



UNITED STATES
 NUCLEAR REGULATORY COMMISSION
 REGION II
 101 MARIETTA STREET, N.W., SUITE 2900
 ATLANTA, GEORGIA 30323-0199

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Report Nos.: 50-325/94-11 and 50-324/94-11

Licensee: Carolina Power and Light Company
 P. O. Box 1551
 Raleigh, NC 27602

Docket Nos.: 50-325 and 50-324 License Nos.: DPR-71 and DPR-62

Facility Name: Brunswick Nuclear Power Plant

Inspection Conducted: May 2-6, 1994

Inspector: G. W. Salyers 5/27/94
 Date Signed

Approved by: K. P. Barr 5/27/94
 Date Signed
 K. P. Barr, Chief
 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 included review of the following programmatic elements:
 (1) Radiological Emergency Response Plan and its implementing procedures;
 (2) emergency facilities, equipment, instrumentation, and supplies;
 (3) organization and management control; (4) training; and (5) independent reviews/audits.

Results:

In the area inspected, one non-cited violation was identified for failure to update Plant Emergency Procedure Appendix A on a quarterly basis (Paragraph 2). A violation from a previous inspection (93-04-2) concerning the Emergency Response Facility backup power supply (emergency diesel generator) not receiving adequate scheduled maintenance was reviewed, but not closed. The upgrade of the Emergency Preparedness training program had been delayed due to implementing new protective action guidelines into the training program. Improvements were noted to the Emergency Warning System (sirens), emergency radio communication system capabilities, and the emergency response organization call-out system (Dialogic). The Emergency Preparedness Program appeared to be receiving good management support.

This inspection concluded that the emergency response personnel were satisfactorily trained and the emergency response facilities and equipment were satisfactorily prepared to respond to a radiological emergency at the Brunswick Steam Electric Plant.

REPORT DETAILS

1. Persons Contacted

Licensee Employees

- *K. Ahern, Manager, Work Control
- *R. Baldwin, Emergency Preparedness
- *G. Barnes, Manager, Unit 2 Operations
- *M. Bradley, Manager, Nuclear Assessment Department
- *J. Cowan, Manager, Technical Support & Regulatory Compliance
- *J. Ferguson, Manager, Material and Control Section
- *C. Gannon, Manager, Maintenance Unit 1
- *T. Gildersleeve, Emergency Preparedness
- *J. Guibert, Consultant
- *M. Harris, Manager, Site Communications
- *G. Hicks, Manager, Training
- *B. Houston, Manager, Emergency Preparedness Programs
- *J. Heffley, Manager, Maintenance Unit 2
- *W. Levis, Plant Manager, Unit 1
- *R. Lopriore, Manager, Regulatory Affairs
- *B. Pergerson, Emergency Preparedness
- *C. Robertson, Manager, Environment and Radiation Control
- *G. Thearling, Senior Special Investigator
- *J. Titlington, Manager, Unit 1 Operations
- *M. Turkal, Senior Special Investigator
- *C. Warren, Plant Manager, Unit 2

Other licensee employees contacted during this inspection included members of the emergency response organization, training staff, and office personnel.

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- *R. Prevatte, Senior Resident Inspector

*Attended exit interview

Acronyms and Initialism used throughout this report are listed in the last paragraph.

2. Emergency Plan and Implementing Procedures (82701)

Pursuant to 10 CFR 50.47(b)(16), 10 CFR 50.54(q), and Appendix E to 10 CFR Part 50, this area was reviewed to determine whether changes were made to the program since the last routine inspection (February 1993), and to assess the impact of these changes on the overall state of emergency preparedness at the facility.

A violation was issued in IR 93-04-01 for "Failure to maintain controlled copies of the PEPs in the EOF current." The inspector reviewed documentation that indicated the root cause of the violation was maintaining ten complete copies of the PEPs in the EOF with the same control copy number. The licensee's corrective actions were to:

- Uniquely identify Procedures in the EOF with control copy identification numbers and reduce the number of procedures in the EOF.
- Identify each set of procedures in the EOF and instruct all Document Control Personnel on how to properly update procedures and what action to take if procedures can not be located.

The inspector verified that within the EOF, the ten full volumes of the PEPs had been reduced to a single full volume, and the PEPs at the individual work stations in the EOF had been reduced to smaller customized books for each position. This provided a more manageable set of procedures for maintaining control and updating.

After reviewing the licensee's corrective actions, the inspector audited controlled copies of the ERP, PEPs, and Emergency Telephone Directory in the Control Room, TSC, and the EOF. No problems were identified.

