

U. S. NUCLEAR REGULATORY COMMISSION

REGION V

Report No. 50-362/82-20
Docket No. 50-362 License No. CPPR-98 Safeguards Group _____
Licensee: Southern California Edison Company
P.O. Box 800, 2244 Walnut Grove Avenue
Rosemead, California 91770
Facility Name: San Onofre Unit 3
Inspection at: San Onofre Site, San Diego County, California
Inspection conducted: September 13-17, 1982
Inspectors: *M. Cillis* 10/7/82
M. Cillis, Radiation Specialist Date Signed
_____ Date Signed
Approved by: *F. A. Wenslawski* 10/7/82
F. A. Wenslawski, Chief, Reactor Radiation Date Signed
Protection Section
Approved by: *H. E. Book* 10/8/82
H. E. Book, Chief, Radiological Safety Branch Date Signed
_____ Date Signed

Summary:

Inspection on September 13-17, 1982 (50-362/82-20)

Areas Inspected: Routine, unannounced inspection of preoperational radiation protection program, including organization and staffing, training, respiratory protection, and ALARA; environmental monitoring program; solid, liquid and gaseous radwaste management, including process and effluent monitoring systems, area radiation monitors, HVAC systems; status of NUREG 0737 items; a tour of the licensee's facilities, and followup on previous inspection findings. The inspection involved 40 hours on site by one regionally based NRC inspector.

Results: Of the areas inspected, no items of noncompliance or deviations were identified.

RV Form 219 (2)

DETAILS

1. Persons Contacted

a. Southern California Edison Company (SCE)

- *W. C. Moody, Deputy Station Manager
- *D. Brevig, Supervisor, Plant Chemistry
- *P. Knapp, Manager, Health Physics
- *P. A. Croy, Manager, Compliance
- *R. Grey, Unit 2/3 Health Physics Supervisor
- C. Bostrom, H.P. & Chem Training Administrator
- G. Peckham, Dosimetry Supervisor
- M. Russell, Health Physicist
- H. L. Chun, Quality Assurance Engineer
- *H. L. Richter, Project Engineer, Unit 2/3
- *B. Katz, Manager Technical
- *R. E. Reiss, Quality Assurance Engineer
- *G. T. Gibson, Compliance Engineer
- *R. L. Morgan, Radiation Protection Engineer
- *R. V. Warnock, Radiation Protection Engineering Supervisor
- D. Trinkle, I&C Foreman
- *R. N. Santosuosso, I&C Supervisor
- P. Patterson, Startup Engineer
- S. Scofield, Radiation Protection ALARA Engineer

b. Contractor

Allen Nuclear Associates (ANA)

R. L. Sullivan, Health Physicist

Bechtel Power Corporation (BPC)

S. H. Freid, Assistant Project Engineer
J. R. Purucker, Professional Engineer
E. Pennings, Electrician
W. Young, Building Trades Representative

- * Denotes those present at the exit interview on September 17, 1982.

In addition to the individuals noted above, the inspector met with other members of the licensee's and contractors staff.

2. Licensee Action on Previous Inspection Findings

a. (Closed) Item 50-362/82-15-04

The licensee's corrective action with respect to this item which is discussed in Section 6 of Inspection Report 50-362/82-15 was examined. The item identified the need for providing emergency instructions to visitors entering the licensee's owner controlled areas. This item is also discussed in Region V's Emergency Preparedness Appraisal Inspection Report 50-362/81-08 and Inspection Report 50-361/82-07.

The examination included a review of licensee audit reports, discussions with the SCE staff and the inspectors personal observations.

