



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA ST., N.W., SUITE 3100
ATLANTA, GEORGIA 30303

Report No. 50-348/79-36

Licensee: Alabama Power Company
600 North 18th Street
Birmingham, Alabama 35202

Facility Name: Farley Nuclear Plant

Docket No. 50-348

License No. NPF-2

Inspection at Farley site near Dothan, Alabama

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| Inspectors: <u>D. L. Andrews</u> | <u>11/29/79</u> |
| D. L. Andrews | Date Signed |
| <u>P. A. Taylor</u> | <u>11/29/79</u> |
| P. A. Taylor | Date Signed |
| <u>D. J. Perrotti</u> | <u>11/29/79</u> |
| D. J. Perrotti | Date Signed |
| Approved by: <u>G. R. Jenkins</u> | <u>11/30/79</u> |
| G. R. Jenkins, Acting Section Chief, FFMS Branch | Date Signed |

SUMMARY

Inspection on November 5-9, 1979 and November 13-16, 1979

Areas Inspected

This routine, announced inspection involved 113 inspector-hours onsite in the areas of Coordination with Offsite Support Agencies; Emergency Facilities, Equipment and Procedures; Means for Determining a Release; Emergency Training; Emergency Drills; Fire Brigade Organization and Training; Emergency Organization; I.E. Bulletin 79-18; follow-up on previous inspection findings and follow-up on medical emergency of April 6, 1979.

Results

Of the 10 areas inspected, no items of noncompliance or deviations were identified in 9 areas; one apparent item of noncompliance was found in one area (Deficiency - Failure to perform monthly channel functional test on process monitors R-25 A&B for the fuel storage pool area as required by Technical Specifications 4.3.3 - paragraph 7.d (348/79-36-04)).

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DETAILS

1. Persons Contacted

Licensee Employees

- *W. J. Hairston, Plant Manager
- *J. Woodard, Assistant Plant Manager
- *R. Berryhill, Technical Supervisor
- *L. Williams, Training Supervisor
- *C. Nesbitt, Chemistry and Health Physics Supervisor
- *J. Thomas, I&C Supervisor
- *J. Kale, Quality Assurance Engineer
- *R. Hill, Quality Assurance Engineer
- *M. Carnley, Assistant I&C Supervisor
- *H. McClellan, Generating Plant Engineer I
- *B. Yance, Generating Plant Engineer II
- W. Pruett, Jr., Shift Supervisor
- L. Enfinger, Document Control Supervisor
- O. Graves, Chemistry and Health Physics Foreman
- W. Bayne, Chemistry and Health Physics Foreman
- D. Cox, Generating Plant Engineer I
- K. McCracken, Technical Superintendent
- W. Jackson, Corporate Environmental and Health Physics Coordinator
- J. Garlington, Operations Superintendent
- M. Mitchell, Assistant Chemistry and Health Physics Supervisor
- D. Herrin, Generating Plant Engineer

Other licensee employees contacted during this inspection included 4 technicians, 3 operators, and 3 office personnel.

Other Organizations

- J. Pilcher, Jr., Ambulance Service Company
- A. Clark, Sheriff, Houston County
- J. Manion, Civil Defense Coordinator, Early County, Georgia
- J. Aldridge, Civil Defense Coordinator, Houston County, Alabama
- G. Adams, Georgia Civil Defense Area Coordinator
- R. Barnes, Chief, Dothan Fire Department
- O. Williams, Sheriff, Early County, Georgia
- C. Leigh, Daniels Construction Company, Safety Manager
- Dr. Barlow, South East Alabama Medical Center (S.A.M.C.)
- M. Kelly, Safety Engineer, S.A.M.C.
- W. Cassels, Assistant Administrator, S.A.M.C.
- M. Sedor, Director of Communications and Administration,
Dothan City Police Department

*Attended exit interview

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2. Exit Interview

The inspection scope and findings were summarized on November 16, 1979, with those persons indicated in Paragraph 1 above. With respect to the item of noncompliance discussed in paragraph 7.d and the one unresolved item discussed in paragraph 10.c, the plant manager acknowledged the inspector's finding.

