

U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Docket/Report No: 50-333/93-05

License No: DPR-59

Licensee: New York Power Authority
P. O. Box 41
Lycoming, New York 13093

Facility Name: James A. FitzPatrick Nuclear Power Plant

Inspection At: Scriba, New York

Inspection Conducted: February 2-5, 1993

Inspector: Craig Z. Gordon 3/24/93
Craig Z. Gordon, Senior Emergency Preparedness Specialist, DRSS date

Approved By: Ebe C. McCabe 3/25/93
Ebe C. McCabe, Chief, Emergency Preparedness Section, FRSSB, DRSS date

AREAS INSPECTED

Announced safety inspection of the emergency preparedness (EP) program conducted at the James A. FitzPatrick Nuclear Power Plant. The inspection areas included changes to the emergency preparedness program; inspection of emergency facilities, equipment, instrumentation, and supplies; review of organization and management control; inspection of emergency response organization (ERO) training; and inspection of independent program audits.

RESULTS

The Emergency Preparedness (EP) program was effectively administered and implemented. Emergency response facilities and equipment were operationally ready. Management support to EP was clear. ERO training and independent program audits were complete and thorough.

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DETAILS

1.0 Persons Contacted

The following individuals were contacted during the inspection:

- * D. Ackley, Technical Training Supervisor
 - L. Anderson, Manager, Quality Assurance, White Plains Office
 - * N. Avrakotos, Emergency Preparedness Coordinator
 - * R. Barrett, General Manager, Operations
 - G. Brower, Director, Oswego County Office of Emergency Management
 - J. Chappell, Health Physicist
 - * S. Chubon, Technical Training Specialist
 - T. Coffey, Computer Software Specialist
 - * M. Colomb, General Manager, Support Services
 - B. Cosalito, Lead Auditor
 - C. Faison, Supervisor, Nuclear Emergency Preparedness
 - M. Farley, Computer Specialist
 - G. Fronk, Nuclear Training Specialist
 - * D. Lindsey, General Manager, Maintenance
 - * M. Prairie, Assistant EP Coordinator
 - A. Salemi, Director, Emergency Preparedness, Niagara Mohawk Corporation
 - * H. Salmon, Resident Manager
 - R. Schilling, Nuclear Training Specialist
 - * J. Street, Quality Assurance Inspector
 - * G. Tascik, Quality Assurance Manager
 - * A. Zaremba, Organization/Licensing Manager
- * Attended exit meeting on February 5, 1993.

2.0 Operational Status of the Emergency Preparedness Program

2.1 Changes to the Emergency Preparedness Program

Several changes to the EP program occurred since the last inspection. The inspector reviewed the changes and discussed details with the Emergency Preparedness Coordinator (EPC) and other licensee program staff as follows.

The most significant change came in April 1992 and involved replacing the EPC for EP program management. The newly selected EPC previously served as the site LEC at FitzPatrick and was Emergency Director-qualified. A transition period was provided prior to full assumption of duties. The inspector noted that the new EPC had maintained the proactive approach found during previous inspections. As a result of this change, no negative impact on the program was discernible. Administrative changes made by the new EPC, such as implementation of software-based management tools for maintaining EP program schedules and tracking EP program actions, were program enhancements.

Another change made in the program related to the system tracking action items affecting EP. The Emergency Preparedness Corrective Action Request (EPCAR) system used to track items assigned to EP was eliminated. EP items were transferred to the site-wide Action and Commitment Tracking System (ACTS). The change provided a program improvement in that EPCARs were sent by EP staff to management, but acknowledgement by management was not made for all EPCAR items. ACTS requires General Manager review and approval.

Other program changes were reviewed and discussed with the EPC. These included Emergency Plan and Emergency Plan Implementing Procedure (EPIP) changes (emergency action level status), and upgrades to computer-based systems used in EP. Although no major changes in EPIP content were noted, the licensee was revising some EPIPs to flowchart format. Emergency Response Organization (ERO) familiarity with the revised format will be evaluated during the next emergency exercise. Emergency Plan and EPIP updates were being issued through controlled distribution and were up to date in the emergency response facilities.

