

DUKE POWER COMPANY

POWER BUILDING

422 SOUTH CHURCH STREET, CHARLOTTE, N. C. 28242

WILLIAM O. PARKER, JR.  
VICE PRESIDENT  
STEAM PRODUCTION

TELEPHONE AREA 704  
373-4083

December 30, 1977

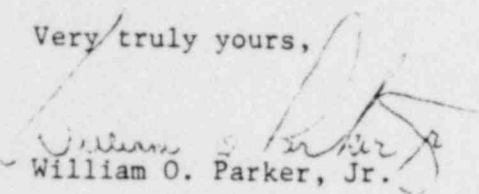
Mr. James P. O'Reilly, Director  
U. S. Nuclear Regulatory Commission  
Suite 1217  
230 Peachtree Street, Northwest  
Atlanta, Georgia 30303

RE: RII:DJP  
50-269/77-24  
50-270/77-24  
50-287/77-24

Dear Mr. O'Reilly:

Please find attached responses to the apparent items of noncompliance identified in the subject inspection report.

Very truly yours,

  
William O. Parker, Jr.

RLG/mlr

Attachment

8001 031042

RESPONSE TO OIE INSPECTION REPORT

50-269, -270, -287/77-24

Notice of Violation

Item A

Technical Specification 6.41 states that the station shall be operated and maintained in accordance with approved procedures and that written procedures with appropriate check-off lists and instructions shall be provided, in part, for Emergency Procedures involving potential or actual release of radioactivity, and Radiation Control procedures. Health Physics procedure, HP/O/B/1009/04, "Scott Air Paks II and III, Self Contained Breathing Apparatus," requires that all Scott Air Paks be thoroughly inspected once per month and the inspection information be placed on a tag on the case.

Contrary to the above, on October 12, 1977, an inspector observed the inspection tags on two Scott Air Paks in Unit 1 and 2 control room which indicated they had not been inspected during June, August, September and December of 1976 and February, March and August of 1977. Two Scott Air Paks in Unit 3 control room and one Scott Air Pak in the administrative building first aid room had inspection tags which indicated similar missing inspection dates. This is an infraction.

Response:

Scott Air Packs in Unit 1 and 2 Control Room, Unit 3 Control Room, and the First Aid Room were considered fire protection equipment and were not inspected as equipment required by the Emergency Plan per HP/O/B/1009/04. However, these air packs were readily available for use in a radiological emergency. This equipment will be included as emergency plan equipment and the monthly inspections required by HP/O/B/1009/04 will be performed.

Item B

Technical Specification Table 4.1-1 requires a monthly battery check and annual calibration of emergency survey instruments.

Contrary to the above on October 12, 1977, an inspector observed that the emergency survey instruments HP 69-2 in Unit 3 control room and HP 69-1 in Units 1 and 2 control room had apparently last received a monthly battery check on March 24, 1977 and May 4, 1977, respectively. This is a deficiency.

Response:

These survey instruments have been checked monthly since October 1977. A change will be made to procedure HP/O/B/1009/01 to require a monthly battery and response check of the radiation monitoring instruments located in each emergency kit. Additionally, this test will be added to Station Directive 3.2.2 "Responsibility for and Scheduling of Surveillance Requirement". These administrative changes will be completed by January 15, 1978.

## Notice of Deviation

### Item A

Section 12.3.3(c) of the FSAR defines the established outside emergency services and Section 12.3.3(e) commits to annually contacting off site agencies to verify telephone numbers.

Contrary to the above commitment, three offsite agencies - Oconee Memorial Hospital, medical consultants at Memorial Clinic, and the ambulance rescue service - had not been contacted for over two years. This item is a deviation.

### Response:

The telephone numbers to the Oconee Memorial Hospital, Memorial Clinic medical consultants, and the ambulance rescue service were verified in November 1977. A change will be made to procedure HP/O/B/1000/13A to list all outside agencies and to annually document the adequacy of communications with them. This administrative change will be completed by February 1, 1978.

### Item B

Section 12.3.3(c) of the FSAR defines the established outside emergency services and Section 12.3.8 commits to simulated drills involving offsite agencies.

Contrary to the above commitment, there has been no participation in any emergency drill by any offsite support agency since June 1975. This item is a deviation.

### Response:

A program for conducting simulated emergency drills which require participation by offsite agencies will be developed by April 1, 1978.

### Item C

Section IIIA. of the Emergency Procedure states that the auxiliary building first aid room will be equipped with a stretcher, resuscitator, first aid supplies and a monitoring instrument, and that this equipment will be available for handling emergencies. 49CFR Part 173.34 requires the oxygen bottles of the resuscitator kit be hydrostatically tested every five years.

Contrary to the above, the resuscitator kit contained oxygen bottles that had not been hydrostatically tested at the required five-year intervals (bottles stamped 10-66). This item is a deviation.

### Response:

The oxygen bottles have been sent to the vendor for hydrostatic testing. Also, a change has been made to Section IIIA of the Emergency Procedure to delete the requirement for a resuscitator as part of the equipment in the Auxiliary Building First Aid Room. The resuscitator is not required to effectively handle contaminated personnel.

Item D

Section 12.3.3(c) of the FSAR defines the established outside emergency services and Section 12.3.8 commits to distribution of the Emergency Procedure to all participating outside services.

Contrary to the above commitment, four of the agencies - State Highway Patrol, Oconee County Rural Fire System, Oconee Memorial Hospital and DOE Savannah River, were not on the distribution list for the Emergency Procedure. This item is a deviation.

Response:

Each outside agency has been mailed a current copy of the Emergency Procedure. Also the distribution list for the Emergency Procedure has been corrected to reflect all outside agencies listed in the procedure.

Item E

Section 12.3.3(e) of the FSAR commits to drills to develop and maintain the competence of operating personnel in handling each category of emergency situation.

Contrary to the above, the licensee failed to conduct drills, during the period July 1975 to September 1977, that were structured to develop and maintain the competence of operating personnel in handling each category of emergency situation. This item is a deviation.

Response:

A program of practical drill scenarios for each type of emergency situation outlined in the Emergency Procedure will be developed by April 1, 1978.