3. Licensee Action on Previous Inspection Findings

Closed (Open Item 50-348/79-07-02) Review, Updating and Controlled Distribution of the Emergency Plan. The inspector noted that the Emergency Plan has been made a separate controlled document. Revisions to the Emergency Plan as well as the Emergency Plan Implementing Procedures (EIP's) are distributed by document control using a return receipt procedure. In addition, document control personnel make spot checks of controlled documents, including Emergency Plans and EIP's, to insure that they are maintained up-to-date and in the proper locations.

Open (Open Item 79-07-01) Revision of AP-27 to Incorporate Training on Revisions to Emergency Implementing Procedures (EIP's). The licensee has revised AP-27 to provide documentation for annual review of EIP's by licensed personnel. The licensee has agreed to initiate immediately the routing of revisions of EIP's to appropriate personnel via the provisions of AP-27. This matter will remain open for review during a subsequent inspection.

4. Unresolved Items

Unresolved items are matters about which more information is required to determine whether they are acceptable or may involve noncompliance or deviations. One new unresolved item identified during this inspection is discussed in Paragraph 10.c.

5. Coordination With Offsite Support Agencies

- a. This area was reviewed with respect to the licensee's commitments to maintain contact and coordination with the offsite agencies as described in the Emergency Plan.
- b. The inspector reviewed the licensee's Emergency Implementing Procedures, (EIP), written letters of agreement with offsite support agencies and the list of offsite support agencies specified in the Emergency Plan to verify that:
 - (1) Detailed procedures have been established describing methods for notifying Local, State, and Federal officials, and other offsite support agencies in the event of a radiation emergency.
 - (2) Arrangements for the services of a physician and other medical personnel qualified to handle radiation emergencies have been established.

- (3) Arrangements for the transportation and treatment of injured or contaminated individuals at a treatment facility outside the site boundary have been established.
- c. The inspector contacted five offsite agencies and met with officials of these agencies to verify that contact is being maintained by the licensee and that services, as described in the letter of agreement, can be provided. In addition, an inspector contacted representatives of the Dothan City Police Department and the Houston County Sheriff. The inspector was assured that, while no written agreement with Farley had been established, both agencies would respond to any request for assistance within their respective jurisdictions. An inspector participated as a Federal observer and as a member of the Federal Interagency Regional Advisory Committee during the test of the Alabama Emergency Plan conducted on November 6-7, 1979. This test was accomplished as a result of a postulated major reactor accident originating at the Farley Nuclear Power Plant. The results of the test were sufficiently adequate to warrant NRC's continual concurrence in the Alabama Emergency Plan. An inspector observed the activities of the Civil Defense Emergency Operations Center (EOC), in Early County, Georgia on November 7, 1979. This exercise was held in conjunction with the State of Alabama and Farley Nuclear Plant. The State of Georgia Department of Natural Resources conducted the exercise. The inspector verified that an effective communication link was established between the Houston County EOC and the Early County EOC. The inspector also discussed with licensee representatives the notification procedure for the State of Georgia as outlined in Emergency Implementing Procedure (EIP) No. 8. The inspector pointed out that, in addition to the notification procedure established by the EIP, a written agreement between the State of Georgia and Farley Nuclear Plant should be established. The licensee stated that this matter was being looked into, and in fact has been actively pursued for a considerable length of time. The inspector verified, through contact with the Federal Interagency Regional Advisory Committee that the Georgia Emergency Plan was being actively reviewed for NRC concurrence and that the plan had provisions for responding to an emergency at the Farley Nuclear Plant. An inspector also received a copy of the Early County Emergency Response Plan (DRAFT) which would be incorporated in the Georgia Emergency Plan.
- d. The inspector used the following acceptance criteria for the inspection and evaluation of the above areas.
- (1) 10 CFR 50, Appendix E, paragraph IV.A and D.
 - (2) Farley Emergency Plan, Sections III.C., IV, Part I (Appendix B) and Part II (Appendix B).

