

Safety Goal Project

NUCLEAR REGULATORY COMMISSION (45 FR 71023)

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In the Matter of:

WORKSHOP ON QUANTITATIVE SAFETY GOAL



PANEL A

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1 UNITED STATES OF AMERICA

2 NUCLEAR REGULATORY COMMISSION

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4 PUBLIC MEETING

5 WORKSHOP ON QUANTITATIVE SAFETY GOAL

6 PANEL A

7
8 Palo Alto Room
9 Rickey's Hyatt House
10 4219 El Camino Real
11 Palo Alto, California
12 Thursday, 2 April 1981

13 The meeting was reconvened at 9:30 a.m., pursuant to
14 adjournment, with Dr. Herbert J. C. Kouts, Panel Chairman.

15 PRESENT:

16 Messrs. Bernero, Beyea, Burstein, Joksimovic,
17 Levine, Kato, Lewis, Lowrance, Mazur, Salisbury, Wald.

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CHAIRMAN KOUTS: Yesterday when we broke off, I had a view graph up here and we had discussed it a little bit. To be a little more correct, I've added a few things.

Let me just start by summarizing what I think has been some agreed upon points of views connected with the ACRS concept so far among us.

There are three hazard states proposed in the ACRS document. The first having to do with significant core damage, the second having to do with core melt and the third having to do with release of fission products following core melting. And each of these has a limit set upon it and I think we've generally agreed that Hazard State Number 1, having to do with partial core damage is simply not an implementable goal, simply not an implementable safety goal, inasmuch as no one really knows how to calculate partial core damage. Is that true, we have agreed on this?

DR. BEYEA: At this time, but the situation could change.

CHAIRMAN KOUTS: The situation could change. It will be difficult to do this but at this point it's difficult to see this as a --

MR. BERNERO: I would just add to clarify we have some work going in that regard, trying to make that distinction. I don't know if it will be successful or not.

1 DR. LEWIS: As a general comment heard, though,
 2 just a general one, not specific to this, I don't think
 3 it's a good idea to ever say one cannot calculate something
 4 because it's never true in the absolute sense and people
 5 on the outside aren't as learned as the people who make that
 6 comment and think that it really is true that you can't
 7 calculate it, so you know, some qualifying word such as
 8 you can't calculate it as well as you'd like or you can
 9 calculate other things, is probably more honest and useful.

10 CHAIRMAN KOUTS: Allright. The uncertainty
 11 with which you can judge that you have met this criteria
 12 is very high.

13 DR. LEWIS: Yes. That's right.

14 DR. MAZUR: That's a better way to say it.

15 CHAIRMAN KOUTS: And as Carl, having recognized
 16 this and perhaps even dominating it not corollary to it
 17 is an acceptance of a view among this group that you can't
 18 calculate it reliably as well. You should not use it as
 19 far as safety goes. Is that an acceptable view also?

20 DR. MAZUR: It is if you can't calculate it.

21 CHAIRMAN KOUTS: Then it should not be part of
 22 the safety bill.

23 DR. BEYEA: You should try and avoid it. In some
 24 cases it may be unavoidable. Some calculations are.

25 CHAIRMAN KOUTS: It's a question of how useful is it

1 if you can't depend on it.

2 DR. MAZUR: If you can define its limits of
3 uncertainty it can be useful.

4 CHAIRMAN KOUTS: I suppose if you can show that
5 something is microscopic even with all error bars included
6 to be microscopic then you can say its microscopic and use
7 it that way.

8 DR. MAZUR: I would certainly say in a pragmatic
9 sense I would definitely have no trouble going on but it
10 just seems to me that there's some broader ways of inter-
11 preting that I would like to remain agnostic on without
12 much time to think on it.

13 MR. LEVINE: Could I say something?

14 I think if you look at all the other elements
15 of safety laws proposed by ACRS, there are models that are
16 in existence that will allow you to calculate them. There
17 is none for severely damaged cores at this time. And,
18 I think it's a research -- I'm not saying that it can't
19 be -- to calculate that. I think it's a research program
20 to look into that.

21 DR. MAZUR: But what that's saying is you can't
22 calculate the likelihood of having a severely damaged core,
23 or let's just say that if you couldn't calculate the likelihood
24 of having a severe release --

25 MR. LEVINE: A what?

1 DR. MAZUR: A severe radiation release then you
2 shouldn't have a safety goal --

3 MR. LEVINE: Oh, yeah, I think if we had not done
4 Wash-1400 this workshop would not be being held.

5 If those models did not exist we wouldn't have
6 these conversations, at all.

7 CHAIRMAN KOUTS: No follow-up on that. Bob?

8 MR. BERNERO: I want to offer what I think might
9 be a clarification by putting the proposed Hazard State 1
10 and Hazard State 2 as they exist in the ACRS report, into
11 a somewhat different set of words.

12 What those two hazard states together are
13 really saying if you look at the numbers, are that if you
14 get the core into trouble, you should be able to stop
15 short at least 4 out of 5 or 2 out of 3 times at core
16 damage without large scale core melt.

17 That that would describe the capability of plant
18 design and operator errors or operator intervention, that
19 would be a level of protection.

20 DR. BEYEA: Can you define what core -- coin
21 what core trouble is more precisely?

22 MR. BERNERO: Yes. They said that they described
23 it in terms of cladding perforation and radioactive gas
24 release. The theoretical distinction and the existence
25 of a goal for it might have validity even though you can't

1 at this time calculate it and I think one should be careful
2 to say if nobody knows how to calculate it with confidence
3 today, does that necessarily or obviously foreclose the
4 ability being developed tomorrow and a worthwhile additional
5 goal being adopted?

6 MR. LEVINE: There's a second question about that.
7 I agree with your question as another question, what does
8 it add to the whole framework of things? If your primary
9 motive in setting goals is to protect the safety of the
10 public. Clearly the primary goals are those which affect
11 the health of the public and these engineering goals must
12 be secondary to that.

13 DR. MAZUR: I think though that goals are something
14 we strive for, right? Wasn't that part of the discussion
15 even though we might not have one at the moment?

16 MR. LEVINE: Goals are things to strive for, but
17 you know, it's, I can't be postulating goals when no one
18 has the foggiest notion of how to go about determining
19 whether he meets it or not.

20 DR. MAZUR: Well, I'd rather sort of postulate
21 a goal and then find out we can't handle it and then say
22 okay, pragmatically we can't operationalize that today.

23 MR. LEVINE: Well, we know that today.

24 DR. BEYEA: Do we have to decide this now? Can
25 we just say that Hazard 1 and Hazard 2 should be combined or

1 is this debateable? You know, are we going to -- should
2 we get into debate at this point?

3 CHAIRMAN KOUTS: Any conclusions we can draw on
4 this particular thing would be valuable because we're dealing
5 with the question of how should safety goals be structured?
6 What should be included in safety goals? And, I think this
7 really is a fundamental question as to whether or not you
8 should include in safety goals things that you know or don't
9 know at present how to calculate with the reliability that
10 you would like to demand.

11 MR. SALISBURY: May I ask for a little clarifica-
12 tion here. I'm not sure, Saul, if what you're objecting
13 to is the concept of hazard states per se, or the specific
14 hazard states that are mentioned in the ACRS document, because
15 it seems to me that if you can't -- if there isn't some
16 kind of a sort of hazard state that you can define and then
17 you can have some kind of an estimate for to me as a lay
18 observer, that seems to imply which some other people have
19 said in various ways, that you can't really determine these
20 individuals risks and societal risks as well as you can
21 if there are points within that reactor sequence, accident
22 sequences and so forth, that you can't define well enough to
23 make these kinds of estimates about.

24 MR. LEVINE: Let me try to respond to that.

25 I'm not objecting to hazard states in principle at

1 all. If you have that impression I would like to ---- you.

2 MR. SALISBURY: I wasn't sure.

3 MR. LEVINE: There are 3 hazard states specified.
4 I'm objecting to 2 of them, not one of them. I also suggest
5 that the hazard states are secondary considerations compared
6 to the primary considerations, though it's really protecting
7 the health and safety of the public and are handled by the
8 individual - societal risk statements.

9 MR. SALISBURY: I think there is, too, I would
10 agree that they are secondary but I don't think they're
11 necessarily negligible.

12 MR. LEVINE: ---- I'm saying secondary, not
13 negligible.

14 DR. BEYEA: At some point I would like to
15 take a few minutes to come back to the hazard state question.
16 Is this a good time to do that or should I wait until you've
17 decided whether Hazard State 1 or 2 --

18 CHAIRMAN KOUTS: Well, we're dealing with a more
19 general question about calculable and non-calculable aspects
20 of criteria.

21 Do you have a comment on that?

22 DR. MAZUR: Yes, I do. I can visualize this.
23 I can visualize our stating as a safety goal a low probability
24 for some hazard states and we can't A-priority calculate
25 the likelihood of that happening. However, it may be that

1 in ten years we'd have enough of those occurring that we are
2 able to on an experiential basis say hey, that's over what
3 our limit is so we better go back and figure something else
4 out. It seems to me that's a very meaningful kind of a
5 safety goal even though we can't A-priority calculate the
6 probability of reaching it. But we might after the fact
7 as the results of some unfortunate experiences decide we
8 exceeded --

9 DR. JOKSIMOVIC: But we cannot afford that
10 experience.

11 DR. MAZUR: Well, maybe we can't afford it
12 but we might end up with it anyway.

13 MR. SALISBURY: Well, it seems to me to be more
14 valuable that if there are hazard states that you can define
15 you know, or hazard states --

16 DR. BEYEA: Well, you can define this state.

17 MR. SALISBURY: You can define and make a kind
18 of an estimate of the probability of, that's more valuable
19 then --

20 CHAIRMAN KOUTS: Let me clarify the situation
21 if I can with respect to Hazard State Number 1.

22 We can certainly calculate probability of occurrence
23 of Hazard State Number 1 in any given application.

24 In order to do this calculation, we'd have to
25 make a number of assumptions, and a lot of these assumptions

1 will be relatively adhoc. If we want to be sure that we're
2 underestimating the probability that Hazard State 1 occurs,
3 we will be a little conservative with respect to a number of
4 these assumptions.

5 If we introduced all the conservatisms of this
6 kind, we will find that we're calculating the probability
7 of total melted core. That's the whole situation, because,
8 probably, there may not be very much difference in probability
9 between melting 30% of the core and melting 100% of the core
10 and it's this range between 30% and 100% that's being
11 discussed here. This is the difference that's being talked
12 about.

13 MR. SALISBURY: It seems to me that as far as
14 the safety goal would go, that's more of a technical
15 difference that to me, anyway, doesn't have that much
16 implication.

17 CHAIRMAN KOUTS: There's even an arbitrary
18 character to the selection of 30% of the core.

19 MR. SALISBURY: Right, right. It would seem to
20 me that just having a single hazard state which would be
21 major core damage or something like that, assigning the
22 probability of that would be equally as functional as far
23 as a safety goal as dividing it up in a way --

24 DR. BEYEA: When you say major core damage it
25 is not quantitative anymore.

1 MR. LEVINE: But there's another way to think
 2 about that. Maybe this will help. If you have a core that
 3 doesn't melt but is severely damaged, that core does not
 4 in and of itself threaten and taint the integrity of the
 5 containing building. It's only when you melt the core that
 6 the containment building integrity is threatened in a
 7 dependent way to the core building.

8 DR. BEYEA: Would you repeat that statement?

9 MR. LEVINE: It's only when the core melts that
 10 the integrity of the containment building is threatened
 11 in a dependant way, that is, depending on the core melting.

12 DR. BEYEA: Would there be enough steam pressure
 13 to burst the --

14 MR. LEVINE: When the core is not molten, the
 15 containment integrity is not threatened.

16 DR. BEYEA: Well, if it's -- I won't accept that
 17 right away. I'll wait on that.

18 MR. LEVINE: Well, I guess there are a few
 19 exceptions. There are a few exceptions where steam pressure
 20 can break the containment, but that always happens in
 21 such a way that the core then melts, so --

22 MR. BERNERO: Excuse me, Saul. The little
 23 containments and hydrogen is the other.

24 CHAIRMAN KOUTS: But what Saul is saying is
 25 that when you break the containment you lose the cooling

1 quality --

2 MR. LEVINE: You melt the core anyhow.

3 So, if you're talking about a severely damaged
4 core, you're talking about very little threat to the public
5 which is our primary concern because if the containment
6 holds together, very little is going to get out. Now,
7 I'm leaving out the psychological problems such as those
8 that happened at TMI.

9 So I see there's a great significant difference
10 between Hazard State 1 and Hazard State 2 in terms of the
11 real effects on people.

12 DR. MAZUR: I'm a little confused on the levels
13 we're going, so I might well accept what you're saying about
14 that particular thing, but in jumping from that particular
15 case to a broader policy issue and that is that one shouldn't
16 have to include in safety goals things that one can't
17 calculate.

18 MR. LEVINE: Let me just explore that a little
19 bit.

20 Reg Farmer proposed in 1967 a -- it wasn't a safety
21 limit but people call it a safety limit and it's called the
22 limit line, and it wasn't used very much by anybody because
23 one didn't know how to make the calculations very well.
24 They set up some models in the U.K. for using it for siting
25 practices, but no one knew how to calculate accidents that

1 went beyond the -- design basis accident that is the heart
2 of the regulatory process of the U.S.

3 This was not known until Wash-1400 was done and
4 we would not -- what I said before, we would not be sitting
5 here today talking about how to calculate public exposures
6 realistically if Wash-1400 had not been done.

7 DR. MAZUR: Well, one way of knowing whether
8 you've met those criteria without Wash-1400 is after a certain
9 amount of experience, you can count the number of reactors
10 that may have had those experiences and then you might be
11 in a position to say that's more likely than --

12 MR. BURSTEIN: Then the problem is there is
13 no such data base.

14 DR. MAZUR: No, but there may be 15 - 20 years
15 down the line.

16 MR. LEVINE: But if our probabilities are right
17 there might not be.

18 DR. MAZUR: Well, I'm frankly one of those people
19 who isn't that trustful.

20 MR. BURSTEIN: Do you suggest we abandon the
21 session and wait for 20 years?

22 DR. MAZUR: No, but I am suggesting that it might
23 well be an idea not to foreclose the notion of defining a
24 goal which we may be in a position in a few years to say--

25 CHAIRMAN KOUTS: In 15 years, that data base will

1 only be about twice as large as it is now.

2 DR. MAZUR: But the accident base might be substan-
3 tially higher.

4 CHAIRMAN KOUTS: Maybe not, but that's ---

5 MR. BURSTEIN: But I heard you say, excuse me,
6 Mr. Chairman, but I heard you say in answer to my question
7 which your answer was, let us wait and see.

8 Now, that means we shouldn't be doing anything
9 now because we haven't enough data on which to do it.

10 CHAIRMAN KOUTS: For Hazard Scate 1.

11 MR. BURSTEIN: I understand. But it gets back
12 to something we discussed today perhaps in this respect,
13 whether in order to achieve the goals we are really concerned
14 with which happen to be those related to individual and
15 societal risk, whether we should be fooling around with
16 the intermediate hazards, the close-calls, the challenges,
17 the frequency and perhaps the extent of those challenges
18 to the systems that might cause the individual and societal
19 risks to become a statistic and I guess perhaps part of
20 the question we should address again is whether we need
21 to have arguements about the number of challenges.

22 Really, what we're basically interested in is
23 the actual probability and degree of individual and societal
24 risks.

25 Do we need to define the mere misses?

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MR. LEVINE: Do you have to define the failure probability of valves to operate those?

CHAIRMAN KOUTS: I'll take Hal Lewis.

MR. LEWIS: I just want to comment I think that's an excellent point and we're getting around it because it seems to me -- well, first let me just disagree with something that Saul said earlier which is, I think you can compromise the containment without melting the core and we can talk later about specific scenarios. I think one shouldn't be too flat about statements which may not be entirely true.

MR. LEVINE: I take it all back.

MR. LEWIS: This point is well taken. Before we discuss in any great detail whether we can calculate and we can calculate well or not the graded core states, the question that was just raised of whether we should go along on hazard states, I don't think we have a consensus on it and I'd like to make a point on it.

To disagree with another thing Saul said earlier and everyone has been saying, which is that our primary intention is the next level which is the protection of the health and safety of the public, I think we all agree that if not a secondary at least a parallel objective is to make the regulatory process more rational. Now, I don't believe that you can make the regulatory process more rational without inevitably improving the health and protection

1 of the public, and in fact, I would regard it as essential
 2 to do so and the idea of setting goals on hazard states I
 3 think goes to that point, to making regulatory processes
 4 more rational, not to determine a better approximation of
 5 the end state.

6 Just to use an analogy, I think we all get
 7 students who come in and say, they want to study physics.
 8 Why? Well, they want to understand general relativity but
 9 they don't have time to study the elementary mechanics
 10 and electricity, they just want to go right ahead and
 11 study general relativity. By the same token, I don't think
 12 you can do a good job on that next level which is the
 13 protection of the health and safety without making the
 14 regulatory process more rational. Now, whether setting
 15 goals at intermediate levels instead of a final result
 16 is a good way to do that I'm not commenting on, but
 17 certainly that's the context in which we ought to be talking
 18 about this. Period.

19 DR. BEYEA: I would like to speak in favor of the
 20 hazard state concept and I'd also like to go a little further
 21 and the fact that having thought about it last night and
 22 this morning, I think now that there should in fact be
 23 intermediate levels on hazard states. I'd like to also
 24 indicate a formulation of the problem which Tom Cochran
 25 gave me which I think is very useful. I'd just like to put

1 this on the board as a way of perhaps handling the discussion
2 about hazards.

3 If you look at the individual risks and we
4 call that something "Z" and if you have it on a large
5 scale and make it a "Z" it's combined by two effects.
6 And we have some uncertainty - "X" and some uncertainty
7 "Y" and of course there's some uncertainty in "Z".

8 CHAIRMAN KOUTS: Are these probabilities which
9 you're writing?

10 DR. BEYEA: No, it's on a log scale.

11 CHAIRMAN KOUTS: Yeah, this would be on a log
12 scale. These are sequential probabilities.

13 DR. BEYEA: That's right. We might have in here --
14 core -- some joint probabilities. And then of course
15 there's some uncertainty in "Z" and one way of setting the
16 limits of how well you want to deal with certain issues,
17 this must be -- mutual to some number - "W" and if you
18 make this your criteria then it would show up uncertainties
19 in Sigma X and Y as you want, as you please.

20 The alternative is to expect this each time
21 to less than the sum WX and less than or equal to sum of
22 WY . All right, now my own feeling now is that I'm nervous
23 about this concept because that which I'm most happy about
24 is experience. And the question is how well do I know
25 Sigma X and how well do I know Sigma Y? It seems to me that

1 based -- where I have a lot of experience, I'm going to have
2 more confidence.

3 For instance, the containment system. There is
4 no way that anyone is going to convince me that we don't
5 need containment systems because we've had some experience
6 with them and some alternative containment systems, I would
7 be worried about, I would not have much confidence in the
8 analysis because there wasn't enough experience with the
9 analysis. At least to the extent of the containment system,
10 maybe with ECCS, I'm not sure, but I think now I withdraw
11 my yesterday's agreement with the idea that when it goes
12 to a WZ formulation, I would now like to see restriction
13 on at least certain ways of breaking up the problem.

14 CHAIRMAN KOUTS: What you're saying, you'd be
15 uneasy about retiring to Hazard State Number 3 completely.
16 That you feel there ought to be something beyond doing just
17 that?

18 DR. BEYEA: I think that the hazard state concept
19 is useful and I think more than that, I think we should in
20 fact put specific goals on each, certain states.

21 CHAIRMAN KOUTS: Well, that's one way of not
22 retiring to Hazard State 3, but --

23 DR. JOKSIMOVIC: I think, what if I may interpret
24 what he's saying is that if we end up with individual risk
25 societal risk and not have hazard states, you'll be uncomfortable?

1 CHAIRMAN KOUTS: No, no, he will even accept
2 hazard states -- what he's talking about is whether or not
3 we should have simply a hazard state on melting a core plus
4 bio- you know, the 10^{-6} probability that Bob put up there
5 yesterday.

6 He says he's uneasy about that. He'd rather
7 see the restriction on the core melt and another restriction
8 on the probability of containment failure because he feels
9 he's got successive protection this way and he feels he can
10 depend more on the individual calculations, but what I'm
11 saying is that maybe you don't have to go that far if you
12 feel that unsure about retiring just to Hazard State 3.
13 Maybe you could put limits on how far you could push the
14 individual components.

15 MR. BURSTEIN: Isn't that what we do when we
16 talk about components that go beyond that. My question
17 simply put is why not get more comfortable by going farther
18 down.

19 If a degree of security or comfort is what you're
20 after, why not look at the ECCS system and put a number on
21 it and why not get to the high pressure safety injection
22 pump or the valves that you mentioned and put a number on
23 that and, you know, the degree of comfort now gets to be
24 perhaps the implementation of what the overall goal is
25 and, the question of whether you're setting up engineering

1 criteria or whether you're setting overall goals and perhaps
2 that might help draw the line as to where you're going to
3 start setting the limits.

4 I can go down the list all the way to individual
5 pieces of hardware, individual operating and maintenance
6 procedure and write a very detailed specification rather
7 than a goal or an objective.

8 DR. JOKSIMOVIC: Those would be reliability
9 goals rather than safety goals.

10 DR. BEYEA: I'm not asking for going down to
11 every last valve.

12 I think that's a mistake.

13 MR. LEVINE: I understand. I think there's
14 another thing to consider.

15 Suppose -- and I want to talk about Hazard States
16 2 and 3.

17 CHAIRMAN KOUTS: That's really what we're talking
18 about.

19 MR. LEVINE: Suppose it's decided for economic
20 reasons by a reactor manufacturer or a utility manufacturer
21 or whomever, that they are going to design a reactor
22 that can be analyzed to have the core melt probably not
23 to 10^{-4} but to 10^{-5} . Would you still want the Hazard State 3
24 to be two orders of magnitude different from that or only
25 one order of magnitude would be enough?

1 DR. BEYEA: I want two orders of magnitude.

2 MR. LEVINE: Independently?

3 DR. BEYEA: Independently because I have the --
4 because of my lack of confidence, my lack of confidence in the
5 calculation 10^{-5} .

6 CHAIRMAN KOUTS: That's the position that the ACRS
7 document takes. They say they are unwilling to take 10^{-4}
8 for core melt because there are questions connected with
9 seismic problems, fires, etc.

10 DR. BEYEA: But that is to cover uncertainty,
11 isn't it?

12 MR. LEVINE: That's to cover inadequacies in
13 certain models.

14 CHAIRMAN KOUTS: Vojin?

15 DR. JOKSIMOVIC: I said something yesterday but
16 I'd like to say it again today, which is basically my
17 position on hazard states in general. And I'll read
18 from my notes to be precise.

19 These are reliability or -- goals and as such
20 it could be effectively argued that they should be outside
21 the NRC's --. Mainly, they should be established but left
22 to the industry and the insurance industry for implementa-
23 tion. NUREG-0739 recognizes this point but proposes them
24 on the basis that A) they represent forerunners of most
25 serious accidents, B) public and utility losses, and

1 C) potential traumatic effect on the public, and I would 157
2 like to add Lewis's point D) which is they would contribute
3 to more rationale in regulatory process.

4 Based on that, I would be willing to abide them,
5 however, they in my opinion, are unnecessarily detailed,
6 and a simple goal on the severe core degradation of something
7 like 10^{-4} and perhaps another one to the -- mitigation would
8 be perfectly evident.

9 CHAIRMAN KOUTS: In your last sentence you took
10 back all you'd said before because you were opposed to
11 having core degradation criteria and now you're willing
12 to accept it. Isn't that true?

13 DR. JOKSIMOVIC: My last sentence is given that
14 there is a need for -- these goals in essence are not
15 public safety goals and ----- that they could be left to
16 the utility industry or insurance industry for implementation.

17 However, given the points that have been made
18 in NUREG-0739, the point that Harold made a few minutes
19 ago, I'm willing to abide that, but I'm saying that
20 as they're stated in the ACRS document in unnecessary
21 detail, and I would be happy with a simple goal on a core
22 degradation and perhaps another one to reflect mitigation
23 like condition of probability for release as opposed to
24 necessarily relating that to the containment we discussed
25 last night.

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CHAIRMAN KOUTS: Just taking your view that severe core degradation should be left up to the industry on a logical basis as a goal, I think you'd find great difficulty in convincing public or NRC or Congress or anyone that the probability of things like TMI should not enter into safety goals.

DR. JOKSIMOVIC: Well, I think that the --industry and the insurance industry has learned a great deal from TMI and they don't --- any longer.

CHAIRMAN KOUTS: ---- would not satisfy the Congress, I'm sure.

DR. JOKSIMOVIC: But also, you know, one point I failed to mention is I believe that NRC should have jurisdiction of making spot checks but not necessarily doing it on application by application.

DR. MAZUR: I wonder why one makes the assumption that there is no harm to the public unless there is radiation leaks because it seems to me we have clear evidence to the contrary.

DR. JOKSIMOVIC: What happens when a dam breaks?

DR. MAZUR: There can be substantial harm to the public if there is a public -- dam. I'm not sure what the relevance of that is. If you have a serious malfunction that is reported, even though there is not a radiation leak, and you know quite well that that causes public harm,

1 DR. JOKSIMOVIC: You mean stems from emotional
2 stresses?

3 DR. MAZUR: Emotional stresses and others.

4 DR. JOKSIMOVIC: I wouldn't argue that, but --

5 DR. MAZUR: It's more than emotional, by the way,
6 because the whole public response itself can bring about
7 actual physical stresses like attempts to flee, to panic
8 states, physical accidents, things of that sort. So right
9 off the bat, by anything other than the most narrow
10 definition of public harm, there surely is public harm
11 with an accident like that.

12 DR. JOKSIMOVIC: Are you saying that we can't
13 have any accidents?

14 DR. MAZUR: No, what I'm saying is an accident that
15 is at a sufficient level to cause public concern and psychic
16 and related physical effects even though there's no
17 released radiation, surely that gets into the issue of
18 whether or not we're protecting public health, that's point
19 number 1. Point number 2 which is Harold's point is quite
20 a separate one and that is given that we've had one of our
21 criteria for the purposes of our safety goals is just
22 simply rationalizing the regulatory procedure when one
23 needs a demonstration of public harm, anyway, but it seems
24 to me that the levels of accidents we're talking about
25 satisfy both of those. There is public harm associated

1 with many of them even though there is a release of radiation.
2 There seems to me by either way they fit within the curve of
3 what we call the purposes of our safety goals.

4 DR. JOKSIMOVIC: So you would see no reason why
5 they should be excluded?

6 DR. MAZUR: No, well, I could see some reasons
7 why one might not want to choose the particular hazard states
8 they have. I'm surely not denying them but, no, I see no
9 reason to exclude some kind of accident below the level of
10 radiation.

11 DR. JOKSIMOVIC: But you would agree they are of
12 secondary importance as far as the public health and
13 safety.

14 DR. MAZUR: I would agree that any lesser accident
15 is of secondary importance to a more serious accident. Of
16 course, that goes without saying. But I wouldn't agree
17 that they are secondary in the sense of not to be considered.

18 CHAIRMAN KOUTS: Bob?

19 MR. BERNERO: I wonder if I could somewhere in
20 here give this panel a clarification I promised to obtain
21 yesterday.

22 If you recall, when I wrote on the board, I stated
23 my continuing interpretation of the ACRS Strawman Safety
24 Goal, that there was clear logical linkage between Hazard
25 State 2, Hazard State 3, and the probability of early

1 totality. 10^{-4} times 10^{-2} equals 10^{-6} . I asked Dave
2 Okrent this morning and he said no.

3 DR. JOKSIMOVIC: Sounds right.

4 MR. BERNERO: He embellished on it by saying
5 that if we felt that if you met Hazard State 2 goals, and
6 Hazard State 3 goals, and had evacuation you would easily
7 have met the early totality goal.

8 DR. JOKSIMOVIC: I agree with that.

9 DR. WALD: That makes a lot of assumptions about
10 evacuations.

11 DR. BEYEA: Well, it wasn't perfect evacuation,
12 it must have been some evacuation model.

13 MR. BERNERO: I don't know. He did not embellish
14 on it. But to obtain the clarification I said I would,
15 he and his colleagues did not integrally link the goals
16 for Hazard State 2, Hazard State 3 and early totality
17 as I had thought they did.

18 CHAIRMAN KOUTS: Then there was less rationale
19 behind the choice of these values than I thought was
20 there.

21 MR. LEVINE: That's what we've been trying to tell
22 you.

23 DR. MAZUR: I want to define the level of debate
24 here if I can. I hope we're not debating on whether those
25 particular hazard states are ones that should be in there,

1 so much as we're stating in general --

2 CHAIRMAN KOUTS: I'm not going to fall back on
3 asking a different question. I think I have the correct
4 answer, too, and I'd like to check it out.

5 Do we now agree that there should be, that it is
6 reasonable, then let's put it that way, it is reasonable and
7 perhaps desirable to have safety goals linked to hazard
8 states?

9 MR. LEVINE: Yes, independently of what they
10 are. Without specifying.

11 CHAIRMAN KOUTS: That's fine. That's a good
12 conclusion.

13 I think that we could probably agree that among
14 these hazard states, there should be one connected to core
15 melt probability.

16 Beyond this it requires some discussion.

17 DR. MAZUR: And expertise.

18 CHAIRMAN KOUTS: And expertise. And that's
19 as perhaps far as we can go.

20 DR. BEYEA: Can we go further and talk about
21 whether there should be a hazard state release to release
22 after melt?

23 CHAIRMAN KOUTS: Shall we ask if there's agreement
24 on that?

25 MR. LEVINE: I would not agree with that.

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CHAIRMAN KOUTS: Should there be a hazard state connected with substantial release of radiation from the facility? That's really the hazard state --

MR. LEVINE: That's what they define.

DR. LEWIS: So that isolates the point between substantial release and damage to the public which means potassium iodide, and it could be others, and evacuation.

MR. LEVINE: Not necessarily. They define the large release as 10% of the core -- inventory and 90% of the --. That's a large enough release to cause significant consequence. Not the largest consequence. But significant consequences.