The examination and observations disclosed that security force personnel have been re-trained, new visitor handout instructions have been printed, site locator maps used for briefing visitors have been installed at each of the five entry points, guard post instructions have been prepared for the security force and the security force was observed implementing the responsibilities identified on the instructions. Discussions with the staff disclosed that the site Emergency Preparedness group are scheduled to conduct periodic audits and the site QA group is planning to conduct an inspection during the fourth quarter of 1982 to verify that the corrective actions are being enforced. This matter is considered closed. (82-15-04)

No items of noncompliance or deviations were identified.

b. (Open) Item 50-362/82-15-03

The inspector met with the licensee staff to ascertain the status of the Radwaste Building's HVAC system. Concerns with respect to the adequacy of this system are described in Section 9 of Inspection Report 50-362/82-15.

The inspection disclosed that a Task Force consisting of SCE and BPC personnel has been appointed by the Station Manager to conduct an evaluation of the current system and report their findings and recommendations by October 1, 1982. The inspection revealed that the Task Force evaluation had not been completed at the time of this inspection. The licensee representatives stated that a preliminary Task Force evaluation revealed:

1. The current HVAC system is installed in accordance with the design objectives described in the FSAR except for the Waste Gas Compressor Room. An inspection of the Radwaste Building, conducted by the licensee, revealed that the Waste Gas Compressor Rooms ventilation system was not installed per design. The system consisted of a supply source only, the exhaust portion had not been installed. The licensee has generated a DCP to correct this problem. The licensee has since requested that BPC take immediate action to install a temporary ventilation system from the Waste Gas Compressor Rooms. The temporary system was deemed necessary because of an unplanned release of noble gases due to a ruptured waste gas compressor disc which occurred during this inspection. The release, which was investigated by the inspector, did not result in any personnel contamination or releases of radioactivity that exceeded 10 CFR 20, Appendix B or T. S. limits. The release was not a T. S. or 10 CFR 20 reportable occurrence. The installed effluent monitoring system was not capable of detecting the minute quantity released. Personnel in the immediate area of the release were given whole body counts. The whole body counts did not show any activity above the Minimum Detectable Activity levels of the whole body counting system.
2. The licensee's operations group is continuing with a Radwaste Building Ventilation once-a-shift surveillance check.
3. The licensee has experienced some problems in attempting to properly balance the ventilation system on the 70' level of the Rad Waste/Auxiliary Building. The cause(s) for this problem are still under evaluation by the Task Force.
4. An evaluation of the Truck Bay high-roll-up door area has not been completed.
5. The waste compactor's exhaust system has not been connected to the building ventilation system as required by a licensee DCP request.
6. An additional 22,000 CFM total capacity of portable ventilation systems is expected to be available by the end of October 1982. The first 12,000 CFM is expected by mid October 1982. The portable ventilation systems will be used to supplement the as installed ventilation system.

The staff stated that the Task Force would not complete the evaluation of the HVAC's system adequacy until October 1, 1982. A report will be issued upon completion of the evaluation. At the exit interview, the inspector emphasized the need for completion of the evaluation and immediate correction of the problems associated with the Waste Gas Compressor Room ventilation system. This item will remain open and be examined during a subsequent inspection.

No items of noncompliance or deviations were identified.

c. (Closed) Item 50-362/82-15-02

The inspector examined the licensee's actions taken in regard to providing controlled access to the Unit 3 spent fuel transfer tube. This item of concern is described in Section 7.c of Inspection Report 50-362/82-15. Discussions with the staff revealed that a separate DCP has been issued to correct the problem at Unit 3. Construction modifications are expected to commence on or about September 17, 1982. This matter is considered closed. (82-15-02).

No items of noncompliance or deviations were identified.

d. (Open) 50-362/82-15-01

The inspector held a meeting with the Chemistry Supervisor to discuss the status of concerns identified in Section 5.b of Inspection Report 50-362/82-15. The concerns identified problems associated with the training of Chemistry Technicians that were not commensurate with the T. S. requirements. The inspection disclosed that additional training was provided to the Chemistry Technicians to ensure compliance with Section 6.4 and 6.8.4 of the Technical Specifications. Additional actions included:

- a. Assignment of a Chemistry Group Training Coordinator.
- b. Development of a qualification program for senior technicians.
- c. Conducting weekly seminars and self study programs to apprise/familiarize personnel with new procedures, changes to procedures and incidents.
- d. Establishment of separate training records in the Chemistry Group which are in addition to those maintained by the site training organization.

