

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Report Nos. 50-266/82-02; 50-301/82-02

License No. DPR-24; DPR-27

Licensee: Wisconsin Electric Power Company  
231 West Michigan Street  
Milwaukee, WI 53201

Facility Name: Point Beach Nuclear Plant

Inspection At: Two Creeks, WI

Inspection Conducted: January 4 through 15 and 20, 1982

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Appraisal Summary:

Appraisal on January 4 through 15 and 20, 1982 (Report Nos. 50-266/82-02; 50-301/82-02)

Areas Appraised: The appraisal of the state of onsite emergency preparedness at the Point Beach Nuclear Plant involved seven general areas: Administration of the Emergency Preparedness Program; Emergency Organization; Training; Emergency Facilities and Equipment; Procedures Which Implement the Emergency Plan; Coordination with Offsite Agencies; and Drills and Exercises. The inspection involved 661 inspector-hours onsite by three NRC inspectors plus two consultants.

Results: No items of noncompliance or deviations were identified. Significant deficiencies were identified which must be corrected within the provision of 10 CFR 50.54(s)(2).

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1.0 Administration of the Emergency Plan

1.1 Responsibility Assigned

1.2 Authority

1.3 Coordination

1.4 Selection and Qualification

An individual has been named to the Emergency Planning Coordinator (EPC) position. This function is his primary responsibility. He spends half-time at the Point Beach Nuclear Plant Site (PBNP) and half-time at the Wisconsin Electric Power Company headquarters in Milwaukee, Wisconsin. A job description for this position is part of the Quality Assurance Manual for the plant.

Personnel interviewed indicated they recognized that the EPC is responsible for emergency plan coordination and that they provide emergency planning input to him. There are good communications and interaction between site and corporate personnel involved in emergency planning.

The EPC has the necessary authority to implement his responsibility. He receives support from management at the site and corporate level. The EPC reports directly to the Site Manager at the site and to the Superintendent of Regulatory Affairs at the corporate office. Overall coordination of the site and corporate emergency planning is the responsibility of the Vice President of Nuclear Power who delegates the responsibility to the EPC.

Although the EPC is not a member of the plant operating review committee, he has input to the committee review through the General Superintendent of the PBNP. Changes to the Emergency Plan (EP), the Emergency Plan Implementing Procedures (EPIP), and the Emergency Operating Procedures (EOP) are reviewed by the EPC who provides input to the review committee.

There have been no problems experienced in coordination between the site and corporate level with regard to emergency planning. Persons involved in emergency planning often work at both sites.

Other than the job description for the EPC, previously mentioned, there is no formal selection and qualification criteria for the position. The EPC has received no training for professional development in emergency preparedness. Although training has been scheduled for him, in the past, matters of higher priority have precluded his receiving this training.

This portion of the licensee's program is adequate; however, the following should be considered for improvement:

- . Provide professional development courses in emergency preparedness for the Emergency Planning Coordinator to maintain state-of-the art capability.
- . Provide formal selection and qualification criteria for persons assigned to administration of emergency preparedness.

## 2.0 Emergency Organization

### 2.1 Onsite Organization

### 2.2 Offsite Organization

A review of the site and corporate administration and organization was made to determine that responsibility, authority, and coordination for administration of the Point Beach Nuclear Plant Emergency Plan had been established. The review included an examination of the appropriate sections of the Emergency Plan and implementing procedures and discussions with members of the site and corporate management.

The result of the review indicates that individuals could walk through the actions they would take in the event of an emergency at PBNP. The individuals in key emergency response positions at corporate and at the site carry pager units and can be reached on a 24 hour basis. The Site Managers and Duty and Call Superintendents carry hand books to direct and facilitate their response and direction actions.

Corporate and site management have met with State of Wisconsin personnel to coordinate planning with respect to the prompt notification system, scheduling exercises, and assuring good communications.

The inspectors determined that functional areas specified in the Emergency Plan and Emergency Plan Implementing Procedures by title and description are consistent with the actual organization. Designated management structure is provided for these and other emergency support functions by organization charts and procedural descriptions.

The Duty and Call Superintendent would arrive at the plant to relieve the Shift Supervisor in an emergency situation. The PBNP Site Manager is the senior official onsite to serve in an emergency coordinating function.

Selection and qualification criteria for personnel assigned to onsite emergency activity functions are not specified by the licensee in the Plan or Procedures, but are based on managerial evaluation of the individual's capabilities for emergency preparedness activities and his current job function. The licensee has provisions for supplementing the Health Physics staff beyond 24 hours under accident conditions with the addition of radiation safety technicians from the Kewaunee Nuclear Power Plant.

The current minimum shift staffing consists of:

- 1 Shift Supervisor (SRO)
- 1 Operating Supervisor (SRO or RO)
- 2 Control Operators (RO)
- 3 Auxiliary Operators who are qualified in Health Physics
- 1 Duty and Call Technical Advisor (Shift Technical Advisors)

This shift complement does not meet the regulatory positions of NUREG-0654 Table B-1. The licensee has communicated his position with respect to shift staffing in a November 3, 1980, and an April 14, 1981, letter to NRR. The licensee intends to add an auxiliary operator to the shift complement by July 1982 thus bringing the total to eight on shift. The licensee has not demonstrated through an unannounced drill that shift augmentation for emergencies can meet the goals of 30-60 minutes as specified in NUREG-0654, Table B-1.

The licensee clearly does not meet 10 CFR 50.47(b), planning standard (b)(2). That standard requires that on-shift facility licensee responsibilities for emergency response are unambiguously defined, adequate staffing to provide initial facility accident response in key functional areas is maintained at all times, timely augmentation of response capabilities is available, and the interfaces among various onsite response activities and offsite support and response activities are specified.

The licensee does not maintain 24 hour per day coverage for the following major tasks:

- (a) Chemistry/Radiochemistry for post-accident sampling and analysis
- (b) Notification and communication for the first hour during an emergency
- (c) In-plant radiation surveys under accident conditions.

In addition to the above tasks, the minimum shift crew does not include an additional SRO and RO for plant operations and accident assessment during dual unit operations. This deficiency is being examined by NRR.

The results of the review indicate that Section 2.0, Emergency Organization Program is inadequate for the following reasons:

- . The licensee does not meet NUREG-0654, Table B-1 shift staffing.
- . The licensee has not demonstrated that 30-60 minute shift augmentation can be met.

The following item should be considered for improvement:

- . Formal selection and qualification criteria for personnel assigned emergency preparedness functions should be established and included in the Emergency Plan and Implementing Procedures for onsite shift staffing and augmentation.

### 3.0 Emergency Plan Training/Retraining

#### 3.1 Program Established

A review was made to determine if the licensee has an established emergency plan training/retraining program.

No formally documented and approved program is available for training of onsite personnel and supportive agencies although a training program is in effect. The current program addresses elements of the Emergency Plan. Formal lesson plans with clearly stated performance objectives are not available except for nonemergency plan training for disciplines whose basic function does not vary between normal and emergency conditions. Qualifications for individuals assigned to functional areas of emergency activity are contained in Section 3 of the Licensee's Quality Assurance Manual. Emergency plan overview is available to all employees but does not provide for student evaluation.