DR. LEWIS: No, I understand, but the purpose -- I'm just really now confused. The purpose of isolating specific points is to provide, if I understand what they wrote in the report, is to provide an incentive for intervention somewhere along the line short of ultimate catastrophe.

CHAIRMAN KOUTS: Absolutely. They call this a criteria mitigation. But between a substantial release and damage to the public, you're talking about things that include not just potassium iodide obviously, but sheltering, evacuation and things like that. So it's specifically to provide incentive to do things at that level that would include a significant release as a hazard state. Am I wrong? I'm really asking for information.

1 DR. BEYEA: I don't see that at all. It would
2 seem to me that by putting another hazard state on, you'd
3 make another restriction, like perhaps you had to have a
4 container.

5 DR. LEWIS: Yes, that's right.

6 DR. BEYEA: There would be some restrictions --

7 MR. LEVINE: There already is a requirement for
8 containment which the safety goal is not going to take a
9 way.

10 DR. BEYEA: I'm sorry?

11 MR. LEVINE: There already exists a requirement
12 for reactors to have containment buildings that this
13 safety goal is not going to take away.

14 DR. BEYEA: It could if you -- it could if you
15 just had a formulation where you had the hazard state which
16 included core melt and a hazard state which looked at the
17 hazard to the public. You could argue that you don't need
18 a containment to meet those criteria--that you could have some
19 other -- you could have sprays, you could have potassium
20 iodide and evacuation. You would not need containment and
21 still meet the overall risk goals.

22 MR. LEVINE: Why don't we put down that instead
23 of the probability of a large release, write down that you
24 have to have containment if that's what you want. I'd
25 be satisfied with that.

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DR. BEYEA: That would be another kind of hazard state then.

CHAIRMAN KOUTS: Now you're in the design criteria. Yes, Bob.

MR. LEVINE: I'm not trying to get rid of containment.

MR. BERNERO: I wonder if I could ask Hal -- what you just said a few minutes ago seems to raise the possibility of hazard state 4 which would be another conditional probability that perhaps would say something like, given a large scale release defined as what we defined it, the probability of an early totality anywhere on site shall be less than 0.1 or .01 or something.

DR. LEWIS: I think that's assumed in group 2 which is the public health consequences.

MR. BURSTEIN: Isn't that indeed what is said here?

MR. BERNERO: No, group 2 or rather group 3, Hazard State 3 is the conditional probability of release, large scale release given large scale fuel melt but that is not by Dave Okrent's clarification synonymous with early fatality.

DR. LEWIS: I understand, Bob. What I'm saying is after we get through the first table which is the hazard states, the next table includes limits on risks to the public.

1 MR. LEVINE: And they include considerations
2 of sheltering.

3 CHAIRMAN KOUTS: I think now there's a duplication
4 beginning to appear. Clearly. The question is, do we
5 need this duplication.

6 MR. BERNERO: But in effect, are not these
7 criteria, do not the criteria in their structure leave
8 out altogether emergency public protection measures --
9 that one doesn't even need to consider that. The hazards
10 states and the public protective measures might consider
11 them, but there is no incentive built into the safety
12 goal either to consider them or to have a performance
13 standard for them.

14 DR. LEWIS: If there were no safety goals other
15 than the hazard state safety goals, that would be true but
16 when there are standards in addition to the hazard state
17 goals, that is not so.

18 DR. LOWRANCE: Mr. Chairman, I suggest that we
19 go onto the next category.

20 CHAIRMAN KOUTS: I'm prepared to do that. I
21 think I've gotten about as much agreement --

22 MR. LEVINE: I think you've gotten about all you
23 can get.

24 CHAIRMAN KOUTS: From now on its down hill.

25 MR. LEVINE: I wonder if I could ask Allan one

1 question that's a little bit off the track but I'm interested
2 because of things he's been saying.

3 It's my opinion and it's strictly a lay opinion,
4 that the psychological damage at TMI which I agree there
5 was, was caused by the mishandling of the situation by the
6 NRC and the public statements that were issued. And they
7 were honest statements, but uninformed. Suppose they had
8 not been made and the public had not been told that the
9 reactor was going to blow up at any moment. Would the
10 psychological damage have been much less?

11 DR. MAZUR: Sure, of course.

12 MR. SALISBURY: But it wouldn't be zero.

13 MR. LEVINE: But very much the order of magnitude--

14 DR. MAZUR: Oh, I fully agree with your analysis
15 of the cause and sequence.

16 MR. LEVINE: Okay.

17 MR. SALISBURY: The question, would there have been
18 more radiation released --

19 MR. LEVINE: That would be different.

20 DR. JOKSIMOVIC: For instance, in the Soviet Union,
21 the emotional stress is zero when they have accidents.

22 Nobody knows about it.

23 MR. LEVINE: We ought to not publish reports of
24 these things when they occur.

25 DR. MAZUR: That is not a corollary.

1 DR. BEYEA: So as I understand it it is the NRC's
2 responsibility for causing the stress at Three Mile Island?
3 Is that what you're saying?

4 MR. LEVINE: Not all of it but I think a large
5 part of the stress was caused by the fact that someone in
6 the NRC told an Associated Press or somebody, reporter, that
7 the reactor was going to blow up at any moment.

8 DR. MAZUR: Well, I think there's more to it than
9 that. We don't want to make it that narrow.

10 MR. BURSTEIN: But surely the fact that information,
11 alarming information which in retrospect shouldn't have been
12 so alarming, but maybe some of it should have been, got
13 out and got reported and was clearly the thing that led to
14 the psychic stress.

15 DR. BEYEA: I think you can argue in the causal
16 chain that it might be the operators and management of GPU
17 who were responsible. You put the causal chain back on
18 and it seems to me the NRC operated in a prudent and
19 responsible manner by assuming the worst.

20 MR. BURSTEIN: I don't want the record to hear
21 that that's the final word. Certainly they did not help
22 and we ought to go onto the next item.

23 MR. LEVINE: Why don't we go on? I'm sorry I asked
24 the question.

25 CHAIRMAN KOUTS: Now in the ACRS proposal there are

1 two aspects to individual risks. First of all let me say
2 that the document itself is not at all consistent to individual
3 risks. The criteria are stated in terms of fence post
4 individuals and the calculation which is given as an example
5 is not that of a fence post individual, but is essentially
6 the average person in the low population zone, or something
7 like that. I think that's a detail we can recognize but
8 it probably doesn't influence what we want to talk about
9 here because that really is related to other numbers that
10 were calculated.

11 There are two aspects of the risks. The first
12 of these is the probability of an early death due to a
13 reactor accident over the lifetime of an individual at the
14 fencepost. This is the way the criteria is stated.

15 This is essentially the same criteria as is used
16 in part 100.

17 The second is the probability of a delayed death
18 by cancer due to all reactors at a site over the lifetime.

19 MR. LEVINE: I'm not sure I know what you meant
20 by a comparison on part 100. The fencepost element?

21 CHAIRMAN KOUTS: Yes, the fencepost element.
22 Part 100 is related, well, I maybe went a little too far
23 there. There is a vague relationship of part 100 to the
24 early aspects.

25 MR. LEVINE: The latents are calculated as fenceposts?

1 I'm not sure what point you're trying to make.

2 CHAIRMAN KOUTS: No point.

3 MR. LEVINE: Okay. Forget it.

4 CHAIRMAN KOUTS: It was unimportant.

5 MR. LEVINE: Okay.

6 CHAIRMAN KOUTS: So there are really two criteria
7 connected to individual risk and this is the ACRS proposal.

8 Now I guess the first thing we ought to take
9 up is whether individual risk, the most exposed individual,
10 is suitable for criteria.

11 MR. BURSTEIN: I would say yes. In fact, I didn't
12 hear any disagreement on this in any of our discussions.

13 MR. LEVINE: Others have proposed different
14 criteria. Chauncey Starr, for instance, talks about how
15 to think about risks to people in a geographical sense,
16 that is the people nearby the reactor, 10,000 people nearby
17 the reactor and then people in the general region of
18 the reactor perhaps 100 to 200 miles.

19 I find that more satisfactory than most exposed.
20 I'm not sure I can prove why, but I just find that concept
21 is attractive to me.

22 MR. BURSTEIN: Isn't most exposed then, really
23 the worst case for the average within the low population
24 zone.

25 CHAIRMAN KOUTS: No, most exposed is fencepost person.

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MR. LEVINE: Except they don't calculate it that way.

MR. BURSTEIN: It's a surrogate for that.

CHAIRMAN KOUTS: There's certainly a link. It wouldn't be varied place to place.

MR. LEVINE: I think we have to straighten out in the ACRS proposal if they really mean most exposed or if they really mean the average person within a short distance of the reactor.

CHAIRMAN KOUTS: Before we do that we have to determine this is an important distinction to make at this point or do we believe that a criteria having this general character is appropriate. I think we can agree on the general character aspect.

DR. JOKSIMOVIC: Do we have the benefit of Mr. Griesmeyer in the audience who is one of the authors in reports?

MR. GRIESMEYER: There's a footnote on page 62 in the document which describes in a little bit more detail of what we meant by most exposed individual. It's not exactly the fencepost individual. I don't know if that clarifies anything.

CHAIRMAN KOUTS: You mean there are other people who might be exposed more than the fence post individual?

MR. GRIESMEYER: We don't intend for it to be quite

1 that restrictive. The footnote explains it.

2 MR. LEVINE: It says averaged over a representative
3 distribution of the population.

4 MR. BURSTEIN: Yes, that's what my understanding
5 was.

6 MR. LEVINE: Then I think that the term most
7 exposed is unfortunate.

8 CHAIRMAN KOUTS: I think so too, especially since
9 that particular footnote only appears in one of the appendixes
10 to this particular report, whereas the thing that has really
11 been regarded as the ACRS proposal is this thing up in
12 front which is the letter which was transmitted to the
13 commission and in the letter which was transmitted to the
14 commission, the only person discussed was the most exposed
15 individual.

16 DR. WALD: Isn't the issue really, if we accept
17 that it is important to have the criterion damage to the
18 individual in the early death as the representative case,
19 isn't the issue that you're really addressing about conserva-
20 tism in the limits?

21 And when we're discussing about whether we're
22 talking about the fencepost individual or an average
23 individual at some --

24 MR. LEVINE: Five miles.

25 DR. WALD: At some distance, we're talking about

1 whether the limits should be conservative or not it appears
2 to me.

3 DR. JOKSIMOVIC : But I think most of us would
4 like to have a clear definition.

5 MR. BURSTEIN: I think we're recognizing the fact
6 that there is a difference with distance.

7 DR. WALD: But in defining our quantitative
8 safety goal, are you opting for designing the protection
9 to meet the needs of the fencepost individual or are we
10 settling for an average -- at some distance. This is the
11 issue of do we put the conservatism in this and if we do,
12 identify it, it seems to me.

13 CHAIRMAN KOUTS: Well, this is a departure
14 from one part-100 type calculation. Because in part-100
15 you do calculate the fence post individual.

16 MR. LEVINE: I'd like to ask another question of
17 Griesmeyer because inspite of what you said, I understand what
18 you said about the footnote, but there's another place in
19 here and I can't think of where it is but it said that
20 it points out that the most exposed individual concept
21 refers to a very few people and I think those words were
22 used -- just a very few people. So it's apparently stated
23 two ways in here or --?

24 MR. GRIESMEYER: Unfortunately, this was written
25 by a committee.

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MR. LEVINE: Are you saying the intent was not fencepost?

MR. GRIESMEYER: The fencepost individual wasn't there 24 hours a day.

DR. JOKSIMOVIC: What was the concept of the most exposed individual?

MR. LEVINE: How as the calculation --

MR. GRIESMEYER: Well, the calculation would be people who spend their time around this area. The most exposed individual might be somebody who works in the factory next door and he's only there 8 hours a day. We're not saying that you sit on the fencepost 24 hours a day.

DR. JOKSIMOVIC: For instance, at Three Mile Island, my recollection is that the most exposed individual was a fisherman on the island who received something like 80 miligrams. Is that the concept you had in mind?

MR. GRIESMEYER: That would be accurate.

CHAIRMAN KOUTS: Was he the most exposed individual?

DR. WALD: He was. That was a real most exposed but that was also a calculation for the fencepost individual who in effect was at the North Gate for 24 hours without moving and that was the 80 MR but the actual fisherman on the next island was actually less.

The point I wanted to make is in appendix A where this acceptance criteria used the application on page

273

1 105, the calculations presented here are not strictly for
2 the maximum exposed individual, but in most cases they
3 are, however, appropriate for most individuals near the
4 plant. I'm not exactly sure what that means.

5 In the actual run through of the application of the
6 criterion, there are two cases. In one, the individual
7 is located initially within half a mile to one mile of the
8 reactor and in case two an individual is located one to
9 one and a half miles from the reactor.

10 DR. JOKSIMOVIC: That was done by another member
11 of the committee.

12 MR. LEVINE: Another thing to point out -- in
13 actual accident calculations there are some cases where
14 you have a hot gas release where the cloud goes up over
15 the people nearby and comes down later and so the most
16 exposed individual in that sequence is further away.

17 CHAIRMAN KOUTS: You have an elevated release.

18 DR. BEYZA: But when you average over all weather
19 conditions then you tend to at least be flat and --.

20 MR. LEVINE: Right.

21 CHAIRMAN KOUTS: Bill Lowrance has a comment.

22 DR. LOWRANCE: I'd like to think a little bit about
23 the tie between these hazard state goals and individual
24 risk goals and how those relate back to plant design. In
25 some ways there's no real difference if you -- because there's

1 a lot of overlap in the implications between the hazard
2 state statement and the individual risk limit statements.
3 Would somebody draw out for me why we need a second set
4 of limits -- that is, individual limits. Individual risk
5 limits. Why don't we just stop at the hazard state limits,
6 that is, the release limits and things of that kind?

7 In what ways are these not redundant?

8 What does the designer or regulator do differently
9 because he now has a second batter of considerations?

10 I'm assuming that we could eventually develop
11 a really sophisticated set of hazard statements and goals.

12 CHAIRMAN KOUTS: I'll accept that. That's a good
13 question.

14 MR. BURSTEIN: Among other things, it goes to how
15 we deal with siting criteria.

16 DR. LOWRANCE: That's what I see.

17 DR. JOKSIMOVIC: You're also telling people
18 what their risks are.

19 DR. LOWRANCE: I can derive that from the hazard
20 states and information about the site.

21 DR. JOKSIMOVIC: Well, you can but not that
22 many people can.

23 DR. LOWRANCE: Okay. But it's conceptually
24 derivative.

25 DR. BEYEA: Isn't it the other way around?

1 DR. JOKSIMOVIC: It's a matter of -- you have to set ²⁷⁷
2 a goal which is going to be acceptable and you have to come
3 up with some kind of number which is going to be an
4 acceptable number. We have to argue hard for rationale
5 behind that number.

6 DR. LOWRANCE: We could say then let's adopt
7 a set of individual hazard limits and the overall societal
8 risks and then we'll derive, we'll go back to hazard states
9 from that. I'm not saying that there aren't implications
10 from going on --

11 MR. LEVINE: I think there is in fact in the goals
12 as stated here the hazard states versus the public protec-
13 tion goals, not a one to one correspondence, but you cannot,
14 if you take these hazard states derive these numbers or
15 vice versa. They certainly aren't in most of the goals.

16 I think you need two sets, the primary one to
17 protect the public and to say that in terms of protecting
18 the public and the other one to help more in the other
19 objective of safety goals to make their licensing process
20 more rational.

21 CHAIRMAN KOUTS: Neil?

22 DR. WALD: Isn't another consideration that
23 given only hazard states as the criteria, that there would
24 not be any incentive to have mitigation outside of the plant,
25 given the risks of the individual or society this puts more

1 emphasis on developing mitigating procedures which -- from
2 which you can take credit in meeting that goal of the health
3 goal.

4 MR. BURSTEIN: You're referring to things such
5 as evacuation?

6 DR. LOWRANCE: Unless you take those things into
7 account when you set your hazard state limits.

8 You could though, take those into account when
9 you set your hazard state limits.

10 DR. WALD: It seems a little less logical to
11 take credit for procedures out there in order to justify
12 or compensate for deficiencies in the plant. I would not
13 like to see guidance that pushes in that direction.

14 DR. BEYEA: It seems to me that if the risk is
15 calculated, assuming certain evacuation models, then the
16 NRC has some requirement, not some obligation, to ensure
17 that those evacuation models will in fact be met and
18 therefore, I think there is a reason to go to the final
19 state and I think it makes some sense.

20 CHAIRMAN KOUTS: If Bill will let me rephrase
21 his question, it is, why do we need the apparent duplication
22 which is offered by criteria connected with hazard states
23 and criteria connected with effects on the public, --

24 MR. BURSTEIN: Isn't that what we discussed
25 yesterday and all morning up until we got into individual

1 risks?

2 CHAIRMAN KOUTS: It's all right if it is opened
3 up again in a new guise. Then, we haven't really settled
4 the question.

5 DR. LOWRANCE: No, I think there are some answers
6 and I knew some, I just wanted to see what we could come up
7 with and we have two or three.

8 CHAIRMAN KOUTS: One good answer is that they're
9 not completely redundant.

10 They do have non-redundant aspects.

11 All right, let's get back to the individual goal
12 aspects. Is there any substance to worrying about fencepost
13 individuals versus some class of individuals nearby?

14 DR. JOKSIMOVIC: I think it's important whether
15 we can define -- I ideologically like the concept of the
16 most exposed individual. The question is whether we can
17 define who that individual is. I think with calculation
18 we can do it. I don't know why members of Professor
19 Upton's staff didn't do it, and maybe Professor Wald
20 can tell us if there is any problem that I'm missing, if
21 I have a blind spot. I think in every calculation that
22 members of my staff can do, we can tell exactly the place
23 which has the highest dose.

24 DR. BEYEA: It's different in different accidents,
25 here. The same individuals --

1 DR. JOKSIMOVIC: For every single accident
2 category group it the way you like it -- we can always say
3 what is the peak dose.

4 DR. BEYEA: But how would you calculate if in
5 actual sequences to average them. Do you take the average
6 dose -- do you sum over the highest exposed individual for
7 each accident?

8 DR. JOKSIMOVIC: What we normally do is what
9 Saul did in Wash-1400, we grouped into release categories
10 and whatever release categories we talked about exact
11 nuclear composition, was released into the environment,
12 and then we take atmospheric dispersion codes and take
13 things like -- into account, we can have -- curves through-
14 out the environment.

15 DR. BEYEA: But they did not apply to the most
16 exposed individual because the most exposed individual is
17 not a well-defined concept -- it's just not a well-defined
18 concept to begin with. It's only well-defined in individual
19 accidents.

20 CHAIRMAN KOUTS: In principal, that calculation
21 could have been made but it wasn't.

22 DR. BEYEA: How? How? What did you do?

23 CHAIRMAN KOUTS: Sum overall accidents.

24 DR. BEYEA: Then what are you actually measuring?
25 Are you looking at the highest degree?

1 CHAIRMAN KOUTS: You're measuring integrated
2 probability that person at the fencepost will have been
3 exposed over all times, the amount of radiation on the
4 average been exposed to.

5 DR. WALD: Are you equating the fence post person
6 with the most exposed person?

7 CHAIRMAN KOUTS: No, no, you'll find some scenarios
8 where the fencepost individual is not the most exposed in --

9 MR. LEVINE: If you do the -- calculation, the
10 most exposed guy is at the fencepost.

11 DR. BEYEA: So the language would not be the
12 most exposed individual but the individual at the greatest
13 risk.

14 CHAIRMAN KOUTS: They are synonymous.

15 DR. BEYEA: No, because in some accident sequences,
16 the person who is most at risk on the average is not the
17 highest exposed individual.

18 MR. BURSTEIN: I'm confused by individual accidents
19 and lifetime probabilities or averages and I think what
20 I understand --

21 MR. LEVINE: It's ensembles we're talking about.
22 If you take the ensembles of all accidents, you
23 do get a curve that says the most exposed individual is
24 in-site boundaries.

25 DR. BEYEA: The most exposed individual on the

1 average? The average exposure?

2 CHAIRMAN KOUTS: It's not the average its the
3 sum.

4 MR. LEVINE: The sum. The sum of all accidents
5 at the plant. Even though in specific cases he could be
6 further away from the site boundary, the ensemble puts
7 him at the site boundary.

8 DR. BEYEA: Like I said before. I think that's
9 true.

10 There are different ways you can define. That's
11 all I'm -- depending on how you decide it to be.

12 MR. LEVINE: It could be a lot of ways but
13 again, the ensemble of all the accident sequences puts
14 the most exposed individual at the site.

15 The closest person.

16 DR. BEYEA: The ensemble average?

17 DR. JOKSIMOVIC: An integral. An integral.

18 DR. BEYEA: You're saying the sum of what?

19 MR. LEVINE: Of all the accident sequences
20 calculated --

21 DR. BEYEA: Sum of what? Something over an
22 accident sequence?

23 CHAIRMAN KOUTS: Sum of dose times probability?

24 DR. BEYEA: Sum of dose times probability is
25 greatest at the site. That is a correct statement.

1 The most exposed individual -- now, that's a
2 different statement. How do you define most exposed?

3 CHAIRMAN KOUTS: You put the individual in --

4 DR. BEYEA: If you want to define it that way,
5 that's fine.

6 CHAIRMAN KOUTS: That's exactly what people have
7 in mind. That concept.

8 MR. LEVINE: And the question is should you do
9 that or should you do that instead of putting him at the
10 site boundary, put him anywhere in a distance of five
11 miles or two miles or something and say that's an average of
12 the most exposed population as opposed to the most exposed
13 individual.

14 CHAIRMAN KOUTS: Now, of course, in actual
15 practice, the difference between these two concepts
16 will appear as a result of the population distribution
17 around the site they're considering and it may be that
18 nobody really lives at the fencepost.

19 MR. LEVINE: That's right.

20 CHAIRMAN KOUTS: It may be that no one lives in
21 this area or it may be that everybody lives in this area
22 of the fencepost and very few people farther out in the
23 low population zone. There's certainly an arbitrary charac-
24 ter to selection of this --

25 MR. BURSTEIN: Excuse me. Is there anything to

1 prevent population changes that might characterize the site ⁰⁵¹
2 in the year 1980 but would be completely different in the
3 year 2000?

4 CHAIRMAN KOUTS: We certainly have no restrictions
5 on that.

6 MR. BURSTEIN: On that basis I suggest a more
7 conservative dealing with that average individual or that
8 most exposed individual.

9 CHAIRMAN KOUTS: What does that suggest?

10 MR. BURSTEIN: The fencepost.

11 CHAIRMAN KOUTS: The fencepost.

12 I think, I would accept, personally, any, either
13 of these two interpretations but I prefer fencepost person
14 because I think there's more logic to that selection as
15 you say. That's how I come out and I don't find any strong
16 basis for choice there. Is that an acceptable --

17 MR. LEVINE: I sort of -- where you are, except
18 I'm slightly on the other side and with no strong way of
19 saying why. I like Chauncey's concept and Chauncey's
20 concept is the idea of looking at some distance from the
21 reactor and averaging over that distance and saying those
22 people should be reimbursed because they are at higher
23 risks than others. Which is an attractive concept as
24 opposed to practically.

25 MR. BURSTEIN: I don't know why we talk about

1 reimbursement at this stage of the game.

2 MR. LEVINE: I just mentioned it because it's
3 part of his concept, that's all. I'm not opposing reimburse-
4 ment.

5 DR. WALD: There seems to be sort of a toss up
6 in the guidance from our second objective of increased
7 rationality? Which is more useful from the standpoint of
8 regulatory?

9 DR. JOKSIMOVIC: Site boundary has been tra-
10 ditionally used for many years.

11 CHAIRMAN KOUTS: Then you can tie that to --
12 evacuation, which is also arbitrary.

13 MR. LEVINE: I don't see any real difference.
14 You have to -- the calculation of the model and bring
15 one into the other.

16 CHAIRMAN KOUTS: And there's less -- well, I've
17 said my view. I have a preference, but it's not absolute.

18 The next question which really comes up is
19 whether there should be two criteria connected with the
20 most exposed individual, one connected with early death
21 and one connected with late death.

22 DR. JOKSIMOVIC: I have a very strong view on
23 that. The first point is that some magic factor of 5 over
24 there which I found zero rationale for and then secondly
25 I would like to question the concepts of the individual risk

1 of latent cancer and whether that is meaningful at all.
2 Because latent cancer the way I understand it in all of the
3 tests that statistically, identifying the effect on the
4 population so not to any particular individual.

5 DR. MAZUR: You have a probability there. It's
6 the same thing.

7 CHAIRMAN KOUTS: I don't understand your point
8 there.

9 DR. JOKSIMOVIC: When we talk about particular
10 individual, if he is exposed to 510 grams there's a 50%
11 chance he's going to die.

12 CHAIRMAN KOUTS: An average person?

13 DR. JOKSIMOVIC: An average person. A biologically
14 average person. So we know what we're talking about. When
15 we talk about latent cancer, there's absolutely no way how
16 we can assign 5 milligrams or 10 milligrams to a particular
17 person. We integrate this over a large population to get
18 an effect.

19 CHAIRMAN KOUTS: Are you arguing that there
20 should not be a probability of latent cancer?

21 DR. JOKSIMOVIC: I am. I am.

22 CHAIRMAN KOUTS: To the most exposed individual.

23 DR. JOKSIMOVIC: I am.

24 MR. LEVINE: I think the basic concept of -- and
25 Niel is the one who should say this but the basic concept of

1 of latent cancer as a population exposure is a statistical³⁷
2 process.

3 If you add up the total exposure to people and
4 say on the average this is what you're going to get -- but
5 I don't think you can discriminate very much on the basis
6 of the size of the dose to an individual, for latent
7 cancer.

8 DR. MAZUR: How does that differ from talking
9 about the probability of a given individual getting cancer?
10 It's the same thing.

11 If you're going to get 10 cancers in a million
12 population then the individual exposed to that thing then
13 there's 10 of them with a chance they'd get cancer.

14 DR. JOKSIMOVIC: If an individual is exposed
15 to a high level of radiation, we know there is going to be
16 some effect.

17 DR. MAZUR: Some probability and effect.

18 DR. JOKSIMOVIC: Some probability of radiation
19 injury, some probability of fatality, whatever, and we
20 can talk in medical terms.

21 DR. MAZUR: And there is also some probability
22 of getting cancer.

23 DR. JOKSIMOVIC: There would be no individual
24 around -- plant who is going to be seriously affected by
25 the -- of the plant unless there's a major accident. If

1 there is a major accident, then there is going to result ⁰⁸⁴
2 some kind of high dosage and you can identify the individuals
3 who have received those high dosages and you can evaluate
4 the effect. If for instance you have --

5 DR. WALD: Even at that point, the end point you're
6 using here of early death is still based on probability
7 and -- based on the probability that that particular
8 individual will die or live.

9 It is the probability just as much if that
10 particular individual will be the one out of --

11 DR. JOKSIMOVIC: But you know - that in the
12 range of, I don't know above 100 grams that there will be
13 some effect and you can examine the individual and say
14 that he's been exposed to radiation, right?

15 If a million people had received 5 milligrams
16 each, you haven't the faintest idea if the radiation came
17 from the sun or I don't know, some other source or nuclear
18 power plant. Right.

19 So how can you assess the risks from a particular
20 source?

21 DR. WALD: On a statistical basis.

22 DR. JOKSIMOVIC: But you can't attribute that
23 to nuclear.

24 DR. WALD: That's another question.

25 DR. JOKSIMOVIC: -- attribute this to nuclear power

1 plants then.

2 DR. LEWIS: -- Something might die for other
3 reasons. Suppose somebody got 400 grams and one week after
4 the accident dies. Possibly he could have died anyway. He
5 could have died from pneumonia that he had beforehand.

6 DR. JOKSIMOVIC: That's right. But I think there
7 is certain probability and significant that he died from
8 radiation injury, but if some individual dies from cancer
9 and is exposed to 5 miligrams of radiation then the probability
10 that he's dying because of that is infinitesimal.

11 MR. BERNERO: Can I interject? I'd like to ask
12 Niel Wald to correct me. I'm going to venture a clarifica-
13 tion and it may not be a correct one.

14 Both the calculation of early fatality and the
15 calculation of latent fatality are statistical processes and
16 a very crude example - if a 1000 -- are suffered by a population
17 of two people, one dies and you can't tell which one because
18 statistically, that dose, that population dose will kill one
19 person, not two.

20 DR. LEWIS: The one Dr. Wald attends to will survive.

21 MR. BERNERO: Yes, in a similar fashion, with a
22 lot tougher odds or a lot tougher situations for selecting
23 who is likely to get it, as you go into a larger population
24 base for a given -- exposure, you're still selecting or
25 identifying that somebody is going to get a latent cancer.

1 You can't hand a label on him and give him continuing medical
 2 care but the process of identifying and calculating the
 3 statistical threat of latent cancer is really no different
 4 than calculating the probability of early death and so
 5 I don't see how the one is legitimate and the other is not.

6 DR. JOKSIMOVIC: The reason why I'm arguing this
 7 way, I'm saying it is not legitimate on the individual
 8 risks but it is legitimate in the societal risk.

9 CHAIRMAN KOUTS: Let me ask a question here.

10 One of the objectives of the quantitative safety
 11 goals is to protect the public health and safety. We
 12 agreed on that.

13 Are you saying it is not protecting the public
 14 health and safety if we pay attention to an increase --
 15 a probability of incidents of cancer?

16 DR. JOKSIMOVIC: No. Any set of safety goals in
 17 my opinion is going to have individual risks and societal
 18 risks. And the early effects could be directed to individual
 19 risks and the latent effects could be attributed to societal
 20 risks so we're accounting for that by doing this together --
 21 we're trying to double account.

22 DR. WALD: So your real question is whether or
 23 not the individual risks should be included?

24 DR. JOKSIMOVIC: No, no.

25 MR. LEVINE: May I try this question?

1 Two people get 510 grams and one dies of an
2 early fatality and the other one does not, the one who does
3 not die, is his probability of dying of a latent cancer
4 fatality 5%? That is, 500 divided by 10,000?

