



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA STREET, N.W.
ATLANTA, GEORGIA 30323

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Report No.: 50-348/94-05, 50-364/94-05

Licensee: Alabama Power Company
600 North 18th Street
Birmingham, Al 35291-0400

Docket No.: 50-348 and 50-364

License No.: NPF-2 and NPF-8

Facility Name: Farley 1 and 2

Inspection Conducted: March 14-18, 1994

Inspector:

G. W. Salyers
G. W. Salyers

April 11, 1994
Date Signed

Approved by:

K. P. Barr
K. P. Barr, Chief

April 11, 1994
Date Signed

Emergency Preparedness Section
Radiological Protection and Emergency Preparedness Branch
Division of Radiation Safety and Safeguards

SUMMARY

Scope:

This routine, announced inspection was conducted in the area of emergency preparedness, and consisted of: (1) a review of the Emergency Preparedness corrective action program; and (2) a review of the last five annual exercises to determine that: the annual scenarios were different, the annual and five year elements were met, and different personnel were manning particular key positions within the Emergency Response Organization.

Results:

In the areas inspected, no violations or deviations were identified. The licensee's Commitment Tracking System appeared to satisfactorily track and respond to regulatory issues and findings in a timely manner. The Emergency Preparedness Punch List which was the corrective action program for lower level facility-identified findings, was in some cases not being maintained current or reviewed quarterly. Some issues on the list were not always being resolved in a timely manner (paragraph 2).

REPORT DETAILS

1. Persons Contacted

Licensee Employees

- *R. Coleman, Southern Nuclear Company, Plant Modification Manager
- *L. Enfinger, Southern Nuclear Company, Administration Manager
- *R. Hill, Nuclear Plant General Manager
- *J. Hornbuckle, Southern Nuclear Company, Safety Audits and Engineering Review, Lead Auditor
- *W. Lee, Southern Nuclear Company, Emergency Preparedness Coordinator
- *C. Nesbitt, Operations Manager
- *L. Stinson, Assistant General Manager, Operations
- *R. Vanderbye, Emergency Preparedness Coordinator

Other licensee employees contacted during this inspection included engineers, operators, technicians, and administrative personnel.

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- *W. Cline, Chief, Radiological Protection and Emergency Preparedness Branch
- *S. Koenick, Resident Inspector, Intern
- *D. McGuire, Chief, Safeguards Section
- *M. Morgan, Resident Inspector
- *T. Ross, Senior Resident Inspector

*Attended exit interview

Abbreviations used throughout this report are listed in the last paragraph.

2. Corrective Action Programs (82701)

Pursuant to 10 CFR 50.47(b)(14) and 10 CFR 50 Appendix E, F.5, this area was inspected to evaluate the licensee's corrective action program for deficiencies and weaknesses identified during exercise and drills. In order to effectively evaluate Emergency Preparedness's response to findings, the licensee's corrective action program was reviewed.

a. Commitment Tracking System

The inspector reviewed GO-NG-39, Licensing Correspondence and Commitment Tracking, which proceduralized correspondence between the licensee and the NRC. The CTS was the mechanism used by the licensee to track and document, actions and commitments to the NRC.

The inspector reviewed documentation of numerous individual commitment tracking sheets that were being tracked by the Nuclear Engineering and Licensing group. The inspector selected two of these commitments at random from the files for closer review.

- 1) Commitment number 8126 was written in response to NRC IR 90-09 dated April 16-20, 1990. In the report, the licensee committed to formalize the process of conducting and documenting the required annual reviews of the EIPs. Documentation indicated that Revision 6 to GO-EIP-135, Emergency Plan Review and Revision, dated April 3, 1992 added "and General Office Emergency Implementing Procedures (GO-EIP'S)" to Section 3.1 of the procedure. As indicated, there were two years between the commitment and the final procedural change that satisfied the commitment. The inspector reviewed the procedure and verified that the statement had been incorporated into the procedure. The inspector also verified that the licensee had conducted EIP reviews in 1992 and 1993, in accordance with the procedure change and commitment. The commitment tracking form indicated that the commitment resolution was completed, but was "ongoing" which meant the commitment would be tracked and verified complete each year.
- 2) Commitment number 8173 was in response to NRC IR 90-02, dated March 1990. The commitment was "to identify requirements for non-operations groups in support of all emergency procedures. Supervision will ensure their personnel are familiar with their groups responsibilities by July 15, 1990." The commitment was primarily concerned with the interaction of other groups in task support of the EOP. The inspector verified and reviewed NRC IR 91-24 dated January 1992, which closed out the commitment. Based on the NRC closeout inspection report, the inspector concluded that the licensee had satisfactorily met the commitment. The inspector also noted that the licensee had underestimated the amount of work necessary to meet the commitment. The licensee had to rewrite the EOPs in addition to performing a task analysis of the work needed to support the EOPs. The task analysis had to be incorporated into the different support groups training programs to satisfy the commitment.