- e. Establishment of training requirements for Chemistry Technicians that are consistent with ANSI N18.1-1971 and with the Chemistry Department demands. The training requirements will be jointly determined by the Chemistry and Training Group rather than by the Training Group alone which had been the practice.
- f. Improving the line of communication between the Chemistry and Training organizations.

The Chemistry Supervisor stated he would continue to evaluate means for improving the training program for the site chemistry organization.

The inspection disclosed improvement in communication between the Chemistry and Training groups. This was attributable to a recent reorganization in the site Training Division. The reorganization shifted the responsibilities for Health Physics and Chemistry Technician Training to a newly appointed HP&Chem Training Administrator. Previously, this responsibility was under the direction of the site Training Administrator who was also responsible for training in the following areas:

- a. Emergency Preparedness
- b. Security
- c. Respiratory Protection
- d. General Employee Training
- e. Whole Body Counting

The inspector commended the Chemistry supervisor for the progress that had been made in addressing the concerns identified in Inspection Report 50-362/82-15. The inspector also commended management for the recent reorganization of the Training Division. The licensee was informed that this item would be re-examined during a subsequent inspection. (82-15-01)

No items of noncompliance or deviations were identified.

3. Radiation Protection

a. Health Physics Organization

The inspection did not reveal any significant changes in the Health Physics Organization from what is discussed in paragraph 5.a of Inspection Report 50-362/82-15 and Section 3 of Inspection Report 50-361/82-19.

No items of noncompliance or deviations were identified.

b. Training

Discussions with the Manager of Health Physics confirmed the inspectors observations with respect to the training improvements discussed in Section 2.d of this report. The Manager of Health Physics provided the inspector with a new Health Physics Technician Qualification Manual Number QM-5500A, Rev 0. which was recently approved by the Station Manager. The manual is intended to serve as documentation of prerequisite training for both Assistant and Senior Health Physics Technicians. The manual is divided into 20 sections. It appears to be quite thorough as a self study training tool. The following subjects are discussed in the manual:

- . HP Administrative Concepts
- . Principals of Radiation and Radioactivity
- . ALARA Program
- . Radiation Exposure Permits (REP)
- . Personnel Monitoring Program
- . Instrumentation and Calibration Program
- . Counting Room Instrumentation
- . Respiratory Protection Program
- . Anti-Contamination Clothing
- . Radiological Surveys
- . Radiological Postings
- . Radioactive Material Control
- . Plant Systems
- . Emergency Plan
- . Radioactive Waste
- . Technical Specifications
- . Practical Problems
- . Special Radiological Situations
- . Seminars

No items of noncomplaine or deviations were identified.

c. Respiratory Protection Program

1. Breathing Air Supply System

The licensee's respiratory protection program remains unchanged from what is discussed in Section 5.c of Inspection Report 50-362/82-15. The inspection report identified that a consultant had been hired to evaluate the best possible means for providing a breathing air supply system that ensures compliance with 29 CFR 1910.134(d)(1-4). Discussions with the staff revealed that the contractor's evaluation was not complete at the time of this inspection. The licensee representative stated that preliminary indications from the evaluation will probably identify that the Service Air System and use of a bottled air system would be unsatisfactory. The representative stated that the most likely recommendation resulting from the evaluation will be to separate the Instrument Air System from the Service Air System and to provide a hard

pipe breathing air supply system from the Service Air System. The consultants evaluation was expected to be complete on or about September 21, 1982.

No items of noncompliance or deviations were identified.