PEP Appendix A, Emergency Response Resources, was an Emergency Telephone Directory. The ERP, Section 6.2.1 state that Appendix A will be updated on a quarterly basis. Quarterly was defined in the ERP as 92 days, not to exceed 25 percent (115 days) or 3.25 times the specified interval (299 days) in three consecutive intervals. The inspector's review noted that revisions to PEP Appendix A were made on May 19, 1993, August 20, 1993 (day 93), December 17, 1993 (day 119), and March 28, 1994 (day 101). The revision did not appear to be scheduled on a programmed bases. Between May 1993 and March 1994, the 115 day interval and the 299 day interval were exceeded. Exceeding the two intervals is a violation of the ERP. The licensee identified that they plan to establish specific schedule for updating this document. Also, the licensee stated that procedures and scheduling of tasks had been identified as an area for improvement. The licensee further explained that with the increase in staff size they now had more resources, and their goal for the year was to improve their procedures and to develop a more detailed and structured task/maintenance program.

The licensee was informed that failure to update PEP Appendix A on a quarterly basis was a violation of Section 6.2.1 of the Brunswick Steam Electric Plant, Emergency Response Plan. This NRC identified violation is not being cited because criteria specified in Section VII.B of the NRC Enforcement Policy were satisfied.

NCV 50-324, 325/94-11-01: Failure to update PEP Appendix A on a quarterly basis.

The inspector reviewed the licensee's program for making changes to the ERP and the PEPs. Copies of the letters that were actually sent to the NRC notifying them of changes to the ERP and PEPs were not available. Consequently, the inspector used the implementation date on the procedure, and closure date on a copy of the distribution list for the procedures. NRR was on the procedure distribution list and a letter notifying NRR of the procedure changes accompanied the new procedures. A review of licensee records confirmed that all changes to the EP and PEPs for the period of January 1993 through April 1994, were approved by management and submitted to the NRC within 30 days of the effective date, as required.

The inspector reviewed documents verifying that the EALs and PARs were presented to and reviewed by the State and county agencies during the October 14, 1993 task force meeting. The State did not recommend any changes to the EAL at that time. The inspector verified that the EALs in the PEPs were consistent with the ERP and with those required by regulation.

In a previous inspection (IR 93-04), the inspector performed a comparison between the EAL flow charts and the control room instrumentation and identified three discrepancies. These discrepancies resulted in IFI 93-04-02: "Perform a detailed comparison between the EAL Flow Charts and the availability and numbering of Control Room instrumentation." In Revision 34 to the EALs, the licensee performed a detailed review, and corrected the discrepancies noted in IR 93-04. The inspector reviewed Revision 34 to the EALs and noted that the discrepancies had been corrected and the EALs were based on parameters obtainable from Control Room instrumentation.

The inspector reviewed the licensee's event declaration to verify that the events were properly classified in accordance with their EALs and that the applicable PEPs were properly implemented. Two NOUE emergency declarations were made by the licensee since January 1993.

- March 16-18, 1993 loss of offsite power
- November 8, 1993 potentially contaminated person transported offsite

The inspector reviewed the EAL Classification procedure and conditions prompting the classification. The review indicated that the classifications were made correctly and offsite notifications were satisfactory.

The licensee forwarded INs that were applicable to emergency preparedness to the Emergency Preparedness group. The inspector verified that the Emergency Preparedness group was reviewing the INs and

satisfactorily responding to the INs if necessary. The licensee provided the inspector documentation that indicated the following INs had been reviewed or were in the process of being reviewed.

- IN 93-07: Classification of Transportation Emergencies
- IN 93-53: Supplement 1 - Hurricane Andrew
- IN 93-94: "Unauthorized Forced Entry into the Protected Area at Three Mile Island Unit 1 on February 7, 1993"
- IN 94-27: Local Area Flooding

No violations and no deviations were identified.

3. Emergency Facilities, Equipment, Instrumentation, and Supplies (82701)

Pursuant to 10 CFR 50.47(b)(8) and (9), and 10 CFR 50.54(q), and Section IV.E of Appendix E to 10 CFR 50, this area was inspected to determine whether the licensee's ERFs and other essential emergency equipment, instrumentation, and supplies were maintained in a state of operational readiness, and to assess the impact of any changes in this area upon the emergency preparedness program.

The licensee's EOF and TSC were located in the same building and when the facilities were activated, they were separated by an airtight door. The inspector toured the EOF and TSC and noted that the facilities were basically unchanged since the last inspection. While touring the facilities, the inspector performed a random operability check of communication equipment, verified that procedures were up to date, and the overall state of readiness of the facilities. The inspector observed the licensee perform an operational demonstration of the dose assessment computer and the ERFIS terminals in the EOF and TSC. The inspector noted that the systems were user friendly and immediately available for use. The ERFIS system contained SPDS information required by Regulatory Guide 1.97, and data was displayed on high quality (definition) overhead monitors in each facility.