Items that were requested by the inspector for review were readily available and organized. Based on the CTS list, the individual commitment tracking sheets, and the documentation reviewed, the inspector concluded that the licensee was satisfactorily tracking and completing commitments and except for isolated cases, they were completed in a timely manner. No violations or deviations were identified with the Commitment Tracking System.

b. Emergency Preparedness Punch List

The EP group tracks issues identified during audits, drill, and program maintenance on the "EPPL." For each issue, the EPPL prioritized the issues, gave a description, identified the responsible group, indicated its status, gave a brief comment or disposition, and its estimated completion date.

The licensee stated to the inspector that the EPPL was updated quarterly. When the EPPL was updated, the responsible groups were to review the status of issues assigned to them, and up-date the actions being taken in the "Comments, Disposition" column. The feedback information was to be used in updating the next quarterly revision.

The EPPL reviewed by the inspector was printed by the EP Coordinator on March 14, 1994, the first day of the inspection. The inspector requested the licensee provide documentation of the last two EPPL up-dates. The documentation provided by the licensee indicated that the last EPPL update was issued on November 11, 1992, and the next previous up-date was April 9, 1992. The inspector concluded that the licensee had not been updating the EPPL within the quarterly objective.

The inspector reviewed the EPPL list and noted that there were approximately 456 issues dating from 1985. The majority of the issues were dated from January 1992 to present. The inspector noted that:

Completion dates were not indicated.

Projected completion dates, when assigned, were not adhered to.

No explanation was given for not meeting due dates.

Many items on the list were 2 to 2 1/2 year old.

That 3 pages of issues, I.P.# 171 through 201 were duplications of I.P.# 102 through 167.

When the inspector questioned the licensee about the "quarterly up-date" of the EPPL, the licensee stated that the quarterly up-date was an EP objective and that the EPPL tracking was not proceduralized. The EPPL was maintained by the EP Coordinator. The inspector noted that 10 CFR 50.47(b)(14) and 10 CFR 50, Appendix E, F.5 only require that deficiencies identified as a result of exercises or drills are corrected but, does not require a proceduralized tracking system.

The inspector selected EPPL issues at random and reviewed their status, corrective action, and timeliness of the corrective action. Each time the inspector requested information on a particular issue, the EP Coordinator would contact the responsible group who would in turn contact the individual assigned to maintain the file and follow the issue. The inspector's request for documentation revealed that the only information immediately available to the licensee pertaining to an issue was the information stated on the EPPL. Eventually, requested documentation was always made available to the inspector. Some issues were reviewed:

- I.D.# 91-015, "Elevated temperature in EOF room 117, could adversely affect detector, computer operation." The status indicated that the issues was being evaluated and the ECD was October 1, 1992. According to documentation, Bechtel had evaluated the issue in report B-91-0-7765, dated September 10, 1992, and concluded that "No action necessary." The issue could have been closed in September 1992.
- I.D.# 92-118, "The TSC and EOF Staff failed to provide protective actions for the EOF and Gate 95 security post during the December 8, 1993, annual drill." The status indicated that the implementation was in progress and the ECD was March 21, 1994. The inspector reviewed procedure changes that would alert the EOF and TSC staff when making the PARs. The changes had not been implemented and needed to be approved by the PORC. The inspector considered the procedure change and response time acceptable.
- I.D.# 90-246, "FEMA report of 1990 Emergency Exercise, corrective action regarding State of Alabama RMT collection of air sample." The status indicated that the implementation was in progress and the ECD was February 1993. The issue was to be evaluated for closure during the 1992 annual exercise. The inspector reviewed documentation that indicated the licensee did not receive their FEMA Report on their December 8-9, 1992 annual exercise that would close the issue, until February 8, 1994.
- I.D.# 91-014, "Resolve NRC position concerning reportable releases and FNP Initial Notification Message. Negotiate changes to message form with governmental agencies as needed. EIP-26 Figure 2 to be revised when approval is obtained." The status indicated that the issue was complete. The inspector reviewed the documentation and the review process associated with developing a new notification form. The source document was a 1991 NEL report and the notification form was implemented on September 8, 1992, and EIP-26 was revised.

