAE.
    - ☐ 2.1.1.2 Select "Run Application".
  - ☐ 2.1.2 At the Nuclear Callout System Login Screen, perform the following:
    - □ 2.1.2.1 Refer to the Password Card located in the Control Room, Central Alarm Station (CAS) or Secondary Alarm Station (SAS) to obtain the username and password.
    - $\square$  2.1.2.2 Enter Username.
    - $\square$  2.1.2.3 Enter Password.
    - $\square$  2.1.2.4 Select **Create Job** from the Start page pull down menu.
    - $\square$  2.1.2.5 Click the **Login** button.

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## **Emergency Organization Activation**

Page 2 of 4

	□ 2.1.3		appropriate message to be sent from the Select Template/Saved Job n menu as follows:
	•	□ 2.1.3.1	For an ERO Drill, select !5 CNS Drill.
		□ 2.1.3.2	For an actual Emergency event, select !6 CNS Emergency.
		□ 2.1.3.3	Click the Review & Send button at the bottom of the page.
		□ 2.1.3.4	Click the Submit button at the bottom of the page.
NOTE		31-7332) or Si	system will deliver a call to the confirmation phone in the Control Room mulator (803-701-3167) which is verification that the activation was

 $<sup>\</sup>square$  2.2 Verify the Nuclear Callout System activation is successful.

## **Emergency Organization Activation**

Page 3 of 4

□ 2.3	IF the activat	Nuclear Calloution via the telep	nt system activation via the computer was <b>NOT</b> successful, perform an phone (VoiceREACH) per the following:
□ 2.3.1 Call <b>866-51</b>		Call <b>866-5</b> 1	15-0663 (The system will play the VoiceREACH greeting).
	· .	□ 2.3.1.1	Refer to the Password card located in the Control Room, Central Alarm Station (CAS) or Secondary Alarm Station (SAS) to obtain the user number and numeric password.
		□ 2.3.1.2	Enter the User Number followed by the # key.
		□ 2.3.1.3	Enter the Numeric Password followed by the # key.
		□ 2.3.1.4	You will be prompted to "wait while we verify your ID and Password."
		□ 2.3.1.5	Press 1 to create a message.
		□ 2.3.1.6	Press 1 to enter a list distribution number.
		□ 2.3.1.7	Enter 4 (Distribution List Number) followed by the # key.
		□ 2.3.1.8	Press 1 to confirm your list distribution number.
		□ 2.3.1.9	Press 2 to select your message.
		□ 2.3.1.10	Press # to play the same message for both live and answering machine recipients.
		□ 2.3.1.11	Press 2 to specify your script.
		□ 2.3.1.12	Press 1 to select a script number.

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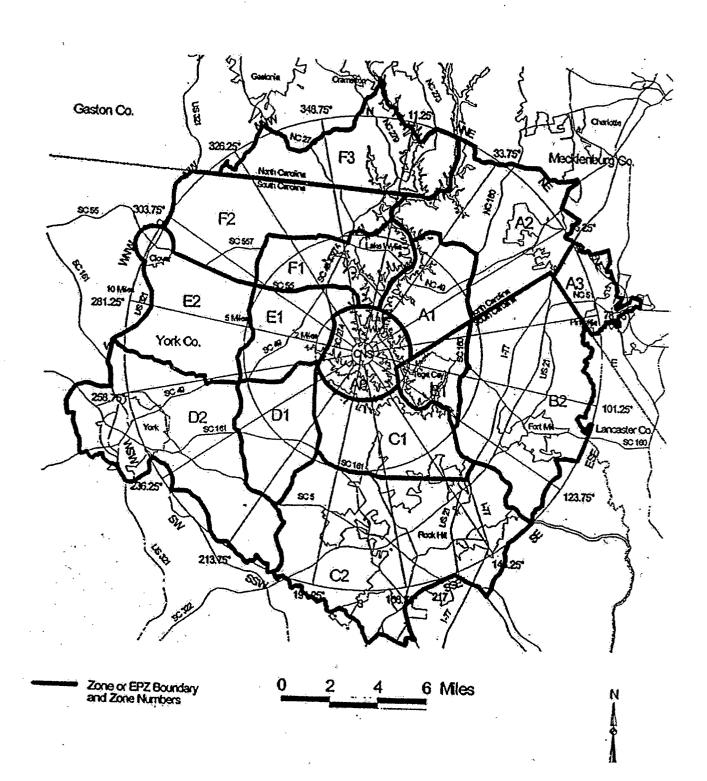
# **Emergency Organization Activation**

