

AP 525.02

EMERGENCY PLAN EXERCISES AND DRILLS

1.0 Purpose

- 1.1 Implementation of drills and exercises involving onsite and offsite personnel as appropriate and at the frequencies specified in Attachment 7.
- 1.2 To detail the requirements for drills and exercises which test the efficiency of the Emergency Plan.

2.0 Personnel Responsibility

- 2.1 The Emergency Planning Coordinator is responsible for preparing all drill scenarios.
 - 2.1.1 The development of the scenario may be delegated to an individual whose expertise is directly related to the type of drill to be conducted.
- 2.2 The Manager, Nuclear Operations is responsible for reviewing and approving the drill scenario.

3.0 References

- 3.1 AP 500 Rancho Seco Emergency Plan.
- 3.2 AP 501 - 599 Emergency Plan Procedures.
- 3.3 NUREG-0654 FEMA-REP-1 Rev. 1 "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants".

4.0 Attachments

- 4.1 Attachment 1 - Communication Drill Verification Form.
- 4.2 Attachment 2 - Annual Medical Emergency Drill Verification Form.
- 4.3 Attachment 3 - Annual Radiological Monitoring Drill Verification Form.
- 4.4 Attachment 4 - Health Physics Drill Verification Form.
- 4.5 Attachment 5 - Annual Exercise Verification Form.
- 4.6 Attachment 6 - Coordinator's Checkoff List.

4.7 Attachment 7 - Frequencies of Drills and Exercises.

4.8 Attachment 8 - Definition of Drill and Exercise Frequencies.

5.0 Initial Conditions and/or Requirements

5.1 The appropriate enclosure shall be completed and kept on file with the Emergency Planning Coordinator.

5.2 An unplanned activation of the Emergency Plan shall satisfy applicable drill requirements if the following are conducted.

5.2.1 A critique is conducted following termination of the Emergency Plan implementation.

5.2.2 The appropriate attachment is completed.

5.3 Attempts will be made to rotate drill personnel.

5.4 Drills and exercises should be conducted at the frequencies specified by Attachment 7. Definitions of frequencies are in Attachment 8.

5.5 Actual emergency communication equipment should be used.

5.6 All drill and exercise scenarios shall be developed and conducted such that the safe operation of the plant is not compromised.

6.0 Procedures

6.1 The Emergency Planning Coordinator shall prepare exercises and drills to be carried out to allow free play for decision making and to meet the following objectives. Scenarios for use in exercises and drills shall include but not be limited to, the following:

6.1.1 The basic objective(s) of each drill and exercise and appropriate evaluation criteria;

6.1.2 The date(s), time period, place(s) and participating organizations;

6.1.3 The simulated events;

6.1.4 A time schedule of real and simulated initiating events;

6.1.5 A narrative summary describing the conduct of the exercise or drill to include such things as simulated casualties, offsite fire department assistance, rescue of personnel, use of protective clothing, deployment of radiological monitoring teams, and public information activities;

- 6.1.6 A description of the arrangements for advance materials shall be provided to observers.
- 6.2 The Emergency Planning Coordinator shall take the necessary steps to implement the drill or exercise. This will include informing the necessary personnel, departments, and offsite organizations as necessary to assure adequate coordination. The Emergency Planning Coordinator will complete Attachment 6.
- 6.3 The drill or exercise shall then be conducted as outlined and according to the Rancho Seco Emergency Plan. The Emergency Planning Coordinator is responsible for the completion of the applicable Attachments (1, 2, 3, 4, 5).
- 6.4 A critique of the drill or exercise shall be conducted by the Emergency Planning Coordinator as soon as practicable following the drill or exercise.
- 6.5 A report of the drill or exercise shall be prepared by the Emergency Planning Coordinator and shall include possible corrective action items.
- 6.6 The Plant Review Committee (PRC) shall review the drill or exercise report.
 - 6.6.1 The PRC shall assign responsibility for implementing corrective action items.
 - 6.6.2 The PRC shall review the corrective actions and, if confident that appropriate action has been initiated, shall sign off the appropriate enclosure.
 - 6.6.3 The PRC reviews the report and assigns responsibility for implementing corrective action items.