5 I think that's the question you're asking,
6 isn't it?

7 DR. JOKSIMOVIC: Thank you, Saul.

8 MR. LEVINE: Or do you have to caveat that by
9 saying this man represents an average dose sensitive
10 person and what is the variation around that average dose
11 sensitive person?

12 Or is latent cancer fatality concept a massive
13 population dose which you then statistically can't identify
14 individual probability.

15 DR. WALD: The answer is you can identify
16 individual probability if you know the dose of the
17 individual.

18 MR. LEVINE: So you can divide 500 by 10,000, say
19 that's the probability -- 10,000 -- latent roughly, 10,000
20 --- per latent cancer fatality.

21 DR. JOKSIMOVIC: You can, in fact -- we don't have
22 a lawyer on this panel but this is what they do. Well,
23 let's say TMI resulted in one latent cancer.

24 That's with no way of knowing who that individual
25 is.

1 DR. WALD: Right.

2 DR. BEYEA: In a large accident you could imagine --

3 DR. WALD: On the other hand, an accident where
4 the dose to an individual is high and that individual
5 subsequently develops cancer, he certainly had a much
6 greater probability of that that is the latent.

7 MR. LEVINE: Let's ask the question a different
8 way.

9 DR. BEYEA: How many -- can a person get
10 and not be killed in an early fatality? It might be 100 -
11 200 grams.

12 DR. WALD: It would be 50. That is the dosage
13 would kill 50% of an average population with treatment, and
14 you'd still have 50% of them die and somewhere around over
15 500 grams.

16 DR. BEYEA: But suppose you didn't get that, you
17 got 200 and your chances of cancer are not very high.

18 MR. LEVINE: Dosage. Dosage.

19 DR. BEYEA: Doses of 200 -- which is below the
20 threshold.

21 DR. WALD: For fatality, all right?

22 DR. BEYEA: So that the maximum individual risk
23 is necessarily from cancer, is necessarily small.

24 It can't be greater than 1 in a hundred. Or 1 in
25 50 in any reactor accident.

1 DR. WALD: For the survivors?

2 DR. BEYEA: For the survivors. Even though there'
3 is a limit because you're either killed from the early dose
4 or so that there is a difference here, the fact that the
5 risk of cancer can never be greater than some number.

6 DR. MAZUR: The incremental risk.

7 DR. BEYEA: The incremental risk. But you still
8 can have a situation where the local population has so
9 many excess cancers that you could say that those cancers
10 were due to the accident. That situation could happen.

11 CHAIRMAN KOUTS: But I'll ask the question
12 somewhat differently which makes it closer to what Vojin
13 was saying and see if this takes care of your implicit
14 concern here.

15 If we have, jumping ahead, a criterion on societal
16 effects of an accident, related to the probability of
17 induction of cancer, okay? Suppose we have a criterion
18 like that and we agreed one should be acceptable and we also
19 have criterion on individual risks associated with early
20 death. Do you think a separate criterion on probability of
21 cancer to the most exposed individual adds anything to the
22 set of criteria?

23 I think that's the real question.

24 DR. BEYEA: I think it definitely does.

25 DR. JOKSIMOVIC: It doesn't add a thing.

1 DR. BEYEA: I think it does. CS4

2 MR. LEVINE: Well, let me ask you another question.

3 I want to give 10,000 people one -- of each. Can you then

4 predict the probability of each of those individuals dying

5 of cancer?

6 DR. WALD: Yes.

7 MR. LEVINE: The same ratio?

8 DR. WALD: Yeah.

9 MR. LEVINE: Okay.

10 DR. WALD: Based on the dose --

11 CHAIRMAN KOUTS: I'd like to discuss this with

12 you at some point.

13 DR. WALD: This is getting into the -- of arguments

14 about extrapolation and --

15 MR. LEVINE: Well, I'm staying out of the range

16 of, you know --

17 CHAIRMAN KOUTS: If you want to take this down

18 to the point of -- considering those who are most likely

19 to develop leukemia, generally, I think the radiation

20 on that subsets --

21 DR. MAZUR: Subsets.

22 DR. WALD: I was waiting to to see --.

23 Very definitely there are substantive risks but

24 I'm not sure how you deal with that, that is, this

25 equity issue.

1 CHAIRMAN KOUTS: Well, we have a disagreement.

2 Why do you think this adds something?

3 DR. BEYEA: I think it adds something because
4 people are concerned about cancer and when you talk about
5 accidents, it's something people don't want to get and
6 if you just have a concern about individual early death,
7 you're not reaching the concerns of the people in the popula-
8 tion. I think that if it's covered in the - I guess I don't
9 worry too much whether it's covered in the societal risk
10 or the individual risk as long as it is somewhere. But
11 it seems to me at least to the public's point of view, we
12 do have some responsibility to talk about the fear of cancer
13 which is a very important fear in the population.

14 CHAIRMAN KOUTS: Allan, that's the point where
15 there's a question of equity concerns because the most
16 exposed individual is the one most likely to get cancer.

17 DR. MAZUR: No. Some subsets are more susceptible
18 to the risks than others.

19 CHAIRMAN KOUTS: There is that also. That's
20 not really relevant to our discussion.

21 DR. MAZUR: No, that was a -- remark. But I feel
22 strongly that cancer should be one of the --

23 CHAIRMAN KOUTS: On an individual basis?

24 DR. MAZUR: On an individual basis.

25 MR. SALISBURY: I don't understand why or I don't

1 persuasive rationale for making a distinction between delayed
2 death and immediate death.

3 It seems to me that for the purposes of a goal
4 like this you should just combine the two and make it one
5 standard.

6 MR. LEVINE: I like that. I would combine the
7 two.

8 DR. BEYEA: What do you mean? Not treat them --
9 just the risk of death?

10 MR. LEVINE: Yes, which includes both.

11 DR. BEYEA: The sum of the two? The problem --

12 MR. LEVINE: That depends on how you want to
13 add them. I wouldn't add them one to one.

14 MR. SALISBURY: I'm talking about adding them
15 one to one.

16 MR. LEVINE: I would not.

17 DR. BEYEA: The reason you might not want to
18 add them one to one is that there's a difference in terms
19 of when the death occurs. So the life shortening effect is
20 different. In otherwords, if you look instead of death at
21 the reduction in life expectancy --

22 MR. SALISBURY: I understand that, but I don't
23 find it persuasive.

24 CHAIRMAN KOUTS: Let me ask it this way.

25 Suppose you are offered two doors, right? And

1 if you enter that door there's a ten percent chance you
2 will die. 897

3 MR. SALISBURY: What kind of death?

4 CHAIRMAN KOUTS: Just a 10% chance you're going
5 to die.

6 MR. SALISBURY: Of the tiger?

7 CHAIRMAN KOUTS: There's another door. If you
8 enter that door, there's a 10% chance you're going to die
9 in 30 years. Which door are you going to go into?

10 MR. SALISBURY: Well, the answer to that is
11 obvious.

12 DR. WALD: There's another point, distinction
13 between these two and I have trouble seeing how to counter-
14 add them because in the one, the early death, the relation-
15 ship to the event is fairly clear and I think that's the
16 point you were bringing out.

17 In the other, it may never come about. You have
18 a statistical chance if you get hit by a car or smoke a lot
19 of cigarettes or many other things the prediction will never
20 be satisfied in an individual case.

21 From a public understanding point of view, to lump
22 these two it would be very hard to explain.

23 MR. LEVINE: I think it's even more than that if
24 you think of -- I agree with what you're saying. I'd like
25 to give another example. If you have 50,000 auto fatalities

1 in the country a year, we sort of accept that and we spend
2 some money on trying to reduce the number but it sort of
3 goes by the board.

4 On the other hand, if you had 50,000 people being
5 killed in one day in one city it would a calamity. And so
6 the distribution and time and space of fatalities is very
7 important to the public perception and latent cancer fatalities
8 would be widely distributed in time and space. So they
9 don't count the same in terms of public perception as early.
10 I would not add them one to one.

11 DR. LOWRANCE: How would reactor designers or
12 regulators use an individual immediate death limit as
13 compared to the delayed death limits in doing their design
14 work?

15 That is, how do the two different limits ultimately
16 affect the design of and licensing of reactors.

17 MR. LEVINE: That's never been considered.

18 MR. BURSTEIN: Unless it gets translated back to
19 an effluent release, from then on they're considered in the
20 same mechanistic way but you start out with a different
21 number.

22 CHAIRMAN KOUTS: That's true and it certainly
23 effects the mitigating features you put into a plant, because
24 the releases related to the delayed effect are not necess-
25 arily identical to the ones that lead to immediate effects.

1 MR. BERNERO: I'd just like to offer a comment. I
2 tried to allude to that yesterday when I spoke of plant
3 specific features and goals that would appear to a designer
4 as a useful thing.

5 Hazard State 2 is a very useful example of that.

6 In the general usage of developing siting criteria
7 for reactors or verifying existing siting criteria for
8 reactors, both the latent fatality and vulnerability and
9 the early fatality vulnerability would appear directly with
10 certain assumptions about design and certain assumptions
11 about emergency planning.

12 In the specific case in my mind would only appear
13 as a redundant check on the hazard states goals and section
14 of emergency measure which fall through the cracks on the
15 hazard states. There is no hazard state which speaks to
16 emergency measures and one -- the possibility that if the
17 designer doesn't satisfy the early fatality goal with core
18 melt prevention and containment integrity, one is forced to
19 come up with another factor of ten or something with the
20 fatality goal calculation.

21 DR. MAZUR: If I were a designer and there was
22 a safety goal in early death but not in long term death,
23 then I would try and design in whatever way I can so that if
24 there were release it was rather low, but spread out all over
25 the place.

1 CHAIRMAN KOUTS: No, no, no. That was the
2 assumption -- there is no individual limit on late death,
3 but there is a societal limit. That was the question.

4 DR. MAZUR: So you do have limits connected with
5 latent cancers but you determine your calculation over
6 everybody -- everybody.

7 CHAIRMAN KOUTS: If you use that case then, what
8 I would do as a designer is keep the absolute amount low and
9 disperse it over the lower population areas.

10 MR. BERNERO: Allan, that strategy is called
11 remote siting. That's exactly what you do. You have a
12 certain level of prevention that one presumes, and you look
13 for a low population zone in which spread the unfortunate
14 release that you can't prevent.

15 DR. MAZUR: So if you had individual cancer, then
16 you would be somewhat prevented from doing that, too, right?

17 You have to keep the individual risk of the cancer
18 down, then you couldn't drop the stuff in a low population
19 area because you'd still be taking that one guy there and
20 elevating the individual risk. Whereas, if you didn't have
21 the individual risk, you could take that strategy.

22 That's an interesting possibility actually in the
23 sense that it might be counterproductive than to have the
24 individual cancer strategy because I'm just thinking as I'm
25 talking and maybe this isn't sensible, but it seems to me it

1 might foreclose your strategy of dumping the stuff in a low ⁰⁰¹
2 population zone.

3 MR. LEVINE: I think you're giving more credit to
4 the control than there really is.

5 DR. WALD: I think so too.

6 I think the case where the individual has the
7 risk is really limited -- the matter of societal cancer is.
8 I'm not really sure -- mean much.

9 CHAIRMAN KOUTS: If you found that the societal
10 cancer risk is too high, you would use certain mitigating
11 features such as thyroid removal if you were concerned
12 about thyroid and whatever else. And, whatever you use to
13 reduce the individual risk itself -- in fact, there's no
14 way you could apply mitigating responses that would deal
15 with the individual risk without at the same risk really
16 dealing with the societal.

17 DR. MAZUR: That's exactly the point I'm making.
18 Why does one need an individual risk of early death if
19 you've got your thyroid taken out? Bob, I guess you've an
20 answer?

21 MR. BERNERO: I think you have to be careful to
22 distinguish -- when one looks at reactor sequences and
23 consequences of those sequences, the population that is
24 threatened with early death and immediate fatality
25 is that population which is close to the reactor for the

1 first couple of miles. The population that is threatened⁰⁰²
2 with latent cancer is a much much larger population pool.
3 It's a population over 200 miles.

4 MR. LEVINE: You get 90% of the cancer at 200 miles.

5 DR. MAZUR: If you're defining the population for
6 early deaths that's going to take care of the people who
7 are nearby, too.

8 MR. BERNERO: Yes, but if you go to the Zion
9 reactor in Northern Illinois, the early threat is to the
10 school house down the road which can't be evacuated.

11 The measures one takes in emergency planning to
12 deal with that, to deal with the early death threat, are
13 quite different from the ones that one would take to deal
14 with the latent cancer.

15 DR. MAZUR: But that would be covered if I had
16 a low population risk from early death, if I'm not going to
17 allow more than 4 or 5 early deaths, I've got to get those
18 kids out of there anyway, so I don't see any basic disagree-
19 ment whether we're talking about early or late. To some
20 extent, the societal number -- on the individual risks but
21 in both cases then the fact that it's early or late doesn't
22 change the logic of that. By the way, we could also add
23 should there be some kind of genetic risk in that? We
24 don't have to limit it.

25 CHAIRMAN KOUTS: We're going to get to that.

1 DR. MAZUR: But it seems to me again, that if
2 we're talking about the structure of this thing, we might
3 just as well go on with it at this point because we're
4 dealing more with the structure of the --

5 MR. BURSTEIN: Excuse me, but are we getting to
6 the point where early deaths are to be characterized as
7 risks to the individual and cancer, latent cancer effects
8 are a figment of societal effects?

9 CHAIRMAN KOUTS: No, not at all.

10 MR. BURSTEIN: That's what I keep hearing here.

11 CHAIRMAN KOUTS: I think that you'll find -- I
12 think that if you were to analyze this problem very carefully
13 you would find that of these four numbers proposed here of
14 individual and societal risks, any three are independent
15 and one is redundant.

16 MR. BURSTEIN: And that's the individual cancer
17 death?

18 DR. BEYEA: Or, it could be the other one.

19 CHAIRMAN KOUTS: I think that's probably right
20 but I think the farthest we can get here is to recognize
21 this as a possibility and say that we can't settle it right
22 here and it may be that you're just throwing in a redundant
23 requirement but we'll find out about it.

24 MR. BURSTEIN: I think I understand that and I
25 think that's what Niel pretty much said.

1 DR. MAZUR: I suspect that we could come to some
2 consensus that if in fact there is a redundancy, that nobody
3 in fact is going to impose a redundancy?

4 DR. BEYEA: No, that's not true. I would think
5 that --

6 CHAIRMAN KOUTS: You may want the redundancy.

7 DR. BEYEA: In explaining things to the public.
8 You may not want to leave out -- you might want to leave goals
9 but people might object to them.

10 DR. WALD: Remember that.

11 We've already decided and I think rightly that
12 the primary objective is public health and safety --

13 DR. BEYEA: It can't be designed primarily to
14 explain to the public -- and a redundancy, it really doesn't
15 hurt to add a redundancy for better public understanding.

16 DR. WALD: Unless it interferes with the rational-
17 ization and --

18 DR. BEYEA: Then it's not a redundancy.

19 DR. MAZUR: If indeed it is a redundancy it won't,
20 though.

21 CHAIRMAN KOUTS: It may take 25% longer to calculate.

22 DR. WALD: Can I ask just one question before
23 we leave and that's to say that the number they chose in
24 the ACRS report of 200 rads as a threshold above which
25 you get I think 100% fatality, just ain't so.

1 DR. JOKSIMOVIC: No, they didn't mean that. Not
2 the way it's stated. It's in Appendix A.

3 DR. WALD: I've lost it now, but maybe I didn't
4 read it carefully enough but the calculations reflected in
5 tables a.1 and a.2 are from 100% fatality for individuals
6 who received a dose greater than the assumed threshold
7 value for non- -- (which is spelled wrong) effect. And
8 they used two hundred rads and if I understand what I'm
9 reading there, I think that's a rather wild and extremely
10 arbitrary and not supportable --

11 MR. LEVINE: What page is that on?

12 DR. WALD: 109. The footnote.

13 They say this is a conservative approach, but if
14 you use 700 it wouldn't matter. But nevertheless, I think
15 it's unwise, but 200 -- is up in the paragraph, the first
16 paragraph on 109.

17 DR. BEYEA: What number would you suggest they
18 use instead?

19 DR. WALD: Well, the number that WASH-1400 used
20 was 510 rads as an LV-50, an LV-100 --

21 DR. BEYEA: That is for extreme medical --

22 DR. WALD: No, not extreme. Just supportive.

23 DR. BEYEA: No, I disagree. Supportive is --
24 what is supportive?

25 DR. WALD: Here's the man who wrote it.

1 CHAIRMAN KOUTS: --- then of course there have been
2 those criticisms of that.

3 DR. WALD: Yes, but there have been criticisms
4 anyway. The 200 number as I remember was taken from --

5 DR. JOKSIMOVIC: By the way, while we're on these
6 numbers, just for my education, is there some international
7 agreement on these? On these types of numbers we got
8 supportive treatment and lack of it and --?

9 DR. WALD: The German, I think, I forgot the
10 name of the organization, --

11 MR. LEVINE: The German Risk Study.

12 DR. WALD: Yes, has come out with a similar --

13 DR. JOKSIMOVIC: I'm aware of that but --

14 DR. BEYEA: Sweden uses three hundred. Different
15 countries use different things for different reasons.

16 MR. LEVINE: The German number was slightly
17 lower, I think, because they didn't feel that they had
18 as many hospitals per individual as we do but it's close.

19 CHAIRMAN KOUTS: Can we go on?

20 MR. LEVINE: Yes.

21 CHAIRMAN KOUTS: Let's go on to the societal
22 risks now.

23 DR. MAZUR: Are we going to take up the genetic
24 risks now?

25 CHAIRMAN KOUTS: Yes, we are, after we go through

1 what's in the ACRS, we'll go through the things that are ⁰⁰⁷
2 not in the ACRS.

3 Societal risk I think is pretty much -- again,
4 there are two limits attached to societal risk, one is
5 cancer deaths per kilwatt hour of plant operation, and the
6 other, expected early deaths per kilowatt hour of plant
7 operation.

8 MR. LEVINE: I'm not sure the per kilowatt hour
9 is a meaningful measure.

10 CHAIRMAN KOUTS: You're not?

11 MR. LEVINE: No. I think whenever a plant is
12 hot and at pressure, --

13 CHAIRMAN KOUTS: Do you think that makes any
14 difference?

15 MR. LEVINE: It's not operating but it's --

16 DR. JOKSIMOVIC: Related to the benefits?

17 MR. LEVINE: Relating to benefits?

18 CHAIRMAN KOUTS: Is that a factor of 5?

19 MR. LEVINE: All right.

20 DR. MAZUR: That's a real problem, that whole issue
21 of societal deaths per -- then what's the unit in the
22 denominator? ----- what he calls the scaling effect, I
23 think indeed, you get a very large number of reactors
24 going what looks like not so much on a small basis but it's
25 a very different picture on a big basis. And if we're to

1 think of it per accident or per amount of electricity
2 generated or per operating plant or just in absolute numbers.
3 Maybe there is a notion that whatever the amount of elec-
4 tricity generated from nuclear power, there is some level
5 for the whole society beyond which we don't want people
6 dying, so that I think one must hold open the units of how
7 one specifies the societal level.

8 CHAIRMAN KOUTS: I think a little farther on
9 we take up the question of risk aversion.

10 DR. MAZUR: But this is different than risk
11 aversion, really.

12 CHAIRMAN KOUTS: I thought you were just talking
13 about that?

14 DR. MAZUR: No, no, I'm not talking about it
15 so much whether it happens in a catastrophe or spread out --
16 they could be all spread out but it could be we're operating
17 on a very large scale so that within limits we could speak
18 of in terms of -- electrically generated. If there are a lot
19 of nuclear power plants even though their deaths are occurring
20 at spread out intervals a very large number of them and that
21 may be just quite a different acceptance issue than if you
22 were to operate fewer nuclear power plants at spread out
23 intervals, a very large number of them and that may be
24 just quite a different acceptance issue than it would
25 operate if there were fewer nuclear power plants and those

1 spread out deaths are at a smaller number. It's not obvious. 309

2 MR. BERNERO: I wonder if I could just ask in
3 this context if all of you reflected on the previous table
4 of individual risks explicitly says, due to all reactors
5 at a site which is an attempt to deal with that issue,
6 not normalizing to a per reactor --

7 DR. MAZUR: That's when it aggregates all the
8 reactors at one location -

9 MR. LEVINE: That sort of handles the earlies but
10 it doesn't handle the latents.

11 DR. MAZUR: I don't know if that's the latent
12 issue, but I think it's between the individual and the
13 societal.

14 CHAIRMAN KOUTS: That incidentally is the criterion
15 which would discourage nuclear parks.

16 MR. BERNERO: That's right.

17 MR. BURSTEIN: Unless the site boundary is 40
18 miles away.

19 MR. BERNERO: It raises a further question if
20 one had the rigger and was drawing the line so fine, that if
21 you built a two reactor site, and certified that you met
22 that criteria, and then 10 years later concluded that it
23 made a whole lot of sense to put two more reactors at
24 that site, you are confronted with the -- choice of getting
25 two extra-ordinary safer reactors or going in and beating

1 on the two existing reactors.

2 CHAIRMAN KOUTS: That's what I said. It
3 discourages nuclear parks.

4 MR. BERNERO: Yes, but --

5 DR. MAZUR: Unless one pre-plans the nuclear
6 park of course, to assume expansion capabilities by site
7 boundaries which is one of the rationales for nuclear
8 parks in the first place.

9 So I have a real problem in terms of the units
10 that societal levels are stated in and it's not an issue
11 of whether they are immediate deaths or cancer deaths
12 or genetic problems but the denominator that one picks --
13 in otherwords, how many deaths in the society per whatever
14 that is. It strikes me that -- it changes the picture
15 a great deal.

16 CHAIRMAN KOUTS: As I interpret it, this is
17 the goal which was selected for use in analyzing a specific
18 reactor case and for any given reactor case we have
19 essentially 1000 megawatt reactor and 1 million kilowatt
20 reactor operating at say 65% of the -- cycle over the
21 course of the year and whatever number of hours that is,
22 and it comes out to a certain number of hours.

23 DR. MAZUR: I interpret it somewhat differently.
24 I interpret it as implicitly putting in a risk considera-
25 tion and I think we have not yet settled the issue of if

1 that's the basis upon which you're going to select such ¹¹¹
2 numbers.

3 MR. SALISBURY: It would seem to me that this
4 formulation for societal benefit does leave a big question
5 which is the overall risk to society as a whole from
6 nuclear endeavor which you may not want to incorporate into
7 the specific safety goals but if you don't incorporate it
8 here then it's going to have to be a matter of -- it's going
9 to be factored in some other way.

10 DR. JOKSIMOVIC: --the national risk budget for
11 nuclear power?

12 MR. SALISBURY: That would be one possible approach.
13 Another approach would be to just change this to per person
14 year for the total population rather than for reactor year,
15 whatever.

16 DR. JOKSIMOVIC: But I thought that the argument
17 was about the -- the same kilowatt hours which --

18 MR. SALISBURY: That would be after a year, right?

19 MR. BURSTEIN: I've looked at the fuel cycle and
20 it's not particular in this document --

21 CHAIRMAN KOUTS: We're not looking at the fuel
22 cycle.

23 MR. BUSTEIN: No, we haven't, but I'm speaking
24 about our analysis of the environmental impact of nuclear
25 power in general and that we have reserved for the nuclear

1 power a portion of that total budget.

2 CHAIRMAN KOUTS: Nobody's done that that I know
3 of. I mean, nobody has reserved for the nuclear power
4 plants any fraction of the budget for nuclear power in
5 general.

6 MR. BURSTEIN: The budget hasn't been set, has
7 it?

8 CHAIRMAN KOUTS: I don't think a budget has been
9 set.

10 MR. BURSTEIN: I guess maybe that's correct. The
11 budget has not been determined to be so much but we have
12 analyzed the effects of the total fuel cycle on the popula-
13 tion.

14 CHAIRMAN KOUTS: Yes, that's been done.

15 MR. BURSTEIN: And I guess the reasoning in the
16 ACRS report is to try to relate societal risk to societal
17 benefit as a philosophy and that's what determines this
18 denominator. I guess we are trying to argue that particular
19 philosophy.

20 MR. LEVINE: If that's its objective it fails
21 largely in my opinion. I don't think it has any measurable
22 societal effect.

23 CHAIRMAN KOUTS: I think even though it was
24 stated in the supporting document that is essential to
25 consider benefits as well as risks. That was never done.

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MR. LEVINE: It was never done.

I think Allan's point is he would have the same problem whether per 10^{12} kilowatt hours or 10^{10} or whether per reactor year.

DR. MAZUR: Right.

MR. BURSTEIN: Are you going to the arbitrary list of the number or the philosophy?

DR. MAZUR: No, no. The philosophy question is dead, the way one sets the method --

DR. BEYEA: It seems to me that this is a natural indication -- let's start again.

A natural point, a natural target --- bring up the number, it seems to me it is really to determine with a comparison to the alternative, like the coal alternative.

DR. JOKSIMOVIC: It had.

DR. BEYEA: That's right. So this is a question of whether you believe in the alternative philosophy.

DR. MAZUR: Well, we got on that discussion yesterday about how-what philosophy needs to get at these things.

DR. BEYEA: Let me finish the comment on the rationale of choosing the coal level. First of all, taking into account the uncertainty overlap, and there's uncertainty in the cancer coefficient and there's uncertainty in determining the coal deaths, and I believe the ACRS number is

1 as a rather high and low limit. They pick a number 10 --
2 I think the number was 10 to 200 deaths per 10¹⁰ kilowatt
3 hours.

4 DR. JOKSIMOVIC: That was the number they took for
5 estimating for coal. And then they took the lower value of
6 that to be the upper value.

7 DR. BEYEA: That number 10 can actually be lower
8 if you look at the data. I would use a larger spread, more
9 like 2 to 200 is the range of coal deaths depending on how
10 you interpret the data. The same is true for nuclear
11 cases. The cancer coefficient can be off. It may be
12 too high, it may be too low. There's a fairly large
13 uncertainty. So you have the problem -- if you look at the
14 range and take the low number for coal and the high number
15 for nuclear, you get a story where the risks for nuclear
16 cancer risks would be actually higher for nuclear. That's
17 one point.

18 The second point is that you also -- the question
19 is whether if you're looking at new plants, shouldn't you
20 be comparing this risk to the risk of new coal plants with
21 scrubbers. And roughly you estimate that a new coal plant
22 with scrubbers -- operating scrubbers, you look at a factor --
23 in the coal risk. Which makes me want to ask, if this
24 number is related to coal, then shouldn't it explicitly
25 say that it is tied to current coal technology?

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DR. JOKSIMOVIC: It does. It's in effect.

DR. BEYEA: That it would be changed as coal technology gets better?

CHAIRMAN KOUTS: Well, we don't want to debate the numbers.

DR. JOKSIMOVIC: No.

We ought to debate a concept then.

DR. BEYEA: The concept is if you're going to base this on coal which is what you said has been done, I'm just trying to point out the coal numbers can be lower. That's all I'm trying to make a comment.

DR. JOKSIMOVIC: You're not objecting to a comparison with coal, you're objecting to the number associated with coal.

DR. BEYEA: I also think that when you compare it one time, you have to do it continuously then. You have to update it.

DR. JOKSIMOVIC: That's for developing checking the numbers whereas for my liking the ACRS number is a liberal for a number of reasons.

MR. SALISBURY: What Jan wants to do is set up a moving target where that goal would change as there are changes in coal or other technologies.

DR. JOKSIMOVIC: I think we all have moving targets. Congress changes the laws and we age and we learn

1 and we update.

2 CHAIRMAN KOUTS: Let me try to break the Gordian
3 Knot here since it's almost time to do something else.
4 Namely, go to lunch.

5 There may be some unease about the question of
6 whether there's a natural limit to the electrical industry,
7 let's put it that way, because really, it's not nuclear
8 alone that you're talking about it's electrical--it's the
9 effects of electricity and so on and in order to settle this
10 you might have to do a cost benefit analysis, the kind that
11 Hal Lewis has been pressing for.

12 We could make this point as an aside if we wanted
13 to but it's over and above the thing which we're facing
14 right here which is whether or not criteria attached to
15 judging the adequacy of safety of a single plant should
16 have attached to it criteria of this general kind but
17 the societal effect per kilowatt hour of electricity
18 produced such an effect.

19 DR. MAZUR: I accept what you're saying but I
20 think you're missing my point. I'm saying that there
21 lies an assumption that is not obviously a good one to
22 make. I am not quite sure that because it is a bigger
23 plant I will necessarily allow more side effects. That is
24 a cost benefit assumption which you may or may not want to
25 make. As we decided yesterday there are other philosophies.

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CHAIRMAN KOUTS: That's the risk benefit analysis you must make on electricity generation in general because the only way you can do this with a smaller plant is make less electricity and in that case you might make two plants and then you end up with the same total societal effect.

DR. MAZUR: I spoke of a sociologically sensible way of determining acceptable risk and it may well be that in that sense many many people in this society figure no matter how much electricity you're going to give me, I will not accept more than a certain number of deaths per year.

CHAIRMAN KOUTS: From the electricity industry?

DR. MAZUR: From the electricity industry --- from the nuclear part of it from the energy in it -- I don't know. I'm not taking a position. I'm simply saying that there is a substantial value judgement made in there and I think you're passing over it and you don't seem to recognize --

DR. BEYEA: Can we note it?

DR. MAZUR: We can note it but if we go ahead with an acceptance I will object.

MR. LEVINE: If we accept what, Allan?

DR. MAZUR: If we accept the assumption that we will necessarily accept more societal deaths for more electricity

1 generated. I'm not talking about numbers and I'm not eve⁰²¹⁵
2 preferring strategies, I'm simply saying there is a value
3 judgement in there and I don't feel -- to make that value
4 judgement. I mean, if you ask me personally I'll give you
5 an answer and we'll do it outside --. You seem to be passing
6 over without recognizing that there's a value judgement.

7 MR. LEVINE: I think there's no question that
8 there's a question of scale involved if you're looking at
9 per unit or per ten units or whatever, and you're talking
10 of hundreds of thousands of units there's a question of
11 scale involved which affects the overall risks. I have
12 no question about it.