2. Respiratory Training and Qualification

The inspector attended the licensee's respiratory protection training program and subsequently became respiratory qualified in accordance with the licensee's procedures. The training program consists of a video tape presentation, issuance of handout material, oral presentation, written examination, physical examination, whole body count and fit testing. The program appeared to be consistent with 10 CFR 20.103, Regulatory Guide 8.15 and NUREG 0041 requirements. The training course content and presentation was excellent. The inspector commended the instructor after the presentation and at the exit interview.

No items of noncompliance or deviations were identified.

4. Radiological Environmental Monitoring Program (REMP)

The licensee's radiological environmental monitoring program was examined to determine compliance with Sections 4.12 and 6.8.1.i of the T. S. Discussions with licensee site and corporate personnel were held during the inspection. The inspection disclosed that the licensee has taken action to revise the Environmental Monitoring Program Plan manual. The revisions will address the inspector's concerns identified in Section 3 of Inspection Report 50-362/82-15. The licensee representative stated that the land-use-census audit required by Section 4.12.2 of the T.S. was currently in progress. The census audit which is being conducted by a consultant is expected to be complete by October 1982. The discussions also revealed that the licensee is planning to audit contractor organizations (e.g. EAL/Lockheed) to ensure compliance with the intralaboratory comparison program required by Section 4.12.3 of the T.S. This audit is being planned for the fourth quarter of 1982.

The inspection also revealed that the licensee has implemented a Quality Assurance Program for effluent and environmental monitoring that is consistent with Regulatory Guide 4.15, Rev 1, February 1979 as required by Section 6.8.1.i of the T.S.

The inspector informed the licensee that the Radiological Environmental Monitoring program was acceptable to support issuance of a license for fuel load. The REMP organization, applicable procedures and responsibilities appeared to be well defined.

No items of noncompliance or deviations were identified.

5. TMI Action Items

The inspector examined the status of certain TMI Action Plan Requirements discussed in NUREG 0737, Section 4 of Inspection Report 50-362/82-15 and Section 6 of Inspection Report 50-361/81-35. In particular the status of Item II.B.3, "Post Accident Sampling Capabilities" (PASS) and Item II.F.1, "Accident Monitoring Instrumentation" for Unit 3 was examined.

Discussions with the staff revealed that the licensee was having difficulty with the PASS system (Item II.B.3) and has requested approval from the NRC to delay the implementation of this system until January 1, 1983. The licensee representative stated the system was approximately 75% functional, however, they have not been able to perform an Oxygen analysis of the Reactor Coolant System liquid. Nor does the licensee have a contract with an approved laboratory to perform the chloride analysis required by NUREG 0737. The availability of approved shipping containers for transporting PASS samples also has to be resolved. The final item requiring resolution is the capability for obtaining a containment sump sample. The licensee has not been able to demonstrate the capability for obtaining this sample. The inspector was informed that NRC had approved the licensee's request to delay the implementation of the PASS until January 1, 1983.

The inspection disclosed that no significant progress had been made in the implementation of Items II.F.1.2.a.b&c. The radiation monitoring systems required by Item II.F.1 are currently installed; however, the functional calibration and functional checks required by the T.S. and NUREG have not been completed. A schedule for completing the calibrations was reviewed by the inspector. The schedule indicates the systems will be completed by October 14, 1982.

No items of noncompliance or deviations were identified.

6. Radiation Monitoring Systems

a. Process and Effluent Monitoring Systems

An examination was conducted to determine the status of T.S. required process and effluent monitoring systems to support fuel load at Unit 3. Common systems, such as the Control Room Airborne Monitor, which are common to both Units 2 and 3 were also examined. The inspector reviewed the licensee's schedule for completing the installation, calibration and final review of calibration packages for the monitoring systems. The process and effluent monitors specified in table 11.5-1 of the FSAR were observed by the inspector during a tour of the licensee's facilities. The inspection disclosed that the same

concerns described in Section 8 of Inspection Report 50-362/82-15 and Section 6 of Inspection Report 50-361/82-09 still existed; except for the following which appeared to be adequate:

1. Development of calibration procedures which have been prepared to support Unit 2 monitoring systems. The same procedures also apply to Unit 3.
2. Developing of acceptable methods for conducting the calibration of monitoring systems that are consistent with the T. S. requirements.