Page 4 of 4

□ 2.3.2	Select the	appropriate message to be sent:
	□ 2.3.2.1	For an ERO Drill, press 5.
	□ 2.3.2.2	For an actual Emergency event, press 6.
□ 2.3.3	Press 1 to	confirm.
□ 2.3.4	Press 1 for take ~20 s	immediate delivery (The system will give you a job number. It may econds.).
□ 235	Press 0 to	end the call and send the voice broadcast

10 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables

Page 1 of 3



# 10 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables

Page 2 of 3

Use the table on the next page to determine the recommended zones for Protective Action Recommendation per Enclosure 4.3.

## **NOTE:**

- 1. Upper tower wind direction (OAC Pt. C1P0250) is preferred. If not available, use lower tower wind direction (OAC Pt. C1P0252). Use wind direction from National Weather Service if site meteorological information is not available.

  Duke Met. Lab: 704-382-0139 NWS: Primary: 800-268-7785 Backup: 864-879-1085
- 2. Wind direction indicator in Control Room has a scale of 0 to 540 degrees. Both 0 and 360 degrees indicate North.
- 3. Subtract 360 from wind direction indications greater than 360 degrees to arrive at wind direction for table below.

## 10 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables

Page 3 of 3

**CAUTION:** A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release." A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. IF a release is short term and controlled, sheltering in lieu of evacuation should be considered.

		Table 1	
	Pr	otective Action Zones	
Wind Direction	2 Mile Radius	2-5 Miles Downwind	5-10 Miles Downwind
348.75 - 11.25	A0	B1, C1, D1	B2, C2, D2
11.26 - 33.75	A0	C1, D1	C2, D2
33.76 - 56.25	A0	C1, D1, E1	C2, D2, E2
56.26 - 78.75	A0	C1, D1, E1, F1	C2, D2, E2, F2
78.76 - 101.25	A0	C1, D1, E1, F1	D2, E2, F2
101.26 - 123.75	A0	D1, E1, F1	D2, E2, F2, F3
123.76 - 146.25	A0	E1, F1	E2, F2, F3
146.26 - 168.75	A0	A1, E1, F1	A2, E2, F2, F3
168.76 - 191.25	A0	A1, E1, F1	A2, F2, F3
191.26 - 213.75	A0	A1, B1, E1, F1	A2, A3, B2, F2, F3
213.76 - 236.25	A0	A1, B1, F1	A2, A3, B2, F2, F3
236.26 - 258.75	A0	A1, B1, F1	A2, A3, B2, F3
258.76 - 281.25	A0	A1, B1, C1	A2, A3, B2, C2
281.26 - 303.75	A0	A1, B1, C1	A2, A3, B2, C2
303.76 - 326.25	A0	B1, C1	A3, B2, C2
326.26 - 348.74	A0	B1, C1, D1	B2, C2, D2

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# Guidance for Protective Actions Protective Action Recommendation Flowchart

**NOTE:** 

Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002.

PROTECTIVE AC	TION GUIDES (PAGs)
(Projected Dose or	Field Measurements)
Total Effective Dose	Committed Dose
Equivalent (TEDE)	Equivalent (CDE)
	Thyroid
≥1 Rem	≥ 5 Rem

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## **Guidance for Protective Actions Protective Action Recommendation Flowchart**

## Protective Action Recommendation Flowchart - Initial PAR

**GE Has Been** Declared Is this a Rapidly No **Progressing Severe** Accident (RPSA) (See Note 2) Yes (See Note 1) P. • EVACUATE 2-mile Radius A • EVACUATE 2-5 miles Downwind

• SHELTER 5-10 miles Downwind

NOTE 1: For all PARs, affected Protective Action Zones are defined in Enclosure 4.2, Page 3 of 3

NOTE 2: RPSA criteria: Only applicable to first PAR after GE declaration and the following exist:

LOSS of Containment Barrier per RP/0/A/5000/001(EAL Wallchart) as indicated on Table F-1 (Fission Product Barrier Threshold Matrix).