Although there are no provisions for training of non-licensee augmentation personnel, the licensee intends to use current training standards as appropriate. For case by case situations, training will be immediately developed and presented.

The documentation portion of this program is considered to be unacceptable. In order to have an acceptable program the following must be completed:

- . Develop and document an approved program
- . Provide formal lesson plans with clearly stated performance objectives
- . Provide for student performance evaluation as part of the program documentation

The following item needs improvement:

- . Address provisions for training of non-licensee augmentation personnel (e.g., Kewaunee support, contractors and vendors).

##### 3.1.3.1 Licensee Personnel

##### 3.1.3.2 Non-Licensee Support Personnel

#### 3.2 Training/Retraining Implementation

A review was made of training/retraining implementation to determine if this portion of the program has been completed in the manner required.

Training provided to onsite personnel and supportive agencies is consistent with the elements of the Emergency Plan. Records indicate that required personnel have received Emergency Plan training.

No test was given for the Emergency Plan training to determine that individuals understand information that has been presented.

Based on the above, the implementation portion of this program is adequate, however, the following item should be considered for improvement:

- . Determine by testing that individuals understand the information presented in training/retraining programs.

#### 4.0 Emergency Facilities and Equipment

#### 4.1 Emergency Facilities

##### 4.1.1 Assessment Facilities

##### 4.1.1.1 Control Room

A review was made of the Control Room to determine its adequacy during an emergency. The review included discussions with Duty and Call Supervisors, Shift Supervisors, Operating Supervisors, Control Operators, Auxiliary Supervisors, and the Emergency Planning Coordinator. An inspection was also conducted.

The review revealed that current copies of the Emergency Plan and Emergency Plan Implementing Procedures were in place and readily accessible. Emergency supplies and equipment are available but are scattered in various locations throughout the Control Room. All monitor readouts are readily available and provisions for communications between Units 1 and 2 are in place and operable. In addition, the Control Room is radiologically habitable.

The results of the review indicate that the licensee's Control Room is acceptable, however, the following item should be considered for improvement:

- . Emergency equipment and supplies currently located in the Control Room should be consolidated in a central location.

##### 4.1.1.2 Technical Support Center

A review was made of the interim Technical Support Center (TSC) to determine its acceptability. The review included examination of Sections 7.1.2 and 2.4.3 of the licensee's Emergency Plan, and Sections 7.2.3 and 7.3.4 of the EIPs. In addition, discussions were held with the Emergency Planning Coordinator, a tour was conducted with the Plant Manager and Emergency Planning Coordinator, and the facility was inspected.

The TSC is located on the 26 ft. level of the Technical Support Building. Travel time between the TSC and the Control Room, on the 44 ft. level, is approximately 2 minutes. There is adequate working space for assigned personnel. Steam generator parameters, steam line pressures, hot to cold leg temperatures, pressurizer levels, reactor coolant system pressures and containment pressures are displayed on strip chart recorders in this facility. Current up-to-date records reflecting plant status are available. In addition, the facility has radiation monitoring instruments, air sampling capabilities, and writing supplies.

In the near future, the licensee plans to relocate the TSC to the basement level of the Technical Support Building. This level of the Technical Support Building will be habitable consistent with the Control Room. Travel time from the new facility to the Control Room is estimated to be 70 seconds. This facility should be capable of accessing all readouts, instrumentation, and information in the Control Room.

Completion of the permanent TSC is an open item.

#### 4.1.1.3 Operations Support Center

A review was made of the present Operations Support Center (OSC) to determine its acceptability. The review included discussions with the Emergency Planning Coordinator and an inspection of the facility.

The licensee's present Operations Support Center is located undergrade in the basement of the Energy Information Center. This facility appears to offer personnel protection from direct radiation but the protection factor has not yet been determined. The OSC can accommodate a large number of people. Communications capabilities appear adequate and there is voice communication between the Control Room and TSC. The OSC is adjacent to the Emergency Support Center (ESC) which is also undergrade and has food preparation capabilities and running water. The ventilation is standard with no provisions for the filtration of airborne contaminants. No protective clothing is available. In the event that this facility should need to be evacuated, the Site Boundary Control Center would become the backup OSC. In the event that the Site Boundary Control Center would need to be evacuated, the Two Rivers Town Hall would serve as the backup OSC.

In the near future, the licensee has plans to relocate the OSC to the basement level of the Technical Support Building. This level of the Technical Support Building will be habitable consistent with the Control Room.

Completion of the permanent OSC is an open item.

#### 4.1.1.4 Emergency Operations Facility

A review was made of the Emergency Operations Facility (EOF) to determine its acceptability as an emergency response facility. The review included discussions with the Emergency Planning Coordinator and an inspection of all facilities comprising the EOF.

The review indicated that the EOF is a coordinated group of three facilities which are physically separated. The manner in which

the EOF is presented in the licensee's Emergency Plan and Implementing Procedures is confusing and the identification of the EOF per se is not readily apparent. The EOF is comprised of the Emergency Support Center, Site Boundary Control Center, and the News Center in Two Rivers.

#### Emergency Support Center

The Emergency Support Center (ESC) is located below grade in the Energy Information Center, adjacent to part of the present OSC. It is approximately 1500 ft. from the main plant. This facility is intended as the focal point for all emergency response operations and is intended as the primary interface between Point Beach Nuclear Plant and offsite agencies.

The facility is large enough to accommodate a large number of people, and there are facilities in the auditorium to accommodate news media personnel for an Unusual Event or Alert emergency. In the event of a Site or General Emergency, there are provisions for news media personnel in the town of Two Rivers. (This is discussed in Section 4.1.4.) Adequate survey instruments are available as well as high and low range dosimeters. The facility has air-sampling capabilities, food and water capabilities, first aid and decontamination equipment, copies of all necessary emergency plans, isopleths, and writing supplies. If the Emergency Support Center requires evacuation, the alternate location for this facility is the Two Creeks Town Hall.

#### Site Boundary Control Center

The Site Boundary Control Center (SBCC) is located at the South Exclusion Area boundary access road, approximately one mile southwest of the plant. This facility serves as a personnel accountability and contamination control point, health physics control point, central point for offsite monitoring teams, and security and traffic control point.

The facility is large enough to accommodate the number of people who will use it and communications are adequate. It has an adequate number of survey instruments and high and low range dosimeters. The facility has food preparation capabilities and stored water, first aid equipment, copies of all necessary Emergency Plans, isopleths and writing supplies. In the event that the Site Boundary Control Center requires evacuation, the alternate location for this facility is the Two Creeks Town Hall.

#### Emergency News Center

The licensee's emergency news center at Two Rivers Community House is acceptable.

Based on the results of the review, the licensee's interim EOF is acceptable.

In the near future, the licensee has plans to build a new Site Boundary Control Center one mile from the site. The licensee's permanent EOF is an open item.