The inspector noted one area in which EPIPs might be improved. Review of communication procedures revealed that the licensee did not have arrangements in place to notify the NRC, State, or local authorities in accordance with 10 CFR 50.72 for those events which exceed EALs (triggering an emergency classification) but, when recognized by control room staff, were either over or below the EAL threshold. Discussions with licensee staff indicated that action to address this issue would be considered.

During the previous inspection, an area for improvement was identified relating to complexity of Emergency Action Procedure (EAP)-18, "Protective Action Recommendations (PARs)". In walk-through scenarios, shift supervisors (SSs) were unable to promptly transmit PARs due to decision blocks in the procedure which required management level interpretations beyond the scope of the SS role in accident mitigation. Although the licensee had revised the computer dose model to assist in PAR decision-making (including revised EPA protective action guides), EAP-18 remained unchanged. This item will be followed-up during the next NRC inspection.

Initially installed in 1985, a Meteorological Data Acquisition System (MDAS) upgrade completed in 1992 included new hardware and software, and allowed meteorological data to be more readily obtained. Enhancements included a new version of the operating system, replacement of microprocessors, and external data storage methodology. The inspector observed a demonstration of system capabilities and noted that meteorological data was easily retrievable.

The EPC also provided information about planned program changes. These entailed an agreement between nuclear power plant licensees within New York State to develop a combined emergency action level (EAL) document applicable to each reactor site in the State, possible use of the simulator for exercises and drills, and modifications to the Operations Support Center (OSC) and Joint News Center (JNC) resulting from new site construction. These will be reviewed after changes are implemented.

Based upon the above review, this area was appropriately implemented.

2.2 Emergency Facilities, Equipment, Instrumentation and Supplies

Inspection of the Control Room, Technical Support Center (TSC), OSC, and computer room indicated that facilities were in a good state of operational readiness. Emergency response facilities (ERFs) were adequate to support emergency response and were in agreement with information specified in the Emergency Plan. The Emergency Operations Facility was not inspected; EOF capability was evaluated during the December 1992 annual exercise and determined adequate. The inspector examined a sample of designated equipment and supplies (downwind survey kits, control room breathing air system) and noted that surveillances of equipment were performed at the prescribed frequencies, instrumentation was calibrated as required, and equipment and instruments were operable.

Demonstrations were observed of the Gatelog/Accountability (the licensee's system for determining protected area accountability) and MDAS systems. Each system functioned efficiently. Communications equipment including telephones, public address system, and portable radios were inspected in the above facilities and were consistent with EIPs.

Two noteworthy initiatives were taken by the licensee. FitzPatrick was to be one of the first facilities which coordinated with the NRC on installation of the Emergency Response Data System (ERDS) to provide plant data to the NRC. Also, the computer-based Destiny System which allows success-pathway oriented scenarios as an interactive operator tool during drills and exercises was completed. Licensee representatives indicated that ERO personnel training on ERDS operation was ongoing. The Destiny System, installed during 1992, interfaces with the plant computer in ERFs, the Safety Parameter Display System (SPDS), and ERDS for real-time display of scenario data.

Based upon the above review, this area was effectively implemented.

2.3 Organization and Management Control

In the last inspection, changes affecting EP were noted in site management staff. During this inspection the inspector followed-up on the impact of changes through interviews with the Resident Manager, General Manager (GM), Operations, and General Manager, Support Services to discuss their involvement in the program. Management support for EP was clear; each individual provided good awareness of EP program details. Managers stated that they meet regularly with the EPC to obtain updates on the status of program activities. On occasion they also meet with Oswego County officials and local support groups to discuss items of mutual interest regarding off-site emergency preparedness. The inspector met with the Director, Oswego County Emergency Management, who indicated that NYPA staff worked closely with county personnel relative to EP.