- A leaking or RUPTURED SG is FAULTED outside of containment
- Containment isolation is required AND EITHER
  - o Containment integrity has been lost based on Emergency Coordinator judgment
  - o UNISOLABLE pathway from Containment to the environment exists
- Indications of NCS leakage outside of Containment

#### AND EITHER:

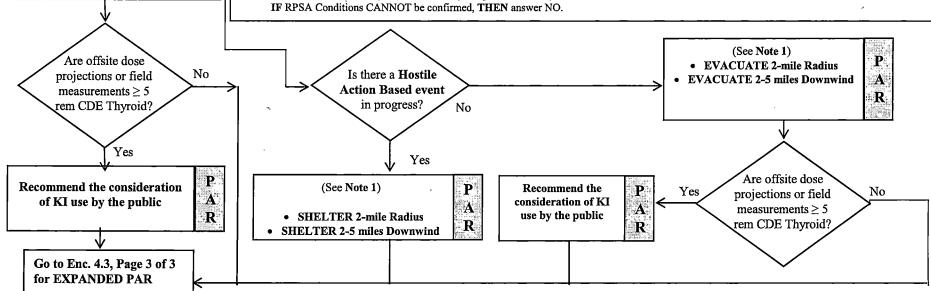
1) POTENTIAL LOSS of the Containment Barrier per RP/0/A/5000/001 (EAL Wallchart Table F-2) as indicated by Containment Radiation Monitor EMF53A or 53B reading at time since shutdown

Time after S/D	CMT Potential Lo
Ohr -1 hr	5500 R/hr
1hr-2hr	4000 R/hr
2hr to 8hr	1600 R/hr
> 8hr	1000 R/hr

R

2) There is a significant radiological release projected to exceed PAGs at the site boundary within an hour as indicated by RP/0/A/5000/001 (EAL Wallchart RG 1.1, RG 1.2 or RG 1.3).

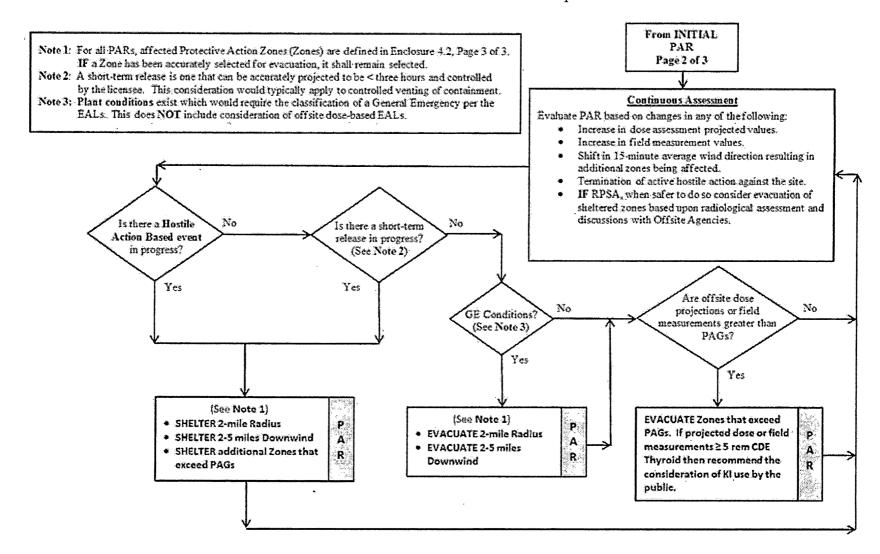
- Valid reading on 1/2 EMF 36H effluent radiation monitor > 2.21E+4 cpm for > 15 min.
- Dose assessment using actual meteorology indicates doses > 1000 mrem TEDE or 5000 mrem thyroid CDE at or beyond the SITE BOUNDARY.
- Field survey results indicate EITHER of the following at or beyond the SITE BOUNDARY:
  - o Closed window dose rates > 1000mR/hr expected to continue for > 60 min
  - o Analyses of field survey samples indicate thyroid CDE > 5000 mrem for 60 min. of inhalation.