4.1.1.5 Post-Accident Coolant Sampling and Analysis

5.4.2.4 Primary Coolant Sampling

5.4.2.5 Primary Coolant Sample Analysis

7.2.5 Post-Accident Coolant Sampling and Analysis

A review was made of the post-accident primary coolant sampling and analysis (PAS) program to determine its adequacy in meeting the requirements of NUREG-0737, II.B.3 Post-accident Sampling (PAS) Capability. The review included discussions and a walk-through with the Chemistry and Health Physics Superintendent and Chemistry Laboratory Supervisor. The chemistry section had the responsibility for obtaining the sample with radiation monitoring assistance from the Health Physics section. The inspectors reviewed Emergency Implementation Procedure 7.3.2 Rev. 3 dated 12-30-81, "Post Accident Sampling And Analysis Of Potentially High Level Reactor Coolant". Walk-throughs of the procedure were conducted by the chemistry technicians and observed by the inspectors.

The results of the review of the facilities and equipment indicated that adequate PAS facilities and equipment exist in the auxiliary building to accomplish this task within the quarterly personnel exposure guidelines.

The results of the review of the implementing procedure indicated that adequate methods and systems were in place to accomplish this task within the 3 hour time limit.

The results of the walk-throughs and exercises of the procedure by the chemistry technicians indicated that all personnel could perform this task properly.

The present post-accident sampling program is considered to be an interim program. The licensee has initiated plans to install the system commonly referred to as the Yankee Atomic Post-Accident Sampling System. This equipment is designed to meet the full requirements of NUREG-0737 and will allow plant personnel the capability to promptly obtain and analyze by remote means, samples of reactor coolant, sump liquids, and containment atmosphere under accident conditions. Procurement and installation of the Yankee System is planned for the summer of 1982. This is an open item.

4.1.1.6 Post-Accident Containment Air Sampling and Analysis

5.4.2.6 Containment Air Sampling

5.4.2.7 Containment Air Sample Analysis

7.2.6 Post-Accident Containment Sampling and Analysis

A review was made of the post-accident containment air sampling and analysis program to determine its adequacy in meeting the requirement of NUREG-0737, II.B.3 Post-Accident Sampling Capability. The review included discussions and a walk-through with the Chemistry and Health Physics Superintendent and the Chemistry Laboratory Supervisor. The chemistry section has the responsibility for obtaining the sample with radiation monitoring assistance from the Health Physics section. The inspectors reviewed Emergency Plan Implementing Procedure 7.3.3 Rev. 3 dated 12-30-81, Post-Accident Sampling of Containment Atmosphere.

The results of the review of the facilities and equipment indicated that adequate containment air sampling facilities and equipment exist to accomplish this task within the quarterly personnel exposure guidelines.

The results of the review of the implementing procedure indicated that adequate methods and systems were in place to accomplish this task within the 3 hour time limit.

The results of the walk-throughs and exercises of the procedure by the chemistry technicians indicated that all personnel could perform this task properly.

This program is considered to be an interim program. Upon completion of installation of the Yankee System, sampling of containment atmosphere will be performed remotely. (See Section 4.1.1.5) This is an open item.

4.1.1.7 Post-Accident Gas and Particulate Effluent Sampling and Analysis

5.4.2.8 Stack Effluent Sampling

5.4.2.9 Stack Effluent Sampling and Analysis

7.2.6.1 Post-Accident Effluent Sampling and Analysis

A review was made of the post-accident gas and particulate effluent sampling and analysis program to determine its adequacy in meeting the requirements of NUREG-0737, II.F.1, Attachment 1, Noble Gas Effluent Monitor and II.F.1, Attachment 2, Sampling and Analysis of Plant Effluents. The review included discussions with the Chemistry/Health Physics Superintendent, Health Physicist, and Health Physics Supervisor.

The review also included discussions with the Chemistry Laboratory Supervisor and counting room personnel as well as tours of grab sample points and review of Emergency Plan Implementing Procedure 7.4.4 AMS-2 dated 3-31-81, Air Particulate, Iodine And Noble Gas Sampler/Detector, and Emergency Plan Implementing Procedure 1.2, Plant Status, dated 3-31-81.

The results of the review of the facilities and equipment, implementing procedure, and walk-throughs indicated that adequate emergency facilities, equipment, and procedures to sample and analyze gas and particulate effluents were provided and properly maintained. However, the secondary steam line effluent monitors have not been installed, nor have the emergency action levels (EALs) been calculated. This is an open item.

4.1.1.8 Post-Accident Liquid Effluent Sampling and Analysis

5.4.2.10 Liquid Effluent Sampling

5.4.2.11 Liquid Effluent Sampling Analysis

7.2.6.2 Post-Accident Liquid Effluent Sampling and Analysis

A review was made of the post-accident liquid effluent sampling and analysis program to determine its adequacy in meeting the requirements of NUREG-0737, II.B.3 and NUREG-0654. The review included discussions with the Chemistry and Health Physics Superintendent, Health Physicist, Health Physics Supervisors, and the Chemistry Lab Supervisor. Tours of sampling stations and grab sample points were conducted by the Radiation Control Operators and Radiochemistry Technicians.

The review also included review of Section 7.0 of the Emergency Plan and Emergency Plan Implementing Procedure 1.2, Plant Status, dated 3-31-81.

The results of the review of the facilities and equipment, implementation procedures, and walk-throughs indicated that adequate facilities, equipment, and procedures to sample and analyze liquid effluents under accident conditions were provided and maintained.

4.1.1.9 Offsite Laboratory Facilities

A review was made of provisions for offsite laboratory capabilities.

The licensee has a Post-accident counting agreement with Wisconsin Public Service, Kewaunee Nuclear Plant to analyze samples in the event that the radiation levels in the counting room interfere with sample quantification. Samples collected will be diluted to the Kewaunee one liter geometry and/or until the contact reading of the sample is less than 1 mR/hour.

This program is considered to be acceptable.

#### 4.1.2 Protective Facilities

##### 4.1.2.1 Assembly/Reassembly Areas

A review was made of the licensee's emergency assembly/reassembly areas to verify that they are as specified in Section 6.4.1.4 of the Emergency Plan and Section 7.1.1 of the EIPs and to determine if they meet the planning standards outlined in NUREG-0654.

The above sections of the Emergency Plan and EIPs were reviewed. In addition, discussions were held with Health Physicists and the Emergency Planning Coordinator. Onsite assembly/reassembly areas were inspected.

The results of the review indicated the essential plant personnel proceed to designated emergency duty stations. Assembly/reassembly areas for nonessential plant personnel, visitors, and contractors are not identified for a limited plant evacuation. During a full plant evacuation, essential plant personnel will proceed to their assigned EIPs emergency duty stations. The current Emergency Plan and EIPs indicate that non-essential plant personnel will proceed to the OSC while visitors and contractors will proceed to the Site Boundary Control Center where they will be monitored and released. Should the OSC and Site Boundary Control Center become radiologically uninhabitable, these personnel would proceed to the Two Creeks Town Hall where they will be monitored and released. This facility is approximately 1.5 miles from the Site Boundary Control Center. No provisions have been made for an alternate location further from the site should the Two Creeks Town Hall become radiologically uninhabitable.

This portion of the licensee's program is acceptable; however, the following items should be considered for improvement:

- . Assembly/reassembly areas for non-essential plant personnel, visitors, and contractors should be specified for limited plant evacuation.
- . Provide an alternate back up site evacuation assembly area should the Two Creeks Town Hall become radiologically unacceptable during a limited plant evacuation.