The inspector noted that the licensee had made several significant equipment improvements since the last inspection. The licensee performed a limited operational demonstration, and explained to the inspector, the capability and potential capability of the following new equipment/program.

- Upgrade to the siren warning system
- A new HF radio with "L" antenna system

- VHF radios were upgraded with two new radios
- Dialogic system
- Updated the dose projection program to "CPLDOSE" to incorporate EPA 400

The inspector observed the Emergency Ventilation system for the EOF/TSC and noted the physical appearance of the system and surrounding area was clean and orderly and appeared in good working order. A review of PT-93.0 "EOF/TSC Building Emergency System Test" conducted on September 30, 1993, indicated that the system had functioned properly. Based on the inspector's physical observation and result of the test, the inspector concluded that the system was being maintained and in a state of operational readiness.

Section 6, "Maintaining Emergency Preparedness," of the ERP specified the performance of a variety of activities. In order to verify compliance with Section 6 of the ERP, the inspector reviewed the following records for the period of January 1993 through April 1994:

- Emergency Communications Test conducted in accordance with PEP 4.2, Exhibit 4.2.1: (1) EOF communications system functional tests, performed biweekly; (2) monthly communications drills involving message transmission from the Control Room to the state Warning Point using the Automatic Ring-Down telephone; and (3) tests of the ENS.
- Early Warning System Siren Activation Monitoring
- Emergency Plan Augmentation Callout. An off hours unannounced augmentation drill was conducted on January 30, 1993. The drill results were satisfactory.
- Emergency Plan Radiation Instruments and Emergency Kit Inspection and Checks

All of the required records were found satisfactory and corrective actions were undertaken when equipment deficiencies were identified.

The EWNS consisted of 34 fixed sirens (29 in Brunswick County and 5 in New Hanover County). Testing was performed under the jurisdiction of the respective county emergency management agencies, with test results forwarded to the licensee. The test results were satisfactory and indicated that sirens met the annual 90% capability criteria. The licensee had upgraded the EWNS system. The upgrade was the Motorola MOSCAD system which permitted an operator working from a computer terminal, to perform an actuation or diagnostic test on individual sirens or all of the sirens as a system. The system became operational in November 1993.

The licensee had installed a new computerized Dialogic system used for group call out and staffing of the emergency facilities. The system had 10 communication lines plus a FAX and a modem line. When the system initially activates, it activates the ERO beepers and only receives incoming calls from the beepers and starts filling in ERO positions. After 10 minutes, the system starts calling individual ERO members and starts filling vacant ERO positions. The system had the capability to either automatically or, on command, print out an ERO roster listing individuals that were responding to those positions. The system became operational in April 1994.

The inspector reviewed inventory records for the period of January 1993 through April 1994, of the various emergency kits listed in PEP 4.2, "Emergency Kit Inventory." The records indicate the emergency kits were being properly maintained. The inspector and licensee performed an inventory check of the Environmental Monitoring Kits at the TSC and OSC. The inspector found the emergency kit inventories complete with the equipment operational and calibrations up to date.

The licensee's ERP, Section 5.7.2 states that the meteorological system was to be calibrated every six months and electronically verified between calibrations. The semi-annual calibration and verifications were performed by the Carolina Power and Light Company's Air Quality Monitoring and Compliance Unit. The calibrations were performed using Semi-Annual Calibration Procedure 3.3, Section 001 through 011 and the electronic verification were performed using Interim Verification Procedure 3.4. The inspector noted that the calibration procedure was in accordance with the requirements presented in NRC Regulatory Guide 1.23. The inspector reviewed documentation for the period from January 1993 through April 1994. The documentation indicated that the semi-annual calibrations and electronic verification were performed as required and all results and test were satisfactory.

The inspector's tour of the licensee's ERFs concluded that the facilities and emergency equipment appeared to be satisfactorily maintained.

No violations and no deviations were identified.

4. Organization and Management Control (82701)

Pursuant to 10 CFR 50.47(b)(1) and (16) and Section IV.A of Appendix E to 10 CFR Part 50, this area was inspected to determine the effects of any changes in the licensee's emergency response organization and/or management control systems in the emergency preparedness program and to verify that such changes were properly factored into the ERP and PEPs.

The management and organization of the emergency preparedness program was reviewed and discussed with licensee representatives. The licensee had elevated the position of the individual primarily responsible for

the Emergency Preparedness Program from Senior Emergency Preparedness Specialist to Manager, Emergency Preparedness. When the position of Manager, Emergency Preparedness was formed, the size of the Brunswick Emergency Preparedness group was also increased by two Emergency Preparedness Specialist positions. One of the positions was filled from the Corporate offices when the Project Specialist, Corporate Emergency Preparedness, positions were dissolved and the personnel were transferred to the CP&L sites. The second position was filled from outside of the company. The management organization above the Emergency Preparedness Manager had not changed since the last inspection. The Emergency Preparedness group continued to receive strong management support.