13 DR. MAZUR: Correct.

14 CHAIRMAN KOUTS: I was not -- I haven't been
15 directing any of this toward evaluation of total risk of
16 an industry which is --

17 DR. MAZUR: And we need not and my point doesn't
18 depend on that. The evaluation here implies that with
19 larger plant, the more societal deaths we will accept. And
20 its a value judgement that is not obvious.

21 CHAIRMAN KOUTS: I think there's a break in that
22 logic.

23 DR. MAZUR: Deaths per amount of electricity
24 generated.

25 CHAIRMAN KOUTS: We have some 500 gigawats of

1 electricity being generated in the country more or less now,
2 and we're talking about one gigawat of that. The contribution
3 of that to the effect of the 500 is just below the size of
4 the pencil I'm going to use.

5 DR. MAZUR: But the standard says that you can have
6 more societal deaths, the more electricity you generate from
7 a plant.

8 DR. LEWIS: Allan has a good point, the example
9 in air transportation is that the death per passenger mile
10 went down when the number of passenger miles went up. So
11 it can certainly go the other way. Nobody, I hope nobody
12 is denying that, but it's still true that you can divide
13 the number of deaths by the number of kilowatt hours
14 generated. It doesn't suggest that is the difference
15 between secant and the slope.

16 DR. JOKSIMOVIC: -- the assumption of --

17 DR. LEWIS: He's saying the fact that he --

18 DR. JOKSIMOVIC: He's not attacking that---.

19 DR. LEWIS: No, no, no.

20 DR. BEYEA: Why couldn't this number then drop
21 each year? There's another way to meet your objective.
22 But the point is that this number decreases each year so
23 the total risk was -- page 9.

24 DR. MAZUR: Now this number says, let's see,
25 for example the goal level. The average number of delayed

1 cancer deaths per 10^{10} kilowatt hours of electricity 5.0
2 generated -- that means if I'm setting that as a safety
3 limit, that means the more energy I generate the more people
4 I can kill. Well, I'm saying that's a value judgement.

5 DR. LEWIS: No, I don't believe you're right.
6 It's clearly an error. What I think is meant there is if
7 you build a new plant and add it on to the existing data
8 base and that produces so much electricity and if you
9 don't change anything else, will have a potential -- it
10 won't save lives.

11 DR. MAZUR: It will allow more lives to be killed.
12 That's within your safety goals. You are willing to permit
13 it. That's a value judgement.

14 DR. LEWIS: Oh, I see -- I misunderstood your --

15 CHAIRMAN KOUTS: I'm trying to address what his
16 real problem is.

17 DR. LEWIS: Forgive me, I misundersttod.

18 DR. MAZUR: I don't have a problem, you guys have
19 a problem.

20 CHAIRMAN KOUTS: There are limits to bacterial
21 content of drinking water which is set on the basis of how
22 many bacteria you find per drop of drinking water. The
23 very terms that these are expressed in terms of bacteria
24 per drop does not mean, considering that there is no limit
25 on the number of drops you don't care how many bacteria exist

1 in the world. There's no relationship whatsoever.

2 DR. MAZUR: No, now if you allow me to drink
3 10 bacterium per glass of water and then the more glasses
4 of water I drink the more bacteria I am allowed to digest.

5 CHAIRMAN KOUTS: You have a natural limit.

6 DR. BEYEA: What does that stand for, best
7 available control --

8 CHAIRMAN KOUTS: And this is taken into account.
9 You have a natural limit to the amount you can ingest and
10 this is taken into account in setting the initial limits.

11 DR. MAZUR: Does it not follow that if I have
12 a capacity of 10^{10} and that allows me a certain number of
13 societal deaths per year, I now move my electric generation
14 up to two times 10^{10} and I now allow twice that number of
15 deaths?

16 MR. BERNERO: Yes.

17 DR. MAZUR: That is a value judgement. I might
18 just as well decide --

19 CHAIRMAN KOUTS: This would not effect the total
20 number of people killed by nuclear power --

21 MR. BERNERO: Yes, it would.

22 CHAIRMAN KOUTS: Within a 10th of a percent or
23 something like that.

24 MR. BERNERO: No, that number represents the
25 best estimate you can make of the real deaths associated with

1 nuclear power with a gigawatt of nuclear power or 100 gigawatts.⁰⁰⁰

2 MR. LEVINE: Well, I think you have to -- another

3 way to look at it is if you decide as a society that you

4 need that much more electricity -- to nuclear power, and

5 you did not make it nuclear power but you made it something

6 else, the question is, which would be the -- how would you

7 want to think about that problem?

8 DR. MAZUR: That is one philosophy of deciding.

9 Another philosophy is are you getting the benefit to

10 justify -- another philosophy is we won't tolerate more

11 deaths, I just don't want the electricity. There are numbers

12 of philosophies. What I'm saying is that's a value judgement.

13 MR. LEVINE: It is a value judgement.

14 DR. MAZUR: And we should recognize it as such.

15 MR. LEVINE: And I would like to recognize it

16 as such.

17 DR. MAZUR: What?

18 MR. LEVINE: I would recognize it.

19 DR. JOKSIMOVIC: I don't think there is any

20 disagreement.

21 DR. MAZUR: I appreciate it. I will work on

22 equity now.

23 CHAIRMAN KOUTS: What is the outcome of this?

24 DR. MAZUR: My outcome is that I think this is

25 a non-obvious point and to automatically accept the fact that

1 a population's societal goals will be stated in terms of
2 permissible deaths per amount of electricity generated is
3 a value judgement that is not trivial and ought to be
4 considered against optional ways of doing it and that
5 we shouldn't pass over it and we are, or most of us are.

6 DR. JOKSIMOVIC: You recognize not all of us.

7 MR. LEVINE: I would say that some of us have
8 not passed over it but regard it as a value judgement that
9 is not very significant.

10 DR. MAZUR: I regard it as very significant. I
11 regard it as precisely what we were discussing yesterday
12 in terms of the various philosophies one has whether it
13 is a -- philosophy or a benefit philosophy or a sociological
14 sensible philosophy. It's the same issue.

15 DR. BEYEA: Another way of putting the criteria,
16 the safety goal criteria would be to say that the number of
17 deaths or expected risks in the nuclear industry would be
18 less than 100 deaths per year.

19 DR. MAZUR: Period. That would be another way.
20 I'm not defending that, but that's another way of putting it.

21 DR. BEYEA: When you put it in those terms, you
22 actually understand.

23 DR. MAZUR: Okay, I accept that alternate statement.

24 DR. JOKSIMOVIC: That would be in the national
25 risk budget.

1 DR. BEYEA: That's right. That would be the 001
2 criteria. That would be a rational criteria which could be
3 dealt with within the regulatory framework.

4 DR. JOKSIMOVIC: But in order for that to be
5 meaningful for the regulators it has to be divided somehow.

6 DR. BEYEA: Then divide it by the population
7 after each year so each year that number is going to decrease.
8 -- time to be a coefficient for the --. That's all it would
9 mean.

10 DR. WALD: A certain number of deaths would
11 be permissible.

12 DR. BEYEA: Yes.

13 DR. JOKSIMOVIC: But things are being done
14 that way in the pollution area.

15 DR. BEYEA: Basically, we don't want to get any
16 worse. -- put a lid on it. Usually the lid is whatever
17 the current level is and keep it where that is. Or bring
18 it down.

19 CHAIRMAN KOUTS: Shall we recess?

20 (Thereupon the hearing was recessed for lunch
21 to reconvene at 1:50 p.m.)
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A F T E R N O O N P R O C E E D I N G S

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2 CHAIRMAN KOUTS: We have still a great deal of
3 ground to cover in fact, most of the grounds are yet uncovered
4 and I would like to confine -- well, first of all we have
5 a responsibility to finish the ACRS.

6 I'm going to confine this discussion to 2 or 3 as-
7 pects of it if that's all right with you gentleman, and then
8 I would like to go into the question of other proposals
9 which have been made for goals on risks and do some
10 comparative discussions on the comparative aspects of the
11 various things which have been proposed.

12 On the ACRS, we talked about the ALARA concept
13 because this is particicularly one which Dave Okrent
14 has asked that we pay some attention to. Do you feel
15 that a safety goal should include an ALARA concept?

16 DR. JOKSIMOVIC: In my opinion for all present
17 plants, yes, for new plants no.

18 CHAIRMAN KOUTS: Only on a basis for determining
19 whether backfits should be made?

20 DR. JOKSIMOVIC: No.

21 MR. LEVINE: I think if you word it in terms of
22 a cost benefit analysis to determine, I don't think ALARA
23 is needed. I think what you need is a cost benefit requirement
24 about a safety goal. That is if someone wants a safety
25 goal lowered you have to do a cost benefit and if it shows

1 it's cost beneficial, then if someone wants to not meet a⁰⁰⁶
2 safety goal he has to do a cost benefit to show that
3 that's justified also. I think that's implicit in ALARA,
4 and I take ALARA to mean that.

5 CHAIRMAN KOUTS: ALARA is really a sort of cost
6 benefit analysis, already.

7 MR. LEVINE: Although very muddled up.

8 DR. LOWRANCE: Again, back to what I've said
9 twice before, the third round is so are those earlier
10 state limits in a sense, really in effect cost benefit
11 analysis both in the macro and micro and I wonder whether
12 those again the hazard states and the individual risk
13 limits and societal risk limits don't really in a sense
14 take in anything else you might do under ALARA.

15 DR. LEWIS: I thought that there was a fight
16 yesterday about whether the numbers associated with the
17 safety goals could be determined by cost benefit or
18 risk benefit analysis or by comparison with other technolo-
19 gies and both of you seem to be assuming that at the tail
20 end, that is in terms of the ALARA concept you should work
21 through cost benefit analyses and I think it would be a
22 little bit funny to determine the original number through
23 comparison with other technologies and determine the
24 tail end through cost benefit analyses. I'm delighted to
25 hear you both talking in terms of risk benefit but I thought

1 we had finessed that issue yesterday, because of disagree^{ment}
2 ment.

3 DR. LOWRANCE: That wasn't my understanding from
4 yesterday.

5 DR. LEWIS: Oh good, I'm delighted.

6 DR. LOWRANCE: I think it's interesting to
7 compare technologies with each other but I don't think you
8 can decide very much on that basis.

9 DR. LEWIS: But the numbers in the ACRS report
10 as I understand it come in large parts by comparison with
11 technology. Now, we're not saying anything about these
12 numbers but it's implicit in the risk for nuclear set 5 times
13 below the risk for coal and things like that.

14 DR. LOWRANCE: Which in itself is based on
15 cost benefit analysis and --.

16 DR. LEWIS: Well, to public acceptance is not
17 really a cost benefit analysis because the costs of coal
18 in terms of risks are only beginning to be understood.

19 In this conversation I think we're assuming that
20 the whole thing is going to be done a rational way and
21 I applaud it. I don't want to stop it.

22 MR. LEVINE: I don't see anything wrong with
23 setting the basic numbers on a comparative basis but then
24 doing cost benefit analysis without those basis?

25 I don't see anything illogical about that.

1 MR. BURSTEIN: I guess we're straying a little
 2 bit from the question but it seems to me that ALARA by
 3 definition is as we have said involves this cost benefit
 4 trade off and as such to me really has no place in a
 5 safety goal. If you were going to talk about setting a
 6 maximum level of exposure for occupants in that industry,
 7 without reference to the benefit aspect, it seems to me
 8 that that's more consistent with the safety goal.

9 Philosophically I'm troubled with the idea of
 10 making ALARA a safety goal.

11 MR. LEVINE: I would rather word it as a cost
 12 benefit requirement.

13 CHAIRMAN KOUTS: The logic of it is essentially
 14 this. You have a set of safety goals which are structured
 15 according to numbers which have to be met. It comes a
 16 proposal to build a plant with all the information necessary
 17 to do the judgement. You determine that the licensees,
 18 the proposed licensees application fits all the criteria.
 19 This is part of the process. You do the review and sure,
 20 it meets the safety goals. Then you do another analysis
 21 which says inspite of his meeting the safety goals, he can
 22 still do a cost effective improvement beyond this in plant
 23 safety applying ALARA criteria. He would then have to do
 24 that. This is what the inclusion of an ALARA requirement
 25 would be.

1 MR. BURSTEIN: Again we're talking between the
2 lower limit and the --. And you're talking again about
3 a cost benefit increment and I personally think that
4 gets you back into the arguement. Right back into the
5 arguement again and defeats the purpose of setting a
6 specified limit.

7 CHAIRMAN KOUTS: That certainly goes beyond the
8 specified limit.

9 MR. BURSTEIN: I think that that part of a table
10 in my judgement doesn't belong there. As a safety goal.

11 CHAIRMAN KOUTS: How many people think there
12 should be an ALARA?

13 MR. BURSTEIN: There shouldn't be?

14 CHAIRMAN KOUTS: Should.

15 DR. BEYEA: I do. I think there should be.

16 CHAIRMAN KOUTS: And opposed?

17 There seems to be a general view that there should
18 not be an ALARA Limit.

19 I guess the point of view there is once you
20 determine how safe enough safe really is, and you build
21 to do it, then you're safe enough. This is the conclusion
22 with one hold out.

23 MR. LEWIS: I do think that in the course of
24 evolution if there are real changes in our understanding
25 of the risks then adjustments may need to be made in the goals

1 and the issue of how you grandfather older goals has to be
2 made on a judgemental basis in terms of the integrated
3 societal risks, but certainly things will change. It is
4 a dynamic environment.

5 DR. JOKSIMOVIC: And one of the things people are
6 saying is that if we do institute the safety goals, they
7 should be in a foundation of a period of time. -- the law,
8 -- three years is what I read somewhere.

9 CHAIRMAN KOUTS: The next point I'd like to take
10 up is how risk aversion is built into this model.

11 Risk Aversion is built into this model as far as
12 I can determine in only one place. And this is in societal
13 risks where you do an integral over all accidents, probability
14 times consequences to an alpha power. And the alpha means
15 risk.

16 DR. JOKSIMOVIC: Only for the -- effects.

17 CHAIRMAN KOUTS: Only for the early effects.

18 MR. LEVINE: But there's a risk aversion built
19 into the relationship between earlies and latents also.
20 A factor of 5.

21 CHAIRMAN KOUTS: In the early versus late but
22 no risk aversion on the late in the sense of what -- was
23 just saying.

24 MR. LEVINE: They're viewed differently, that's
25 all. Not one for one.

1 CHAIRMAN KOUTS: There certainly is a risk aversion³³¹
2 built in connected with the size of the accident, and the
3 early societal effects. And there really are a number of
4 options for the ways to build in that kind of risk aversion
5 or an early versus late aversion to risk; perhaps other
6 ways by which risk aversion could be built in.

7 MR. LEVINE: Or risk aversion to nuclear power.

8 CHAIRMAN KOUTS: Or risk aversion to nuclear
9 power through some sort of criterion that nuclear power
10 has to be safer than competitors, or something like that.

11 DR. LOWRANCE: For the record, Mr. Chairman I
12 wonder if you would define risk aversion. That's a jargon
13 term that probably is not widely understood.

14 CHAIRMAN KOUTS: I don't know if I can make it
15 general, but would you like to give is one?

16 MR. BERNERO: Risk aversion is the mechanism
17 by which the tolerable risk is decreased as the level
18 of consequences increases in the usual practice.

19 CHAIRMAN KOUTS: That's only one application.
20 There are other definitions.

21 DR. LEWIS: Can I make a try at one?

22 Risk aversion is referred to take into account
23 the presumption which may even be true, that society does
24 not like a large number of people to be killed at once and
25 in taking that into account, the aversion is never meant that

1 it is an aversion. And in taking that into account one
2 decides to somehow measure large accidents in clumps as
3 costing more than integrated small accidents.

4 MR. LEVINE: Another definition of risk aversion
5 is that any new technology will be somewhat more suspect
6 with people than existing technology and therefore should
7 be treated differently.

8 DR. LEWIS: No, I don't think so. That's not
9 the sense in which it is used here.

10 DR. LOWRANCE: As I suspected, there are even
11 here around this table different view of what risk aversion
12 means.

13 MR. LEVINE: I'm trying to talk about the ways
14 very different people use it.

15 MR. BERNERO: I would just like to make the point
16 that the ACRS report includes risk aversion in the sense
17 that I tried to define it which shows basically the question
18 should there be another rheostat on the panel that depresses
19 risk in total and the level of consequences go higher rather
20 than just say 50,000 people a year from automobiles and
21 50,000 accidents is the same as 50,000 people a year from
22 something else and one accident.

23 MR. LEVINE: I think the only reason the ACRS has
24 to put a risk aversion factor in their goals is because they
25 in all other aspects use at least on health effects use average

1 values. And if you in fact set a risk in safety goals that
2 included a comparison with accidents that covered both
3 large and small consequences as a function of probability,
4 you would get that automatically and if you then derived
5 average values from that formulation, they would include
6 the risk aversion factor. And you wouldn't need to spell
7 it out separately.

8 CHAIRMAN KOUTS: Well, I'd like to propose one
9 conclusion that we might draw and that is including risk
10 aversions attached to large accidents as a reasonable aspect
11 would be.

12 DR. JOKSIMOVIC: I think we may wish to debate
13 also whether how ---- is appropriate for latent effects.

14 CHAIRMAN KOUTS: Yea, but let's take the first one.

15 DR. LEWIS: I would like to support the use of
16 an enhancement term for large single accidents and decry
17 the use of the term risk aversion for it, because the damage
18 done to society by a single large accident is greater than
19 the sum of many small accidents for lots of reasons of which
20 we've seen some. And therefore you ought to charge the
21 system more if it has a potential for a large accident
22 but not because society is more averse to large accidents
23 so I'd like to support the factor and decry the term.

24 Do you like that?

25 DR. LOWRANCE: We agree.

1 DR. LEWIS: Done, done.

2 CHAIRMAN KOUTS: What are you going to call it?
3 What are you going to substitute?

4 DR. LEWIS: People always say if you don't like
5 this, do you have a better offer and I say that's never
6 a fair question.

7 CHAIRMAN KOUTS: Any -- how do other people feel
8 about this?

9 DR. LOWRANCE: I agree.

10 MR. LEVINE: Sounds reasonable.

11 CHAIRMAN KOUTS: Now, about the next question.

12 MR. LEVINE: We were endorsing the use of an
13 alpha factor in this statement.

14 CHAIRMAN KOUTS: Not necessarily an alpha factor.
15 It can take another mathematical form.

16 DR. LOWRANCE: There are other non-linear forms
17 than the alpha factor.

18 It doesn't help the regulator very much though,
19 until you've talked about how disproportionate you want that
20 factor to be.

21 CHAIRMAN KOUTS: Then we get into numbers.

22 DR. LOWRANCE: I would just point out that we
23 didn't solve the conceptual problems very much.

24 DR. LEWIS: The continuum ranges up to unity,
25 doesn't it? Our camel got his nose in the tent. But I think

1 that determining the alpha factor is very important if it's
2 to be an alpha factor or a logarithmic scale or something
3 like that, is very important for the regulator, but so is
4 the choice of every other number passed by in this effort
5 and I think that in the end somebody, probably not this group,
6 is going to have to work very very hard to find reasonable
7 numbers.

8 CHAIRMAN KOUTS: Yes.

9 DR. BEYEA: I want to make a comment on what
10 kind of effect this may have on the regulatory process.
11 If you did make your alpha very very large, or some other
12 number in your formula very large, then it seems to me
13 you would ultimately at some point move toward smaller
14 reactors. Individual reactors being much smaller with
15 a much smaller amount of release of radioactivity which
16 could be released so that there is a possible impact from
17 a non-linear formulation on the design of the plant.

18 MR. LEVINE: I think if you made alpha very
19 large you would not build any nuclear power plants.

20 DR. LEWIS: Or anything else for that matter.

21 DR. BEYEA: What if you dropped the inventory
22 by 10?

23 MR. LEVINE: I don't think people would build
24 those kinds of reactors.

25 DR. BEYEA: Well, suppose you did. Maybe they

1 wouldn't.

2 CHAIRMAN KOUTS: This I assume is what we just
3 talked about refers to use of -- I don't know what to call
4 it, I'll still call it risk aversion.

5 MR. SALISBURY: Risk scale factor.

6 MR. BERNERO: Severity scale factor.

7 DR. LEWIS: Scale penalty or assigned penalty.

8 CHAIRMAN KOUTS: Or immediate. Now how about
9 this question which Vojin raises concerning latent effects?

10 MR. SALISBURY: I would think you would want
11 a scale factor there, too. Greater than 1.

12 CHAIRMAN KOUTS: You think that an accident which
13 would lead to 10,000 latent cancers would be worse than
14 say 10 accidents each associated with 1,000 latent cancers?

15 MR. SALISBURY: Yes.

16 DR. LEWIS: I think so, too.

17 Because, inevitably it effects a particular
18 region and as such it has concentrated interlocking social
19 effects.

20 CHAIRMAN KOUTS: It is spread out over time.

21 DR. LEWIS: It is spread out over time, that's
22 right, so you don't have as much but it's a little bit
23 different.

24 CHAIRMAN KOUTS: Yes.

25 MR. LEVINE: It's spread over 30 years and it's

1 spread over a large number of miles, a very large number of
2 miles.

3 DR. WALD: And it's spread over a large base of
4 non-radiation cancer. I don't see the additional societal
5 impact.

6 DR. LEWIS: I agree it's not large, but I can
7 see a little bit of an extra things affecting more families
8 and more neighbors and more neighborhoods. It's intangible
9 and it's not very large. That's for somebody else to
10 work out but I can see a possible affect there.

11 MR. BERNERO: May I suggest that there's two
12 parameters together because the calculation tracks both
13 of them more or less together, property damage and latent-
14 ness.

15 DR. LEWIS: Yes, property damage, too.

16 DR. JOKSIMOVIC: Property damage is not proposed
17 in the ACRS report.

18 MR. BERNERO: And it should not be.

19 CHAIRMAN KOUTS: Well, we haven't taken up the
20 things that are not in it yet. What's the conclusion there?
21 That you do want a non-linearity also here, but it need not
22 be as strong.

23 DR. LEWIS: I seem to be the only one who would
24 like one. I agree that it might be a weak one.

25 DR. JOKSIMOVIC: I'm with you. I'm the one that

1 offered the -- should be greater than unity. 88

2 CHAIRMAN KOUTS: Should be greater than unity,
3 whatever that means.

4 DR. LEWIS: That's in the alpha concept.

5 CHAIRMAN KOUTS: Within the alpha concept.

6 Any other views?

7 DR. BEYEA: I don't think it's very important.

8 It's a minor question. First of all, the number of latent
9 cancer deaths are not -- they're almost insensitive to a lot
10 of plant parameters that depend on the released quantities and
11 ---.

12 MR. LEVINE: But the probability depends on the
13 design of the reactor.

14 DR. BEYEA: Of the release, but the number of
15 cancer fatalities are mostly correlated to the release
16 magnitude and are not correlated to whether they mention
17 another variable. You don't have this rapid change of
18 1 or 2 deaths to 3000. In a reactor accident you're either
19 going to get thousands of deaths or 10,000 of death or
20 so, it doesn't seem to me that the formulation makes much
21 sense.

22 DR. JOKSIMOVIC: If alpha is high, you would do
23 nothing.

24 DR. BEYEA: You would do nothing?

25 DR. JOKSIMOVIC: Yeah.

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DR. BEYEA: That depends on what your scale factor is. You scale it. You have an alpha and a scaling factor. What are you going to pick as your scale factor? One death?

DR. JOKSIMOVIC: The slope of the curve.

DR. BEYEA: It's a non-linear curve and you have to normalize it at some point.

DR. JOKSIMOVIC: --- that's a line.

CHAIRMAN KOUTS: I think we probably have a -- here. I'll just move on.

The third thing I want to take up is really tied to the way which ACRS proposes to use the criteria and this is it's inclusion of this list certification panel down at the bottom. Now, what they propose is as we talked about it yesterday this whole risk analysis done for each plant. Then you apply these criteria and then you establish you meet these goals.

There is a risk certification panel which is supposed to review the entire process and determine that sure enough, this is a reasonable evaluation of risk and a reasonable test of whether or not the plant meets the objectives and I suppose a concept like that may make sense supposing you use the safety goals in precisely this way. If you don't use the risk goals in these ways, the safety goals in this way, then presumably you don't need a risk certification panel and that's the sort of conclusion

1 I would draw.

2 So if we've come to a conclusion for some time that
3 we shouldn't operate in that manner, then I guess we come
4 to the conclusion that we don't need a risk certification
5 panel.

6 MR. LEVINE: That's right. Fine.

7 DR. BEYEA: Except they will be used for some
8 impact on the regulatory process and it might be useful to
9 have some peer view, some outside review of this process
10 and -- the ACRS would probably be a useful procedure.

11 CHAIRMAN KOUTS: Do you think the ACRS could be
12 a risk certification panel?

13 DR. BEYEA: I think that they have indicated
14 an ability to do such things, yes.

15 MR. BURSTEIN: I guess if you want to go back to the
16 beginning of AEC/ACRS time that was indeed one of the
17 purposes for which ACRS was created. It issued some very
18 initial and early documented reports that really did
19 do a peer review if you will of an application or of a
20 particular problem they were faced with including an on-time
21 review of naval reactor opportunities and designs.

22 CHAIRMAN KOUTS: I did those.

23 MR. BURSTEIN: On that basis, while the mechanism
24 has changed, certainly that kind of a position was there.
25 But getting back to this very important issue that if you

1 formalize this procedure as part of the licensing program,
 2 you're dead in the water. And I think in all due deference
 3 to repeating what we said in the panel session this morning,
 4 it seems to me that we ought to re-enunciate the need for
 5 a or rather the implication of a risk certification panel
 6 and the formalization of that process automatically puts
 7 you into the legal jurisprudence of licensing. And I guess
 8 I have a very sensitized aversion to that sort of thing.

9 MR. LEVINE: I thought we agreed yesterday we
 10 were not recommending that as an --.

11 MR. BURSTEIN: Indeed, and I'm merely re-emphasizing
 12 that.

13 CHAIRMAN KOUTS: Well, Jan is saying this, and it
 14 deserves some kicking around.

15 Suppose you use this risk assessment process
 16 and your safety goals you're talking about to review the
 17 adequacy of these deterministic requirements. Should there
 18 be a risk assessment panel to review that kind of thing?

19 MR. BURSTEIN: There's got to be some mechanism
 20 somewhere, someplace, there has to be some opportunity for
 21 perhaps assuring that the mechanistic criteria do indeed
 22 fulfill the requirements of the safety goals. Now whether
 23 that's done by one vehicle or another I'm not sure is
 24 important but clearly there must be some opportunity for
 25 that exercise to occur.

1 DR. LEWIS: Call it the risk assessment review
2 group.

3 DR. BEYEA: That's what I was going to say, it
4 is a continuous use committee.

5 CHAIRMAN KOUTS: Okay, that's pretty clear.
6 Whatever you call it there has to be some mechanism but
7 it does not have to be a quasi-judicial mechanism like the
8 kind being proposed for the risk certification panel.

9 MR. BURSTEIN: That's my various serious concern.

10 CHAIRMAN KOUTS: I think those are the essential
11 features of what's in the ACRS proposal.

12 Let's talk about what's not in it. Somewhere
13 I've got some sheets of paper.

14 I've got a partial list of things which are not
15 included in these criteria which might have been thought
16 about for inclusion. I might read out what I've got.
17 And you might have some others.

18 The number of people at risk above some amount.
19 So this is a different way of measuring impact.

20 How about the number of people that might have
21 to be evacuated included in some probablistic expression.

22 The ACRS criteria contains nothing on operating
23 crews. Exposures to operating crews.

24 They don't refer to the societal effects of loss
25 of vital industry should that occur. I'm thinking of TMI-1

1 and TMI-2 shut down over long periods of time as typical. 34

2 They include impact of multiple plants only
3 in one aspect involving individual risk. They did not
4 include genetic effects.

5 They do not include normal operation.

6 These are a number of things that are not
7 included in the -- but if I've listed anything that
8 anyone thinks should be in the criteria but aren't.

9 MR. BERNERO: Property damage.

10 DR. BEYEA: You think property damage should
11 be included in the safety criteria?

12 MR. BERNERO: Yes, I think it should.

13 DR. JOKSIMOVIC: External.

14 MR. BERNERO: Yes. Off-site property damage.
15 Third party.

16 And also the one I raised before about an
17 explicit hazard state for off-site protective measures.
18 There are hazard states for the plant but there was no
19 corresponding one for the one I call hazard state 4.
20 Given the large scale release, the probability of death
21 shall be a figure of merit to describe how effective
22 emergency response needs to be. There's no direct index
23 of that in the ACRS goal structure.

24 MR. BURSTEIN: I guess I'm a little confused
25 about what you think the lack -- what are these limits on

1 risks to expose individuals?

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2 MR. BERNERO: They're a product. The risk to the
3 exposed individual is a product of the risk of core melt
4 and the risk of containment failure and the risk that the
5 protective measures won't be successful in preventing the
6 individual's exposure.

7 CHAIRMAN KOUTS: This is not a plant design aspect.

8 MR. BERNERO: Oh, yes it is. It's part of the
9 siting and --

10 CHAIRMAN KOUTS: The evacuation plan?

11 MR. BERNERO: Yes, the evacuation plan structure.
12 I think it's a legitimate --

13 MR. BURSTEIN: Maybe if I use the right source
14 term in these calculations I won't need to worry about
15 this.

16 MR. BERNERO: Well, I'm just saying with the
17 goal structure that exists, it is just not confronted.

18 MR. BURSTEIN: It's confronted in the consequence
19 models that have been written.

20 MR. BERNERO: Yes, but they assume certain
21 evacuation.

22 DR. BEYEA: Is there anything in this goal
23 structure --

24 MR. LEVINE: There's a PRA procedure being written
25 and it's going to tell people how to do these things, and

1 the models.

2 MR. BERNERO: The point I was trying to make
3 is previously we have said that it is, it would not be
4 acceptable to meet the overall goal merely by prevention
5 and throwing away the containment or merely by containment
6 and throwing away the prevention of core value and I raise
7 the question is it acceptable to meet the public health
8 threat goal by the combination of preventing core melt
9 in nice containments and you don't even need an emergency
10 plan.