COMMUNICATION DRILL VERIFICATION FORM

The monthly/quarterly/annual Emergency Plan Communication Drill was conducted
(circle one)

(Date)

Communication Equipment Location

Drill Performed By:

Control Room

Technical Support Center

Emergency Operations Facility

Corporate Emergency Center

Communication equipment performance

Initials/Date

Control Room

_____/_____

Technical Support Center

_____/_____

Emergency Operator Facility

_____/_____

Corporate Emergency Center

_____/_____

Communications with offsite agencies

Sacramento County EOC

_____/_____

Amador County EOC

_____/_____

San Joaquin County EOC

_____/_____

California State OES

_____/_____

(Quarterly) NRC

_____/_____

(Quarterly) FEMA

_____/_____

(Quarterly) CA Dept. of Health
Services, Rad Health

_____/_____

(Annually) Field Assessment Teams

_____/_____

Initials/Date

Critique Conducted

_____/_____

Report Prepared

_____/_____

Corrective action recommendations
recorded and submitted to PRC

_____/_____

Remarks: _____

Signature (Emergency Planning Coordinator)

Date

Corrective action recommendations reviewed and submitted to the Plant
Superintendent:

Signature (PRC Chairman)

Date

ANNUAL MEDICAL EMERGENCY DRILL VERIFICATION FORM

The _____ Annual Medical Emergency Drill was conducted _____
(Year) (Date)

The Emergency Transport Service used was _____

The Hospital drilled was _____

Initials/Date

Critique Conducted

_____/____

Report Prepared

_____/____

Corrective action recommendations
recorded and submitted to PRC

_____/____

Remarks: _____

Signature (Emergency Planning Coordinator)

Date

Corrective action recommendations reviewed and submitted to the Plant
Superintendent.

Signature (PRC Chairman)

Date

ANNUAL RADIOLOGICAL MONITORING DRILL VERIFICATION FORM

The _____ Annual Radiological Monitoring Drill was conducted _____.
 (Year) Date

		Initials/Date
Enviroms monitored	Onsite	<u> / </u>
	Offsite	<u> / </u>
Sample media collected (AP 500 Section 8.1.2.5)		<u> / </u>
Sample media analysed		<u> / </u>
Communications satisfactory		<u> / </u>
Records satisfactory		<u> / </u>
Counties involved		<u> / </u>

What offsite agencies were involved? _____

	Initials/Date
Critique Conducted	_____ / _____
Report Prepared	_____ / _____
Corrective recommendations recorded and submitted to PRC	_____ / _____

Remarks : _____

Signature (Emergency Planning Coordinator)

Date

Corrective action recommendations reviewed and submitted to the Plant Superintendent.

Signature (PRC Chairman)

Date

HEALTH PHYSICS DRILL VERIFICATION FORM

The Semi-Annual Health Physics Drill was conducted _____. This drill
Date
does/does not satisfy the Annual Health Physics Drill requirements.

Initials/Date

Were airborne, liquid and direct radiation
measurements performed?

_____/____

Was analysis satisfactory?

_____/____

(Annual) Were implant liquid samples taken?

_____/____

(Annual) Were actual radiation levels
included?

_____/____

(Annual) Was post-accident sampling
system used?

_____/____

The California Department of Health Service, Rad Health Section did/did not
participate.

Initials/Date

Critique Conducted

_____/____

Report Prepared

_____/____

Corrective recommendations recorded
and submitted to PRC

_____/____

Remarks: _____

Signature (Emergency Planning Coordinator)

Date

Corrective action recommendations reviewed and submitted to the Plant Superintendent.

Signature (PRC Chairman)

Date

ANNUAL EXERCISE VERIFICATION FORM

The _____ Annual Exercise was conducted _____.
 (Year) (Date)

Participation of offsite emergency support personnel included:

1. Sacramento County _____

2. Amador County _____

3. San Joaquin County _____

4. State of California _____

Initials/Date

Emergency Repair Team Activated

_____/____

Critique Conducted

_____/____

Report Prepared

_____/____

Corrective action recommendations
 recorded and submitted to PRC

_____/____

Remarks: _____

 Signature (Emergency Planning Coordinator) Date
 Corrective action recommendations reviewed and submitted to the Plant
 Superintendent.

 Signature (PRC Chairman) Date

COORDINATORS' CHECKOFF LIST

Notify the following:

Initial/Date

- .1 Plant Superintendent (approval for date and time)
- .2 SMUD Supervising Telephone Operator
- .3 SMUD Dispatcher and Communications Coordinator
- .4 Consumer Relations
- .5 Emergency Plan Coordinators at offsite agencies
- .6 Rancho Seco Visitor Center Information Director
- .7 Rancho Seco Park Personnel
- .8 Sacramento County Sheriff's Department (440-5092)

_____/_____
 _____/_____
 _____/_____
 _____/_____
 _____/_____
 _____/_____
 _____/_____
 _____/_____

Verify the following:

- .1 That observers have prepared drill checkoff lists
- .2 A list of drill observers, including name, Badge number, and observation location has been given to the Emergency Coordinator and Assembly Point Coordinator at the time of the initiation of the drill

_____/_____
 _____/_____

Description of drill:

Completed by _____

FREQUENCIES OF DRILLS AND EXERCISES

A. Five Years:

A radiation emergency joint exercise appropriate to a site or general emergency that involves state, federal, and county emergency response personnel, organizations, and agencies.