Within the areas inspected, no items of noncompliance or deviations were identified. The matter of a written agreement between the licensee and the State of Georgia is an open item and will be reviewed at a future date (348/79-36-01).

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6. Facilities, Equipment and Procedures

a. Changes to Facilities, Equipment and Procedures

- (1) The inspector reviewed established management controls and interviewed licensee personnel to determine if changes had been made to the emergency plan, emergency implementing procedures, emergency facilities and equipment since the last inspection.
- (2) The review of this area, with respect to changes, was conducted to verify that:
 - (a) Changes did not constitute an unreviewed safety question.
 - (b) Changes did not alter the requirements set forth in the Emergency Plan.
 - (c) Changes were reviewed and approved in accordance with established plant procedures.
 - (d) The Emergency Plan notification roster (names, telephone numbers), organization and listed personnel specifically qualified for coping with emergencies were updated at the required intervals.
 - (e) Required plant committee review and QA audits of the Emergency Plan were conducted.
 - (f) Revisions to the Emergency Plan and Emergency Implementing Procedures were distributed to the required locations at the facility.
- (3) The inspector used the following acceptance criteria for the inspection and evaluation of the above areas.
 - (a) 10 CFR 50.59
 - (b) Technical Specifications 6.5.1.b.c, and 6.5.1.6.k

Within the areas inspected, no items of noncompliance or deviations were identified.

b. Emergency Kits

- (1) The inspector reviewed selected calibration and inventory records along with a physical inspection and inventory of emergency kits and equipment located in the main control room, first aid room, alternate control center, plant emergency vehicle, switchhouse, and medical center. Types of emergency equipment selected for inspection and inventory included self-contained breathing apparatus (SCBA), respirators, survey meters, air samplers, -

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communication equipment, control center instrumentation, emergency kit supplies, pocket dosimeters, and pocket dosimeter chargers.

- (2) The review and inspection of emergency kits and equipment was conducted to verify that:
 - (a) The required periodic inventory, maintenance and calibration of emergency equipment and emergency kits were being conducted.
 - (b) The physical condition and content of emergency kits and supplies are being maintained in a state of readiness.
 - (c) The emergency kits, supplies, and portable instrumentation are at various locations as required by the Emergency Plan and Emergency Procedures.
- (3) The inspector used the following acceptance criteria for the inspection and evaluation of the above areas:
 - (a) 10 CFR 50 Appendix E Section IV.F.
 - (b) Emergency Plan Section VII.C and Appendix A
 - (c) Emergency Implementing Procedure (EIP-16)

Within the areas inspected, no items of noncompliance or deviations were identified.

c. Main Control Room Habitability

- (1) This area was reviewed with respect to maintaining the main control room habitable. The Emergency Plan defines this area as the center for controlling activities during emergency conditions.
- (2) The inspector reviewed surveillance test records, calibration data, channel checks, and system alignment to verify that:
 - (a) The control room emergency ventilation system is properly aligned.
 - (b) The required operability tests are being performed on the control room emergency ventilation system at the required frequency, including system automatic start upon receiving a safety injection signal.
 - (c) The control room air temperature checks, pressure test and chlorine monitor channel checks and calibration had been performed at required intervals and surveillance data was satisfactory.
- (3) The inspector made a physical review of food and water supplies stored in the control room which are described in the Final Safety Analysis Report.