The examination revealed that the status of the process and effluent monitoring systems remains unchanged from that discussed in Section 8 of Inspection Report 50-362/82-15 with the exception of the environmental qualification of the containment high range monitors. The schedule for completing the calibrations has been extended by approximately 12 days. As of September 14, 1982 the licensee has identified that of the monitoring systems: 7 are on schedule, 9 are behind schedule and 8 are ahead of schedule. All systems are scheduled to be completed by October 14, 1982. The inspector requested the licensee to forward the calibration data to the inspector to expedite the review process. The calibration data for the Control Room Airborne Monitor 2/3-7824 was reviewed during the inspection. The method for conducting the calibration appeared to be consistent with the requirements specified in the T.S. and licensee commitments as noted in Inspection Report 50-361/82-09. Also examined was the calibration data for the Radwaste Discharge Line Monitor 2/3-7813. The review revealed the following:

- a. The certification papers for some of the calibration sources used in the calibration of both systems did not indicate whether the sources were indirectly or directly traceable to NBS. The inspector reminded the licensee of a similar finding that was discussed in Section 4.b of Inspection Report 50-361/82-19.
- b. The inspector found an error in the licensee's calculations used for determining the Control Room Airborne Monitor efficiency. The efficiency had been determined using Krypton-85 source number 84012E. The error had not been found by the licensee's three party review process that had been accomplished prior to the inspector's examination. The inspector discussed the error with the licensee's I&C foreman. The licensee's representative took immediate steps to resolve the problem.

At the exit interview, the inspector emphasized the importance of conducting adequate and thorough reviews and reiterated the concerns expressed with respect to the status of the monitoring systems previously discussed in Section 8 of Inspection Report 50-362/82-15. The inspector informed the licensee that the process and effluent monitoring systems specified in the T.S. will be required to be fully operational in accordance with T.S. requirements prior to issuance of a license for fuel load.

The inspector observed the Low and High range Main Steam Line Monitors during a tour of Unit 3 facilities. The calibrations of these monitors were not completed at the time of this inspection. The licensee identified that a noise problem was delaying the implementation of Unit 3 Wide Range Gas Steam Jet Air Ejector Monitor, 3RE-7870. The problem was under evaluation by the system supplier at the time of this inspection. The inspector asked if the problem was generic that must be considered for Unit 2 systems. The licensee representative stated they would not know whether it was generic until the evaluations were completed.

The inspection revealed that Unit 3 process and effluent monitoring system calibration data can not be included in the Offsite Dose Calculation manual (ODCM), as required by Section 6.14 of the T.S., until the calibrations are complete. The need to expedite the process and effluent monitor calibrations so that the data could be included in the ODCM was emphasized at the exit interview. The licensee was reminded that the ODCM must be approved by the Commission prior to implementation as required by Section 6.14.1 of the T.S.

No items of noncompliance or deviations were identified.

b. Area Radiation Monitors (ARM's)

The inspector reviewed the status of ARM's described in paragraph 12.3.4.1 and 12.3.4.3.1 of the FSAR. The review revealed that the monitors identified in Table 12.3-1 of the FSAR were installed and are scheduled to be calibrated prior to fuel load. Discussions with the staff indicated that the calibration of the ARM's which are not considered as safety related items may be delayed beyond fuel load if necessary to support the implementation of those process and effluent monitors that are required for fuel load. The licensee representative stated that an attempt will be made to calibrate the ARM's on the same schedule as the process and effluent monitors. The staff was confident that as a minimum the calibration of the non-safety related ARM's would be completed prior to initial criticality.