The licensee has plans to build a new Site Boundary Control Center one mile from the plant which will be operable by fall, 1982. At this time, non-essential personnel, visitors, and contractors will be assembled for monitoring and release at this point.

#### 4.1.2.2 Medical Treatment

#### 5.4.3.5 First Aid and Rescue

A review was made of medical treatment facilities, procedures for first aid, and search and rescue.

The review included Section 7.5 of the Emergency Plan and EPIP Nos. 11.1, 11.2, 11.3, 12.1, and 12.2. Interviews were conducted with the Emergency Planning Coordinator, Health Physicist, Health Physics Supervisor, and Chemistry/Health Physics Superintendent.

Provisions for treatment of injured and/or contaminated individuals are consistent with those listed in the Emergency Plan and procedures. The facility contains readily accessible first aid equipment, supplies, and provisions for decontamination at Health Physics Control. These are located near the controlled area. Calibrated, operable monitoring instruments are available. The Gai-tronics paging system and walkie-talkies were available. Emergency dosimetry was available at the site. Internal contamination may be assessed on either the PBNP or KNPP whole body counter. Urine and/or fecal samples may be sent to Hazelton Laboratories, Northbrook, Illinois for analyses.

Most operators are trained in First Aid Multi-media. Several individuals have also received Emergency Medical Training. Stokes stretchers are located on the 66 ft. level outside containment personnel hatches and at the Unit 1 truck access. These are a considerable distance from the Health Physics Point. There are no provisions for first aid supplies in these areas. Neither the Emergency Plan, EIPs, nor Health Physics Procedures contain procedures for receiving, transporting, and handling injured/contaminated personnel. Personnel have not performed search and rescue drills.

The results of this review indicate that this portion of the licensee's program is acceptable, however, the following items should be considered for improvement:

- . First aid kits should be contained inside the Stokes stretchers on the 66 ft. level, outside containment personnel hatches, and at the Unit 1 truck access.
- . Specific procedures should be developed for receiving, transporting, and handling injured/contaminated personnel.
- . Periodic drills should be conducted by search and rescue teams.

#### 4.1.2.3 Decontamination Facilities

#### 5.4.3.4 Personnel Monitoring and Decontamination Procedures

A review was made of personnel decontamination facilities to determine their adequacy in meeting the requirements of NUREG-0654, K.1 and K.5. The review included interviews with the Chemistry/Health Physics Superintendent, the Health Physicist, and a Health Physics Supervisor. The personnel monitoring and decontamination areas visited and inspected included; In-Plant Areas, Emergency Operation Facility, Site Boundary Control Center, and the Two Rivers Community Hospital. These areas were checked for available decontamination supplies, equipment, and personnel monitoring capability.

The results of the review indicated that adequate facilities, supplies, equipment, and procedures for a decontamination program under accident conditions were in place.

#### 4.1.3 Expanded Support Facilities

A review was made of the licensee's plans to provide expanded support facilities during emergencies. The review included discussions with the Emergency Planning Coordinator, Administrative Specialist and Senior Health Physicist. The location of several contractors' trailers were also checked.

The review revealed that personnel needed to augment plant staff during an emergency situation will be housed in contractors' trailers currently on site. Adequate communications are available in each trailer.

The results of this review indicate that the licensee's Expanded Support Facilities are adequate.

#### 4.1.4 News Center

A review was made of the licensee's News Center at Two Rivers Community House. The review included discussions with the Emergency Planning Coordinator and the Director of the Two Rivers Community House. This facility was also inspected.

The results of the review indicated that this facility will accommodate approximately 600 people. Adequate telephone lines and electrical supply are in place and operable. Point Beach staff will bring TV cameras, copy machines, and recording equipment to this facility in the event of an emergency. Additional facilities having the same capabilities are available at the Energy Information Center but would not be used for a Site or General emergency.

Based on the above, the licensee's News Center at Two Rivers Community House is acceptable.

#### 4.2.1.1 Kits and Survey Instruments

A review was made of emergency kits and survey instruments to determine their adequacy in meeting the Planning Standards of NUREG-0654. The review involved discussions with Health Physics Supervisors and Radiation Control Operators. The inspection included an inventory check of emergency kits located at the Site Boundary Control Center, Technical Support Center, South Gate, Operation Support Center, Two Rivers Community Hospital, and Control Room.

Documentation of inspections conducted by Radiation Control Operators was reviewed. Kit contents, frequency of inspection, and record keeping were adequate to meet the criteria of NUREG-0654 except that the portable radiological survey instruments were removed from the Two Rivers Community Hospital Emergency Kit and placed in the Emergency Vehicle in accordance with EPIP 11.3, Section 2.3.6. This was found to be acceptable; however, the following item should be considered for improvement:

- . The Victoreen Thyac survey meter with end window, GM probe and the mini-rad survey instrument listed in the Two Rivers Community Hospital supplies list (EPIP 11.3, p.9) should be removed from the list.

#### 4.2.1.2 Area and Process Radiation Monitors

A review was made of the area and process radiation monitoring system to determine its acceptability for meeting the criteria outlined in NUREG-0578, NUREG-0654, and NUREG-0737 for area and process radiation monitors under accident conditions. The review included conversations with Shift Supervisors, operating supervisors and inspection of monitoring locations outside containment. Section 7.3 of the licensee's Emergency Plan was reviewed. Table 7-1 contains a list of all onsite area and process monitors.

Although the results of the review indicated that adequate methods, instrumentation, and equipment for assessing and monitoring plant conditions during an emergency situation are in place and properly maintained, the following items need improvement:

- . The Emergency Plan should contain a more detailed description of area and process monitors.
- . Area containment monitors R-2 on the Missile Shield on the 66 ft. level, and area monitor R-7 on the Seal Table on the 47 ft. level have a maximum range of 10 R/hr. The maximum range for these monitors should be re-examined in accordance with RG 1.97.

The licensee plans to have a complete new radiation monitoring system in place and operable by 5-3-82. The licensee has not installed high range dome monitors ( $10^7$  R/hr or  $10^8$  rads/hr) in accordance with NUREG-0737. Completion of the new radiation monitoring system and dome monitors are open items pending NRR review.

#### 4.2.1.3 Non-Radiation Process Monitors

A review was made of non-radiation process monitors in the Control Room to ensure their availability in accordance with NUREG-0654. Observation of reactor coolant system pressure and temperature, containment pressure and temperature and liquid levels indicated that the instruments are operable and functional. Discussions with Shift Supervisors indicated that they had a clear understanding of the use of these monitors for emergency detection and assessment. Monitor readouts were readily observable. Monitor alarms are used for initiating operator action during abnormal situations.

This portion of the licensee's program is acceptable.

#### 4.2.2 Protective Equipment

##### 4.2.2.1 Respiratory Protection

A review was made of the availability and amount of respiratory equipment that would be available for use during an emergency. Onsite supplies of both respirators and self-contained breathing devices are adequate, as well as the facility for recharging the Bio-Paks (Oxygen Rebreathers). However, the MSA SCBA Unit Cylinders are transported to Green Bay for recharging. This should not create a problem because of an adequate number of extra charged cylinders available for use.

The inspector noted, in examining emergency kits, there are a number of half-face respirators in various emergency kits. Half-face respirators are not suitable for emergency use.