- (4) The inspector verified by observation that readouts of displays for air temperature, air intake chlorine, radiation, smoke detection and control room differential pressure were located in the control room.
- (5) The inspector used the following acceptance criteria for the inspection and evaluation of the above areas:
 - (a) FSAR 6.4.1.3.4
 - (b) Technical Specification 4.3.3.6 and 4.7.7.1
 - (c) Surveillance Test Procedure (STP) No. 1; 40.3; 218

Within the areas inspected, no items of noncompliance or deviation were identified. Commitments in the area of main control room habitability are discussed in Paragraph 6.c.(6).

- (6) The inspector reviewed the food supplies stored in the main control room with respect to the Final Safety Analysis Report which requires sufficient capacity for two shifts of operators for 30 days.

Several sealed cardboard boxes containing food supplies were determined to be on hand, but a listing of the required food supplies was not readily available nor has an inventory been conducted since the original supplies were established.

This area was discussed with the licensee at the exit interview. The licensee stated that this area would be reviewed and periodic inventory established and incorporated into EIP-16 by January 15, 1979. Until licensee review and implementation has been completed this matter will remain open and will be inspected at a future date (348/79-36-02).

d. Remote Shutdown Panel

- (1) This area was reviewed with respect to insuring that the required plant parameters and controls as described in the Final Safety Analysis Report can be used to perform an emergency shutdown of the plant in the event the main control room cannot be manned.
- (2) The inspector reviewed surveillance test records, calibration data, channel checks, and performed physical inspections to verify that:
 - (a) The specified Emergency Operating Procedures, Emergency Implementing Procedure, and Off-Normal Operating Procedures were at the remote shutdown room and were up to date.
 - (b) The calibration and channel checks for pressurizer pressure, pressurizer level, steam generator pressure, steam generator level had been done at the required frequency.

- (3) The inspector used the following acceptance criteria for the inspection and evaluation of the above areas:

- (a) Technical Specification Table 4.3-6
- (b) Final Safety Analysis Report, Sections 7.4.1.1 and 7.4.1.2
- (c) Surveillance Test Procedures 201.21; 201.1; 213.10-5
- (d) Emergency Operating Procedure - 8.0

Within the areas inspected no items of noncompliance or deviations were identified. The inspector informed the licensee at the exit interview that during review of procedures provided at the remote shutdown station, two copies of EIP-8, revisions 13 and 14, were at this station. The licensee stated that the out of date copy of EIP-8 would be removed.

e. Emergency Communications

- (1) This area was reviewed with respect to licensee's commitment to maintain and have available various types of communication systems within the plant for both normal and emergency use as described in the Emergency Plan.
- (2) The inspector observed the physical location of communications in the main control room, and remote shutdown room to verify the availability of the communication systems are as required by the Emergency Plan.
- (3) The inspector reviewed records to verify that the plant emergency alarm tests have been satisfactorily performed at the required frequency.
- (4) The inspector used the following acceptance criteria for the inspection and evaluation of the above area:
 - (a) Emergency Plan, Section VI A and B
 - (b) Emergency Implementing Procedure (EIP-15)

Within the areas inspected no items of noncompliance or deviations were identified.

f. Seismic Instrumentation

- (1) This area was reviewed with respect to the licensee requirement to have seismic instrumentation on vital pieces of equipment and readout and/or annunciation in the control room as specified in the Emergency Plan.
- (2) The inspector reviewed surveillance test data, channel checks, and seismic instrumentation in the control room to verify that seismic instrumentation has been maintained in a state of operability.

(3) The inspector used the following acceptance criteria for the inspection and evaluation of the above area:

- (a) Technical Specification Table 4.3-4
- (b) Emergency Plan, Section VI.C.

Within the areas inspected, no items of noncompliance or deviations were identified.

g. Chlorination Station

(1) The inspector reviewed implementing procedures which govern the actions to be taken in the event of a chlorine leak and made a physical inspection of the chlorine station to verify that:

- (a) Emergency repair kits were readily available.
- (b) Safety Precautions signs were posted and instructions for safe handling of chlorine cylinders were readily available.
- (c) General housekeeping of the chlorine station was at acceptable levels.