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# Guidance for Protective Actions Protective Action Recommendation Flowchart

Protective Action Recommendation Flowchart - Expanded PAR



**Enclosure 4.4** 

RP/**0**/A/5000/005

# **Evacuation Time Estimates for Catawba Plume Exposure EPZ (Evacuation Time** Page 1 of 3 in hours and minutes)

· · · · · · · · · · · · · · · · · · ·	Sun	nmer	Sum	mer	Summer	***************************************	Winter	ii isi amaan aasi aasi aa	T	Winter	***************************************	Winter	Summer	Summer
		week	Weel		Midweek Weekend		Midweek			Weekend		Midweek Weekend	Weekend	Midweek
Scenario:	(1).	(2) =	:(3)	(4)	(5)	(6)	H 2(7)	(8)	(9)	(10)		(12)	(13)	(14)
	Mic	day	Mid	day	Evening		Midday			Midday		Evening	Midday	Midday
Region	Good Weather	Rain	Good Weather	Rain	Good Weather	Good Weather	Rain	fce	Good Weather	Rain	Ice	Good Weather	Special Event	Roadway Impact
					Entire 2-Mi	le Region, 5-1	Vile Region,	EPZ, and Cou	inties				***************************************	······································
RO1 (A0) RO2	4:30	4:30	4;30	4:30	4:30	. j. (4:30): ``.	4:30	4:30	4:30	4:30	4:30	્યું:30	4:30	4:30
[AO, A1, B1, C1, D1, E1, F1]	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
RO3 (All Zones) RO4	5:10	6:00	4:40	4:45	4:40	5:40	6:00	6:00	4:45	5:00	535	4:40	4:40	6:20
(A0, B1, B2, C1, C2, D1, D2, E1, E2, F2)	5:10	5:35	4:35	4:35	4:35	5:10	5:30	6:00	4:35	4:35	4:45	4:35	4:35	5:50
RO5 (A0, A1, A2, A3)	4:35	4:35	4:35	4:35	4:35	4:35	4:35:	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R06 (F3)	4:35	4:35	4:35	A:35	4:35	4;35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				2-1	Aile Region a	nd Keyhole t	o 5 Miles			·	·		
R07 (A0, C1, D1)	4:35	4.35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R08 (A0, C1, D1, E1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R09 (A0, D1, E1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R10 (A0, E1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R11 (A0, E1, F1)	4:35	4:35	4:35	4:35,	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R1Z (A0, A1, E1, F1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R13 (A0, A1, F1)	4:35	4:35	4:35	4:35,	4:35	4:35	4:35:	4:35	4:35 ¹	4:35	4:35.	4:35	4:35	4:35
R14 (A0, A1, B1)	4:35	4:35	4:35	4;35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35

**Enclosure 4.4** 

RP/**0**/A/5000/005

# Evacuation Time Estimates for Catawba Plume Exposure EPZ (Evacuation Time Page 2 of 3 in hours and minutes)

	Sun	nmer	Sum	mer	Summer		Winter			Winter		Winter	Summer	Summer
		week	Weel	kend	Midweek Weekend		Midweek			Weekend		Midweek Weekend	Weekend	Midweel
Scenario:	· (1) 's	` . (2)      ;	: 02/(3), 3s	(4)	(5)	(6)	7)[1	(8)	(9)	·**(10)	(11) نوند	(12)	(13)	*(14) -
	games and a second	idav	Mid	A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Evening		Midday			Midday		Evening	Midday	Midday
Region	Good Weather	Rain	Good Weather	Rain	Good Weather	Good Weather	Rain	Ice	Good Weather	Rain	Ice	Good Weather	Special Event	Roadway Impact
R15 -{A0, A1, B1, C1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R16 (A0, B1. C1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
					5-Mile	Region and	Keyhole to E	PZ Boundary		·				
R17 (A0, A1, B1, C1, C2, D1, D2, E1, F1)	4:50	5:00	4:40	4:40	4:40	5;00	.5:05.	5:15	4:40	4:40	4:40	4:40	4:40	4:50
R1B (A0, A1, B1, C1, D1, D2, E1, E2, F1)	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40
R19 (A0, A1, B1, C1, D1, D2, E1, E2, F1, F2)	4:40	4:40	4:40	4:40	4:40	4:40	્4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40
R20							l					4.40	4:46	4:40
(A0, A1, B1, C1, D1, E1, E2, F1, F2, F3) R21 (A0, A1, B1, C1, D1)	4:40 4:40	4:40 4:40	4:40 ***********************************	4:40 4:40	4:40 :: 4:40:	4:40 4:40	4:40 4:40	4:40 4:40	4:40 	4:40 * 4:40	4:40 4:40	4:40 4:40	4:40 4:40	4:40 4:40
E1, F1, F2, F3) R22			4.5			4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40	4:40
(A0, A1, A2, B1, C1, D1, E1, F1, F2, F3) R23	4:40	4:40	4:40	4:40 	4:40		4,40	4:40		4.40				
(A0, A1, A2, A3, B1, B2, C1, D1, E1, F1,	4:45	4:50	4:40	4:40	4:40	4:40	4:50	5:15	4:40	4:40	4:40	4:40	4:40	4:50
F3) R24	المالية المالية		Property for	a.an	4-40	4:40	4:50	5:15	4:40	4:40	4:40	4:40	4:40	4:50
AO, A1, A2, A3, B1, B2, C1, D1, E1, F1) R25	4:45	4:50	4:40	4:40	4:40					, ··	, .	4:40	4:40	5:50
(A0, A2, A3, B1, B2, C1, C2, D1, E1, F1) R26	5:05	. 5:30 .	4:40	4:40	4:40	5:10	5:15	5:40	4;40,	4:40	4:40			· ·
(AO, AZ, B1, B2, C1, C2, D1, E1, F1)	5:05	5:30	4:40	4:40	4:40	5:10	5:15	5:40	4:40	4:40	4:40	4:40	4:40	5:50