B. Annually:

1. Communications between Rancho Seco, the State of California, and local emergency centers and field assessment teams shall be tested.
2. A drill shall be conducted to determine the effectiveness of Emergency Repair Team members and equipment.
3. A medical emergency drill involving a simulated contaminated individual which contains provisions for participation by local support services agencies shall be conducted.
4. A drill shall be conducted involving communications, record keeping, and sampling of onsite and offsite plant environs and radiological monitoring.
5. A major exercise shall be conducted involving participation of offsite emergency support personnel within the county and state emergency organizations.
6. A drill involving liquid sampling with actual radiation levels and use of the post-accident sampling system.

C. Semi-Annually:

A drill shall be conducted which involves response to, and analysis of, liquid and air samples, and direct radiation measurements in the environment.

D. Quarterly:

Communications with federal emergency response organizations and the State shall be tested.

E. Monthly:

Communications with state and local governments within the plume exposure pathway Emergency Planning Zone shall be tested.

DEFINITION OF DRILL AND EXERCISE FREQUENCIES

1. Five Years - Time periods from January 1 covering the subsequent sixty months.
2. Annually - Time periods from January 1 covering the subsequent twelve months.
3. Semi-Annually - Time periods from January 1 and July 1 covering the subsequent six months and not to be exceeded by more than thirty days.
4. Quarterly - Time periods from January 1, April 1, July 1, and October 1 covering the subsequent three months and not to be exceeded by more than fifteen days.
5. Monthly - Time periods from the first to last day of a calendar month and not to be exceeded by more than seven days.

AP 525.03

EMERGENCY PLAN PHONE NUMBERS
VERIFICATION1.0 Purpose

- 1.1 To provide verification of the Emergency Plan phone numbers on a quarterly basis.

2.0 Personnel Responsibility

- 2.1 The Emergency Planning Coordinator is responsible for verifying and maintaining the emergency plan telephone number listing.

3.0 References

- 3.1 Rancho Seco Emergency Plan AP 500
- 3.2 NUREG-0654 FEMA-REP-1 Rev. 1 "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants"
- 3.3 AP 2, Review, Approval and Maintenance of Procedures
- 3.4 AP 506 Notification/Communication

4.0 Attachments

- 4.1 Attachment 1 - Emergency Plan Phone Number Verification Form

5.0 Initial Conditions and/or Requirements

- 5.1 Attachment 1 shall be completed, reviewed, and forwarded to the Emergency Planning Coordinator each quarter.

6.0 Procedure

- 6.1 Each quarter the Emergency Plan phone numbers (AP 506) shall be verified. Verification shall be done by dialing the number and receiving concurrence from the answering party that said number is the current number for the location indicated. Telephone numbers shall be verified as functioning numbers if a specific use for them has not been assigned in AP 506. Any changes encountered shall be noted on Attachment 1. When changes of telephone numbers are

encountered, the person verifying the telephone numbers will inform the Emergency Planning Coordinator of the change. The Emergency Planning Coordinator will verify the number and prepare a revision to the Emergency Plan in accordance with Reference 3.4. Attachment 1 shall be reviewed by the Emergency Planning Coordinator.

EMERGENCY PLAN PHONE NUMBER VERIFICATION FORM

.1 This complies with the surveillance requirement for _____ quarter, 19____.

.2 Attach all AP 506 Attachments containing telephone numbers.

.3 Initial and date each verified telephone number.

.4 Changes

Location	Old Number	New Number	Initial/date
_____	_____	_____	____/____
_____	_____	_____	____/____
_____	_____	_____	____/____
_____	_____	_____	____/____
_____	_____	_____	____/____

.5 Above changes verified

Signature (Emergency Planning Coordinator)

Date

.6 Comments: _____

.7 Revision required to AP 506 No _____ Yes _____

Revision no. _____ submitted

Signature (Emergency Planning Coordinator)

Date

AP 525.04

EMERGENCY RESPONSE PERSONNEL
ASSIGNMENT VERIFICATION1.0 Purpose

- 1.1 To provide verification of the Emergency Plan response personnel assignments on an annual basis.