(2) The inspector used the following acceptance criteria for the inspection and evaluation of the above area.

- (a) FNP-0-AOP-15.0, Rev. 1
- (b) Chlorine Institute Emergency Kit Instruction Manual

Within the areas inspected no items of noncompliance or deviations were identified. Licensee commitments in the area of chlorine emergency training are discussed in paragraph 6.g.(3) below.

(3) The inspector noted that individuals of the Chemistry and Health Physics Section, who may be called upon to respond to a chlorine emergency, had not been trained in the use of the chlorine emergency kits and had not been indoctrinated in the hazards of chlorine leaks. Licensee management agreed that such training is appropriate and stated that a training program in the above areas would be implemented by January 1980. This item shall remain open, to be inspected at a future date (50-348/79-36-03).

h. Medical and Decontamination Facilities

— (1) This area was reviewed with respect to the licensee commitment to provide emergency first aid and personnel decontamination facilities, including medical supplies and equipment for first aid treatment, which are described in the Emergency Plan.

(2) The inspector performed a physical inspection of equipment and supplies at the first aid room and decontamination facility,

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reviewed records of first aid team training, and inspected equipment and supplies for personnel decontamination to verify that:

- (a) The first aid team had received required training.
 - (b) That emergency equipment and supplies were in good condition and available in specified areas and required quantities.
- (3) The inspector used the following acceptance criteria for the inspection and evaluation of the above areas:
- (a) 10 CFR 50, Appendix E, Paragraph IV.F
 - (b) Emergency Plan, Section V.E.2 and 3
 - (c) Emergency Implementing Procedure (EIP-16)

Within the areas inspected, no items of noncompliance or deviations were identified.

7. Means For Determining a Release

- a. This area was reviewed with respect to the licensee's commitments as described in the Emergency Plan for determining the magnitude of a release of radioactive material and the criteria for determining when protective measures should be considered within and outside the site boundary.
- b. The inspector performed an inspection of instrumentation in the control room and reviewed records for instrument calibration, channel checks, functional test and alarm set points to verify that readouts for wind speed, direction, temperature, and area and process monitors were operable and available as required by the Emergency Plan and Technical Specifications.
- c. The inspector used the following acceptance criteria for the inspection and evaluation of the above area:
 - (1) 10 CFR 50, Appendix E, paragraph IV.C. and F.
 - (2) Emergency Plan, Appendix C and Section VI.C.
 - (3) Technical Specification Tables 4.3-3 and 4.3-5

As a result of this review the inspector identified one item of non-compliance as discussed in paragraph 7.d below.

- ~~d.~~ From a review of surveillance records for the period February to September 1979, the inspector identified that Surveillance Test Procedure (STP) 43.0, the monthly Functional Test of the Fuel Storage Pool Process Monitors A&B, was not performed for the month of May 1979, as required by Technical Specification 4.3-3.2.a. This matter was discussed with licensee management representatives at the exit inter-

view. The licensee stated that conditional STP 43.0 was changed to a routine STP in June 1979, and that the monthly functional tests had been performed monthly since that time. It was explained by the licensee that prior to the refueling in early 1979, the monthly tests were not required, since no irradiated fuel was stored in the Spent Fuel Pool. The inspector acknowledged the remarks by the licensee, and informed the licensee that this matter was an item of noncompliance (348/79-36-04). However, since corrective action appears to have been taken, no reply to this item would be necessary.