No items of noncompliance or deviations were identified.

c. Emergency Radiation Monitoring Systems (ERMS)

The inspector held a meeting with the staff to ascertain the status of the ERMS described in paragraph 12.3.4.3.2 of the FSAR. The Unit 2/3 Assistant Project Manager (APM) stated that a request to eliminate the ERMS was in progress. The Unit 2/3 APM indicated that a change to the FSAR would be issued after the safety evaluation had been completed. It was determined that the ERMS are no longer necessary since the T.S. required High Range In-Containment Monitors serve the same function. The licensee did not deem it necessary to have the redundant systems since the High Range In-Containment Monitor parameters exceed those of the ERMS.

No items of noncompliance or deviations were identified.

7. Process Control Program

The inspector examined the status of the licensee's Process Control Program (PCP). The PCP is required to be implemented at or prior to fuel load and must be approved by the NRC as specified in Section 6.13 of the T.S.

The inspection revealed that the licensee's installed resin solidification system is not satisfactory. The licensee is in the process of redesigning a new solidification system. In the interim the licensee is planning to use a Chem-Nuclear solidification process. The inspection disclosed that the licensee does not yet have an approved PCP.

The need for an approved PCP or to request relief, as currently allowed by Unit 2 License Condition, was emphasized by the inspector at the exit interview.

No items of noncompliance or deviations were identified.

8. Tour of Facility

The inspector and two licensee representatives conducted a tour of the Radwaste Building, Auxiliary Building and Unit 3 Containment Building. The following observations were brought to the licensee's attention:

- a. The containment building appeared to be extremely dirty and in a state of disarray.
- b. The reactor cavity manway cover does not provide for locking during normal plant operations to provide positive control over entry. An identical problem was identified at Unit 2, as

described in Section 4.C2 of Inspection Report 50-361/82-26. The inspector emphasized the need to assure positive control over entry into the reactor cavity once the reactor is operated. The licensee representative stated that the cavity manway cover would be bolted down and locked during reactor operations.

The inspector observed that the containment high range monitor 3RE 7820-1&2 were now environmentally qualified. The monitors had not been electronically or isotopically calibrated nor had the channel functional checks been completed at the time of this inspection. The tour also revealed that the Area Radiation Monitors (ARM's) were in a similar status. The licensee staff stated that the containment high range monitor would be calibrated as required by the T.S. in time to support fuel load which is now tentatively scheduled to occur on or about November 15, 1982.

The tour included observations of the licensee's radiation areas, controlled areas and radioactive material storage areas. In addition, the licensee's identification of radioactive material and control of access to radiation areas were observed during the tour. The observations revealed that the licensee's practices were consistent with the regulatory requirements specified in 10 CFR 20.103, 10 CFR 20.203, and 10 CFR 20.204. The observations did reveal a need for the licensee to evaluate the ingress and egress of personnel from controlled areas for the purpose of ensuring compliance with the guidelines in IE Circular 81-07, "Control of Radioactively Contaminated Material" and as required by licensee procedures. Observations revealed that personnel may exit from controlled areas without being reminded to have their equipment/tools surveyed by the health physics staff as recommend by Circular 81-07 and station procedures. The Unit 3 Health Physics Supervisor agreed to evaluate this matter.

No items of noncompliance or deviations were identified.

9. Allegation

The inspector conducted an investigation concerning an informal allegation that was called into the NRC's Office of Investigation in Region V on September 14, 1982. The allegation was made by a former Bechtel Power Corporation (BPC) employee who stated that he was fired for refusing to perform his work assignment in the Radiochemistry Laboratory at San Onofre's Unit 2 Nuclear Generating Station. The alleger stated that he had refused to perform his assignment because he felt it was unsafe for the following reasons:

- a. He was told that a fellow employee had become contaminated on the previous day while working in the chemistry laboratory.
- b. Personnel were walking in and out of the area with radioactive materials.
- c. The health physics technician did not know what the area contamination or radiation levels were, when asked by the allegor.
- d. He was told that the radiation exposure records of a fellow employee were lost.