11 MR. BURSTEIN: Exactly. Absolutely, because
12 otherwise you're back to this idea of ALARA again. You're
13 saying well, if it doesn't cost much to evacuate the
14 people let's move them anyway even if we don't need to.
15 And then you engender some of the kinds of social reactions
16 and impacts that you're trying to avoid.

17 MR. BERNERO: May I then suggest that you would
18 be defining the goal structure in which no credit would be
19 taken for?

20 MR. BURSTEIN: Not necessarily. And I agree
21 again as I said before, you allow me to do the let's say
22 the prevention system the way I think I can engineer it or
23 the mitigation system or their combination in a more effec-
24 tive way and you allow me to use the realistic source term --

25 DR. BEYEA: Which is the realistic source term?

1 MR. BURSTEIN: -- maybe -- whatever we get of --
2 as opposed to --

3 CHAIRMAN KOUTS: It's not allowed yet.

4 MR. BERNERO: I want to know what he meant.

5 MR. BURSTEIN: As opposed to the worst case
6 situation.

7 CHAIRMAN KOUTS: He means what's allowed.

8 MR. BURSTEIN: Then I think maybe in some cases
9 I won't need evacuation. In other cases I may, but if you're
10 going to not credit me with the difference between a Palo
11 Verde and a Zion location-wise, then I think we have a great
12 deal of difficulty with coming up with any limits.

13 DR. BEYEA: First of all, you are credited in
14 this calculation with Palo Verde versus Zion --

15 MR. BURSTEIN: Well, I thought that's what we
16 were trying to exclude.

17 DR. BEYEA: Your societal risk, that's included.

18 MR. BERNERO: No, no. If you had a safety
19 goal that's met, given a large scale release the probability
20 of early fatality is less than or equal to one tenth.
21 Sun Desert meets it without evacuation because nobody
22 lives there.

23 DR. LEWIS: And there's no nuclear plant there.

24 MR. BERNERO: I just raised the point of
25 whether it is appropriate for a safety goal structure

1 since it has an index of performance for core melt prevention
2 and an index for performance of containment success or
3 integrity, should it not also at least consider having an
4 index for performance for off-site protective measures?

5 DR. BEYEA: I would like to say it has to have
6 one. If it does have one at the present time the index
7 of performance is one. In this calculation you assume that
8 the evacuation model works completely. Perfectly. There's
9 no way you can calculate a dose without specifying post-
10 accident behavior, isn't that correct? You have to specify
11 what the people do. And in this approach they assume
12 certain evacuation procedures and they may assume that
13 is what's going to happen.

14 MR. LEVINE: Where do they say that?

15 DR. BEYEA: Because they do a calculation, they
16 have a model.

17 MR. LEVINE: The models used in real risk
18 assessments have a probability distribution on the evacuation
19 model.

20 DR. BEYEA: That's right, so you're assuming
21 some performance index for the evacuation model.

22 CHAIRMAN KOUTS: What they do is work perfectly
23 and imperfectly.

24 MR. LEVINE: Yeah, they don't work very well, in
25 fact.

1 DR. BEYEA: Whatever it is you have a model and
2 you're assuming that --

3 MR. LEVINE: I also have a model for how to
4 design a reactor vessel which is not in this safety goal.

5 DR. BEYEA: It is implicitly because you have
6 a performance index and you have a performance index and
7 you should implicitly state it.

8 MR. LEVINE: What performance index do I have
9 that covers a reactor vessel failure?

10 DR. BEYEA: Because you have a performance index
11 with a probability of less than a certain value.

12 MR. LEVINE: My point is, where do you stop in
13 this manage'?

14 DR. BEYEA: You stop and make explicit, you have
15 to at some point make explicit your assumptions. If you
16 want to put a performance index of one on emergency planning,
17 then okay, say it, that's what you're doing.

18 MR. LEVINE: I don't understand that at all.

19 CHAIRMAN KOUTS: I would take the point of view
20 that there have to be, along with the safety goal which
21 depends on risk assessment, there has to be some sort of
22 prescription on how you do the risk assessment and included
23 in this will be a number of aspects and a number of features,
24 one of which may well be how you treat evacuation personnel.
25 I would expect it to be there. I would not consider that to

1 be part of the safety goal, I would consider it to be part of
2 a calculation you do in order to determine whether you need
3 a safety goal, but it is prescribed. And that's how I would
4 see it.

5 MR. BERNERO: It may be prescribed, but it may
6 be unreal. If the political structure has it --

7 CHAIRMAN KOUTS: It will have to be matched if
8 necessary with other requirements established by NRC.

9 MR. BERNERO: So you would merely address it in
10 another form.

11 CHAIRMAN KOUTS: I don't really think it's a safety
12 goal attached to the design of the reactor or to its
13 initial license, except as another licensing requirement
14 as it is now.

15 MR. BERNERO: I think it has as much stature
16 as the siting requirements of the reactor. It's a part
17 fo the siting.

18 MR. BURSTEIN: Oh, I don't know. I've got the
19 regulation that says unless we have an emergency state
20 plan approved by a certain date you shut off all nuclear
21 plants in that state down.

22 CHAIRMAN KOUTS: But it's not in Part 50.

23 MR. BERNERO: It is. It's derived from Part 50
24 Appendix E, but that merely says that it is a vital part of
25 the defense in depth requirement for the reactor.

1 MR. BURSTEIN: Right, the same as these others.

2 MR. BERNERO: The same as siting or core melt
3 prevention or containment --

4 MR. LEVINE: Or SME Section 3.

5 CHAIRMAN KOUTS: Okay, we have to make a decision
6 about what is included in this and what is put someplace
7 else and what is part of the goal itself and what is part
8 of that which you do to determine whether you meet the goal.
9 In my view, I'd rather put anything associated with evacua-
10 tion, in the prescription, the calculation requirements and
11 in the additional requirements.

12 DR. BEYEA: You assume then that the NRC is
13 making sure that evacuation will work and you're assuming
14 they will make quality assurance work.

15 MR. LEVINE: They have a regulation now to make
16 evacuation work.

17 MR. SALISBURY: The evacuation shall work. Period.

18 MR. LEVINE: Isn't it in Part 50 --?

19 DR. BEYEA: What if the success of evacuation is
20 a crucial element in achieving the risk factor? I guess
21 that's what worries me. It's not too important, if it's
22 easy, if the methodology you assume in calculating these
23 things is sort of, requires very loose evacuation models then
24 I don't worry. If you keep people for 24 hours and get a
25 calculation that way, then I'm not going to worry about it

1 because I think that can always be met. But if you're 151
2 going to assume that people start getting a warning 15 minutes
3 after the accident and make certain assumptions, then I may
4 be worried that that is not a reasonable assumption to make
5 in the calculation.

6 CHAIRMAN KOUTS: I would expect you might in a
7 case like that make some representation over which would be
8 aimed at lowering some of the numbers, put in some more ---
9 or something like that.

10 DR. BEYEA: As long as we note that as a concern
11 I'm not going to --

12 DR. JOKSIMOVIC: Are you proposing a condition of
13 probabilities?

14 MR. BERNERO: Me, yes. As a candidate Hazard
15 State 4.

16 DR. JOKSIMOVIC: How would you verify that?

17 MR. BERNERO: Analytically, just like you verify
18 Hazard State 3. In fact, you might be better off, you might
19 more easily do a drill over a little sector for Hazard
20 State 4 than you could for Hazard State 3.

21 CHAIRMAN KOUTS: Could we have some indication
22 of opinion on this matter?

23 DR. WALD: There probably is a real problem here
24 if credit is taken in establishing the probability on the
25 most exposed individual in the population because in the real

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1 world it's very clear that the mitigation plans, not just
2 evacuation but distribution of medications if necessary
3 and some of the other plans are variable in the likelihood
4 of accomplishment and it varies from bad to worse and if
5 there's a real credit taken for these mitigation procedures
6 in arriving at the other limits, I think this is an important
7 point and as a safety goal, it needs to be stressed from the
8 standpoint of what it may accomplish for public health
9 and safety.

10 MR. LEVINE: The models term the use of the effec-
11 tiveness of the evacuation which are based on studies of
12 real world evacuations that have occurred, plus a factor
13 of 2 change in early fatalities.

14 CHAIRMAN KOUTS: A factor of 2?

15 MR. LEVINE: Two which is well within the error
16 of calculation so it's not really important.

17 DR. WALD: How about the latents?

18 DR. BEYEA: I would like to comment on that.

19 MR. LEVINE: It doesn't effect the latents.

20 DR. BEYEA: That's when you assume --

21 DR. WALD: I'm talking about mitigation when you
22 include potassium iodide for example.

23 MR. LEVINE: I'm just talking about evacuation
24 purposes. There is also a cost benefit analysis done by
25 Bob's people on potassium iodide which shows not to be very

1 cost effective, and most of the latents come from Cesium
2 anyhow.

3 DR. BEYEA: I would like to make a number of comments
4 about the comments that were made.

5 First of all, the evacuation model which I believe
6 Saul was talking about is the Wash-1400 model, is that what
7 you're referring to?

8 MR. LEVINE: Yes.

9 DR. BEYEA: Ineffective evacuation means no one
10 spends more than 4 hours on contaminated grounds. That is
11 not my definition of ineffective evacuation and so I think
12 that should be specified.

13 Secondly, the cost effectiveness of potassium
14 iodide was done assuming a melt down probability and there
15 are differences of opinion on the meltdown probabilities.
16 And I think that Cesium does account for the 3/4's or
17 so latent cancers but that the other isotopes do account
18 for some. Comment ended.

19 MR. LEVINE: Let's talk about core melt probabilities.
20 There are now 3 risk assessments I know have been done since
21 Wash-1400. They're all getting within a factor of two of
22 the Wash-1400 core melt probability.

23 DR. BEYEA: And that means that the melt down
24 probabilities of the two reactors is the same?

25 Or does that tell you the people are doing the

1 calculations the same?

2 MR. LEVINE: They're done by independent groups.
3 They're all different, 3 different groups.

4 DR. BEYEA: Using the same event sequences?

5 MR. LEVINE: No, they're doing the whole darn
6 study from start to finish.

7 DR. BEYEA: We're just going to have to disagree
8 on that. As I look at the footnote and the Lewis Report
9 and there are other people besides myself who just do not
10 have the confidence that these calculations will ever tell
11 you melt down probability. We believe that they're very
12 useful calculations to do and they tell you a great deal
13 about how to make a reactor safer but that does not mean
14 they are actually useful in terms of meltdown probability.
15 Which is why I want a safety factor.

16 DR. LEWIS: Let's keep the record straight about
17 what our report says.

18 DR. BEYEA: The footnote in the report.

19 DR. LEWIS: The footnote was a minority of one,
20 so don't quote it --.

21 CHAIRMAN KOUTS: Now, maybe we can come back to
22 this question of whether there should be a 4th hazard
23 state.

24 DR. MAZUR: It seems to me that there is -- it has
25 the nature of details somewhat like our numbers and that is

1 we have decided I think in principle there should be Hazard
2 States but the specific number of them and which are the
3 hazard states seem to me to be rather specific details almost
4 on the order of numbers should be assigned to the risks.
5 So I would be inclined to put that in the same category.

6 DR. LEWIS: That's in the draft report I wrote.

7 CHAIRMAN KOUTS: I think you've solved our problem.
8 How about genetic effects?

9 DR. MAZUR: Could we have some comments from the
10 medical expert of that adds meaningfully to the assessment
11 of the whole thing? Once you've started counting the
12 immediate deaths and the cancers?

13 Is it useful or not to start adding, you know,
14 one could add morbidities as well as mortalities and
15 obviously it comes to the point of diminishing returns. So
16 is it useful or not useful do you think?

17 DR. WALD: I think it probably verges too much
18 into the theoretical because considering our real world
19 population in Hiroshima and Nagasaki 100,000 survivors with
20 no demonstrative genetic effect in their offspring. It
21 probably would not add.

22 MR. LEVINE: Do you recall the numbers we got
23 in Wash-1400?

24 DR. WALD: I counted on you for that.

25 MR. LEVINE: 170 for the worst case compared to 8000

1 in the same population, but 170 was only for the first
2 generation so you'd have to add that to the succeeding
3 generation.

4 DR. WALD: I don't see that's really helpful.

5 CHAIRMAN KOUTS: To calculate what happens after
6 the first generation --

7 DR. MAZUR: Well, it certainly establishes new
8 territory for safety considerations.

9 DR. JOKSIMOVIC: What is the definition of
10 genetic defects, by the way?

11 DR. WALD: It's very complicated. That's one of
12 the problems. Depending on where you cut off on severity,
13 the numbers vary, but I mean it could be anything, any
14 detectable difference in the shape of an earlobe to major
15 birth defects.

16 DR. JOKSIMOVIC: How do you attribute that to
17 radiation rather than something else?

18 DR. WALD: A problemistic approach.

19 MR. LEVINE: It's a man-rem approach.

20 DR. JOKSIMOVIC: When you talked about the victims
21 of Hiroshima and Nagasaki, you said there was no demonstrable
22 genetic effect, then what is it they were looking for?

23 MR. LEVINE: That means statistically they were
24 not different from the rest of the population.

25 DR. JOKSIMOVIC: Then I would say they're not

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observable.

MR. LEVINE: That's what he said.

DR. WALD: Demonstrable is the word I used.

DR. JOKSIMOVIC: Then obviously we can't have something like that in the safety goal.

CHAIRMAN KOUTS: We have latent cancers and they're not --

MR. LEVINE: Demonstrable either.

DR. WALD: They're calculable.

MR. LEVINE: You can't identify --

DR. WALD: There's no increase --

MR. LEVINE: You would hardly notice their occurrence.

DR. WALD: There's no increase in genetic abnormalities in that population as compared to control and the trends, the chances which might have been expected on the theoretical basis -- sex ratios change in the offspring, none of those were significantly altered.

DR. JOKSIMOVIC: Is there an example of increased cancer rates which can be attributed to radiation?

DR. WALD: In Japan? Oh yes, definitely.

DR. JOKSIMOVIC: That's observable then?

DR. WALD: Definitely. You can't tell in the individual case that that one was due to radiation and the next one wasn't but definitely --

1 DR. JOKSIMOVIC: Japan versus Yugoslavia for
2 instance -- you can go to a population and you can show
3 the effect of Hiroshima and Nagasaki and you can say that
4 the cancer incidence is higher because of the radiation
5 attack.

6 DR. WALD: There's a dose response relationship
7 then for the short latent period cancers like leukemia,
8 there's a temporal relationship which allows you to say that
9 these are attributed to the radiation exposure.

10 DR. JOKSIMOVIC: and that's the only example?

11 DR. WALD: No, there are others, but that's the
12 largest that involves a population that was "normal" at
13 the time of exposure.

14 DR. JOKSIMOVIC: What reports cover that?

15 DR. WALD: There's a whole series of reports.
16 I guess the National Academy of Sciences biological effects
17 of ionizing radiation report number 3--

18 DR. JOKSIMOVIC: 303?

19 DR. WALD: 303 has a good summary.

20 CHAIRMAN KOUTS: There was a series put out by
21 the Atomic Bomb --

22 DR. WALD: Yes, it was a continuing series of the
23 National Academy Atomic Bomb Casualty Commission but the
24 summary, 303 is the most recent summary of them.

25 DR. BEYEA: I'm also not overly concerned about

1 including genetic effects or not including them. Again
2 it's very difficult to know what the dose response function
3 is for genetic damage.

4 Also, it's my understanding that the effects
5 scale together so that the cancer, latent cancer goal is
6 a surrogate for genetic goal -- except to the extent that
7 the populations are different, the genetic effects may
8 last more than one generation.

9 CHAIRMAN KOUTS: I don't think that's true.
10 I don't think these scale. The genetic effects are
11 quadratic effects.

12 DR. BEYEA: Is that true?

13 DR. WALD: The most genetic effects are latent
14 and you only get the genetic effect appearing in the
15 offspring and you have a combination of two of the genetic
16 effects, in both parents. Recessive.

17 DR. LOWRANCE: That's not strictly true.

18 DR. BEYEA: There are some for which that's
19 true and some for which that's not.

20 CHAIRMAN KOUTS: This is a common way of putting
21 it.

22 DR. BEYEA: Doesn't WASH-1400 use a linear
23 response for genetics?

24 MR. LEVINE: Yes.

25 DR. BEYEA: I've never known anyone to use a non-

1 linear effect for that.

380

2 DR. WALD: Mutation changes in the germ cells
3 in material is one thing. The expression in terms of
4 genetic visibility in the individual --

5 MR. LEVINE: Is another.

6 DR. WALD: Most of the defects are recessive which
7 means that they won't show up unless both parents are
8 contributing which then changes the --

9 DR. BEYEA: It still is linear.

10 DR. WALD: I don't think it will contribute.

11 CHAIRMAN KOUTS: Since nobody is pressing --

12 DR. BEYEA: Let me just finish the comment.

13 Also, if you do the calculations the total number
14 of genetic effects averaged out 5 generations or so, would
15 comparable to the cancer deaths so you're talking about
16 as I understand it by knowing genetic effects, would be
17 comparable to a cancer death, so you're talking about as
18 I understand it by knowing genetic effects, assuming
19 the effect is not important, -- that factor 2 in the total
20 number of health effects if you do include genetic effects.
21 It is not major. From a public relations point of view,
22 however, it might be useful to discuss it.

23 DR. MAZUR: We included that as a --

24 DR. BEYEA: Well, I don't think public relations
25 is necessarily a bad word, but from the public information

1 point of view it might be useful to discuss genetic effects
2 and why they are not especially needed to be discussed
3 specifically in a safety goal.

4 DR. JOKSIMOVIC: They haven't been observed.

5 DR. BEYEA: The mutations by radiation have
6 certainly been observed. The question is how important
7 the effect is and as I understand it the data was considered
8 much more important years ago than it is considered now.

9 DR. WALD: Theoretically, they're there if the
10 population is large enough and if the right matings take
11 place and if the people that have damage to their germ
12 cells reproduced at all -- there are a lot of ifs.

13 DR. JOKSIMOVIC: Allowing for the condition of
14 probability.

15 DR. LEWIS: Isn't there a general consensus that
16 the social impact of genetic changes is lower than the
17 social impact of the carcinogenic changes? Among the
18 people I've talked to they seem to recognize the existence
19 of a genetic change and then for many reasons the number of
20 them that are recessive and all those other things tend
21 to say that if you can limit the cancer producing impact
22 you can limit the genetic ones as well. Is that fair?

23 DR. WALD: That's reasonable.

24 CHAIRMAN KOUTS: Can we leave it?

25 Does anyone have anything more on this subject?

1 Are there any other --? I've been going down 100
2 this category of things which are not included in the ACRS
3 proposal for a safety goal and I guess we have identified
4 one which might be added. Are there any others you'd like
5 to discuss?

6 MR. BERNERO: Property damage wasn't discussed,
7 was it?

8 CHAIRMAN KOUTS: Yes, we put it in.

9 MR. LEVINE: We put property damage in? I don't
10 recall the discussion at all.

11 CHAIRMAN KOUTS: I'm sorry, I must apologize.

12 DR. MAZUR: Did we discuss equity?

13 CHAIRMAN KOUTS: No, we did not.

14 Allan would like to inject equity as a possible
15 feature --

16 DR. MAZUR: Risk criterion. It at least should
17 be given some consideration as a safety goal.

18 DR. LOWRANCE: What form did that take?

19 DR. MAZUR: If one thinks of the basic safety
20 goal as saying there should be a minimum amount of risks
21 say, to a population, to a person or a population. An
22 equity consideration would modify that to say that within
23 that differential of risk between two people in two classes
24 of people should be either minimized or compensated.

25 DR. LEWIS: That would drive you, wouldn't it, I

1 just want to understand what you're saying, I understand what
2 you mean: if you were serving a large area with electricity
3 therefore you would prefer to provide with many small plants
4 so that the risk to all the people receiving the electricity
5 is equalized as well as possible? Is that a consequence
6 of what you're suggesting?

7 DR. MAZUR: That's one way one could address it
8 and in effect, it surely would be the only or most meaningful
9 way of addressing it. Another way of addressing it would
10 be that one makes sure that the level of risk is sufficiently
11 small so the impact between the highest and lowest is
12 just negligible or not terribly interesting.

13 Another way is Chancey Starr's way and that is
14 effectively the issue of what we call side payments and
15 another way that Dave has mentioned is that it may in
16 fact be that there isn't that equity problem with nuclear
17 power plants. There's something of an -- issue there if
18 one starts off with the recognition that I think is non-
19 debateable that risks in this society are inquitably
20 distributed.

21 For example, the poor get more of them than the
22 richer and it may be that the way nuclear power plants
23 are sited, in fact that rectifies some of the existing
24 inequities and work your way around it, you know, maybe you--
25 the fact you leave them out of the urban ghettos helps things,

1 so I really don't have an answer for that. I just feel that
2 it is an issue of substantial concern and I would footnote
3 it that remembering the strangeness of our discussion I got
4 little weird looks when I raised it yesterday, apparently
5 it came up quite independently in the other discussion
6 groups as well as an issue.

7 DR. JOKSIMOVIC: What are the precedents for
8 this type of approach? I know Chauncey Starr told us
9 last time that he -- give some reduction the rates to people
10 living nearby the nuclear power plant. But I haven't
11 hear one -- is there somebody near the airport who will
12 get --

13 DR. MAZUR: There's a de facto situation and
14 that is people who live in a community near a plant get
15 a rather large tax base from the plant but it's not
16 planned that way. It's a de facto and turns out to be a
17 kind of an equity. Actually, it's probably an over-equity --
18 it probably shifts the equity the other way, so I really
19 don't have an answer to your question.

20 I don't know of a particular instance where
21 this was planned. I can simply report that it is an issue
22 of substantial concern. In fact, my lateness to arrive
23 after lunch was due to the fact that I was stranded at
24 Stanford without a taxi cab in discussing some of these
25 issues with a philosopher there and he independently raised

1 the equity issue.

2 DR. JOKSIMOVIC: It is a popular subject.

3 DR. MAZUR: In a group of people who worry about
4 this it's a popular subject.

5 CHAIRMAN KOUTS: Bill?

6 DR. LOWRANCE: Such things as disaster insurance
7 are in the same effect, -- make compensation of this sort
8 isn't that true?

9 Had TMI really been a much worse accident, had
10 there been substantial releases and -- all damage to persons,
11 I have no question that the Federal Disaster Relief Program
12 would have compensated them, the survivors.

13 If this were a routine thing in some very nuclear
14 future, I can't believe we wouldn't have the equivalent
15 of black lung disease, I mean black lung insurance which
16 we currently pay to 115,000 Americans.

17 DR. MAZUR: The Price-Anderson argument of course
18 is that counters what might be an equity producing effect.

19 DR. LOWRANCE: The Price-Anderson is not the
20 only insurance for the industry, and it's not the only
21 form that can be brought into play after an accident.

22 MR. LEVINE: I wonder are there examples in the
23 real world where equity payments or compensations have been
24 made for very low risks?

25 DR. MAZUR: Yes, my Aunt happened to argue a case

1 before the Illinois Supreme Court, if you want some family,
 2 where something like that happened. I'm sure there were
 3 many legal cases where there were payments actual y, without
 4 certainty, even that a given instrument or company causes
 5 but just showing the reasonable likelihood that it may
 6 have happened.

7 DR. LOWRANCE: Several of the recently settled
 8 DES exposure cases are of that kind in which women cannot
 9 reconstruct for the record even what brand of DES they took
 10 20 or 30 years ago.

11 DR. MAZUR: Love Canal seems to have some aspect
 12 of latent --

13 MR. BURSTEIN: Is that not compensation for
 14 actual damages?

15 DR. MAZUR: That's right.

16 MR. BURSTEIN: As opposed to compensation for
 17 different exposure to risk?

18 DR. MAZUR: One is an after the fact -- taking the
 19 harm as opposed to taking the risk without getting the harm.

20 DR. BEYEA: The only example I know of is the
 21 new Massachusetts law for citing of hazardous facilities,
 22 particularly toxic waste disposal facilities and the new
 23 law is the developer must go into the community and negotiate
 24 with the community as to what he will do to get them to
 25 go along with that. The problem is the law hasn't been

1 operative yet so we don't know how it works but there is
2 a law now on the books in one state.

3 MR. LEVINE: What's the level of risk there?
4 I really want to talk about low probability.

5 DR. BEYEA: Isn't that a low probability of release
6 from a toxic facility to dispose of waste?

7 MR. LEVINE: Radioactive waste?

8 DR. BEYEA: No, it's chemical waste.

9 MR. LEVINE: Well, I don't know what the risk is.

10 MR. BURSTEIN: About the only thing I know of that
11 may have some approach to this is what happens when you make
12 payments for the taking of a right of way for a transmission
13 line in which you are really paying for the inconvenience
14 of having a tower perhaps, but a line that goes over your
15 property under which you cannot build.

16 Now that really is some advance compensation for
17 some kind of inconvenience.

18 DR. MAZUR: That's the eminent domain.

19 MR. BURSTEIN: Yes, and in a title of eminent
20 domain there have been some actual of lands for highways
21 for public purposes, but here where the land is still used
22 and useful to the farmer where he can plant his crops or
23 something but he has some inconvenience and perhaps some
24 restriction for which he is compensated and there is an
25 equity element involved in that kind of a thing but it's not

1 specified as such. It's specified really as a contribution³⁴
2 for damages and not for exposure to potential risk.

3 DR. WALD: Question. If there were an equity
4 payment, say Starr's model would that have any impact on
5 subsequent claims in the event something did happen?

6 MR. BURSTEIN: Speaking as a non-lawyer, yes,
7 because you've already accepted the risk. And you'd get
8 paid for it.

9 DR. MAZUR: It depends a little bit on the words
10 of the language. I'm just raising a consideration and there
11 are a number of ways of addressing it and if -- the distinc-
12 tion Saul made is a very good one about the issue are you
13 being paid to take the risk or are you only being paid
14 afterward once it turns out you suffered from it? And
15 I could see that if one took a safety goal -- the equity
16 considerations, how one responded to it might be of differ-
17 ent forms. It may just be if there were an accident and
18 everybody who got cancers even though we don't know whose
19 cancers were associated with the particular accident might
20 get some kind of payment. On the other hand it might be
21 that you were only paid for taking the risk even if there
22 never was an incident and that is people who live near
23 a plant might have I guess the Starr proposal of lower
24 electric rates.

25 . On the other hand, there might be totally different

1 kinds of solutions altogether. I think from the sociological
2 sensible viewpoint we are really dealing with risk levels
3 that are sufficiently small that the difference between the
4 ones who take the high risk and the ones who take the low
5 risk is small enough that that might in itself handle the
6 equity issue, but I wouldn't foreclose it. It seems to me
7 that that's a determination to be made.

8 DR. BEYEA: I have a point clarification here.
9 If the equity issue is taken care of in the safety goal,
10 then you don't need the payments. It's only when the
11 equity issue is not taken into account in the safety goal
12 that you're going to have to make compensations, isn't
13 that correct?

14 DR. MAZUR: No, I think it depends on how the
15 goal is stated. If I just state the equity goal in a very
16 elemental primitive way, and it says that no person or
17 class of persons should have to accept risks that are
18 acceptably higher than another person or class of persons
19 takes that that's the goal.

20 Now how one acts out that goal, how one meets that
21 goal --

22 CHAIRMAN KOUTS: Compensation doesn't change, it
23 doesn't meet that goal.

24 DR. MAZUR: You're right. It might not. I'm sorry.
25 I didn't state it properly. If a person or class of persons

579

1 accepts a successively higher risk than another person or
2 class of persons, without compensation then the goal is said
3 to be not met. That is the goal. How one implements that,
4 you see, is quite open.

5 DR. BEYEA: I think that's a mixture of goals
6 but I guess you could define it that way.

7 DR. MAZUR: I don't think it's a mixture of goals.
8 It does take into the issue what the risk is, but the goal
9 here is how risk is distributed. That's the emphasis.

10 CHAIRMAN KOUTS: Hal Lewis?

11 DR. LEWIS: I understand what Allan is saying
12 and I'd like to speak against it if I may.

13 DR. MAZUR: But at least you know what I said.

14 DR. LEWIS: That's progress, but whether it's
15 progress will be judged by future generations.

16 I'd like to speak against it because where some-
17 thing of value is taken from somebody by the government or
18 utility or a large company, you know, without their consent
19 or without their ability to prevent it, clearly they should
20 be compensated.

21 Where a power line is put over my property and it
22 reduces the value of the property to me, I should be
23 compensated, no question.

24 The idea that if a major accident producing
25 1000 cancers according to the best estimates from the experts

1 at the time happened, but you don't know which of the 100,000
2 people it was, 100,000 cancers it was, heck yes, compensate
3 them all because you're never going to be able to tell. But,
4 clearly damage has been done if that's the judgements of the
5 estimates at the time.

6 But to go further where damage has not been done
7 in the conjecture of damage, I'm afraid, although I under-
8 stand the arguement for it, afraid it's a never-ending g--
9 because of the complexity of the society.

10 If I lived near Ila Vista in Santa Barbara which
11 I do not, that's pretty risky. There are just so many
12 things around my house that expose me to many risks due
13 to a multitude of causes than somebody who lives down the
14 street who in turn has his multitude of risks, that if we
15 were to endorse this I think it would just be another step
16 toward making this an extraordinarily self-centered and
17 litigious society which I'd just as soon avoid.

18 What I don't think we should do around this
19 table is settling the issue by arguing with case law is
20 what we've been doing.

21 DR. MAZUR: Let me just respond to you Hal and
22 that is the arguement is a good one and I could make
23 the same arguement about making special safety goals for
24 nuclear power. I am surrounded by risks that we're not
25 making special safety goals for. So why are we doing it in

1 this case? Well, by the same token we're surrounded by
2 risks that we don't make special equity issues for so
3 why do it in this case? The answer is the same.

4 DR. LEWIS: I would like to argue the case on
5 the merits of doing it and I'm expressing myself against it.
6 I'm saying that I'm against it. I would like to us not
7 make the decision according to whether there are precedents
8 or case law, but in terms of whether it makes sense as a
9 societal objective to start down this road everytime we
10 do something of providing something special for people
11 who may be threatened by it.