Based upon discussions with licensee staff and examination of site facilities and records, under the new EPC, upkeep of the Emergency Plan and Emergency Plan Implementing Procedures (EPIP); surveillance of designated emergency equipment, supplies and facilities; coordination of drills and exercises; interface with State and local authorities; and administration of technical EP functions were adequate. Two full-time EP program staff provided good support in effectively carrying out these functions, with additional assistance from the site Operations and Radiological and Environmental Services (RES) departments.

The Emergency Response Organization (ERO) was adequately described in the Emergency Plan. Review of ERO staffing indicated that a significant change occurred since the last inspection in the assignment of Emergency Directors (EDs). As a result of on-site management-level staff changes, at the time of the inspection, only the Resident Manager and GM, Operations were qualified as EDs. The GM, Support Services was undergoing ED training and, following participation in a drill or exercise, was expected to become the third qualified ED. Licensee staff committed to providing the NRC with information pertaining to the third ED, when qualification was completed. Otherwise, the licensee had at least three qualified individuals in key ERO positions.

Management of ERFs was evaluated by an NRC inspection team during the December 1992 exercise and was determined effective for the Control Room, TSC, OSC, and Emergency Operations Facility.

Based upon the above review, this area program area was well implemented.

2.4 Knowledge and Performance of Duties (Training)

The inspector reviewed the licensee's program for emergency response training and noted that Section 8 of the Emergency Plan describes the emergency training program for different categories of ERO personnel.

The inspector reviewed EP training lesson plans, examinations, qualification records maintained via database, historical training records, and interviewed the EP instructors. Most EP training was provided by the Technical Training Specialist, while the EP staff, Nuclear Operations, and the Training Supervisor supplement ERO training. The inspector interviewed the Technical Training Specialist. Although new to the position, he showed acceptable familiarity and knowledge of program needs. Ongoing assistance in classroom and administration of EP training was provided by the Training Supervisor, who was the previous EP trainer. From record review and discussions with EP trainers, the inspector found that the collective effort provided by Training Department staff ensured that ERO training was complete and up to date.

In the last EP inspection, the NRC identified a concern regarding training requirements for ERO personnel. Demonstration of learned skills and participation in drills/exercises of designated ERO functions were not requirements for ERO assignment. In some cases it was possible for personnel to assume ERO duties without acceptable practical demonstration. To address this concern, in September 1992, the licensee instituted in the training program a requirement for ERO members to successfully demonstrate, during walk-throughs and in drills or exercises, their knowledge of response functions at least every eighteen months and prior to formal ERO assignment. The EPC indicated this change would affect over 500 personnel, and expressed concern over near-term ability to maintain a high level of qualified personnel in light of the additional training requirement. Although not completed at the time of the inspection, the inspector determined good progress was made in implementing practical ERO training. This area will be followed-up during the next NRC EP program inspection and observed during NRC-evaluated drills and exercises.

A schedule of the proposed EP classroom/lecture training cycle was developed each year and issued to ERO personnel and the designated training coordinator within each site department. Updates were issued monthly. Included in scheduling of ERO personnel were licensed operators, non-licensed operators, engineers, maintenance staff, and other designated support groups.

Personnel also were required to attend classroom training every twelve months. From a review of selected Training Department database files for both classroom and practical instruction, the inspector determined that ERO training sessions

were well attended and documented. For each individual in the ERO, training records accurately referenced dates of requalification in assigned positions.

In conjunction with control room simulator training, shift crews had demonstrated emergency response functions in accordance with Section 8.2.6 of Training Procedure TDSO-6, "Conduct of Simulator Training," Revision 3, dated February 5, 1993. This included evaluation of emergency action levels and emergency classification. During the previous inspection, EP interfaces with the site operations and training staffs relative to simulator training was identified as unresolved item 50-333/92-06-01. The EPC now reviews initiating conditions and classifications used in simulator scenarios and discusses EP training of shift crews with operations and training staffs. This item is closed.