8. Emergency Training For Licensee Employees And Offsite Groups

- a. This area was reviewed with respect to the licensee's commitments as described in the Emergency Plan to conduct emergency training for licensee employees who are assigned specific authority and responsibility in the event of an emergency, and non-APCO groups whose assistance may be needed in the event of a radiological emergency.
- b. The inspector reviewed personnel training records along with training schedules and training course content to verify that:
 - (1) Emergency training had been given to the following categories: emergency director, monitoring team members, general employees, contractor personnel, and non-APCO groups.
 - (2) Personnel are informed of changes in Emergency Plan and Emergency Implementing Procedures.
 - (3) Refresher training had been given as specified in the Emergency Plan.
 - (4) The training courses covered the material specified by the Emergency Plan or Procedures.
- c. The inspector interviewed five individuals from the above categories to verify that training had been provided as documented in the training records.
- d. The inspector used the following acceptance criteria for the inspection and evaluation of the above area:
 - (1) 10 CFR Appendix E, Paragraph IV.H.
 - (2) Emergency Plan Section VII.A.1
 - (3) AP-45

— Within the areas inspected no items of noncompliance or deviations were identified.

9. Emergency Drills

- a. This area was reviewed with respect to the licensee's commitments as described in the Emergency Plan for the planning, execution and evaluation of emergency drills.
- b. During the period of this inspection, NRC inspectors were on hand to observe the following drills conducted by the licensee.
 - (1) On November 6, 1979, the licensee initiated a simulated radiation emergency. This exercise provided a scenario for the Alabama Emergency Plan annual concurrence, and is discussed in paragraph 5 of this report. At the exit interview on November 16, 1979, the licensee explained that these minor drills, plus additional training of plant personnel and revisions to the Emergency Plan and Procedures would serve as a foundation for a full-scale radiation drill. A licensee management representative stated that all of these items would be completed by the end of May 1980.
 - (2) On November 14, 1979, a simulated medical emergency was conducted with Southeast Alabama Medical Center (SAMC) in Dothan, Alabama, and University of Alabama Radiation Casualty Treatment Facility (RCTF) in Birmingham, Alabama. NRC inspectors observed activities in the control room and at the scene of the simulated injury emergency in order to verify that:
 - (a) The organization responded in accordance with approved procedures;
 - (b) The response was coordinated, orderly and timely;
 - (c) The licensee used designated persons to evaluate the organization's response; and
 - (d) The results of the drill and licensee self-evaluation will be documented and reviewed.
 - (3) On November 15, 1979, a simulated fire emergency was conducted at the Farley site. An inspector discussed the results of the exercise with the Training Supervisor. Except for some minor problems in communications, the drill appeared to satisfy the requirements of the Emergency Plan.
- c. The inspector used the following acceptance criteria for the inspection and evaluation of the above area:
 - (1) 10 CFR 50, Appendix E, Paragraph IV.I.
 - (2) Emergency Plan, Section VII.A.2

Within the areas inspected, no items of noncompliance or deviations were identified.

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10. Fire Brigade Organization And Training

- a. The inspector reviewed the licensee's procedure on fire brigade organization, training program provided, and reviewed training records for the fire brigade team members to verify that:
- (1) The initial fire brigade training was scheduled for new team members.
 - (2) The fire team roster is maintained by plant supervisors.
 - (3) Refresher fire brigade team training is conducted at specified frequency.
 - (4) The required number of fire brigade team members are maintained onsite at all times.
- b. The inspector reviewed QA Biweekly Composite Audit Report No. 79/9 and noted that the licensee had identified an item concerning the fire brigade drills and quarterly training for the first quarter of 1979. The inspector reviewed fire brigade training records for the second and third quarters of 1979, and determined that 46 percent and 36 percent of the fire brigade members, respectively, did not receive refresher training, even though several training sessions were held each quarter. The inspector reviewed Corrective Action Report, Serial No. 420, and noted that corrective action for the fire brigade training item was not addressed. This was pointed out to the licensee during the exit interview. The licensee stated that the corrective action regarding the fire training would be included in corrective action report Serial No. 420. In addition the licensee plans to initiate a program which will identify those persons who have not completed the quarterly fire brigade training. This will assist supervisors in scheduling their personnel for make-up training sessions.
- c. The inspector used the following acceptance criteria to inspect and evaluate the above area.
- (1) Technical Specifications 6.4.2, 6.2.2f and 6.7.1.f
 - (2) AP-45

Within the areas inspected no items of noncompliance or deviations were identified.