The review found that this portion of the licensee's program was adequate to meet the criteria of NUREG-0654; however, the following item should be considered for improvement:

- . A limited number of half-face respirators with particulate filters are located in various area emergency kits. The half-face respirators designated for emergency use should be replaced with full-face respirators.

##### 4.2.1.4 Meteorological Instrumentation

The bases for the inspector's review of the meteorological measurements program included Regulatory Guide 1.23 and the

criteria set forth in NUREG-0654, -0696, and -0737. The licensee has addressed the requirements outlined in NUREG-0737, Task Action Plan III.A.2 with the adoption of the interim compensating actions to milestone 3.

The meteorological measurements program and integration of information in the dose projection process was outlined in the plan and implementing procedures. This information was reviewed and discussed with appropriate licensee personnel. The preventative maintenance program was outlined in IEP 6.41.

The licensee's meteorological measurements program is limited to wind conditions and does not conform to the guidance outlined in RG 1.23, proposed revision 1 nor the original Safety Guide 23 published in 1972. The licensee has made adequate interim provisions for access to alternate data sources that would yield the necessary meteorological information for dose projection purposes. The preventative maintenance program is appropriate for the current grade of equipment.

The licensee's methodology for assessing the transport and diffusion characteristics in the site area does not consider the terrain (coastal) induced effects. The uncertainty in tracking the plume trajectory should be understood by those in the decision-making process.

The technical basis for the dose calculational methodology is inadequately documented in the plan. Likewise the use of meteorological information from onsite or alternate data sources is not unambiguously described. A formal mechanism should be established to assure that systems are operating properly between calibrations.

Dose rate projections should be considered as a function of repair time so that integrated values can be compared against PAG's; the default value of a single hour is inappropriate. Projections and confirmatory measurements are necessary technical issues that should be available for discussion with emergency response organizations, and the mechanism to carry on these discussions should be identified.

Based on the above findings, improvements in the following areas are required to achieve an acceptable program:

- . Establish a meteorological measurements program that would provide, at the minimum, the data set outlined in RG 1.97 consistent with the specifications outlined in RG 1.23.
- . Identify the techniques to be incorporated into the dose calculational methodology to compensate for potential uncertainties associated with plume trajectories. Such techniques

should provide reasonable assurance that adequate protective measures (scope and area) can be recommended in the event of a radiological emergency.

In addition, the following areas should be considered for improvement:

- . Clearly establish the means for obtaining 15 minute averaged meteorological conditions for use in the dose projection process.
- . Prioritize the alternate meteorological data source access, identify this source on appropriate forms, and identify the data and appropriate adjustments to the data, if necessary.
- . Formalize the data review process to assure meteorological systems are functioning properly and initiate a surveillance program.
- . Document the means for providing direct access to the individual responsible for dose calculations by NRC personnel.
- . Document the technical bases for the upgraded dose calculation methodology and provide the document as an appendix to the plan.
- . Provide, in your method for estimating the dose to the population in the plume EPZ, a conservative assumption for plume release duration and meteorology when the duration is unknown. (see "Manual Of Protective Action Guides And Protective Actions For Nuclear Incidents", EPZ-520/1-75-001, page 5.14, section 5.4.1)

Licensee should consider the following actions which would be acceptable responses to the deficiencies:

- . Within one month undertake a feasibility study that would establish whether the current meteorological equipment can be replaced without significant delay. Realizing that the licensee is moving to upgrade its entire measurements program, an interim correction that requires engineering modifications will likely delay efforts for the permanent solution. If the study indicates an interim solution is plausible, this should be completed within two months after the study. If significant engineering is found to be necessary, the licensee should establish the schedule for the permanent upgrade (approximately July 1, 1982) and identify a mechanism to obtain an acceptable stability class indicator for the interim.
- . Under lake breeze conditions, there is an acknowledged uncertainty in the assessment of plume trajectory. Until a capability exists (both equipment and assessment) that could

provide reasonable assurance that this trajectory can be approximated, an interim solution to the uncertainty posed must be implemented. An acceptable interim solution would be recommending protective measures on a uniform basis (i.e., entire land area to the applicable distance). Guidance to monitoring teams regarding deployment locations should reflect the likely uncertainty of plume behavior. This solution can be implemented within one month; alternate solutions should be documented and evaluated by RIII and HQ staff.

#### 4.2.2.2 Protective Clothing

A review was made of the availability of protective clothing onsite that would be used in an emergency.

The review indicated that there was an ample supply of protective clothing that would be available during an emergency condition. This portion of the licensee's program appears acceptable.

#### 4.2.3 Emergency Communications Equipment

A review was made to determine if onsite and offsite communication provisions exist for prompt notification by the licensee of site and offsite supportive agencies, and the public.

Communications equipment for onsite and offsite notification is as specified in the Emergency Plan. There are site alarms for radiation emergency, evacuation and fire. These alarms are tested monthly. Currently, notification of the public is to be by radio, television, public address, sirens, and word of mouth. Emergency communication devices and equipment are tested in accordance with EPIP 14.1 by type, but records reviewed indicated that the monthly frequency has not been met three out of nine available months in 1981 and the fourth quarter check was not made in 1981. Some systems are tested more frequently than stated in the EPIP by non Emergency Plan requirements.

Communication nets between the plant and supportive agencies have backup systems and have 24-hour per day capability for notification.

The BPX system has an eight-hour battery available in the event of a power failure. In the event the power is not resumed within eight hours, three direct lines to the plant switch to designated plant extensions.

This portion of the licensee's program is acceptable but the following item should be considered for improvement:

Ensure communication checks are conducted in accordance with the frequency prescribed in EPIP 14.1 and the requirements of Appendix E to 10 CFR 50.

4.2.4 Damage Control/Corrective Action and Maintenance Equipment and Supplies

5.4.5 Repair/Corrective Action

5.4.6 Recovery

A review was made of the facilities and equipment that might be required for damage control/corrective action, repair/corrective action, and recovery, to determine their adequacy in meeting the requirements of NUREG-0654.

The review included an evaluation of the Emergency Plan Implementation Procedures 12.1, 12.2, 12.3, and the Emergency Plan Manual Sections 6.4.3, 9.0, and 9.1.

Results of the review indicated that equipment and supplies for damage control and repair following an emergency were available, or if required, additional supplies and equipment could be obtained from offsite sources. The organizational authority for declaring the recovery phase and key positions in the recovery organization were identified. Onsite organizations responsible for evaluation of plant operating conditions and in-plant and out-of-plant radiological conditions were identified. Exposure limitations, and health and safety (entry and exit) procedures to provide an acceptable recovery program were also identified.

The results of the review indicated that this portion of the licensee's program is adequate.

4.2.5 Reserve Emergency Supplies and Equipment

5.5.1 Inventory, Operational Check and Calibration of Emergency Equipment, Facilities and Supplies

A review was made of reserve emergency supplies and equipment. The review included discussions with the Emergency Planning Coordinator and a Senior Health Physicist in addition to an inspection of the supplies and equipment dedicated for emergency use.

