

U. S. NUCLEAR REGULATORY COMMISSION
OFFICE OF INSPECTION AND ENFORCEMENT
REGION IV

Report No. 50-267/80-05

License No. DPR-34

Docket No. 50-267

Licensee: Public Service Company of Colorado
Post Office Box 840
Denver, Colorado 80201

Facility: Fort St. Vrain Nuclear Station

Inspection at: Platteville, Colorado

Inspection
Conducted: February 27-29, 1980

Inspector: R. J. Everett 3/12/80
R. J. Everett, Radiation Specialist Date

Approved: G. D. Brown 3/12/80
G. D. Brown, Chief Date
Fuel Facilities and Materials Safety Branch

Inspection Summary

Inspection on February 27-29, 1980 (Report No. 50-67/80-05)

Areas Inspected: Routine, announced inspection of the licensee's emergency planning program including coordination with offsite agencies; facilities, supplies, equipment, emergency plan and procedures, training, tests and drills and internal audits. The inspector observed the emergency drill on February 28, 1980.

The inspection involved 21 inspection hours by one NRC inspector.

Results: No items of noncompliance or deviations were identified.

DETAILS1. Persons ContactedPublic Service Company of Colorado (PSC)

- *H. L. Brey, QA Manager
- *H. W. Hillyard, Jr., Administrative Services Manager
- *F. Mathie, Operations Manager
- *D. Warembourg, Nuclear Protection Manager
- *T. F. Orlin, QA Engineer
- J. Salakiewicz, QA Engineer
- B. Husted, QA Engineer
- R. Wadas, Training Supervisor
- T. Schleiger, Health Physicist

Off-Site Agencies

- W. S. Martin, Colorado Division of Disaster Energy Service
- E. H. Reynolds, Director, Weld County Communications Center
- J. Montgomery, Colorado Health Department

*Denotes those present at the exit interview.

2. Scope of Inspection

This inspection reviewed the licensee's Emergency Planning Program for the period November 8, 1978 to February 28, 1980. The review covered the implementation of the licensee's emergency plan as presently written. A revision of plan is planned for the near future in line with current criteria.

3. Coordination with Off-Site Support Agencies

The inspector contacted the support agencies listed in paragraph 1 and verified that the licensee had established and maintained contact during the past year. Through discussions with the licensee, it was determined that adequate contact and coordination with off-site agencies was conducted. Records of these contacts are not maintained by the licensee. Present procedures do not require documentation of these contacts.

No items of noncompliance or deviations were noted.

4. Facilities and Equipment

a) Emergency kits

The inspector examined the inventory of supplies and equipment maintained at the two personnel control centers. A list of items to be maintained in the two emergency kits are contained in procedure HPP-37. The inspector noted that all items listed were present, however the inspector questioned the adequacy of just one high range survey meter and one high volume sampler in each kit. The inspector noted also that the air sampler had no indication of calibration or graph of true flow rate. The inspector also questioned the iodine collection efficiency for the standard charcoal cartridge when sampled at 70 CFM. The inspector stated these questions and concerns with respect to emergency supplies would be considered Open. (80-05/1)

b) Facilities

The inspector visited the two personnel control centers, the site command post and the forward command post to determine if the facilities are maintained as described in the present emergency plan.

No items of noncompliance or deviations were identified.

c) Calibration and Maintenance of Emergency Equipment

The inspector reviewed records of calibration and discussed with the licensee procedures and schedules established to calibrate and maintain emergency equipment. The review included portable survey instruments, effluent monitors, Ge(li) counting system, air samplers and meteorological instruments. With one exception, the lack of apparent calibration on one air sampler, the inspector found that emergency equipment was maintained in a satisfactory manner.

No items of noncompliance or deviation were identified.

5. Emergency Plan and Implementing Procedures

The inspector reviewed the licensee's emergency plan and implementing procedures. It was noted that changes to the procedures since the previous inspection had been properly reviewed and approved. Although some changes have been made, the plan is essentially the one approved by NRC licensing in 1973. In reviewing the present plan and procedures, the inspector noted that the part dealing with the calculation of iodine concentrations and release rates from the stack and calculation of iodine

doses as a function of distance from the facility had been deleted. The inspector stated that this critical isotope should be included and procedures were needed to cover this area. For an unmonitored release of iodine, the iodine calculations and predictions remain the same. The inspector noted the installation of a Ping 2 type iodine monitor which is still in the test phase. Measurements now require physical removal of the charcoal cartridge and measurement by a suitable spectrometer. The inspector stated that this item would remain unresolved (80-05/2) pending a review of the item by NRC task force on emergency planning.

The inspector noted two areas in emergency procedures that need clarification. The re-entry assignment responsibility is given to the Controller while early in the emergency drill assignments and a re-entry was authorized by the emergency director or shift supervisor. In another area, the accountability function is given to the team leader of dosimetry and accountability. While in practice, accountability is handled by each plant foreman and then by security. The inspector stated that these items would remain open (8005/3) pending clarification in the emergency procedures.

No items of noncompliance or deviations were noted.

6. Emergency Training

The inspector reviewed the Training Manual and records of training for PSCO personnel. Discussions with the training supervisor and records indicate that emergency training was conducted as required by the Training Manual. The licensee representative stated that training with the Platteville Fire Department and Rescue Squad was conducted in 1979. The licensee's records did not indicate that formal training was conducted with off-site agencies. The emergency plan does not require PSCO to conduct training sessions with off-site agencies.

The inspector inquired as to the corrective actions taken to correct deficiencies noted in previous emergency drills. A licensee representative stated that this responsibility is assigned to the training officer. The inspector's review of corrective actions indicated a lack of documentation as to what actions, if any, were taken. Similar deficiencies were identified in the QA and NSFC audits and documentation of corrective actions taken could not be located. The inspector stated that this item would remain unresolved (80-05/4).

7. Audits

The inspector reviewed audits conducted to comply with technical specification AC 7.1.3.g.2.(e). A NFSC audit was conducted in June, 1979. The QA staff also audited the Emergency Planning Program periodically. The inspector noted that corrective action requests were written on identified deficiencies.

No items of noncompliance or deviations were noted.

8. Tests and Drills

The inspector reviewed the records of drills conducted in November 7, 1978, and February 21, 1980. The items of concern that the NRC inspector identified after the drill on November, 1980, was reviewed with the licensee. The inspector noted that these items were corrected and did not recur in the drill of February 28, 1980.

The scenario for the February 28, 1980, drill involved the leakage of primary coolant from a penetration in the reactor vessel which resulted in a Category II incident. Later a complete failure of the penetration in the reactor vessel resulted in a release via the reactor building louvers. This resulted in a Category III incident. The drill also included an injury to a worker who was rescued and transported to St. Luke's Hospital. Iodine release values were fabricated in order that local and State authorities could carry out certain protective actions. The drill began at 0750 hours and ended about 1130, 2/28/80.

The inspector observed the drill along with several PSCO observers. One NRC inspector was located at the plant while another observed activities at the Ft. Lupton Command Post. A critique of the drill was held by drill observers on February 29, 1980.

No items of noncompliance or deviations were noted.

9. Unresolved Items

Unresolved items are matters about which more information is required in order to ascertain whether they are acceptable items, items of noncompliance, or deviations. Two unresolved items disclosed during the inspection are discussed in paragraphs 5 and 6.

10. Exit Interview

The inspector met with PSC representatives (denoted in paragraph 1) at the site following the conclusion of the inspection on February 29, 1980. The inspector summarized the purpose and scope of the inspection, and discussed the inspection findings.