- Until the licensee provides resolutions and corrective actions for the identified deficiency this matter will remain unresolved to be inspected during a subsequent inspection (348/79-36-05).

11. Emergency Organization

- a. This area was reviewed with respect to the licensee's commitment as described in the Emergency Plan, for developing the organizations for coping with radiation emergencies.
- b. The inspector reviewed licensee's organization charts, Emergency Rosters, Emergency Implementing Procedures and interviewed licensee management representatives to verify that:
 - (1) Specific authority, responsibilities and duties have been defined and assigned for the onsite APCO emergency organization and specified outside support agencies.
 - (2) The individuals assigned on the emergency call list are current as to names, addresses, and telephone numbers.
- c. The inspector used the following acceptance criteria for the inspection and evaluation of this area:
 - (1) 10 CFR 50, Appendix E, paragraph IV.A.
 - (2) Emergency Plan, Section III

Within the areas inspected no items of noncompliance or deviations were identified.

12. Follow-up On IE Bulletins

- a. IE Bulletin 79-18, Audibility of Evacuation Alarm in High Noise Areas, was reviewed and discussed with a licensee representative. A survey has been made in containment with all equipment running and it was determined that, in certain areas of containment, the evacuation alarm could not be distinguished from normal pump noises. Several different actions are being considered. Other areas of the plant have not been surveyed due to an extended shutdown. These areas will be surveyed and corrective action taken when the plant returns to power operations. This item shall remain open until corrective action is completed (50-348/79-36-06).

13. Follow-Up On Medical Emergency Of April 6, 1979

- a. On April 6, 1979, a Daniels Construction Company employee was seriously injured in Unit 1 containment. The first aid team was activated and EIP-11, Handling of Injured Personnel, was implemented. The injured person was loaded into a Daniels Construction Company ambulance accompanied by Chemistry and Health Physics (C&HP) and Daniels medical personnel. While enroute to the Southeast Alabama Medical Center (SAMC) the ambulance was involved in an accident at Ashford, Alabama. A team of C&HP personnel from Farley site responded, secured the damaged vehicle, surveyed the surrounding area and accompanied the injured person to SAMC in Dothan, Alabama. During the trip from

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Ashford to Dothan, the injured person was found to be free of contamination, after his contaminated coveralls were removed. He was subsequently taken to the SAMC Emergency Room and given routine emergency medical treatment by the Emergency Room physician on duty.

- b. An inspector reviewed this matter in order to verify that the requirements of the Emergency Plan and EIP's were met. From the review of various injury reports, observations at the hospital, and discussions with the persons involved from APCO, SAMC, Daniels Construction Company, and the Ashford police department, it appeared that the emergency was handled in accordance with the Emergency Plan and procedures. The inspector discussed the following areas of concern with licensee management personnel.

- (1) Initiation and response of the first aid team.
- (2) Revising EIP-11, so as to make it clearer which actions should be mandatory as opposed to which actions should be considered.
- (3) Which emergency vehicle to use, and utilization of the emergency ambulance kit and emergency team personnel.
- (4) Communications between the plant's Emergency Director, SAMC Emergency Room personnel and the licensee's medical consultant.
- (5) Follow-up on the entire incident.

The licensee stated that the emergency organization responded well during the emergency, and that since no deficiencies were determined, no follow-up or corrective actions were necessary. As for EIP-11, it was explained that certain portions of the procedure were followed as guidelines, with some latitude given to the Emergency Director to follow those steps he felt were appropriate under the circumstances. The licensee acknowledged the inspector's remarks, and stated that these areas would be looked into. The inspector had no further comments.

- c. Within the areas inspected, no items of noncompliance or deviations were identified.

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