Reserve emergency supplies and equipment were stored in the Control Room, OSC, TSC, ESC, EOF, and SBCC. Supplies are inventoried each quarter and survey instruments are calibrated semi-annually. All equipment listed on the inventory was in place and operable. However, there were no check sources available to check all instruments in emergency kits to ensure operability. There was no

protective clothing in the Interim TSC. A supply of protective clothing should be stored in the Interim or Permanent TSC because of the potential for contamination spread from the Turbine Area.

Reserve emergency supplies and equipment in the Interim OSC and Interim ESC are stored in metal cabinets having wire seals. Any time that a seal is broken, the cabinet requires an inventory. Inspection revealed that a reserve supply of door seals were also stored in the metal cabinets.

Based on the above review, the licensee's reserve emergency supplies and equipment are adequate in the OSC, ESC, EOF, and SBCC. However, the following item should be considered for improvement:

- . Control measures for protective door seals for equipment and supply cabinets in the Interim OSC and TSC should be improved.
- . Check sources should be available for instrument operability checks.

#### 4.2.6 Transportation

A review was made of the transportation program to determine its adequacy in the event of an emergency situation. The review included discussions with the Administrative Supervisor, Administrative Specialist and Plant Manager. In addition, an inspection was made of the dedicated emergency vehicles.

"The review revealed that the dedicated emergency vehicles are available at all times for emergency use. An emergency vehicle may be used as an ambulance, if necessary. Additional "Carryall" vehicles are also available. All emergency vehicles and "Carryalls" have radio communications capabilities. One pickup and one stake bed truck, each having four-wheel drive, have also been dedicated for emergency use."

In addition to the above vehicles, six four wheel drive, high clearance vehicles have been ordered for emergency use.

The results of the review indicate that the licensee's transportation program appears to be acceptable.

5.0 Emergency Plan Implementing Procedures

5.1 General Content and Format

The inspectors reviewed the PBNP Emergency Plan Implementing Procedures. The PBNP EPIPs contain the following headings: (1) Purpose, (2) Reference, (3) Precautions and Limitations, (4) Initial Conditions, and (5) Procedure, with personnel listed, by title, who are responsible for implementing portions of the procedure. Emergency Action Levels, Protective Action Guides, and Subsequent Actions are provided in Sections 1 through 5 of the EPIPs. The EPIPs are adequately cross-referenced to other procedures and reference documents. The EPIPs contain checklists, forms for estimating dose to whole body and thyroid, evaluation reports and report forms.

This section of the licensee's program is acceptable.

5.2 Emergency, Alarm, and Abnormal Occurrence Procedures

The licensee has Emergency Operating Procedures (EOPs) which deal with off-normal situations in reactor systems and containment. The EOPs direct the user under Section 7.0, Subsequent Actions to initiate appropriate sections of the Emergency Plan, to initiate the evacuation alarm, alert fishermen, and to conduct a site evacuation, as appropriate. The EOPs should also direct the user to inform the Shift Supervisor of a possible Emergency Action Level (EAL) and initiate the appropriate section of the Emergency Plan Implementing Procedure to classify and report the event in a timely manner. The following EOPs, as a minimum, dealing with events listed in the EALs must require that the Shift Supervisor be notified of a possible emergency event classification and EPIP activation:

EOP 1A	Loss of Reactor Coolant
EOP 2A	Loss of Secondary Coolant
EOP 3A	Steam Generator Tube Rupture
EOP 4A	Reactor Coolant Leak
EOP 8A	High Reactor Coolant Activity
EOP 8B	Irradiated Fuel Handling Accident In Containment
EOP 8C	Irradiated Fuel Handling Accident in Primary Auxiliary Building
EOP 8D	Spent Fuel Handling Shipment Cask Drop

This portion of the licensee's program is acceptable; however, the following improvements should be considered for improvement.

Revise the Emergency Operating Procedures (EOPs) to direct the user to the specific Emergency Plan Implementing Procedure, where appropriate. This should be accomplished in accordance with the schedule for completion of the generic Westinghouse EOPs.

### 5.3 Implementing Instructions

A review of the licensee's implementing instructions was made to determine its adequacy in assisting individuals in emergency detection, classification, and assessment. The licensee has written implementing instructions in the EPIP's (Sections 1-5); however, the emergency classification does not, in all cases, agree with the classification specified in NUREG-0654. Examples of PBNP classifications less restrictive than those given in NUREG-0654 are given in the following table:

<u>Event</u>	<u>PBNP Plan</u>	<u>NUREG 0654</u>
Transient initiated by loss of feedwater followed by a loss of auxiliary feedwater of greater than one hour.	Site Emergency	General Emergency
Missile impacts from whatever source on facility.	Unusual Event	Alert
Severe damage to ESF Equipment from a missile.	Alert	Site Emergency

The Manager of Nuclear Operations in normal operations becomes the Site Manager in emergency situations. The Shift Supervisor, to classify an accident during non-regular hours, consults with the Duty and Call Superintendent. It is not clear in the EPIP's who has direct responsibility for classification of the event; nor are the nondelegatable functions of the Site Manager specified as per NUREG-0654.

Based on the above findings, improvements in the following areas are required to achieve an acceptable program:

- . Modify the PBNP EAL's to agree with those given in NUREG-0654, Appendix 1.
- . Specify in EPIP-1 the functions of the Site Manager or the person acting as Site Manager in his absence which are not delegatable (e.g., promptly notify offsite authorities within 15 minutes of an emergency).

### 5.4 Implementing Procedures

#### 5.4.1 Notifications

#### 7.2.1 Emergency Detection Walk-through

#### 7.2.2 Emergency Classification Walk-through

### 7.2.3 Notification Walk-through

A review of the licensee's procedures for notifications required during emergencies was made to determine their adequacy in meeting the planning standards of Section E of NUREG-0654. The review included discussions with the Emergency Planning Coordinator and a review of Emergency Plan Implementing Procedures 1.1, 1.2, and Sections 2.0 through and including 5.0.

The results of the review indicate that the procedures are acceptable and satisfy the areas required by the criteria.

Walk-throughs were made with persons who would be assigned as Duty and Call Superintendents, Duty and Call Technical Advisors, and Shift Supervisors to determine whether they could identify an emergency situation, classify the event appropriately, and perform the appropriate notifications. Most of the personnel responded to the events hypothesized in the scenarios presented, in an appropriate and timely manner. They recognized the EAL's, classified the event appropriately, and knew the internal organization to be activated and the Federal, State, and Local agencies to be notified for each of the four classifications of events.

Based on the review this portion of the licensee's program appears to be acceptable.

### 5.4.2 Assessment Actions

### 7.2.4 Dose Calculations Walk-through

A review was made of the radiological assessment facilities, equipment and procedures to determine the adequacy of the assessment program in meeting the planning standards of NUREG-0654. The review included a walk-through and review of the Emergency Plan Implementing Procedures 1.3, 1.4, and 1.5. Emergency Plan Implementing Procedures 1.1 and 1.2 provide the bases of classification of an accident (Emergency Action Levels) and list the instrumentation and control room readouts from which the plant status may be determined.

EPIP 1.3, "Estimation of Source Term," and EPIP 1.4, "Radiological Dose Evaluation," and EPIP 1.5, "Protective Action Evaluation," provide the bases for directing the radiological assessment program. Specific comments regarding the meteorological portion of radiological assessment are given in Section 4.2.1.4 of this report.