12 There's a way in other areas that we know, and
13 now I'm arguing case law in which it usually happens when
14 the value of the property goes down and if you can demonstrate
15 that the value of the property goes down you have a case
16 against the people who did that to you and that's a
17 genuine damage although it's based on conjectured risk
18 but still it's a genuine and immediate damage. I under-
19 stand that, but if the value of the property in the
20 vicinity of the nuclear plant doesn't go down but in
21 fact goes up because the tax rate goes down, then I find
22 it very hard to throw in more on the basis of conjectured
23 injury, bearing in mind that if there's a real injury, we
24 have a social responsibility to get in there.

25 DR. MAZUR: I would agree with you. If indeed

1 there isn't an equity problem, I certainly wouldn't try
2 and make it and create an equity. However, I don't know that
3 that's the case and in an A-priority there seems to me quite
4 likely that there is an equity issue.

5 DR. LEWIS: No, no, I'm not denying the people
6 near a plant are more at risk than the people far from the
7 plant. That is true.

8 DR. MAZUR: Well then?

9 DR. LEWIS: I think that's common to so many
10 other things that to start doing them one at a time instead
11 of just recognizing that we have a complex society which
12 on one issue I'm more at risk than you and on another
13 you're more at risk than I am and it's only when it gets
14 well above the noise level that we start negotiating
15 because at that point I'm beginning to lose property
16 or things of value, and if I can demonstrate the loss of
17 a thing of value which in this case should be a reduction
18 in the value of my house, or real estate values in the
19 vicinity of the plant, then absolutely go in for compensation.
20 If that doesn't happen then society is saying it isn't
21 that big of a deal.

22 DR. MAZUR: I understand what you're saying.
23 You're saying that nuclear power shouldn't be so generous
24 that we make a special deal out of it but if that's the
25 case, why are we sitting here making a special deal out of it.

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DR. LEWIS: That question has occurred to me in the last two days.

DR. MAZUR: For consistency purposes, for rational purposes, if we're making a special deal out of it on the one hand, we should be making a special deal out of it on the other hand.

DR. LEWIS: No, I think there is a special reason which is that the government in it's infinite wisdom has made nuclear power a special deal. It is treated in a special way-the safety issues are regarded by the government which has created the NRC which has created us as a special deal and my personal view what we're here for is to help the NRC do it's job more rationally or less capriciously depending on your own terminology. I think that's a useful objective.

DR. MAZUR: I accept that arguement completely and would apply it to the equity issue. And you have pointed out why it has assumed a generous ratio and why it should be treated as such.

DR. WALD: Not all of the issues related to nuclear energy are special cases and it would seem to me that our society has enough mechanisms, for example the 25 million dollar class action settlement for the population around TMI. We have enough mechanisms in place now to take care of inequities after the fact that we don't

070

1 need a special -- even if nuclear energy may be a special
2 case, but this aspect of it, safety considerations, we may
3 not have adequate controls and we have to impose special
4 ones.

5 MR. LEVINE: There is a special provision for
6 treatment of equity afterwards and that's Price-Anderson.
7 There is a special provision for nuclear power for treatment
8 of equity after an event.

9 DR. MAZUR: I would say Price-Anderson is a
10 bad example because that really limits the equity payments,
11 but the ethical issue is the before the fact issue.

12 MR. BURSTEIN: I don't want to debate Price-
13 Anderson. There are things to be said in different ways.

14 CHAIRMAN KOUTS: Yes, I don't want to debate
15 this.

16 DR. MAZUR: I would like to suggest that we
17 probably will cover this to death but I would like to suggest
18 that it's handled already well enough.

19 CHAIRMAN KOUTS: I would like to drop it on the
20 basis that it seems to me only remotely related to safety
21 goals and I don't see how you would use this on a basis for
22 determining whether a nuclear plant met a certain standard
23 of safety, so.

24 DR. MAZUR: Well, I could see how you might do it
25 but I don't want to pursue it obviously. If I'm the only

1 person here that wants to.

076

2 MR. BURSTEIN: Economic compensation?

3 CHAIRMAN KOUTS: Well, the fact that you pay
4 the man down the street doesn't make the plant any safer.
5 Or less safer.

6 DR. MAZUR: Well, that's true. The fact that
7 you do a lot of things we're talking about doesn't make
8 it any more or less safer.

9 If it is indeed the case that I'm only the one
10 concerned about it --

11 DR. BEYEA: I think it, it should be taken up
12 somewhere else. I think it's a siting issue and most dis-
13 cussion nowadays about compensation equity comes up when
14 you want to site an unpopular facility and so I think it
15 is a valid issue and an important issue that belongs some-
16 where else.

17 MR. SALISBURY: I guess I'm tentatively on Allan's
18 side. I can see a rationale for stating that there will
19 be some -- that the difference in risk between the fencepost
20 person and somebody else in society should be below a
21 certain level of difference but, again, I guess I don't
22 feel I know enough to really assess whether that is in
23 fact the case because the risk is so negligible to begin
24 with.

25 CHAIRMAN KOUTS: Okay. I think we've exhausted the

1 ACRS report ourselves. I would like to take up competing ⁰⁷⁷
2 safety concepts and I'm at something of a loss.

3 We have about two and a half hours of actual
4 work time left during which time we have maybe half a dozen
5 concepts to pay some attention to. I've done some structuring
6 of what I take to be people's concepts and I would probably
7 be wrong enough so that I would lose time today, presenting
8 them as interpretations of what people have in mind.

9 MR. BURSTEIN: What do you intend to do with
10 these competing concepts?

11 CHAIRMAN KOUTS: I'd like to flash them up and
12 let -- these are different structures of the way safety
13 goals --

14 MR. BURSTEIN: You're not intending to have this
15 endorsed by this committee?

16 CHAIRMAN KOUTS: Oh, no, we're just commenting
17 on it.

18 MR. BURSTEIN: Or any of these others?

19 CHAIRMAN KOUTS: No.

20 MR. BURSTEIN: So is this merely an invitation to
21 show there are different methods or different approaches?

22 CHAIRMAN KOUTS: The whole idea is that we would
23 like to be able to make some recommendations on how safety
24 goals should be structured. What should their content be?
25 What should they deal with? And, one way of doing this is

1 to take up as many as possible of things which have been ^{pro-}pro-
2 posed by different people and see if these have aspects we
3 think should be concluded in safety goals as the commission
4 laid it out.

5 Not in numerical aspects, but what is addressed,
6 how it is addressed, how is it applied. Now I think if
7 we go to something like Vojin's concept, it's a very
8 different concept than the ACRS concept. Would you like
9 to say a little bit about it?

10 DR. BEYEA: Before we start, could we say that
11 we'll take a half an hour for each of those so that we
12 don't run out of time.

13 CHAIRMAN KOUTS: Yeah, we might do that. Half
14 an hour might take care of four and that would be about
15 eight. Some of them are quite simple. It would not take
16 anything like that. I hope you're not going to go through
17 all those view graphs?

18 DR. JOKSIMOVIC: Just a few.

19 CHAIRMAN KOUTS: In fact if you had something
20 that corresponded with that, that would be excellent.

21 DR. JOKSIMOVIC: Let me go through what I have.

22 I would assume that not very many of you have
23 read my papers on this subject. I know that some have
24 but not very many. So I'll try to, in a similar fashion
25 that we have discussed -- proposal, I have a view graph

1 which says which is the key ingredients of the approach
2 that we favor.

3 DR. MAZUR: What is GA?

4 DR. JOKSIMOVIC: That happens to be the company
5 I work for. General Atomic.

6 It's my perspective of the perspective of the
7 people working for me and then subsequently endorsed by
8 the company.

9 We did it basically because we felt that there
10 was a need for this. Of removing --- that's a problem I
11 address --. And, we felt at the outset of the exercise
12 that there are two ways of doing it. One is via the risk
13 budget approach comparing to other risks that professor
14 Lewis doesn't like and I listen to him occasionally and
15 I also consulted a number of other individuals-they told me
16 don't do it that way so I dropped this approach and I
17 adopted an approach which at the time I called professional
18 judgement and after reading Paul Slovic type of literature
19 of the professional judgement, I don't want to call it
20 that any longer. I think the approach is the hybrid approach
21 and it takes into account professional judgement. It takes
22 into account knowledge of PRA and it takes into account
23 experience. So in Paul Slovic type of language it has the
24 kind of attributes that he assigns to the number of approaches
25 as opposed to the attributes he assigned to professional

1 judgement, so I had used that term before I learned about
2 his definition for that term.

3 And as I said, it places full emphasis on knowledge
4 of probability risk assessment. However, I have recognized
5 for many years that we have to provide a bridge between PRA
6 and the existing deterministic approach which has been
7 employed in licensing for many years and hence, I felt
8 that we don't do that, that if we don't provide that linkage,
9 that we don't do a complete job. So one of the objectives
10 that I had was to provide the linkage with this existing
11 deterministic approach and hence, in order to do that,
12 I have retained the concept of defense in depth that
13 we mentioned and I fully endorse it, but I'm saying that
14 that the way it was implemented had weaknesses.

15 I want to add extra strength to that by focussing
16 with PRA technique. Then I have defined the regions which
17 I will describe in a minute.

18 In addition to designing the -- region, I have
19 added two more regions and I have introduced the concept
20 of no identifiable public injury which I will explain when
21 I come to the diagram. Also, I preferred to use limit
22 lines rather than integrals and the reason why I mentioned
23 the issue yesterday when we discussed the ACRS approach,
24 I had an illustration to show you why.

25 I've also recognized that in doing so, this is not

1 only a technical approach, it's a -- approach, and there³¹
2 has to be some kind of a way to show that we can have ranges
3 depending on how one technology is viewed versus the others.

4 And also I used the same type of a range to say
5 that you can have a new plant and an old plant -- and here's
6 how you can do that.

7 And the bottom line is that we came up with an
8 acceptable individual, societal and public property risks.

9 Now here's the diagram which makes an attempt
10 to illustrate the concept, in the usual F/C diagram which
11 is so common in problemistic risk assessment.

12 I have said that I have defined three regions in
13 the F/C diagrams, the design basis region, a safety margin
14 of design capability region and safety research region.

15 And my consequence is no identifiable public
16 injury and I -- used the limit line which is this.

17 And in coming up with the probability scale or
18 what the frequency scale should be, I took into account
19 what was the current base of experience in the United States.

20 CHAIRMAN KOUTS: Can you tell me what the X-X's
21 are there?

22 DR. JOKSIMOVIC: X? Consequence.

23 CHAIRMAN KOUTS: And what does no identifiable
24 public injury -- what is it there?

25 DR. JOKSIMOVIC: It's associated with 10^{-4} so you

1 imagine a line over here.

2 DR. MAZUR: I still don't get that you mean that
3 you get 10^{-4} as the --

4 CHAIRMAN KOUTS: He's going to tell how he applies
5 it.

6 DR. JOKSIMOVIC: I have a diagram which is a pre-
7 cursor of the -- so it explains the concept.

8 Why 10^{-4} ?

9 I have associated the 10^{-4} --

10 CHAIRMAN KOUTS: We don't want to talk about
11 numbers. You have 3 numbers.

12 DR. JOKSIMOVIC: Right, but there's a rationale
13 behind the numbers.

14 CHAIRMAN KOUTS: I think it's enough for our
15 purposes to say there is a rationale.

16 DR. JOKSIMOVIC: I'd like to say what it is.

17 CHAIRMAN KOUTS: Except that we don't have much
18 time. I'm just trying to cut this problem down in discussion
19 of why we choose this number and not this number.

20 DR. JOKSIMOVIC: So you will take my word that
21 there is a rationale for that?

22 CHAIRMAN KOUTS: Yes. I know there's a rationale.

23 MR. LEVINE: Some kind of rationale.

24 DR. JOKSIMOVIC: There is some kind of rationale
25 for all these numbers.

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DR. MAZUR: A compelling rationale?

DR. JOKSIMOVIC: More than that. Overwhelming.

I promised to illustrate why limit lines rather than integrals. We struggled with that for a while and when we used integrals -- come up with this kind of situation where all three integrals can be the same.

That is, if you should give me this way, this goes that way and there was a question in my mind whether this type of a distribution would be acceptable and I concluded for all practical purposes it wouldn't be. And hence would propose to have a limit line which basically doesn't move as opposed to an integral which can move anywhere, depending on if you can suppress one portion and we can have a bulge in the other portion. And you can put that bulge in the high frequency region which we wouldn't want to do. We want to limit the high consequence low frequency type of region by having a line which also has a risk aversion of whatever the terms are we define. So we had a steady line to shoot at as opposed to a shifting line.

While this applies to the individual risk concept, we basically drew the line at several points and the key point was the point of no identifiable injury to the public. So that's my point which I call VJ. I link this point to Appendix i and hence I've included the whole operation into

1 into account.

584

2 MR. LEVINE: What is Appendix i?

3 DR. JOKSIMOVIC: It is the NRC guideline with
4 regards to normal operation.

5 I re-emphasized, I wanted to provide the linkage
6 with the -- process. So there are protective action guides
7 and there's one that says evacuation requirements. So
8 that one coincided with my VJ point. There's also -- 100
9 which points out my point 10^{-5} . At 10^{-6} I wanted to make
10 sure that the probability of acute fatality was small
11 and I took the threshold of 1% of that. Then I drew
12 the line which became my limit line for the individual risk.

13 Now for societal risks, I took the approach, that
14 they can vary depending on the society and the political
15 climate we live in and hence, I wanted to retain my concept
16 of no identifiable public injury but I also wanted to show
17 the range depending on what the -- climate might be.

18 DR. MAZUR: What does it mean to say no identifiable
19 public injury? Does that mean you can't point to that person
20 or statistically expect any based on the calculation models?

21 DR. JOKSIMOVIC: In the previous one, it means
22 Professor Wald wouldn't be able to identify whether a subject
23 has been exposed to radiation or not.

24 DR. MAZUR: Then there may well be an expected
25 increase in cancer from the calculation model?

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1 DR. JOKSIMOVIC: On the societal type of basis,
2 with regard to a balanced risk line, it means a certain
3 number of latent cancers which are a very small fraction
4 of a spontaneous cancer rate. The cancer would be within
5 the annual variations of a spontaneous cancer rates.

6 It is my understanding that by talking to a number
7 of individuals that in a large population of 2 million
8 people or so, you will see any -- in the spontaneous cancer
9 rates. And my number over here would not be any higher
10 than the delta in any of these radiations and hence would
11 not be identifiable.

12 You would not be able to attribute that to
13 radiation, exclusively.

14 DR. MAZUR: Would you explain the rationale for
15 why you think that's interesting? That's not to say they
16 weren't there. It doesn't say that it's of the magnitude
17 the noise is. What is the rationale that gives that
18 some okayness that we've got a number of cancers reproduced
19 since -- your statistics, we can't be terribly confident
20 that they're there.

21 DR. JOKSIMOVIC: The number of 10^{-4} which I didn't
22 get to explain is basically the lifetime of the nuclear power
23 program in the United States.

24 And if within that lifetime it does not cause any
25 significant impact on the public I believe that nuclear power

1 should be -- .

2 CHAIRMAN KOUTS: 166 reactors per year.

3 DR. MAZUR: I feel you're really producing a
4 fair number of cancers but since there's so much noise in
5 the cancer statistics you can't really see that.

6 MR. LEVINE: I think it's a semantic problem
7 with you do you have predictable public injuries but
8 not identifiable. I think Allan is it would be more honest
9 to call them predictable, but not identifiable as opposed to
10 ---.

11 DR. JOKSIMOVIC: I'm very glad you mentioned that
12 Saul, because subsequent to this type of -- I've established
13 a point of no predictable injury either which is as strict
14 as one can get, which is this point here.

15 DR. MAZUR: So it would follow if we had a given
16 cancer incidence rate from nuclear power it wasn't identifiable
17 but then we get thorough revamping of our statistics to
18 remove the noise of reporting.

19 DR. BEYEA: The statistical noise, you cannot remove
20 it.

21 DR. MAZUR: Well, it may be because the reporting
22 system is awful.

23 DR. BEYEA: No, the statistical effect --

24 CHAIRMAN KOUTS: That's on distribution.

25 This is just random numbers.

1 DR. MAZUR: Surely in terms of year to year
2 cancer statistics there's lots of noise from bad measurements.

3 CHAIRMAN KOUTS: Which would make it even worse
4 than that.

5 This is the minimum you can get to with this
6 rate of cancers.

7 DR. BEYEA: Then I have lost -- I'm still not
8 clear on identifiability issue. I thought identifiability
9 meant if it wasn't identified, it was in the magnitude of
10 noise that you see from year to year; well, surely part
11 of that noise is due to bad reporting categories.

12 CHAIRMAN KOUTS: He's only taken that part of
13 the noise which is still casting.

14 DR. MAZUR: We don't quite know what part is.

15 CHAIRMAN KOUTS: That part is the square root
16 of the number of cancers.

17 DR. BEYEA: You have no way of partitioning out
18 what is measurement error from what is true substance.
19 It has to be greater. The measurement error has to be
20 greater than minimum.

21 DR. LEWIS: As a point of fluctuation, is this the
22 square root of N or is it larger? You said there was a
23 fluctation going from year to year -- is it larger than
24 the square root of N?

25 DR. JOKSIMOVIC: I have to admit I don't remember

1 that but I do remember the numbers we looked at were within
2 that.

3 DR. LEWIS: But the question of whether it's
4 larger than the square root of N is relevant to what people
5 are now arguing about.

6 DR. JOKSIMOVIC: I don't remember that.

7 DR. BEYEA: I think you have an issue in point.
8 I'm not quite sure it's a rationale. But a lot of people
9 have used the same rationale. The FDA has used such a
10 rationale setting proposed standards on action on contaminated
11 crops after an accident, etc., etc., so it has been used
12 before. That doesn't mean it should be used.

13 DR. MAZUR: It's identifiable.

14 DR. BEYEA: Yes, it's a small fraction of the
15 yearly fluctuations.

16 DR. MAZUR: Then it follows to me that what is
17 acceptable becomes unacceptable if you can prove --

18 DR. BEYEA: You either accept it or you don't.
19 You can't justify it.

20 DR. JOKSIMOVIC: In the interest of time, I'll move
21 to the next one which is my last proposal which is a roughly
22 simplistic one and by the way, my alpha is 1.5.

23 My last proposal deals with the subject Bob and I
24 have been raising and that's the subject of public property
25 damage and this is a very tough one to set -- even tougher

1 than the other two. So I've done a limited amount of 289
2 thinking but I visualize the world without a Price-Anderson
3 act. I believe that in 1987 there comes up maybe a Price-
4 Anderson Act would expire and it may not be removed and
5 so I think we have to look at that kind of world. And in
6 the absence of a Price-Anderson Act, I believe the insurance
7 industry has to cover this and I've acted as a consultant
8 to insurance companies so I have learned something from
9 them and one thing is that they're perfectly rational.

10 So, to, -- I'm not suggesting the NRC is not.
11 All I'm suggesting is that in their case, you know, I
12 mean, you know, they absolutely have no problem with alpha
13 equals per unity and I tried it a number of times so I
14 put alpha equals unity on here. Now, I also detected that
15 under no circumstances would they spend more than so many
16 millions of dollars and right now that stands about 300.

17 And then when I asked them the question what the
18 hell does that mean to you, 300 million? Then during
19 numerous discussions I had we agreed that that's a number
20 like 10^{-5} . And I asked them if that number -- I think if
21 you understand the structure of American Nuclear Insurance,
22 it's a multi-national organization where they have Lloyds
23 and European companies and apparently these individuals are
24 insuring all sorts of things in the world and the number
25 10^{-5} was the lowest number they would go to. So that means

1 at 10^{-5} they're willing to put up 300 million dollars risk.
2 So that's how I arrived at this point over here.

3 DR. LEWIS: Is that per year or per day?

4 DR. JOKSIMOVIC: This is the frequency per year.

5 CHAIRMAN KOUTS: Can you plot TMI up there?

6 DR. JOKSIMOVIC: Can I plot TMI? I'm talking about
7 external property damage here.

8 MR. BERNERO: TMI was 300.

9 CHAIRMAN KOUTS: That was not public damage.

10 MR. BERNERO: Broken turbans and mucked up
11 containment buildings.

12 CHAIRMAN KOUTS: Why would they be more reluctant
13 to put up money for 3rd party insurance than for direct
14 property damage?

15 DR. JOKSIMOVIC: No, they wouldn't, but they
16 would still put the same amount of money. They wouldn't put
17 more than that.

18 DR. BEYEA: TMI was a low budget limit line.

19 If you put TMI up there you're way above.

20 DR. JOKSIMOVIC: I'm talking about external property
21 damage.

22 DR. BEYEA: It doesn't matter.

23 MR. BERNERO: There are two factors here that
24 seem to be confused. An insurer has an upper limit on what
25 he can insure because he doesn't have that much money. And an

1 insurer has a rate he charges for what he will insure and¹⁰³¹
2 10^{-5} per year probabilities will set his rate, not his
3 upper limit.

4 At 10^{-1} per year, he's going to want 10% plus
5 gravy as a premium. He'll insure your Harley-Davidson motor
6 cycle for 1/3rd of it's value per year against theft because
7 about 2 out of 3 of them are stolen every year.

8 DR. JOKSIMOVIC: But they would put no more than
9 a certain amount of money irrespective of what the premium
10 is.

11 MR. BERNERO: True. Yeah. They literally cannot
12 guarantee anything. They don't have the resources to
13 guarantee a billion dollars.

14 DR. JOKSIMOVIC: Well even if they did, they
15 wouldn't consider that as proven.

16 DR. MAZUR: Sure they would. If they have plenty
17 of resources and it was a 1 in 3 thing and they charge
18 you more than 33% of the premium, why wouldn't they?

19 MR. BURSTEIN: As we know that target has
20 moved over a period of time, in response to the number of
21 participants -- the premium level, the rate of inflation,
22 the cost of replacement and all the other typical ingredients
23 of insurance policies. I don't think that whether that
24 300 or 200 or 400 is significant --

25 DR. JOKSIMOVIC: No, it isn't. I'm just saying that

1 this is a concept.

382

2 MR. SALISBURY: What your dollars --

3 MR. BURSTEIN: That's what I meant. It wasn't
4 significant.

5 DR. JOKSIMOVIC: 80. 80. Would be the round number.

6 CHAIRMAN KOUTS: This is the application of
7 Vojin's concept. First of all, we talk about individual
8 risks. The application of this is through what is defined
9 as an accident in --, I guess accident means core melt in
10 this case. There are things which we call accidents.
11 And you have three limits which are Limit A, Limit B, and
12 Limit C with 10^{-4} , 10^{-5} and 10^{-6} .

13 The probability of what is called -- what you
14 do is analyze in determining what accidents can occur.
15 You focus on an accident. You do a probabilistic calculation
16 to determine what probability this accident is and if this
17 probability exceeds this limit A which is 10^{-4} in your
18 assumptions, you have to do something about this. You have
19 to redesign the plans. You have to introduce mitigating
20 features, whatever is necessary to bring this probability
21 to less than 10^{-4} .

22 DR. JOKSIMOVIC: To bring the point in the F/C
23 diagram within acceptable regions.

24 CHAIRMAN KOUTS: Bring it down, yes.

25 DR. LEWIS: But if I had that diagram, you have to

1 introduce features to bring it down below that.

2 If the probability is between 10^{-4} and 10^{-5} ,
3 then you have to analyze--

4 DR. JOKSIMOVIC: Here's a point, let's say,
5 hypothetically let's say we're at this point. It's outside
6 the limit line and we have to do something. If we shift
7 it from this point to this point we're in the right direc-
8 tion and so we're reducing the consequences in this event.
9 The other thing we can do is try to educe the probability
10 of this event and we'll go this way and then we'll manage
11 to get next to this point. But in doing so, you want to
12 watch, because as you're reducing the probability and may
13 increase the consequences and you don't want to do that.

14 CHAIRMAN KOUTS: If the probability is clean --
15 10^{-5} and 10^{-6} this is what's called a research region,
16 and you don't have to do anything, probably but you have
17 to do research.

18 DR. LEWIS: That means you only do research
19 on unimportant things?

20 CHAIRMAN KOUTS: This is one of the questions --

21 MR. BERNERO: It's a tradition.

22 MR. LEVINE: That's the idea. We're going to cut
23 off this gravy train somehow.

24 DR. LEWIS: That's illogical, thank you.

25 DR. BEYEA: This is the definition.

1 CHAIRMAN KOUTS: Finally it's a probability
2 low enough --

3 I have one question concerning this process because
4 if you do this item by item -- if you look at one event
5 tree, another event tree and so on, you may end up with
6 individual points which fall within your limit line and
7 you say well, okay, in each case I'm all right but when
8 you add them up you go outside your limit line and you
9 may end up with a probability of damage to the reactor
10 from all events which have been analyzed this way like 10^{-3}
11 which is outside the limit line. What do you do about
12 that?

13 DR. JOKSIMOVIC: I'd correct it.

14 CHAIRMAN KOUTS: Well, that's not part of your
15 process, though.

16 Because, your process is determining what to do
17 in order to make the proper defense against individual
18 accident sequences if you might analyze.

19 DR. JOKSIMOVIC: I don't to -- in designing a
20 plant this is basically a major design tool and in going
21 through this process, I've done all that. Then I move into
22 the individual risk and societal risk to make sure I met
23 those lines.

24 CHAIRMAN KOUTS: I think we're at coffee time.

25 (Thereupon, a 30 minute break was taken at 3:35 p.m.)

1 MR. LEVINE: I'd like to spend a minute first
2 explaining my safety goals which I never felt we needed
3 safety goals until the last year and in self defense I
4 think I explained yesterday why I think we need safety
5 goals. I think you all have a copy of this and the only
6 reason I want to mention this at all is not to press it on
7 you but to illustrate that there's another format one
8 can use that avoids some problems.

9 I propose the safety goal that's about a tenth
10 of a percent of the total of man caused accidents.

11 ----- higher easily. The other thing to note about it
12 is that it includes early fatalities and latent cancer
13 fatalities with the idea that you add the latent 1/30th
14 of the latent cancer fatalities to the early fatalities.

15 And, this kind of goal appeals to me because
16 it's easily explainable. The rationale is visible and
17 explainable to people. I think they can understand it.

18 DR. LEWIS: Why 1/30th?

19 MR. LEVINE: There's a thesis for MIT ---- which
20 suggests there's a factor of 30. Kinchin uses a factor of
21 30 and that's why I chose a factor of 30. I think it
22 certainly should not be added to one.

23 DR. LEWIS: I agree with not one to one. They
24 do for negotiation between one and one --.

25 MR. LEVINE: But that's why I used 1/30th. Enough

1 of that. I'll put up a couple view graphs which I will 134
2 apologize for that would be illegible. If you have copies
3 of it then I will just point the things.

4 What this does is it shows the various people
5 who have proposed safety goals and this is a statement
6 of the goals. Notice only a few people have suggested
7 cost benefit goals, but they're the same essentially and
8 if anything they're a little conservative as opposed to
9 realistic. This is in the ACRS goals and you find various
10 kinds of statements by different people and different
11 organizations and you can read your own copies and see what
12 they mean.

13 What's more important I think is the next view
14 graph again which you have copies of which tries to compare
15 these. I did this work because I felt it was very difficult
16 to comprehend what everybody was talking about unless you try
17 to put the goals in commensurate terms.

18 And you can for instance take my curve or Vojin's
19 curve and derive from it many of the values that the ACRS
20 uses. As I try to derive the values, where I could based
21 on the information given by the authors, of equivalent
22 numbers. I have also put down the Wash-1400 numbers on
23 the bottom line so one gets some idea of what's going on.
24 I recognize the Wash-1400 numbers applied to a hundred
25 reactor industry or an average of one BWR or one PWR at a

1 site that typifies 68 sites so certainly not a number to
2 compare a risk assessment of a specific reactor to a
3 specific site to these numbers.

4 And notice from my curve I can derive all kinds
5 of numbers that Okrent has in his, except for the core melt
6 probability, and I've just used a value similar to the Wash-
7 1400 value for that. I also put in an average of an exposed
8 individual as opposed to a most exposed individual and
9 the way that was done was to compute for early fatalities
10 the average probability to people within 10 miles of a reac-
11 tor so you divide the societal risk by the area people in
12 a ten mile area of a reactor and I use the median population
13 density of 68 sites in the U.S.

14 You can do the same for delayed by using a 200
15 mile area. Notice Chauncey Starr doesn't quite fit the
16 pattern. He has not separated early and latent which I think
17 is wise and he's using a distance criteria which is an
18 average of people in the vicinity of the reactor and an
19 average of people further away from the reactor so his
20 numbers don't fit the pattern. And you can see certainly
21 that if you look at this column, the various goals proposed
22 by the various people do not vary very much. Kinchin's very
23 low, but of course he has a problem with very high population
24 density sites. Otherwise it's only about a factor of 10
25 variations.

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And if I raise my curve by a factor of 10, this would come out 1 or 1.5. It would be very similar to AIF in Oakland. And you can go through and compare these numbers. So this is just a way of thinking about them.

I can say that Vojin, myself and Kinchen have all proposed a curve. The curve format is just as popular as the other formats. And again, I'm not pushing it. I think it has the obvious advantage of communicability to the public.

DR. LEWIS: And for each curve there exists a graph paper from which it's a straight line?

MR. LEVINE: Yes.

DR. JOKSIMOVIC: The location is acceptable --.

MR. LEVINE: And I also think it handles the risk aversion for large consequences but the curve does compare the small and large consequences. The small and large consequences from other technologies. So that factor can be looked up.

I think that's about all I can say about it without getting involved in a lot of detail.

DR. WALD: For clarification -- what is --

MR. LEVINE: That should be one.

DR. WALD: That's the AIF?

MR. LEVINE: The AIF was point 1 and they raised it to the last point to 1.0, on the previous slot. I think

1 it's correct on the 2nd slot.

2 By the way the black boxes are the actual numbers
3 as opposed to goals and all other numbers are derived numbers.

4 MR. BERNERO: If I understand correctly, along
5 with that change they're adding a core melt probability.

6 MR. LEVINE: I think I have it here.

7 MR. BERNERO: The AIF?

8 MR. LEVINE: I'll show it.

9 MR. BERNERO: Oh you have it, I didn't see it.
10 I was looking at the wrong curve, the wrong graph. Yes,
11 you've got it, that's it.