Evacuation Time Estimates for Catawba Plume Exposure EPZ (Evacuation Time in hours and minutes)

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	Sun	mer	Sum	mer	Summer		Winter			Winter		Winter	Summer	Summer
	Mid	week	Wee	kend	Midweek Weekend		Midweek			Weekend		Midweek Weckend	Weekend	Midweek
Scenario:	(2)	· (2) .	. (3)	(4)	(5)	(6)- '	(7)	F. (8)	P(9)	J (2(10)	11)	(12)	(13)	(14)
	Mic	lday	Mid	day	Evening		Midday			Midday		Evening	Midday	Midday
Region	Good Weather	Rain	Good Weather	Rain	Good Weather	Good Weather	Rain	Ice	Good Weather	Rain	Ice	Good Weather	Special Event	Roadway Impact
***************************************	**********			······································	Staged Evacu	ation - 2-Mil	e Region and	Keyhole to 5	Miles	***************************************		·		
R27 (A0, A1, B1, C1, D1, E1, F1)	4:35	4:35	<b>4:35</b>	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R28 (A0, C1, D1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R29 (A0, C1, D1, E1)	4:35	4:35	435	.435	4:35	4:35	4:35	4:35 <sub>1, 13</sub>	4:35	4:35	4:35	4;35.	4:35	4:35
R30 (A0, D1, E1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R31 [A0, E1]	4:35	4:35 🌣	4:35	4:35	4:35	4:35	4:35	<b>4:35</b> ً	4:35	4:35	4:35	4:35	4:35	4:35
R32 (A0, E1, F1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
R33 (AO, A1, E1, F1)	4:35	4:3S	4:35	4:35	4:35	4:35	4:35	.4:35	4:35	4:35	4:35	4:35	4:35	4:35
R34 (A0, A1, F1) R35	4:35	4:35 	4:35	4:35	4:35	4:35	4:35	4:35	4; <b>3</b> 5	4:35	4:35	4:35	4:35	4:35
(A0, A1, B1) R36	4:35	4:35	4:35	4:35	4:35	4:35	- 4:35 <u>-</u> -	4:35	4:35	4:35	4:35	4:35	4:35	4:35
(A0, A1, B1, C1) R37	4:35	4:35	4:35	<b>4:35</b> 2 (24,73 / 2	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35
(A0, B1, C1)	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35	4:35

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# **General Emergency Termination Briefing**

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# with States and Counties

South Carolina North Carolina York County Gaston County	
Agency Person Contacted  South Carolina  North Carolina  York County  Gaston County	Date/Time
Agency Person Contacted  South Carolina  North Carolina  York County  Gaston County	Date/Time
South Carolina  North Carolina  York County  Gaston County  Macklenburg County	
South Carolina  North Carolina  York County  Gaston County  Mecklenburg County	
North Carolina  York County  Gaston County  Mecklenburg County	/ / / /
York County  Gaston County  Macklenburg County	/ / /
Macklanhurg County	/ /
Macklanburg County	/
Macklanburg County	
Comments/Questions from States and Counties:	
	<del></del>
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# Enclosure 4.5 Command and Control Turnover Briefing Form