Results of the review indicate that: (1) there are no provisions for trend analysis of radiological assessment data; (2) there are no provisions, at this time, for continuous update of radiological assessment information to those offsite agencies responsible for

radiological assessments and recommending protective actions for the general population; and (3) there is no description or reference to the data required from the emergency radiological environmental program.

The walk-through for dose assessment indicated that personnel had difficulty in providing accurate and timely estimates of offsite doses based on hypothetical plant parameters and meteorological conditions. Because of uncertainty in the methodology in performing the estimates, the individuals were somewhat awkward in performing the calculations.

This portion of the licensee's program is acceptable; however, the following improvements should be considered to improve the program.

- . Revise the EIPs to include provisions for trend analysis for radiological data, continuous update (15 minutes) of radiological assessment information to offsite agencies who are responsible for radiological assessment and protective actions.
- . Provide additional training for those personnel involved in radiological dose assessment to assure that accurate, timely estimates of offsite doses based on plant parameters and meteorological conditions can be performed.
- . Simplify the initial dose calculations to be performed in the control room by operations personnel.

#### 5.4.2.1 Offsite Radiological Surveys

A review was made of the offsite radiological survey program to determine its adequacy in meeting the planning standard of NUREG-0654 for assessment of offsite radiological monitoring under accident conditions. The review included discussions with the Health Physicist, Health Physics Supervisors, and Health Physics Technicians.

The review also included review of Emergency Plan Implementing Procedure 7.3.1 Rev. 2 dated September 4, 1981, and attachments. Walk-throughs of equipment locations, offsite emergency kit contents, offsite monitoring equipment, and inventory records were conducted by the Emergency Coordinator and Health Physics Personnel.

The results of the review indicated that adequate methods, systems, and equipment for conducting an offsite radiological survey program under accident conditions are in use.

#### 5.4.2.2 Onsite (Out-of-Plant) Radiological Surveys

#### 5.4.2.3 In-Plant Radiological Surveys

A review was made of onsite (out-of-plant) and in-plant radiological surveys to ensure compliance with the planning criteria of NUREG-0654. The review included provisions indicated in the PBNP Emergency Plan Implementation Procedures (EPIP) 7.3.1 and Attachment 7.3.1-1, Rev. 2 dated September 4, 1981, Airborne Sampling and Direct Dose Rate Survey Guidelines.

The review included discussions with the Chemistry and Health Physics Superintendent and a walk-through of the procedures with Health Physics Supervisors and Technicians and observed by the inspectors to determine their expertise in methods and performance of functions.

The results of the review indicated that adequate methods, systems, and equipment for assessing and monitoring actual onsite consequences of a radiological emergency were in use, and means for controlling radiological exposure in an emergency were established and in use.

#### 5.4.2.12 Radiological and Environmental Monitoring Program

A review was made of the radiological and environmental monitoring program to determine its adequacy in meeting the planning standard of NUREG-0654. The review included discussions with the Chemistry and Health Physics Superintendent and the Health Physicist. The inspector reviewed the Environmental Manual and the results of reports from the Eberline Instrument Company and Hazelton Environmental Sciences for 1980 and 1981. The program covered vegetation, shoreline silt, soil, environmental TLD's, lake water, air, well water, milk, algae, and fish.

The results of the review indicated that adequate facilities, equipment, and procedures to conduct an environmental monitoring program under accident conditions were in place.

#### 5.4.3 Protective Action

##### 5.4.3.1 Radiation Protection During Emergencies

A review was made of the protective action program to determine its adequacy in meeting the planning criteria of NUREG-0654. The review included discussions with the Emergency Planning Coordinator, the Chemistry/Health Physics Superintendent, the Health Physicist, and Shift Supervisors. The review included Section 6.0, Emergency Measures of the Emergency Plan, and Emergency Plan Implementing Procedure 1.5 dated May 15, 1981.

The results of the review indicated that the protective action program during emergencies adequately meets the planning criteria of NUREG-0654. Appropriate measures for controlling personnel

exposures in an emergency are established. Protective actions for the ingestion and inhalation exposure pathways have been developed. Point Beach employees have been medically screened for potassium iodide sensitivity and stocks of KI are located throughout the plant. However, the KI tablets stocked onsite are 300 mg each; the recommended KI dose for thyroid prophylaxis is 120-150 mg per day. The following item should be considered for improvement:

- . Provide the proper KI dose for emergency personnel or implement procedures to assure that personnel do not overdose.

#### 5.4.3.2 Evacuation of Owner Controlled Areas

A review was made of the licensee's proposed evacuation of essential and nonessential licensee and nonlicensee personnel.

Evacuation of specific areas within the site and from the site are determined by radiation levels (i.e.) 10 CFR 20, unscheduled alarms, and life endangering conditions. Routes of evacuation are not marked. Section 6 of the EIPs describe announcements to be made depending on the extent of the required evacuation. These announcements describe where specific groups of people are to assemble. "Personnel Assembly and Accountability, and CHP Radiological Response and Preparedness" procedures are listed for initiation as steps in evacuation procedures.

Verification of individual response to oral evacuation announcements is checked by personnel accountability (see Section 5.4.3.3)

This portion of the program is acceptable.

#### 5.4.3.3 Personnel Accountability

A review was made of the area of personnel accountability, to determine if the procedures are available:

- (1) provided for identifying missing individuals within 30 minutes,
- (2) specified the individual or position to whom reports of accountability are made,
- (3) had a means to find missing individuals, and
- (4) have provisions for continuous accountability.

Personnel accountability may be performed both by hand and by other means. Security personnel have been trained in these accountability procedures."

Contractor Security officers and the WEPCO Security Supervisor have copies (8) of Security Procedure PBSP 1.9 but no copies are at the various guard posts. Although the combination of Security and WEPCO accountability can be performed in 30 minutes, the Security personnel were not aware of this time limitation.

This program is considered to be acceptable.

#### 5.4.4 Security During Emergencies

A review was made of security measures to be placed into effect during an emergency.

Point Beach Security Procedure 1.9 specifies that in the event of a relocation of the Security force to the Site Boundary Control Point, all access roads to the plant site will be barricaded and manned by site security and/or local law enforcement personnel. All access and egress would be controlled at the Site Boundary Control Point in accordance with this procedure and the Emergency Plan. Appendix C to 10 CFR 73 would be implemented as normal.

This program is considered to be acceptable.

#### 5.4.7 Public Information

A review was made of the licensee's procedures for the dissemination of public information during an emergency situation to determine their acceptability under the planning standards of NUREG-0654.

The review included examination of the licensee's procedures for Crisis Communications and discussions with the Emergency Planning Coordinator. The licensee's procedures, individuals, and organizations involved in news dissemination are identified. Their locations and methods for contact are specified. These procedures also identify the licensee's methods for providing uniform messages to the public and the utility spokesman. Provisions have been made for rumor control and response to public inquiries other than the news media.

The review indicates that the licensee's procedures for the dissemination of public information is acceptable.

#### 5.5.2 Drills and Exercises

#### 7.0 Drills and Exercises

#### 7.1 Program Implementation

A review was made of the licensee's drills and exercises in accordance with 10 CFR 50, Appendix E, Item IV.F, the licensee's Emergency Plan and Emergency Plan Implementing Procedure 15.