2.0 Personnel Responsibility

- 2.1 The Emergency Planning Coordinator is responsible for verifying and assigning the emergency plan response personnel.

3.0 References

- 3.1 Rancho Seco Emergency Plan AP 500
- 3.2 NUREG-0654 FEMA-REP-1 Rev. 1 "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants"
- 3.3 AP 2, Review, Approval and Maintenance of Procedures
- 3.4 AP 506 Notification/Communication

4.0 Attachments

- 4.1 Attachment 1 - Emergency Plan Response Personnel Verification Form

5.0 Initial Conditions and/or Requirements

- 5.1 Attachment 1 shall be completed, reviewed, and forwarded to the Emergency Planning Coordinator annually.

6.0 Procedure

- 6.1 Annually the Emergency Plan response personnel assignments (AP 506) shall be verified. Verification shall be done by contacting the listed individuals or their supervisors and receiving concurrence that the listed assignment is correct as indicated. Any changes encountered shall be noted on Attachment 1. When changes in personnel assignments are encountered, the person verifying the personnel assignments will inform the Emergency Planning

Coordinator of the change. The Emergency Planning Coordinator will verify the change and prepare a revision to the Emergency Plan in accordance with Reference 3.4. Attachment 1 shall be reviewed by the Emergency Planning Coordinator.

EMERGENCY PLAN RESPONSE PERSONNEL VERIFICATION FORM

- .1 This complies with the annual surveillance requirement for 19____.
2. Attach all AP 506 Attachments containing emergency response personnel by name.
- .3 Initial and date each verified name/function.

.4 Changes

E.P. Title	Assignment	New Individual	Initial/date
			/
			/
			/
			/
			/

.5 Above changes verified

Signature (Emergency Planning Coordinator)

Date

.6 Comments: _____

.7 Revision required to AP 506 No _____ Yes _____

Revision no. _____ submitted

Signature (Emergency Planning Coordinator)

Date

AP 525.05

EMERGENCY PLAN SUPPORT GROUP AGREEMENT
VERIFICATION1.0 Purpose

- 1.1 To provide annual verification of Emergency Plan Support agreements.

2.0 Personnel Responsibility

- 2.1 The Emergency Planning Coordinator is responsible for verification of all support group agreements necessary to support the Rancho Seco Emergency Plan.

3.0 References

- 3.1 Rancho Seco Emergency Plan AP 500
- 3.2 NUREG-0654 FEMA-REP-1 Rev. 1 "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants"
- 3.3 AP 2. Review, Approval, and Maintenance of Procedures

4.0 Attachments

- 4.1 Attachment 1 - Emergency Plan Support Group Verification Form.

5.0 Initial Conditions and/or Requirements

- 5.1 Agreements may include
 - 5.1.1 Contracts
 - 5.1.2 Memorandum of Understandings
 - 5.1.3 Letters
- 5.2 After drafting, but prior to submitting the formal SMUD contracts for signature they are to be forwarded to the District Counsel for review per District policy.
- 5.3 Not all agreements need updating on an annual basis. (Check expiration dates on each agreement.)
- 5.4 Changes in organizations listed in Attachment 1 will require a procedure change to be submitted per reference 3.4.

5.5 Attachment 1 shall be completed, reviewed, and forwarded to the Emergency Planning Coordinator annually.

6.0 Procedure

6.1 The Emergency Planning Coordinator shall annually verify the status of the support group agreements necessary to support the Rancho Seco Emergency Plan.

6.2 The Emergency Planning Coordinator shall update agreements approaching (i.e., 6 months) their expiration date.

6.3 The Emergency Planning Coordinator shall complete Attachment 1.

6.4 The Emergency Planning Coordinator shall initiate new agreements as necessary to support the Rancho Seco Emergency Plan.

EMERGENCY PLAN SUPPORT GROUP VERIFICATION FORM

<u>Area</u>	<u>Organization</u>	<u>Received</u>	<u>SMUD ID. No.</u>	<u>Effective Date</u>	<u>Expiration Date</u>
Medical	Sutter General Hospital				
	Radiological Associates				
	Radiological Associates				
	University Medical Center				
	Galt Fire District				
	Mr. Pavitt				
	Cordova Medical Group Inc.				
Fire	Herald Fire Department				
EOF	Herald Fire Department				
	CA Division of Forestry				
Laboratory	Sacramento Army Depot				
Radiological	Capital Aviation & Helicopter				
	DOE RATE team				

Reviewed by _____
Emergency Planning Coordinator

Date

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ATTACHMENT 1