c. Corrective Action Reporting Program

In addition to the EPPL and the CTS, the licensee maintained a Corrective Action Reporting program for tracking and correcting issues identified by audits and inspection findings or non-compliance issues that were self-identified by responsible supervisors. FNP-0-AP-07, Corrective Action Reporting, was the controlling procedure for maintaining the program. The Corrective Action Status Log identified issues and the group responsible for resolving the issue. The licensee provided the inspector with the three CARs in the system:

- CAR 1900, IR 91-23-01, EW, Failure of control room staff to make initial notifications in accordance with EIPs.
- CAR 1956, IR 92-20-01, Violation, Removal of EOF and TSC ENN circuits from service without establishing a backup ENN telecommunications network.
- CAR 1999, SAER Audit 93-04, Failure to update the RM procedures in the EOF.

The inspector noted that the three CARs which were important to EP, had not been tracked on the EPPL.

d. Conclusion

The inspector determined the licensee has three systems which may be used for tracking EP issues: the CATL, EPPL, and the CARL. The inspector concluded that the licensee was proactive in resolving issues tracked on the CATL and CARL. It was further noted that the EPPL was not always being updated within the quarterly objective and in some cases issues were not resolved in a timely manner. The need for closer attention to the EPPL was discussed as an item for improvement during the exit meeting.

3. Elements of the Annual Exercises (82206)

Pursuant to 10 CFR 50.47(b)(14) and 10 CFR 50 Appendix E, F.2 this area was inspected to verify the annual exercises were being conducted in a manner which would evaluate major portions of the emergency response capabilities.

The inspector reviewed the annual exercises for the previous five years to determine:

- That there were differences in scenarios and EALs used in classifications.
- That the required annual elements and five year elements had been met.

- Different personnel were being used in key positions in the OSC, TSC, and EOF.

The inspector reviewed the annual exercise report packages for 1989 through 1993, and verified that each scenario varied sufficiently from the previous scenarios. The inspector also looked at the EALs used for each classification in successive years to verify a diversity in classification from year to year. No concerns with the scenario contents or EALs used for classification were identified by the inspector.

The licensee's procedure GO-EIP-132, "Emergency Plan Drills and Exercises", Table 1, "Exercise Objective Guideline," identified the annual elements and the five/six year elements, and the last time the objective was exercised. The inspector noted that with the exception of the five year element "use of emergency power," the Table corresponded to the element identified in the guidance of NUREG-0654, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Nuclear Power Plants" and NUREG-0737, "Clarification of TMI Action Plan Requirements." The inspector reviewed the scenarios and scenario objectives for 1989 through 1993, and verified that the required annual and five year elements had been met and agreed with the "Last Year Done" in Table 1 of G)-EIP-132. The inspector concluded that the licensee had satisfactorily met the annual and five year elements. No concerns were identified by the inspector.

The inspector reviewed the Farley "EP On Call Schedule" dated January 18, 1994. The schedule listed three crews and listed the individuals by names for the different positions in the TSC and EOF. In addition, there was an "EP On-Call Designate Alternates" list for positions in the TSC and EOF. The inspector used the "On Call List" in conjunction with the annual exercise report files for 1989 through 1993, and verified that the licensee was rotating different individuals through the key positions in successive years. The inspector concluded that the licensee was sufficiently rotating different individuals through the key positions, thus maintaining depth in experience for the key positions.

4. Exit Interview

The inspection scope and results were summarized on March 18, 1994, with those persons indicated in Paragraph 1. The inspector identified that items in the CATL and the CARL were being addressed in a timely manner. The need for close attention to the EPPL was discussed as an improvement area. Also, the inspector indicated that the licensee had satisfactorily varied their drill scenario, met their annual and five year exercise elements, and rotated personnel in drill key positions to maintain a good depth of experience for emergency response. No dissenting comments were made by the licensee. No propriety information was reviewed during this inspection.

5. Abbreviations And Acronyms

CARL	Corrective Action Reporting List
CATL	Commitment Action Tracking List
CFR	Code of Federal Regulations
CTS	Commitment Tracking System
ECD	Estimated Completion Date
ENN	Emergency Notification Network
EOF	Emergency Operating Facility
EP	Emergency Preparedness
EPPL	Emergency Preparedness Punch List
EW	Exercise Weakness
FEMA	Federal Emergency Management Agency
FNP	Farley Nuclear Plant
IR	Inspection Report
OSC	Operational Support Center
PORC	Plant Operation Review Committee
RMT	Radiation Monitoring Team
SAER	Safety Audit and Engineering Review
TSC	Technical Support Center