In summary, the allegation suggested the possibility that the licensee's radiation protection program was not in full compliance with the regulatory requirements as specified in 10 CFR 19 and 10 CFR 20. The allegation was subsequently submitted in writing. The written allegation was received at the Region V office on September 20, 1982.

The investigation with respect to this item was conducted during the period of September 14-16, 1982. It consisted of selective examination of representative records, interviews with personnel and observations by the inspector during a tour of the licensee's facilities. The inspection did not include an investigation of any possible infractions pursuant to 10 CFR 19.16(c) or to 10 CFR 19.20 requirements. The individual's work assignment required that he enter the radiochemistry laboratory counting room. This is an area where one should expect to see personnel carrying samples that require analysis. The samples are normally in some sort of container and may or may not be radioactive. The investigation revealed that the licensee's sample handling practices were consistent with 10 CFR 20 regulatory requirements.

The investigation also revealed that the allegor and those fellow employee's implicated in the allegation had all attended the General Employee's Training (GET) course provided by the licensee pursuant to 10 CFR 19.12 requirements. The GET course subject matter meets regulatory requirements. A review of the training records revealed that the allegor and those fellow BPC employee's implicated had all attended the training and successfully passed the examination that is administered at the end of the training. The allegor had received score of approximately 92%. Records of daily contamination and radiation surveys of the chemistry laboratory were examined.

The review revealed that contamination and radiation levels at the work site and adjacent areas were comparable to levels found in a clean or unrestricted area. These levels were also noted on postings at the entrance and within the work area cited in the allegation. A review of the reactor coolant radioactivity analysis records revealed that the levels for gross beta, gamma, alpha and tritium were almost comparable to those found in drinking water. The inspection also revealed that the alleged contamination of a fellow employee never occurred, nor had this employee told the alleged that radiation exposure records for another worker had been lost. The implicated employee stated that he had worked in the laboratory on August 23 and August 24, 1982 and was please with the radiological controls. He stated that he had signed in on a Radiation Exposure Permit (REP) on both days as required. He surveyed himself and had his equipment surveyed after each exit. Neither he or his tools became contaminated. The implicated employee stated that he had not made any comments to the alleged regarding his becoming contaminated or of lost exposure records adding that he and the alleged were not on speaking terms. The licensee provided the NRC inspector with copies of the radiation exposure records that were alleged to have been lost. A discussion held with the health physics group revealed that health physics personnel were well aware of the radiological status in the radiochemistry laboratory.

The investigation did not identify any items of noncompliance or deviations pursuant 10 CFR 19.11, 10 CFR 19.12, 10 CFR 19.13 or 10 CFR 20 requirements. A possible inconsistency in removal of the alleged's name from the station security list was identified. This was referred to Region V NRC Security Branch for evaluation. It was also noted that the alleged was being carried on the licensee's active dosimetry list at the time of this investigation. The inspector discussed this with the Manager of Health Physics, Dosimetry Supervisor and at the exit interview emphasizing the need for improving notification of terminations.

No items of noncompliance or deviations were identified.

10. Exit Interview

The inspector met with licensee representatives (denoted in paragraph 1) at the conclusion of the inspection on September 17, 1982. The inspector summarized the scope and findings of the inspection. The licensee was informed that there were no items of noncompliance. The licensee was also informed of the results of the investigation with respect to the allegation discussed in Section 9.

The commendations discussed in Sections 2.d and 3.d and inspector's concerns with respect to the following matters were discussed:

- (a) The Waste Gas Compressor Room HVAC system described in Section 2.b,
- (b) The need to complete the process and effluent monitoring equipment calibrations and improve the review of calibration data as discussed in Section 6,
- (c) The conditions noted during a tour of the licensee's facilities discussed in Section 8,
- (d) The need to submit the PCP to the Commission for approval or be prepared to request relief for implementation of the program prior to issuance of a fuel load license as discussed in Section 7,
- (e) The problem associated with the active security and dosimetry lists after personnel have been terminated as discussed in Section 9.