The review included discussions with the Emergency Plan Coordinator and a Health Physicist.

The review revealed that training and drills were held in 1982 except for drills in Shift Augmentation, Accountability, and Site Evacuation. Site Evacuation drills were not done because the interim emergency response facilities are in the process of relocation to permanent facilities. The licensee felt that the site evacuation during the relocation process would confuse employees. Communication drills have been coordinated with affected county emergency response groups; however, they have not been extensive enough for comment. The drills are used as a training mode in preparation for annual exercises. Drill-identified improvement items have been prioritized but not all of these have been resolved because of excessive workloads.

The licensee's program is adequate based on the Emergency Plan and Emergency Plan Implementing Procedures. However, sufficient drills and exercises have not been done to demonstrate adequate implementation. A full scale exercise is scheduled for March 1982.

Completion of the March 1982 exercise is an open item.

#### 5.5.3 Review, Revision and Distribution

A review of the Emergency Plan and EPIPs was performed regarding review, revision, and distribution of the Emergency Plan and Implementing Procedures. Discussions were held with the Emergency Planning Coordinator.

Telephone numbers in EPIPs are reviewed at least quarterly. The EPIPs are reviewed each calendar year. The Manager-Nuclear Operations is responsible for coordinating the review and updating the plan on an annual basis and he coordinates the review and updating of the EPIPs. This responsibility has been delegated to the Emergency Planning Coordinator. The plan and procedures have been reviewed and updated as specified.

The plan and procedures have been distributed in accordance with the distribution lists in Administrative Procedure, PBNP 3.15.5. Changes to the plan are accompanied by a return receipt indicating to the sender that the changes have been received.

This portion of the licensee's program appears to be acceptable.

#### 5.5.4 Audit

There are no formal provisions for audit of the Emergency Plan or Emergency Plan Implementing Procedures. However, from discussions with the EPC, it was learned that audit provisions

will be formalized. It is the intention of the licensee to have audits of their emergency preparedness program conducted once a year.

This portion of the licensee's program appears to be acceptable; however, the following action should be considered for improvement:

- . Establish a formalized audit program for the emergency preparedness program.

## 6.0 Coordination with Offsite Groups

### 6.1 Offsite Agencies

#### 3.1 Emergency Plan Training/Retraining

#### 5.5 Procedure Review, Revision and Distribution

A review was made of the coordination between the licensee and offsite groups supportive of the Emergency Plan.

The licensee has supplied agencies having emergency response roles within the EPZ, those portions of the Emergency Plan and/or Emergency Plan Implementing Procedures which address that agency's responsibilities. The plans are distributed in accordance with an existing procedure and distribution is controlled using an accounting system for plan changes or administratively controlled (For Information Only), i.e., not using the accounting system. County agencies were trained on the entire plan during a single training session. Other agencies were trained on their area of expertise. The agencies appear to understand their responsibilities.

The licensee has not compared his projected dose calculations method against the method used by the State of Wisconsin.

Although the licensee has letters of agreement from offsite agencies they are not current and do not contain the elements of NUREG-0654, Section A.3 criteria.

Although offsite agencies have received training, the licensee does not currently have a defined training program for these agencies.

Based on the above findings, this portion of the licensee's program appears to be acceptable, but the following items should be considered for improvement:

- . the licensee should compare his dose assessment methodology with the State of Wisconsin's methodology.
- . revise existing letters of agreement from offsite support groups to identify emergency measures to be provided, and criteria for implementation and ensure these agreements are updated at least every two years.
- . a defined training program for offsite agencies should be incorporated into the PBNP training program.

### 6.2 General Public

A review was made of the licensee's methods for disseminating emergency planning information to the public within the plume exposure zone, including the transient population.

Results of the review indicated that the Licensee, along with the Wisconsin Public Service Corporation, distributed a pamphlet entitled "Just In Case - What You Should Know In The Event Of An Incident At A Nuclear Power Plant" to each residence, business, and Post Office box in the plume EPZ. In addition, pamphlets were supplied to motels, gas stations, and park areas and are posted on bulletin boards in parks for the transient population. The licensee plans to disseminate a quarterly newsletter to the affected population containing Site specific, generic, and Emergency Planning information.

The licensee has installed public warning devices to augment existing sirens within his 10 mile EPZ and intends to test the system by February 1, 1982. Key activated controls will be installed on the Kewaunee County sirens until radio controls are received and installed. The licensee stated that manual activation would take approximately 30 minutes.

The program is acceptable; however, the testing of the prompt notification system must be completed by February 1, 1982, with prompt activation from both Sheriff's office.

### 6.3 News Media

A review was made of the program for familiarizing the news media with emergency aspects of the plant.

The licensee has a media program for providing information about radiation and handling of emergencies. Media representatives were allowed to tour the plant and make videotapes of systems. In addition, the licensee has implemented a program for supplying tapes to the media when events occur which could be more accurately presented to the public using visual aids. The media is aware of their contact for obtaining information. The licensee plans to provide non-emergency information to the media during press briefings.

This program is considered to be acceptable.

8.0 Persons Contacted

<u>Name</u>	<u>Title</u>
P. J. Skramstad	Superintendent-Chemistry & Health Physics
Terry Slack	Nuclear Plant Specialist
*Glenn A. Reed	Manager-Nuclear Operations (DCS)
*Jim Knorr	Emergency Plan Coordinator
Tom Koehler	Superintendent-Operations (DCS)
Ken Draska	Operating Supervisor
Don Schoenke	Control Operator
Bob Harvey	Auxiliary Operator
Ken Sokol	Control Operator
Neil Hopka	Auxiliary Operator
Robert Krukowski	Security Supervisor
Howard Gleason	Training Specialist
Don Peterson	Radiochemical Technician
Mike Pockat	Radiochemical Technician
Dan Gesch	Radiochemical Technician
Ron Mulheron	Shift Supervisor
Dick Bredvad	H.P.
Jim Reisenbuechler	Superintendent-I&C
M. Canty	Radiochemical Technician
R. Walesh	Radiochemical Technician
R. Arnold	Radiochemical Technician
Dave Hart	Administrative Specialist
Jim Mielke	Supervisor-Administrative Services

Persons Contacted

<u>Name</u>	<u>Title</u>
R. Bruno	Superintendent-Training
R. E. Link	Superintendent-Engineering, Quality & Regulatory Services (DCS)
J. G. Schweitzer	I&I Engineer (DTA)
C. J. Olson	Nuclear Plant Engineer (DTA)
L. Epstein	HP Supervisor
E. Ziller	Shift Supervisor
Chuck Bolle	HP Supervisor
*J. Zach	Gen'l. Superintendent (DCS)
Ivan Bleeker	Shift Supervisor
Greg Maxfield	Assistant to Superintendent Operations (DTA, SRO)
*C. W. Fay	Assistant Vice President
*F. A. Zeman	Supervisor-Staff Services
*E. J. Lipke	Superintendent of Regulatory Affairs

\*Denotes those present at the exit interview.

#### 9.0 Exit Interview

The inspectors and senior management from NRC Region III met with the licensee representatives (denoted in Paragraph 8) at the conclusion of the appraisal on January 14, 1982. The inspector summarized the scope and findings of the Appraisal.