12 CHAIRMAN KOUTS: This bears a lot of looking and
13 thinking but the thing that stands out as far as I'm con-
14 cerned is that there really is not much variation in
15 proposals that people have made.

16 You can renormalize them pretty broadly and be
17 quite comfortable.

18 MR. LEVINE: If you look down any column it's hard
19 to find more than factors of 10, mostly, sometimes you
20 find larger factors. They're not very large. I guess in
21 this column you see large differences from the average
22 values.

23 CHAIRMAN KOUTS: Different people have used
24 different kinds of logic in deriving where they finally
25 ended up and in spite of that the numbers come out roughly

1 comparable. The structure comes out roughly comparable. ()
2 And as far as I'm concerned this means that the underlying
3 logic is not as important anymore because regardless of which
4 pathway you take you end up in the same place.

5 DR. LOWRANCE: Is there a reason for that? Isn't
6 it just that everybody is taking the same basic approach
7 in saying here's what we are doing, here's what we can meet
8 and therefore that's a reasonable goal?

9 CHAIRMAN KOUTS: There may be a substrate here
10 which is not really revealed in all this process, but in
11 principle some people have tried to construct risks which
12 have some factor of being lower than risks of competing
13 sources of energy. This is one source. Other people
14 have tried to get their risks derived from other kinds of
15 logic and they all end up at about the same place.

16 MR. LEVINE: I think the other thing you ought
17 to note is the ACRS specifies more factors than anyone else.
18 They have 7 and I left two out, 9, I left out 1 and 3 on
19 here. That 9 factors -- Starr has 2, AIF has 4. Joksimovic
20 has one factor and a curve, I have one factor and a curve,
21 Kinchin has two factors and a curve. Corkerton has --
22 John, shouldn't some of these be in boxes in this -- is 10^{-6}
23 in a box?

24 MR. WREATHALL: -- most exposed individuals 10^{-5} ,
25 normal operation and accidents, faulty reactor site, so that's

1 an interpretive number.

2 MR. LEVINE: So most people have suggested far
3 fewer goals than the ACRS has. I think that's important.
4 So they're generally in the said structure.

5 DR. LOWRANCE: You began -- I think it's important
6 to look into the logic of something like this statement that
7 you propose a certain curve. It looks like a reasonable
8 sort of curve to me, but where does it come from and surely
9 it's going to cost us a lot more -- start somewhere else.

10 MR. LEVINE: What I said yesterday, that the
11 nuclear risk would be a small fraction of the sum of all
12 other technological risks.

13 CHAIRMAN KOUTS: That's a different logic.

14 MR. LEVINE: That's the logic I followed.

15 DR. LOWRANCE: And you said that's one/tenth?

16 MR. LEVINE: But you can argue whether I picked
17 the right number but that's the way I did it.

18 DR. LOWRANCE: Can you give us any guidance on
19 what kind of number you would -- how you choose that number.
20 That's what is so --

21 MR. LEVINE: --- choose one percent of the sum
22 as being a negligible fraction of the sum, it wouldn't
23 change the sum significantly. I would say that we're not
24 going to have 100 new technologies in my lifetime, or
25 maybe in the lifetime of the reactor industry.

1 DR. BEYEA: You said here in how you define social
2 risk in your Table A, a curve be drawn to 1/10th to the
3 lowest non-nuclear risk.

4 MR. LEVINE: That happens to be about 1/10th of
5 1% of the sum.

6 DR. BEYEA: What about the risk of being killed
7 by radios? I mean, the risk of being killed by radios
8 is pretty low.

9 MR. LEVINE: Again that's another -- I should
10 have said this. I believe that the most rational comparison
11 is on the basis of accidents that have both small and large
12 consequences with large probability differences.

13 I think that's the most rational comparison to
14 be made.

15 DR. BEYEA: Your Table A needs a better definition
16 for what you're doing because you're taking the lowest
17 non-nuclear risk of a subset that you think is comparable,
18 mainly, 1/10th of air crash persons on --.

19 MR. LEVINE: Yes, but I just as easily could have
20 said 1/10th of 1% of the total.

21 DR. BEYEA: I think that would have made more
22 sense.

23 MR. LEVINE: And that's what I'm saying today.

24 DR. MAZUR: It's sort of arbitrary. How do you
25 categorize to compare with?

1 MR. LEVINE: The comparisons I've made are on
2 the basis of what people have proposed. I've tried to
3 compare all the parameters that have been proposed by
4 everybody.

5 DR. MAZUR: I'm sorry. I meant in terms of
6 life. You take the criterion of 1/10th of the lowest
7 non-nuclear risk. What is a non-nuclear risk? How do you
8 categorize it?

9 MR. LEVINE: You look at the curve. The curve
10 identifies all the risks.

11 DR. MAZUR: These. These are arbitrarily
12 exclusive or even singularly --

13 MR. LEVINE: There may be others in there.

14 DR. MAZUR: Well, not only are there others
15 in there but one could conceptualize -- differently.

16 MR. LEVINE: They're based on data and analytical
17 projections.

18 DR. MAZUR: I know they are but I'm saying that
19 first of all, categorization is somewhat arbitrary and
20 second of all the selection of which ones to include --
21 which categories to include and which not to include are --

22 MR. LEVINE: The ones we chose to include were
23 the ones we thought would be the largest. We also thought
24 that chemical plant risks ought to be in there and we
25 simply couldn't --

1 DR. MAZUR: What about risks from nuclear bomb
2 accidents or --

3 MR. LEVINE: Oh, I don't believe we should put
4 war in.

5 DR. MAZUR: That's not war. I'm not saying
6 war, I'm saying nuclear bomb accident errors in setting off
7 a nuclear bomb, or what about the recombinant DNA accidents
8 or botulism accidents or that flouridation may inadvertently
9 kill our population and we could go on and on.

10 DR. LEWIS: I agree with Allan on that. Would
11 one argue that if there were to be --

12 MR. LEVINE: They would all react to the total.
13 They would make this choice more conservative.

14 DR. LEWIS: But suppose the world were to go to
15 pot in some obscure way that does produce extra risks to
16 us. I don't know whether it's botulism or whatever, so
17 that the total man-caused moved up by a factor of 10,
18 would you then advocate relaxing the controls on reactors?

19 MR. LEVINE: I haven't said I would relax the
20 controls on the reactors.

21 DR. LEWIS: But well, why not if that's the
22 rationale?

23 MR. LEVINE: I might. I might.

24 DR. LEWIS: I see. I wouldn't.

25 MR. LEVINE: I have to think about that.

1 DR. LEWIS: I don't want to reopen the question
2 about whether the comparison is a reasonable way to begin
3 but --

4 MR. LEVINE: I said yes, I favor your view in
5 -- I don't know how to --.

6 The first speech I wrote on how one should set
7 safety goals said we should do it just the way you want, by
8 risk benefit analysis. I said that's a 10 year project
9 let's get it right to expose to public view.

10 DR. LEWIS: That's because you have --

11 MR. LEVINE: Now wait a minute, let me finish.
12 And I have only gone to this comparison route to defend
13 ourselves against what the NRC is doing. We just have to
14 have the goal faster than that. And I think the comparison
15 route is probably pretty good.

16 DR. LEWIS: A reporter recently said to me are
17 you saying extremism in the defense of liberty, and so forth?

18 CHAIRMAN KOUTS: Here is the Atomic Industrial
19 Forum reasoning. It says for the individual health effects,
20 should not result in a significant increase of annual
21 mortality risks for its' significant shortening or its
22 expected statistical life span. They come up with a 1/10th
23 of a percent of total mortality risks and one percent of
24 accident mortality risks for the fencepost person. Now for
25 their societal risks, they say should be no more than a small

1 fraction of the average background incidents of health
2 effects. And his comes out to 10^{-5} of total mortality
3 and 5^{-5} of total cancer and you come up with about the same
4 number.

5 There's certainly an amount of arbitrariness
6 in all of these factors that are chosen here but varying
7 them by a factor of five or so, that doesn't make that much
8 difference. You're still in the same boat.

9 MR. LEVINE: That's one way in fact of getting
10 a cost benefit risk judgement. To ask people what they
11 think it ought to be and get a number.

12 CHAIRMAN KOUTS: Well, this is Allan's major
13 suggestion which I thought was --.

14 DR. MAZUR: I would argue that the reason there
15 is so much convergence on these things --

16 MR. LEVINE: There's some history we don't know
17 about.

18 DR. MAZUR: Right. As I said before, if Wash-1400
19 weren't done, nobody would be here. Because nobody would have
20 thought about it or have any idea what the numbers were.

21 DR. LOWRANCE: And that stems from Chauncey
22 Starr's earlier --

23 MR. LEVINE: What?

24 DR. LOWRANCE: Some of that stems from Chauncey
25 Starr's earlier works. This curve is about 10 years old.

1 And, first printed by Starr.

2 MR. LEVINE: No it isn't. That curve was first
3 printed in Wash-1400.

4 DR. LOWRANCE: Well, you put the nuclear plant
5 on it.

6 MR. LEVINE: What?

7 DR. LOWRANCE: You added the nuclear plant.

8 MR. LEVINE: No, Chauncey never did that curve.
9 He did a different kind of curve. Sorry about that.

10 DR. LEWIS: But just for fun, I think it would
11 be fun to construct a curve which visually would be
12 a totally different expression. For example, constructed
13 curve for -- is over here and constructed curves that have
14 a lot of things below the --

15 MR. LEVINE: That's very interesting. I wanted
16 to talk about that.

17 DR. MAZUR: I wouldn't even worry about it.

18 MR. LEVINE: The shape of the tab is incorrect.
19 It changes the shape significantly because Okrent's study had
20 been failures that caused consequences out here at probabili-
21 ties up around here.

22 DR. MAZUR: You mean you had a man loss?

23 MR. LEVINE: It's predicted.

24 And, it's predicted at high probabilities down to
25 the -2 or 3. And we just didn't want to scare people about

1 Dan's and my report. His report is published separately.
 2 Let them look at it. We financed his report and it's been
 3 published. Our only point is we wanted to show that nuclear
 4 risk did not present extraordinarily large consequences
 5 compared to other risks. That there are other -- earthquakes
 6 go out to here and with some estimates of a million fatalities.

7 DR. MAZUR: So the shapes of the curves can be
 8 somewhat different.

9 MR. LEVINE: If you want to do this right you
 10 really ought to do that right. Do that better than we've
 11 done.

12 DR. BEYEA: But you're not proposing to put
 13 earthquakes on this?

14 MR. LEVINE: No. Just technological.

15 CHAIRMAN KOUTS: Well, as far as I'm concerned
 16 we've accomplished our objectives.

17 DR. BEYEA: There's one more thing I would like
 18 to look at and that is in the, I believe in Chauncey
 19 Starr's proposal this idea that one can rely on the utility
 20 to protect plants themselves, that's what it says.

21 I would offer that that is not a valid assumption
 22 and we should not make such an assumption particularly
 23 because the experience we had suggested the utilities don't
 24 know how to protect investments in plants, particularly
 25 the experience we had at Three Mile Island.

1 So the record doesn't look good and now we're
2 being asked to say that the utilities are going to do better.
3 And that as a result of Three Mile Island we can now
4 expect the utility people to pay attention.

5 It's not clear to me what the utilities can be
6 expected to do. Utilities executives are not experienced
7 with reactors. Although all they can do is to rely on other
8 people and tell them to do better. Except for certain
9 utilities such as TVA which have a large staff of their
10 own, a very large staff of their own nuclear capability,
11 but in general, I don't see what special expertise the
12 utilities have to protect their own investment.

13 I would prefer to see the NRC still have its
14 hand in this to a certain extent until the utilities
15 demonstrate an ability to protect their investment, I
16 don't want them to do it.

17 DR. JOKSIMOVIC: How would that happen?

18 DR. BEYEA: How would they mess up their own
19 investment?

20 DR. JOKSIMOVIC: No.

21 MR. LEVINE: What would they have to do to
22 satisfy you?

23 DR. BEYEA: Well, they'd have to go for a long
24 period of time -- I'll probably never be satisfied without
25 the NRC in there except after hundreds and hundreds of years

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experience with reactors.

DR. JOKSIMOVIC: Some of us have worked in Great Britain and NAI which is the equivalent of NRC, they don't get into the details of the plant design and the records are satisfactory.

DR. BEYEA: I'm not advocating for NRC to get into every little design. I'm criticizing the assumption that the regulatory system need not worry about the protection of -- need not worry about certain kinds of accidents because the utility would take care of it automatically to protect its own investment. I'm challenging that assumption.

MR. BERNERO: Jan, would you relate your comment as to the distance of hazard state 1 and 2?

Are you thereby justifying --

DR. BEYEA: Yes.

MR. BERNERO: Hazard state 1 and 2?

DR. BEYEA: Yes.

MR. BERNERC: And are you thereby justifying hazard state 1 and 2?

DR. BEYEA: Yes, I think it would make some sense to have a hazard state 1.

DR. JOKSIMOVIC: You're saying you wouldn't buy safety goals if they were just based on individual risk and societal risk and the property damage? In addition

1 to that, you would like to see the hazard states and that
2 gives you the confidence?

3 DR. BEYEA: Well, I might want to throw out
4 the hazard state for another reason, like Saul Levine
5 mentioned because it is not defineable in any simple way
6 so I would not accept the arguement that we don't need
7 a distinction of hazard state 2 because the utility is going
8 to protect its own investment. That's the arguement that
9 I --

10 MR. LEVINE: I think you have no faith to --

11 DR. BEYEA: I think IMPO may do a good job.
12 But I don't think the utilities have demonstrated an
13 ability to protect their own investments.

14 You have to convince me that they've now changed.

15 MR. BURSTEIN: What makes you think -- excuse
16 me. As the only utility guy here I resent this whole subject.
17 I don't think it has anything to do with what we're talking
18 about but let me say very candidly if the NRC was so
19 good in the first place, Three Mile Island wouldn't have
20 happened, if they'd done their job and the whole concept
21 of short term lessons learned and backfitting and other
22 things is the same admission that you're now accusing
23 the utilities of being guilty of incompetence and incapacity
24 and not having adequate staffing. You know, it seems to
25 me that such comparisons don't lead to constructive apprecia-

tion of what we're trying to do. TVA may be the largest
single staff but they've also had Sequoia's, and they've
also had Brown's Ferry fires and a utility up in Wisconsin
who has only 65 people operating the plant didn't. I don't
know what that tells you but it suggests to me that maybe
when you get too far removed from where the action is in
a large organization you lose something. I think there's
enough concern and as I said before at this meeting for
the utilities to survive for them to implement as a restric-
tive safety application as may be imposed by regulation
if not more so. Now we all learn by experience and sometimes
the bad experiences are the best teachers and I would
suggest not for one moment to have the utilities not
learn from Three Mile Island. The same as everybody else
has.

But I think we can't ignore the lessons of
history and the lessons of experience and sure, we don't
have and perhaps in our lifetimes we will never see an
adequate data base to ensure against the kind of things
we're concerned with here. But that doesn't mean we
shouldn't attempt as I think Saul Levine and all the
others have suggested here to do what I think what Harold
would say, the best we can. And, I'm convinced personally
that the best we can involves perhaps some selfish greedy
types of criteria like self-preservation and financial

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integrity.

DR. BEYEA: Could you explain to me what a utility can do, the executive owner of a utility can do to ensure the safety of his plant? Not to lose his investment?

MR. BURSTEIN: Among other things, he can do all the things that NRC has suggested needs to be backfitted and many of which some plant had prior to that notice -- he can do a number of things in the way of assuring the kinds of things of items that were mentioned in the respect to a steam driven feed pump. Not every plant, I think Saul's purge, showed 6 plants needed revision to make the electric features of a steam driven feed pump operative in the loss of an AC and 6 didn't need any and there are groups inbetween. There are variations in what utilities do.

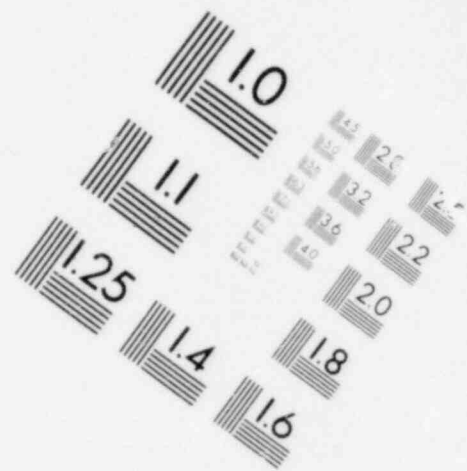
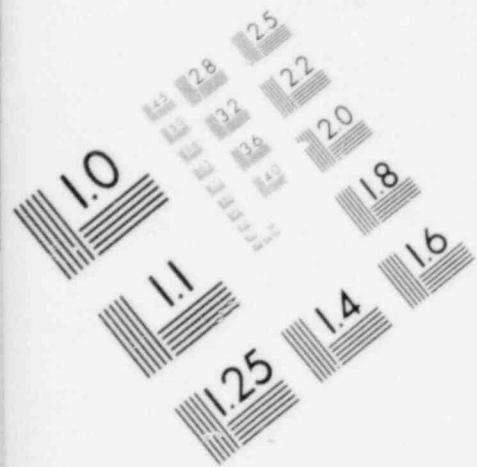
Selection and qualification of personnel. We've heard a lot about the operator error contribution to the Three Mile Island accident. We know that even by NRC inspection that different utilities get different report cards on how they operate and how they maintain and how frequently they do preventive maintenance so there are different philosophies among utilities and I think by attention to good design -- let me also say that I would not want to remove the role of the consultant to utility by saying that each utility must have all of its expertise on its own staff. That would not only throw a lot of good

1 people out of work but it also would give us inbreeding ¹¹¹
2 and while that's good for british flowers and complexions
3 it can sometimes give us very narrow view of the world.

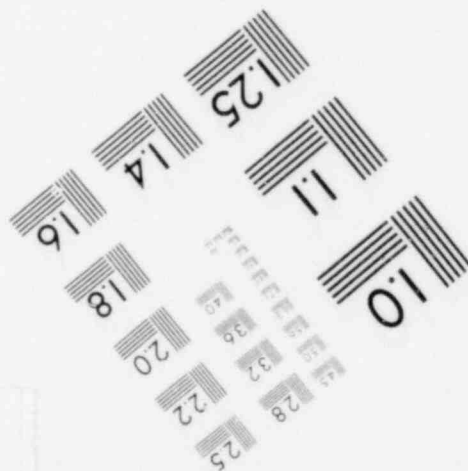
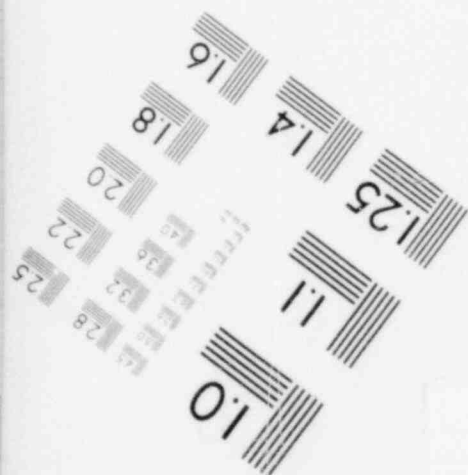
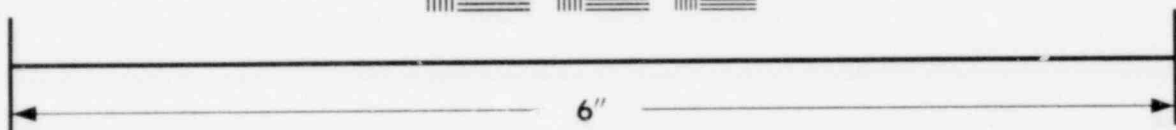
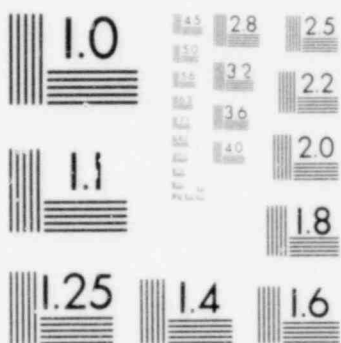
4 I think that good design certainly, the quality
5 of construction and a high degree of intelligent operation
6 and although Harold and I have had discussions about
7 reactor operators versus judgement in operation and analysis
8 in operation, I think we're really closer together than
9 we are farther apart and I think that's the essence of
10 recognition of what constitutes basically the successful
11 nuclear experience. But we can debate this and go on from
12 that for a long period of time. As a practical matter it
13 doesn't make any difference. While I would wish it so,
14 the NRC isn't going to go away.

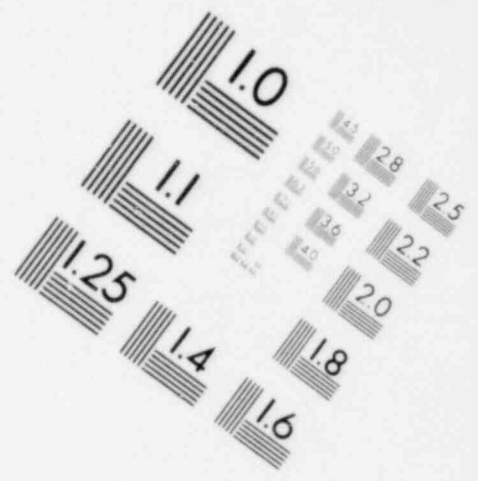
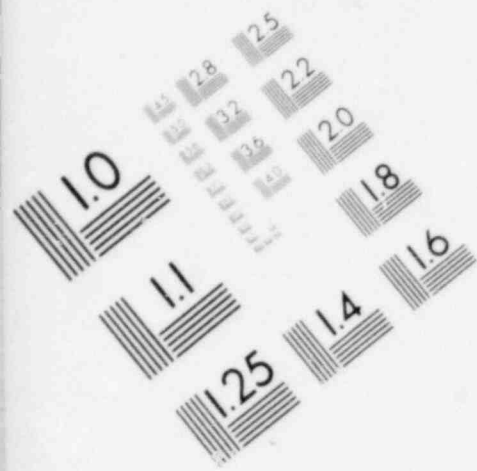
15 DR. LEWIS: It could merge with DOE and call it
16 the Atomic Energy Commission.

17 MR. BURSTEIN: And I think we're going
18 to live with the need, not only to demonstrate to our
19 lending institutions or what you call the insurance industry,
20 but to the public, that we have indeed the ability to
21 fulfill the promise that we made when we started out.
22 Let me again make one point that so far, the beneficiaries
23 of nuclear power are the customers and not the utility
24 officials and not the utility stockholders. The rate of
25 return financially is identical to the utility and its

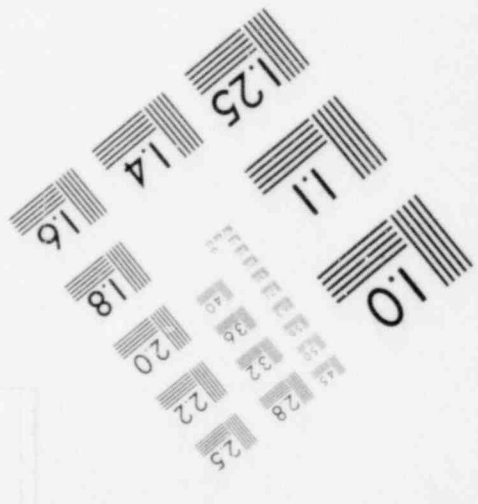
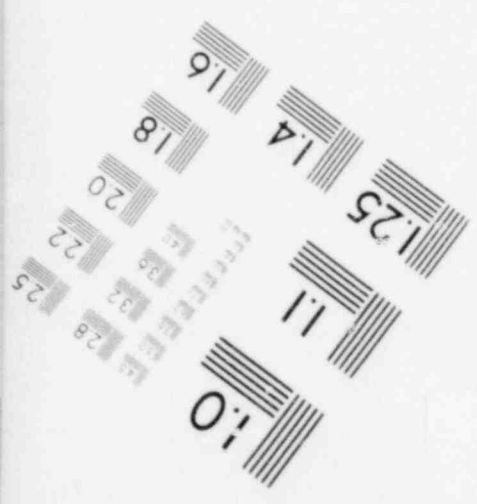
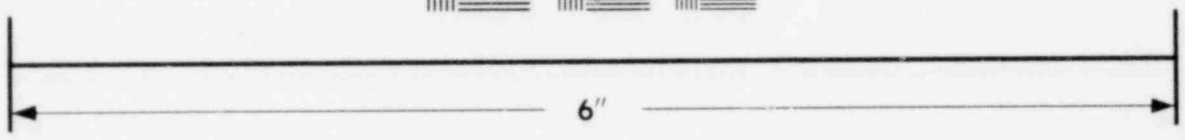
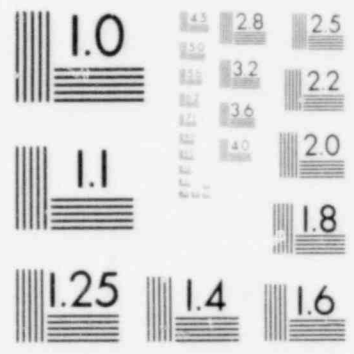


**IMAGE EVALUATION
TEST TARGET (MT-3)**





**IMAGE EVALUATION
TEST TARGET (MT-3)**



1 stockholders, whether it fills a coal plant or a nuclear
2 plant.

3 DR. BEYEA: It depends on the rate.

4 MR. BURSTEIN: No, I said the rate of return.

5 DR. MAZUR: But you're making it on the more
6 rate base, right?

7 MR. BURSTEIN: What does that mean?

8 DR. MAZUR: It means you've got more money
9 coming in.

10 MR. BURSTEIN: Total dollars is not the criteria.

11 DR. BEYEA: No, that's not true. The rate of
12 return -- depends on the success which you can raise the
13 money to get the capital to build the plants you need to
14 build.

15 MR. BURSTEIN: The point I wanted to make is that
16 on the basis of risk, there is also financial risk in
17 those areas as well as technical risks to the public
18 and while we can go round these matters, as I said before,
19 we're not going to resolve them in this fashion, however,
20 I do think it is unfair and irresponsible not to consider
21 that the utilities have just as much say if not more so
22 in public health and safety as anybody else. End of speech.

23 CHAIRMAN KOUTS: Hal?

24 DR. LEWIS: I think this end of the table is
25 beginning to wonder if we're wandering from our objectives.

1 CHAIRMAN KOUTS: We've accomplished it.

2 DR. LEWIS: In that case let me speak only for
3 myself. I wondered whether we did.

4 CHAIRMAN KOUTS: I define the objectives.

5 DR. LEWIS: It's a subjective judgement.

6 I wait with baited breath but not held breath
7 to hear what you say tomorrow we've accomplished.

8 MR. LEVINE: I have a request. Are you going
9 to write a little thing that we can take home with us?
10 Whatever you're going to say tomorrow?

11 CHAIRMAN KOUTS: Yes. It will be typed out
12 tomorrow. But that will not be the end product of this.
13 It will be the basis for the end product which I'll try
14 to put together on the plane as I go back.

15 DR. LEWIS: I wonder if I could be even more
16 intrusive and I think it's been very interesting to hear
17 some of the extremely detailed discussions we've had around
18 the table but I've tried to put myself in the position of
19 our sponsor and mentor and asked myself what he's getting
20 out of this and it seems to me earlier, that although
21 he's derived a great deal of wisdom from what has passed
22 around the table, wisdom that he surely had before, that
23 it might also be helpful if we had some understanding of
24 some general points that we really could agree on that
25 he could take home as kind of -- if not directives, at least

1 a consensus of the group and it is in that context that
2 I wrote those two pages for you and I wonder whether it
3 would be appropriate to give me a couple of minutes to
4 read them to people and see whether they represent any
5 kind of view to which some people could subscribe.

6 I know it's late to start that kind of thing and
7 I hate to delay the cocktail hour, is that a fair thing
8 to do?

9 MR. LEVINE: Yes.

10 MR. BERNERO: If at the end of that if I could
11 have five minutes to bounce one more thing off the group
12 I would appreciate it.

13 DR. LEWIS: I don't want to take long, but a
14 few hours ago I began to wonder about how this is all going
15 to come together and I have a compulsion to try to write
16 things down. What I wrote was I know in some ways objection-
17 able to some individuals and it was my honest effort to
18 think through and there are no numbers in it because it
19 seems to me that numbers are things we, you know, require
20 detailed study by groups both different and differently
21 constituted than this and with more time, but what I wrote
22 down was the following and let me read it through instead
23 of screening each sentence because it's a page and a half.
24 It goes like this:

25 One. There should be quantitative safety goals

1 in order to enhance the protection of the public, not
 2 directly but by making the regulatory process less capricious
 3 and more objective, and then A) an understood standard
 4 to meet to subject in the end to political test. It
 5 forces quantitative analysis of rules and sub-system
 6 standards and it provides a diminimous basis, a basis
 7 for diminimous standards.

8 Two. The goals should include a small number
 9 of hazard state or sub-state requirements or sub-goals
 10 so that not only a final grade be achieved. Every professor
 11 knows the difficulty of giving only a final grade is my
 12 comment to that. Every professor understands that.

13 Three. The licensing process should be
 14 deterministic with deterministic basis justified through
 15 demonstration that are assuredly meeting the safety goals.
 16 Both sub-system and whole plant analyses can contribute
 17 to this and it is recognized that in the present state of
 18 the art, a large element of judgement will be involved
 19 as well as recourse to operating experience. The one
 20 exception to the deterministic rule should be that an
 21 applicant for a license should be free to propose a new
 22 system or sub-system and to attempt to prove by analysis
 23 whether it better achieves the goal. That's different
 24 perhaps.

25 Four. The numbers associated with the goal require

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political consensus with the development of techniques for calculation requires much more technical work. In particular, there may be some sub-goals for which the calculation is now beyond the state of the art. There is an interaction here between desirability and feasibility and then I put in c'est la vie. That's certainly true in my life.

Five. The goals should guarantee so far as possible that the public benefit of nuclear power is substantially greater than the risk which is part of the overall cost which should not be so unevenly distributed that any individual is unreasonably exposed to risk. This is an effort to meet the equity issue. It is recognized that this trade-off between public benefit and individual cost is inherent in any complex society and the issues are no different and no simpler here.