As a result of an out-of-sequence county notification prior to declaration of an Unusual Event, communications training was revised. Non-licensed operators were required to demonstrate use of the New York Radiological Emergency Communications System (RECS) and the NRC Emergency Notification System, thereby enhancing shift communications capability.

Lesson plans were detailed and focused on relevant response actions and implementing procedures. Program changes were appropriately factored into EPIPs. The inspectors reviewed examination questions, examination records, and training records of selected individuals. Examination questions related directly to lesson plans. Requalification examinations for Emergency Directors were adequate in scope, covering emergency classifications, EALs, notifications, and direction and control of ERO staff, and together with practical demonstrations, provided a good level of test material.

The inspector was provided a list of personnel who attended ED training and were qualified as Emergency Directors prior to November 1992. Discussions with the EPC indicated that, of the 15 individuals on the list, only three would actually serve as an ED (see Section 2.3). ED training was given to the other staff in order to familiarize them with the ED role, thus enabling them to assist the ED whenever necessary. Licensee documentation should be revised to more accurately present qualified EDs. Knowledge and performance of duties by other ERO personnel were acceptably demonstrated during the December 1992 emergency exercise.

Good implementation was assessed in this program area.

2.5 Independent and Internal Reviews and Audits

Quality assurance reviews of the entire EP program were conducted independently each year by the White Plains Office (WPO) Audits Department. In addition, the

site Quality Assurance Department performed surveillances of selected drills and exercises to supplement the annual reviews. The 1992 audit was performed by senior WPO staff accompanied by an individual from the Consolidated Edison EP staff. Several surveillances were also performed by site QA. The inspector reviewed the audit and surveillance reports issued by each group, held a teleconference with the WPO Audits Manager, and discussed audit conduct with the lead auditors and Site Quality Assurance Manager.

The inspector determined that the 1992 audit was sufficient to satisfy the requirements of 10 CFR 50.54(t), identified areas requiring corrective action, and covered a review of off-site interface with State and local authorities. The ACTS (corrective action system) was in place and used to track items to completion. Review of the reports indicated that activities of the EP program were conducted effectively since the previous audit. Only minor recommendations for EP improvement were made. Audit and surveillance reports provided good detail for potential EP program enhancement. Audits and surveillance reports were distributed to senior plant and WPO management. Auditors adequately addressed a NRC concern relative to treatment of previous audit findings by providing item status in current reports. The EP staff has been attentive to resolving items identified by the WPO Audit Department. In some site surveillances however, initial recommendations were summarized by auditors at the conclusion of the surveillance, but formal transmittal (including QA management review) was longer than the prescribed QA Department criteria. This is a concern in that QA and EP management staffs were unable to provide prompt review of QA identified issues for possible resolution. For example, the June and August 1992 drill surveillances were briefly discussed among QA and EP staffs immediately following the surveillances, but findings were not formally issued until December 1992. When issued, staffs did not completely agree as to the content of findings. Management representatives from each staff agreed to considering closer and more timely discussion of future recommendations and findings.

This program area was assessed as being well implemented.

3.0 Licensee Action on Previous Inspection Findings

During the inspection, the inspector reviewed the licensee's progress on previously identified NRC concerns and discussed with the EP Manager how each item was addressed. Specific items reviewed included turnover in EPC duties, practical ERO training, implementation of upgraded emergency action levels, and general administration of the EP program. All items were adequately addressed and no further concerns were identified.

4.0 Exit Meeting

The inspector met with licensee personnel denoted in Section 1 at the conclusion of the inspection to discuss the scope and findings of this inspection as detailed in this report.

The licensee was informed that no violations were identified. Several areas of improvement were discussed. The licensee acknowledged these findings and agreed to evaluate them and institute corrective actions as appropriate.