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Station: □	BNP 🗆	CNS □ H	NP I MNS	ONS	S □ RNF	•	Tu	ırnover:	(From):[	CR / 🗆 TS	C / 🗆 EOF
Unit(s) Affe	ected:	<b>1</b>	□ 2     □	3					• •	Change	C / 🗆 EOF
``.			<u> </u>			_ <del></del>			☐ Shift	Cnange	
Emergency	y Classificatio	on: Unusual	Event Declared	at:	EAL #:		Alert Decl	lared at:	EAL #:	<del></del>	
1		Site Area	Emergency Dec	clared at:	EA	\L #:	_ General E	Emergency Decla	ared at:	EAL #	:
CAST FORE	F167-14214	Unit 1		riter de	a Controllère	Unit 2		THE STAR THE	hárasí.	Unit 3	
Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Press	Rx Power	Cont. Press	Rx Cool Temp	Rx Cool Pres		Cont. Press	Rx Cool Temp	Rx Cool Press
					_						
Mode	Shutdown	Date:	Гіте:	Mode	Shutdov	vn Date:	Time:	Mode	Shutdow	n Date:	Time:
FPB Status	(circle appro	priate condition	on)	FPB Status	s (circle appı	ropriate condit	tion)	FPB Status	s (circle appr	opriate condit	ion)
Fuel Int	act Potentia	al Loss Los	s	Fuel int	act Poten	tial Loss Lo	SS	Fue! Int	act Potent	ial Loss Lo	ss
	act Potentia act Potentia			1			ess ess			ial Loss Lo ial Loss Lo	
	ment Out of S				oment Out of		-	Major Equip	ment Out of S		
Evolutions in	n Progress:			Evolutions i	n Progress:			Evolutions i	n Progress:		
	_				_						
ERDS Activ	ated: Yes	No N/	Ά	ERDS Activ	ated: Yes	No	N/A	ERDS Activ	ated: Yes	No N	√A
Response P	rocedures in F	rogress (option	nal):			Emergency/A	bnormal Proce	edures in Progres	ss (optional):		
Station Prior	rities.	<del> </del>				<u> </u>					
	nios.										

# Enclosure 4.5 Command and Control Turnover Briefing Form

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Site Assembly: YES NO TIME: Location/Comments:	Other Agency Involvement:  MEDICAL DIFIRE DILAW ENFORCEMENT DIOTHER
Site Evacuation: YES NO TIME: Take Cover Order: YES NO TIME:	Additional Information (Injuries):
Rapid Evacuation: YES NO TIME:	
Radiological: Emergency Worker dose limits approved: YES NO For whom:	
Release in Progress: YES NO Field Monitoring Teams Deployed: YES NO Num	ber
Release Pathway: WIND SPEED:	WIND DIRECTION:
Offsite PARS Recommended: YES NO Zones Evacuated:	Zones Sheltered:
KI Recommended: YES NO Dose Assessment Available: YES NO Have Dose A	ssessors discussed Turnover? YES NO
Off-Site Notifications: Last Notification Completed (time): Last ENF Number:	Next ENF Due (time):
NRC Communication: Notified (time): Continuous Communications with NI	RC Established: YES NO
Have Communicators discussed Turnover with acquiring facility Communicators? YES NO	
Upon the transfer of Command and Control, the following will be performed by:	
	CR TSC EOF
Event Classification:	□ CR □ TSC □ EOF □ CR □ TSC
Event Classification:  CR TSC PAR Decision Making:  State and Local Notification:  CR TSC EOF NRC Notifications:	
Event Classification:  CR TSC PAR Decision Making:  State and Local Notification:  CR TSC EOF NRC Notifications:	CR TSC
Event Classification:  CR TSC PAR Decision Making:  State and Local Notification:  CR TSC EOF NRC Notifications:  Site Emergency Exposure Controls & KI:  CR TSC Control of FMTs:	CR TSC
Event Classification:  CR TSC PAR Decision Making:  State and Local Notification:  CR TSC EOF NRC Notifications:  CR TSC EOF  Control of FMTs:  CR TSC EOF	CR TSC