Six. The goals should be dynamic as technology progresses but grandfathering plants already approved should be normal policy in the absence of overriding the safety considerations.

Seven. Political consensus and public acceptance are essential for the end product but the responsibility of the NRC is to protect the public not to satisfy it. These are not always compatible and (if doctors were licensed through a public hearing we would have even more charming

1 quacks than we now do.) Then the ultimate recommendation.

2 Eight. A finer group than this should meet in a
3 finer place than this to flush out these recommendations.

4 That is a serious effort to try to summarize
5 some general conclusions which might conceivably be of
6 value.

7 MR. BURSTEIN: I would take 7½ but that finer
8 group business --.

9 DR. MAZUR: I think that's very good. Can I
10 make one bit of an editorial?

11 To demand political consensus, not even to
12 request it is an unusual thing because we don't operate
13 on political consensus. Our decision making is based
14 on decisions without consensus.

15 DR. LEWIS: By consensus I don't mean unanimity.
16 I mean political acceptance. What we normally do, you know,
17 we can't do things --

18 DR. MAZUR: But that's definitely not consensus.

19 DR. LEWIS: I see, I may have misused the word.
20 Forgive me. I certainly don't mean unanimity. I mean,
21 you know, that you can do it. In a democratic society.

22 DR. MAZUR: I'm grateful for your inclusion of
23 the equity item. On the basis of that, I withdraw any
24 other objection.

25 DR. LEWIS: I was not trying to make you withdraw.

1 I was trying to pick out the finer point of your position.

2 DR. BEYEA: I thought that the list by and
3 large is excellent but I still have a problem though with
4 the statement that the benefits should exceed the risk.
5 I don't know how you make such a calculation except on an
6 individual basis so I'd like some explanation. You said
7 that the benefits of nuclear power should exceed the risk.

8 DR. LEWIS: Yes.

9 DR. BEYEA: Are you talking about dollars?
10 Are you converting risk to dollars?

11 DR. LEWIS: No, I'm not, I said a finer group
12 should meet in a finer place to flush out these principles.
13 I'm not prevented -- we're now arguing -- I'm not prevented
14 from establishing principles which I would find difficulty
15 implementing. I usually try to start by establishing the
16 principles and then try to implement them instead of
17 setting the principles to match what I can implement.

18 And I think the ultimate societal objective is
19 to make the benefits exceed the risks. I grant as well
20 as anyone else. I've tried. It's very difficult.
21 One way of doing it and there are many, is to translate
22 everything into dollars and another is to translate every-
23 thing into lives and another is to translate everything
24 into loss of life expectancy. There are many ways --
25 that's the level of detail that we can talk about at great

1 length and I'm not particularly personally an advocate of
 2 any of these but I wouldn't like the general point. The
 3 objective is that the benefit exceed the risk and be
 4 obfuscated by forcing me to set a dollar value on lives
 5 which I'm happy to do but you know, my judgement about it
 6 would be different from yours depending on whose life
 7 we're talking about. It becomes very individual, sure.

8 MR. LEVINE: I just wondered, does that statement
 9 about that benefit being greater than the risk mean that
 10 you are likely to require that the numbers be set by means of a
 11 benefit risk assessment?

12 DR. LEWIS: No. Because the term -- I carefully
 13 avoided the term cost benefit analysis or risk benefit
 14 analysis or risk benefit technology or methodology.

15 Because, you know what I mean. There is so much
 16 masquerade under that that I don't subscribe -- that I
 17 don't endorse that but the general principle in some
 18 rational way one should make the benefits exceed the risks,
 19 I agree to. They just showed me Comar's thing which says
 20 the benefit should greatly exceed the risk and I don't agree
 21 with that, or the costs, I mean, more than the risks, because
 22 when we go into the store and buy things, we don't ask that
 23 their values greatly exceed what we spend for them. We ask
 24 only that it exceed what we spend for them. That's the way
 25 we run a society and I don't see why we should run this

1 particular aspect of society in an irrational way. 123

2 MR. LEVINE: I also didn't follow what you said
3 about grandfathering. I'm not sure of the meaning.

4 DR. LEWIS: Grandfathering. Well, the concern
5 there is -- maybe you don't want to have this debate on this
6 document.

7 CHAIRMAN KOUTS: No, no, that's fine.

8 DR. LEWIS: What I mean is that you run the risk
9 in a new thing like this which is -- forgive me, it is
10 hard to do, that when you set the numbers for the first
11 time, a finer group and ultimately the regulatory agency
12 sets numbers, it may set them badly. In either direction.
13 And, therefore, there will be a period as one gets experience
14 with quantitative goals and with quantitative analysis
15 in which these numbers will change. I don't want that to
16 introduce an excessive unpredictability into the licensing
17 process. So, I would say if a plant is approved at the
18 construction level as having met a set of regulatory
19 deterministic regulatory requirements which meet a safety
20 goal and we later learn that that particular set of
21 regulatory requirements doesn't meet the safety goal,
22 I would normally grandfather the plant unless there really
23 is an overriding safety issue. If there is an overriding
24 one there is no question that that takes precedence over
25 anybody's investment. That's what I mean by grandfathering.

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DR. JOKSIMOVIC: A clarifying question.

You said licensing should be deterministic.

DR. LEWIS: Yes, that's my view.

DR. JOKSIMOVIC: As opposed to probablistic.

DR. LEWIS: That's my view.

DR. JOKSIMOVIC: I know what people mean by that but I'm not sure I know what you mean by that.

DR. LEWIS: What I mean by that is the general principle of law that a person should know what requirements he has to meet to get a license. And I don't know a way to do that without having deterministic requirements. Examples maybe clarify it better than anything.

The requirement, forgive me, on an airplane wing is declared in terms of a particular stress level it has to meet. That's deterministic. That stress level is determined through very complex analyses of the probability of hitting gusts greater than a certain speed of gusts with the fact that the wing loading is proportionate to the square of the sum of the airplane speed and the gust speed and it comes from the fact that with a given stress level, the probability that a wing gets blown off is at an acceptable point. Still, at the licensing level, what the person has to show is that the airplane meets the stress level. And that's my view of the proper role of the probablistic assessment at this level. Maybe when we're all

1 gone and other more learned, finer committees are sitting
2 at this very table it will be possible to do better but
3 I see it happening that way.

4 DR. JOKSIMOVIC: I recall that Reg Farmer and
5 John Wreathall verified it, told me that when the British
6 airport authorities applied for license for a blind landing
7 for the planes at the London/Heathrow airport, they had
8 to meet a quantitative goal. Are you opposing that sort
9 of criteria?

10 DR. LEWIS: No, in a case in which the whole
11 act can be subjected to a quantitative probablistic risk
12 assessment, I have no problem. I don't think we're there
13 yet and I have no problem --

14 MR. LEVINE: So you would say at this time?

15 DR. LEWIS: At this time, sure. No, if in the
16 end and let me just say what trap I'm trying to avoid, the
17 trap I'm trying to avoid is if when we're to go to that
18 procedure for plant analyses, you know, in which you simply
19 say you have to prove to my satisfaction that the probability
20 of killing X people is less than P_0 then I can only see
21 that happening if one is -- I've said this before -- if
22 one is prescriptive about the techniques -- if one takes the
23 guide book for how to do probablistic risk assessment that
24 is being developed at NRC and makes everybody use it and
25 I think that at least at this stage it's not going to be that

1 fine a guidebook. Forgive me. If there were such a fine
2 guidebook then I would have no problem with the final
3 grade.

4 DR. JOKSIMOVIC: I haven't seen the guidebook for
5 the London/Heathrow airport but I don't think it's that
6 either.

7 I don't see that there's much of a difference
8 between that or let's say 10^{-4} for probability of core
9 melt.

10 DR. LEWIS: No, no. First of all I think it was
11 10^{-6} per landing. I've even forgotten what the system
12 was, it's not the same as R CAT 3. It's a different
13 system and I'm really not that informed on it.

14 We have zero landing too. We have so-called
15 CAT 3 landings, category 3 landings and I just don't
16 know in any detail what -- of that analysis, but I assume
17 that lots of pilots -- it's an automatic system. There
18 were failure rates for the essential components probably
19 measured by long run-ins on the components and these
20 things were factored probably into credible estimates.

21 DR. JOKSIMOVIC: -- Reg Farmer. Are you familiar
22 with that, John?

23 MR. WREATHALL: On which, this landing technique?

24 DR. JOKSIMOVIC: Yes.

25 MR. WREATHALL: The way in which it was done in

1 practice was a combination of analytical techniques and also
 2 experience. There had to be x number of landings carried
 3 out in perfect flying weather -- landings fully hands off.
 4 -- a demonstration of the analytical process. It was valid.
 5 But the question would be --- whether the analysis was valid.
 6 And if it was clear -- decide whether that analysis was
 7 valid or not. There wasn't a textbook given -- technique.
 8 That could have been queried, it wasn't. If it would have
 9 been it would have validated the cost analysis.

10 DR. JOKSIMOVIC: In my mind there is no difference
 11 between that and having a probability for ten miles for
 12 core melt.

13 DR. LEWIS: I guess in my view it is because that
 14 would be a much easier job.

15 But now we're hagglng. As the joke goes we're
 16 hagglng over price. Because I would certainly agree that
 17 the credibility of a full probablistic analysis that would
 18 product a probability consequence curve on which some
 19 reasonably random sample of experts agree, if that could
 20 be done in a credible way I would have no problem in
 21 gradually shifting the licensing over to that. I just
 22 don't think we're anywhere near that now.

23 MR. LEVINE: My understanding is that the analysis
 24 that was done in effect did not predict 10^{-6} but it was
 25 10^{-5} and decided to go ahead anyhow. Is that correct?

1 That's what Farmer -- Farmer's analysis said 10^{-5} .

2 DR. LEWIS: I'm simply not sufficiently familiar
3 with it. I do know that for the analcous system that
4 the U.S. Cat 3 landing, it was not done in such a systematic
5 way by our FAA but it's still acceptable for properly
6 equipped aircraft and properly trained pilots.

7 DR. JOKSIMOVIC: Reg Farmer is of the opinion
8 that we do the best analysis in the nuclear field.

9 DR. LEWIS: Well, this is an issue we could
10 perhaps resolve then later because as a general principal,
11 I do not believe that at this time but I don't know what
12 this particular analysis was. I do know what we do in the
13 aviation field and in this country, and we're simply
14 dealing with simpler systems at that level, also remembering
15 that the fraction of time which an airport is below a
16 hundred feet which is category 2 which is a triviality,
17 is infinitesimal. The fraction of a time that an airport
18 is under instrument conditions which is below a thousand
19 feet, the last time I remember looking at the numbers,
20 the worst airport in the country is Los Angeles and that
21 was only 10%. So the vast majority of the time a landing,
22 well, you know that from experience is a triviality --
23 every now and then it comes down to a few hundred feet. For
24 my airplane my limit is 200 feet -- I can only go below
25 200 feet and I've only once failed to make it in on a landing.

1 but I didn't get killed.

2 DR. JOKSIMOVIC: What is the probability?

3 DR. LEWIS: I'm only saying that such a system
4 gets tested very rarely.

5 DR. JOKSIMOVIC: Oh really? At London, too?

6 DR. LEWIS: Yes, at London, too.

7 MR. SALISBURY: They've cleaned up all the fog
8 there and stopped burning coal.

9 DR. JOKSIMOVIC: I would appreciate it if Hal
10 would put out a statement over there to this effect, that
11 these -- temporal.

12 DR. LEWIS: I would have no compunction about
13 putting in a statement which would go roughly like this.
14 This -- I hate the word methodology but this is a dynamic
15 field and ultimately it may be that one can sufficiently
16 credibly predict the probability consequences curve for
17 reactor accidents with sufficient skill that one could
18 use them directly in the regulatory process, but I personally
19 do not think that time is now.

20 DR. JOKSIMOVIC: Yes, but what do we have now?

21 DR. LEWIS: We have a deterministic system which
22 is based on --.

23 DR. JOKSIMOVIC: What was that to bear in mind
24 what we're comparing against?

25 DR. LEWIS: That's right.

1 DR. JOKSIMOVIC: And I've been --- PRA as a
2 tool for making decisions than we've been doing in the
3 last x years.

4 DR. LEWIS: Of course you know I agree with
5 that but it's the level of decision that we're talking
6 about and I believe that is a far better tool for making
7 the decisions about the deterministic requirements that
8 go into the licensing process.

9 DR. JOKSIMOVIC: But do you believe that as a
10 result of what we do somebody has to say at the NRC that
11 in the auxiliary feed water system we need three pumps?
12 Or would you let designers make the decisions and its
13 much better to tell the designers they must meet the
14 goal of 10^{-3} but demand or something as opposed to how
15 many plants and how many valves and that kind of stuff.

16 MR. SALISBURY: Didn't you agree earlier that
17 there should be a transition period?

18 DR. JOKSIMOVIC: Yes.

19 MR. SALISBURY: Why do we keep going over the
20 same thing?

21 DR. MAZUR: I think Hal is saying the same thing
22 with slightly different words.

23 DR. LEWIS: There was astonishingly little
24 dissent. I'm shocked.

25 MR. LEVINE: I think Herb has some additional

1 points.

2 CHAIRMAN KOUTS: I have quite a bit to add.

3 DR. LEWIS: That's right. This was a core, I hoped
4 of things.

5 MR. BERNERO: For some time I've been looking
6 forward to a finer group than this --in another place.
7 --- safety goal, and I recognize that many probablistic
8 analysis are done on plants and a concern that I've had
9 for some time now is that in doing an analysis of a plant,
10 one is frequently analyzing a part of the plant -- a
11 safety concern arose. Is the auxiliary feedwater system
12 seismically qualified or did you discover that there were
13 defective motors in some system and one is frequently
14 confronted with a situation wherein all you have is a single
15 accident sequence calculation and probably a rough one at
16 that.

17 You don't have good confidence bounds on it.
18 It's a best estimate, -- and all. And in attempting to deal
19 with that, a number of us have discussed it at length inside
20 the staff and we came up with the following logic, at least
21 this is the logic I hold.

22 Some years ago, Wash-1400 calculated the probability
23 of core melt and the probability of containment failure and
24 the probability of early fatality and the probability of
25 latent cancers and so on, and there was great controversy

1 about it. The controversy was centered on the credibility
2 of the analysis and certainly of the analysis and not
3 whether that level of risk if credible was acceptable or
4 not. It was almost a tacit consent if you could really
5 show that the risk is like that it's acceptable, so I start
6 from the point and say that Wash-1400 and later analyses that
7 may be incestuous -- there may merely be children of Wash-1400
8 they suggest that the probability of core melt is in the
9 range of 10^{-5} to 10^{-4} per year and in that context we
10 said before and I think most reasonable people would agree
11 the dominant risk sequences in that range may be worth
12 fixing so that if one finds an accident sequence in a random
13 analysis for a plant for which there exists no complete
14 spectrum of analysis, all you know is that one thing, that
15 if you calculate a core melt accident sequence it's
16 probability is in the range of less than 10^{-5} , leave it
17 alone. If it's in the range of 10^{-5} per year to 10^{-4} per
18 year it may be worth fixing. And if it is higher than that,
19 to a reasonable degree, you can trade exposure time for
20 level of risk with the following: The plant is nominally
21 rated to operate for about 30 years. So if the probability
22 of core melt is 10 times higher than that Wash-1400 rate,
23 than the exposure time ought to be at least 10 times less than
24 that, so that if the probability of core melt is in the
25 range of 10^{-4} to 10^{-3} per year then you ought to fix it but

1 it is reasonable to take up to a few years to fix it and
2 if you go up another decade then it's only a few months
3 to fix it. And if you go up another decade in a few days
4 you shut it down.

5 That's what was -- by the way it's mis-typed in
6 that draft, NUREG0764 or whatever the number is that was
7 handed out. I wonder what your reaction is to that primitive
8 logic or how to deal, just as an interim measure, how to
9 deal with the occasional accident sequence calculation that
10 cannot be dealt with with any consequences -- you can't
11 assign solid confidence bounds to it. You can't say how
12 it compares to all the other risks in that plant because
13 you haven't calculated them.

14 MR. LEVINE: The problem is that in all your dis-
15 cussion here you've ignored what size release there might
16 be in that sequence. If the size release is 1/10th of
17 the largest release in Wash-1400 has essentially no
18 calculable consequences, so I think you have to be able to
19 pin some consequences on it to be able to think about it.

20 MR. BERNERO: Admittedly. One has to look at
21 it and say, is the -- there are a number of factors that
22 would bias that. Is it a very serious release, or a mild
23 release? Is it a popular site? Is it Indian Point or
24 is it Palo Verde or Crystal River or some place that's
25 surrounded by alligators. And also who did the analysis?

1 How thoroughly did he do it. Many of those analyses are
2 primitive in the extreme.

3 MR. LEVINE: I would be very hesitant on making
4 any judgements on primitive analyses, as a matter of fact.

5 MR. BERNERO: There would be highly objective
6 correction factors, too. But the core of the logic --
7 it's happening every day that individual do things, a variety
8 of methods of calculating core melt probability. And
9 immediately there is a great bewilderment -- how urgent is
10 that? There's one that the ACRS has bounced around with
11 us for some time. Auxiliary feedwater system reliability
12 for older PWR's where the seismic design criteria were
13 not applied to that system. There's a very primitive
14 analysis of the probability of core melt caused by a loss
15 of auxiliary feedwater --

16 MR. LEVINE: Due to an earthquake.

17 MR. BERNERO: Due to an earthquake. And that
18 would be a fairly serious release.

19 MR. LEVINE: You don't melt the core just due to
20 loss of auxiliary feedwater; you have to have some other
21 things happen, too.

22 MR. BERNERO: The analysis tried to trace core
23 melt due to --

24 DR. LEWIS: You obviously need some other failure.

25 MR. LEVINE: You have to lose electric power.

1 And that's a very tough analysis to do realistically -- the ¹³⁵
2 seismic part of it.

3 MR. BERNERO: I agree it's very tough, in fact
4 the technology --

5 MR. LEVINE: --- asked me how much credence I would
6 give to a primitive analysis of that.

7 MR. BERNERO: I'm more asking the group for their
8 reaction as the logic of using Wash-1400 as an acceptable
9 level of risk until some better basis is available. Just
10 asserting that if the level of risk calculated by Wash-1400
11 were real, at least for the time being, it could be considered
12 an acceptable number.

13 MR. LEVINE: I have no quarrel with the numbers.

14 MR. BERNERO: And secondly saying that one can
15 trade exposure time for level of probability.

16 MR. LEVINE: I have no problem with that concept.
17 I have no problem with the numbers you spoke about but I
18 am very leary about the competence of the analysis that
19 would be made and you're just going to have to look at those
20 one by one.

21 MR. BERNERO: And make a subjective correction.

22 MR. LEVINE: I don't know whether it's subjective
23 or what but I think you have to look at the analysis very
24 carefully. I don't know who is doing those analyses, I
25 don't know if they're people who thought they were ---

1 MR. BERNERO: You can only make the judgements
2 when you look at the specific analysis, but the core thing,
3 if it's a virtually perfect analysis of a single sequence
4 is what I'm asking you, you know, if it's the best available
5 analysis --

6 MR. LEVINE: It's a very good analysis. I have
7 no problem with your numbers or your concept.

8 DR. BEYEA: It sounds logical in many ways but
9 I would also want to know how long -- it might only take
10 a month of two to fix -- why would you give them, why would
11 you say three years unless the analysis might be wrong.
12 It seems the only time you come up against a constraint is
13 if it will take a long time to fix.

14 MR. BERNERO: I put it in a way which a regulator is
15 forced to put it. You have until to fix. It's a limit
16 more than an objective. It wouldn't be an objective unless
17 it took about 3 years to fix it. It would be designed and
18 analyzed and fixed and bound the time.

19 DR. BEYEA: I would think you'd want it fixed
20 as reasonably as -- or AFARA Principle.

21 DR. BEYEA: As fast as reasonably achievable.

22 MR. BURSTEIN: I think I have to agree with Jan
23 that sometimes it's a matter of the practical, perhaps,
24 procurement manufactured delivery of accessories or devices
25 to repair and one might have a real serious potential problem.

1 The option is either to shut the plant down for two years
 2 while you wait for that piece to come in or to perhaps assume
 3 a different risk level because perhaps the costs, the social
 4 costs of being without that energy for that period of time
 5 might be significant in comparison to the potential risk and
 6 we do that and have done that all the time. So I have
 7 some trouble with the methodology again because I'm not
 8 sure what the nature of the fix could be. Obviously if you
 9 come under the curve, if your several sequences show that
 10 breaker DB47 comes up 16 times as one of the causative
 11 things, you look at that instantly because you could replace
 12 or fix a breaker in a matter of a few days but if you have
 13 to install a third pump as an example, that might take 3 years.
 14 And I don't know what you do in the meantime.

15 MR. BERNERO: That's the very thing I'm talking to.
 16 It is a rationale for saying yes indeed you can wait until
 17 the next review until shut down to replace that device, or
 18 yes indeed you can wait until the cable manufacturer provides
 19 that specialty cable which is three years hence, or no I'm
 20 sorry, you cannot, the level of risk is too high. You either
 21 fix it in two days or the plant is shut down.

22 DR. JOKSIMOVIC: The probabilities aren't going
 23 to tell you what the level of risk is.

24 MR. BERNERO: One has to correct the analysis --
 25 it's a core melt.

1 MR. LEVINE: If it's a small release you have
2 plenty of time. If it's a very large release --

3 DR. MAZUR: I'm not sure. You seem to be addressing
4 it as if there was an answer you want us to give. And
5 obviously it's a judgemental thing. There isn't an
6 appropriate clear response.

7 MR. BERNERO: Principally, the thing I'm interested
8 in is your reaction to using the calculated level of risk
9 in Wash-1400 as an assertable standard until the doctor
10 comes with another one. A better one, a more finely tuned
11 level of this.

12 DR. MAZUR: Wash-1400 is given that whether
13 manifestly or latently the way it functions as an assurance
14 about nuclear power plants it surely seems to be a very
15 low statement of risk. As these things go, if you want
16 just gut responses then I would think if one could be assured
17 that that level of risk would be able to be adhered to,
18 given a -- thing anyway, I'd certainly have no problem with
19 it.

20 MR. BERNERO: Then the other is the trade-off,
21 the exposure time. Now, there are going to be many
22 subjective corrections -- does that probability of core
23 melt really represent risk -- was that analysis a best
24 estimate or a very conservative bound or a highly -- you
25 know, there are many many biases that cannot be stated

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in formulas --

DR. BEYEA: Why not take 1/10th of it? Why not take ten times the Wash-1400 probability to be sure -- to be conservative.

DR. MAZUR: But it's so super-optimistic already.

DR. JOKSIMOVIC: Are you saying that instead of using ACRS or Levine or Joksimovic or Kinchen, you want to use Wash-1400 numbers in this type of analysis?

MR. BERNERO: I mean temporary core melt probability. Goal or limit.

DR. JOKSIMOVIC: That's not telling you about the risk.

MR. BERNERO: That's a luxury I don't have.

DR. MAZUR: You're saying you want to know if you've got a quick thing to worry about.

MR. BERNERO: Yes, an index of --

DR. MAZUR: I'd like to go to what Jan said. In some of our discussions, if you recall the UCS added a factor of 100 to Wash-1400.

DR. BEYEA: On probability?

MR. BERNERO: On risk. And if one looked at this curve which Saul handed out which is really -- Wash-1400 as a similar one. If you took the reactor risk with the present scale of reactor's order of magnitude, -- and even multiply it by a 100, one might still argue that at least

1 temporarily acceptable.

2 We just used Wash-1400 --. What you're really
3 dealing with is a 1 in 12,000 probability because that
4 is in a year.

5 MR. BERNERO: Well, I just made it linear. A
6 decade in probability is a decade in time.

7 DR. LEWIS: What troubles me a little bit is in
8 terms of trading time for risk, that's obviously done
9 everywhere all the time, but Wash-1400 as it came up
10 yesterday is a particular reactor. There are other reactors
11 right now out there if you were to do the same calculation
12 would come out substantially higher.

13 MR. LEVINE: That's just what he's talking about.

14 MR. BERNERO: I believe that.

15 I find there are toe nails, I find there are
16 thumbs and I find there are left arms.

17 DR. LEWIS: I thought you were talking about
18 newly invented sequences. The same old sequence done
19 for a different reactor.

20 MR. BERNERO: No, I mean any sequence done for
21 any reactor where that's all I have before me, is a one
22 accident sequence.

23 DR. LEWIS: But the same sequences that were in
24 Wash-1400 or maybe new ones depending on the design.

25 MR. BERNERO: S2HF in the ice condenser was a new

1 accident sequence. And S2HF was a given proba--TPI for
2 Gran Gulf sits on the table before me now. 8×10^{-4} per year.
3 What should I do with it?

4 DR. BEYEA: Plus or minus how many factors of 10?

5 MR. DEVINE: The first thing you have to do is
6 make sure it's a competent analysis.

7 DR. LEWIS: That's right.

8 MR. BERNERO: And what biases are in it and what
9 conservativisms, how thorough.

10 MR. LEVINE: And then find out how large the
11 release is. If it's less than a category 3 forget about it.

12 DR. LEWIS: I'm going to have to call Dan right
13 this moment. That's a joke.

14 MR. BURSTEIN: Herb, did you have some things
15 you wanted to add?

16 CHAIRMAN KOUTS: Not a thing.

17 MR. BURSTEIN: I thought Saul said you were going
18 to embellish on Harold's --

19 CHAIRMAN KOUTS: I'm going to embellish it, but
20 tomorrow.

21 DR. MAZUR: May I just ask a question? Unfortunately
22 I have to leave early in the morning and will miss a lot
23 of the surmation, but could you just sort of give us your
24 gut reaction in terms of what kinds of expectations you had
25 yesterday morning. Is it disappointing, is it --

1 MR. BERNERO: A finer group in a finer setting
2 might --.

3 I'll tell you what my reaction is. I felt that
4 we came into this workshop with a lot less homework done
5 in advance than we should have had.

6 MR. LEVINE: By the NRC.

7 MR. BERNERO: By the NRC. I think we could have
8 been much better structured and much clearer in what was
9 asked of you and much clearer in how we structured the
10 activity to gain the best fruits of your labor. However,
11 I have found a higher yield than I expected considering that
12 lack of structure. I think, although I can't speak for
13 the other two groups except for what I heard this morning,
14 I think that we are getting more than we deserve out of
15 it.

16 DR. LEWIS: One constructive suggestion is that
17 a larger ratio of plenary to panel session would have been
18 fruitful because the way it is now, the introduction which
19 I unfortunately missed yesterday, there was a little bit
20 of round tabling this morning and that's it. We have a
21 final report tomorrow.

22 MR. LEVINE: I would speculate that if this group
23 had been expanded slightly with some other disciplines that
24 it has the other two panels will determine to be unnecessary.
25 I'm speculating based on what I heard this morning not what

1 we're going to hear from them finally. I may be wrong. 2-10

2 DR. LEWIS: I rarely agree with Saul, but --.

3 MR. BERNERO: Let me put out a tentative proposal
4 and see if you have a comment to make on it. I would think
5 that the next round would consist of a much more structured
6 proposal of a goal with advocates of that proposal not
7 only ready to explain why the goal is constructed that way
8 but to begin by presenting the goal and why it was structured
9 and why the numbers and why the logic and all that stuff.

10 DR. LEWIS: It is a peer review of a proposal.

11 MR. BERNERO: And then the group would be redundant --
12 there must be separate groups but their charter would be
13 the same. They would each go off in their corner and
14 independently critique that and then come back in the grand
15 ballroom.

16 DR. MAZUR: That's very interesting by the way,
17 if you maintain it and raise the issue of how reliable are
18 the critiques. Does one get a different critique depending
19 on what group you gave it to or do the groups come to some
20 agreement on these proposals which is an interesting issue
21 and the critique of the proposal depends on the composition
22 of the group and you can't put too much credence in the
23 critique but if you get a similar critique from several
24 groups operating independently you've got a lot more faith.

25 MR. BERNERO: I've done it that way before on other

1 issues, other workshop structures, and it's been quite
2 satisfactory.

3 CHAIRMAN KOUTS: Let's be clear on what was expected
4 out of this--what was expected out of this operation was
5 not to derive a safety goal, not choose among safety goals,
6 not to establish anything particular about safety goals
7 except to discuss, one safety goal in particular and then
8 other safety goals as well as they had been proposed. One
9 safety goal in particular because it had been proposed to
10 the commission in a normal document and other safety goals
11 because they had been proposed by various individuals with
12 a lot of thought and a lot of work over a period of time
13 and out of this, to try to establish whether the approach
14 which is in here or this approach is suitably modified
15 or some other approach suitably modified or some mixture
16 of all of these things -- the structure at any rate of all
17 of these approaches could be used as a basis of the next
18 step in the process. And the next step in this process
19 is one which is to be taken in house by the NRC.

20 Now, before, when is it George, July is the time
21 being thought of for the next step in this process?

22 MR. SEGE: The next paper due to the commission
23 is scheduled for August of this year. ---

24 DR. JOKSIMOVIC: When is the next workshop then?

25 MR. SEGE: The next workshop based on that schedule

1 would have to be held probably the second part of July 140
2 sometime.

3 CHAIRMAN KOUTS: So there has to be a proposal
4 formulated for that time which is based in part on documents
5 which are gathered into the NRC and based in part on comments
6 on these documents which have been generated in the course
7 of these meetings and that will be the stalking horse for
8 the next group that will be meeting to consider this matter.

9 It was not meant to arrive at this next step
10 at this meeting by any means. It was not meant that we
11 go out of this meeting with a proposed safety goal by
12 any means.

13 And all of the round discussions which have
14 taken place here I think really do contribute to input
15 to the next step even though they may not have generated one
16 thing in particular they've generated the aspects of that
17 thing in particular that you've fabricated.

18 Well, it is 24 minutes after 5. Our schedule says
19 5:30 we break and I think Parkinsons has almost won again.
20 I think returns can become negative if they diminish far
21 enough.

22 (Thereupon, at 5:30 p.m., the meeting was
23 adjourned.)
24
25