The inspector discussed with the licensee, the site's working relationship pertaining to Emergency Preparedness with the State and county agencies. The Emergency Preparedness Manager provided the inspector meeting minutes from the "Brunswick Task Force", a licensee, State, and community working group that was scheduled to meet quarterly but, historically meets monthly. The Task Force attendees included representatives from North Carolina Division of Emergency Management, Brunswick and New Hanover County Emergency Management, US Coast Guard, Highway Patrol, and on occasions, the Red Cross. The meeting minutes indicated that the relationships were open and responsive. No problem areas or concerns were noted.

No violations or deviations were identified.

5. Independent Review/Audits (82701)

Pursuant to 10 CFR 50.47(b)(14) and (16) and 10 CFR 50.54(t), this area was inspected to determine whether the licensee has a corrective action system for deficiencies and weaknesses identified during exercises and drills.

The inspector reviewed NAD audit report B-EP-93-01 which was conducted from April 13 through May 7, 1993. The audit used INPO documents "Performance Objectives and Criteria for Operating and Near Operating License Plants" (INPO 90-15), and "Generic Guidance for Emergency Preparedness Program Review" (INPO 85-14) as an audit guide. The major areas assessed in the audit were:

- Management
- Organization and Administration
- Plans and Procedures
- Training

- Corrective Action
- Facilities, Equipment and Resources
- Personnel Protection
- Communication with Off-Site Agencies

Each of the major areas listed above were further subdivided into specific tasks. The inspector concluded that the audit was satisfactory in depth and coverage to the met the requirements identified in 10 CFR 50.54(t). The inspector reviewed the qualifications of the auditors and concluded that the auditors qualifications were satisfactory. The audit identified one weakness. The inspector verified the weakness identified in the NAD audit was responded to and being tracked by the Emergency Preparedness group.

The inspector reviewed selected licensee drill packages and critiques from drills that had been conducted since the last inspection, and verified: (1) that the critiques were thorough and objective and (2) that issues identified in the critiques were being tracked and corrected. The inspector observed that the licensee had established a facility wide computer-based system for tracking deficient EP issues. The licensee's documentation indicated that action items were being tracked and completed. In addition, the emergency preparedness group also maintained a personal computerized EP action item tracking list for managing follow-up actions items within the group.

No violations or deviations were identified.

6. Training (82701)

Pursuant to 10 CFR 50.47(b)(2) and (15), and Section IV. F of Appendix E to 10 CFR Part 50, this area was inspected to determine whether the licensee's key emergency response personnel were properly trained and understood their emergency responsibilities.

The licensee utilized the self study approach to training for both initial and requalification training. The Training Department maintained a computerized personnel history of all the training for ERO personnel stationed at the site. The inspector randomly selected names of members of the ERO and used the computer tracking system to verify that their training was current. The inspector then verified that the computer data agreed with hard copies of their training documentation for the randomly selected individuals. All of the records reviewed were current and up-to-date and no discrepancies were noted.

The inspector discussed the status of the new EP training program with the EP training instructor and reviewed material provided by the instructor. The program was based on a systematic approach to training,

using job and task analysis, subject matter experts and peer review. The inspector reviewed the licensee's development plan and time line for up grading the EP training program. The inspector noted that the overall development of the new training program had slowed since the last inspection. The licensee stated that the delay was due to incorporating the new EPA 400 requirements into the training material and the ERO shifting from a first responder concept to the team concept.

The licensee provided the inspector a computer print out titled "Status of EP Training Program Development." The print out indicated that by August 1994, the licensee intended to revise TI-306, Emergency Plan Training Instruction, develop an ERO qualification card, and begin implementation of the new training program. The remaining 24 lesson plans would be developed by January 31, 1995.

The inspector reviewed:

- EPA 400-R-92-001, Manual of Protective Action Guidelines and Protective Actions for Nuclear Incidents, student handout and instructor guide
- EP930404B, CPLDOSE Software Training, student handout and instructor guide

The inspector noted that the licensee had fully staffed and trained five teams. While reviewing documentation, the inspector noted that some of the team training had been performed using the new training material. Based on discussions with the licensee and material reviewed by the inspector, the inspector concluded that progress was being made in the development of the new training program.

The inspector reviewed documentation that indicated in 1993, offsite training as specified in the Plan, was provided to:

- Doshier Hospital
- Brunswick and New Hanover County
- Southport Rescue personnel
- Southport, Boiling Spring Lakes, and Yaupon Beach Fire Department
- State and local officials and other offsite support agencies expected to respond to an emergency at the Brunswick Plant.

No violations or deviations were identified.

7. Action on Previous Inspection Findings (92701)

The inspector reviewed the following open items from the previous inspections:

- a. (Closed) VIO 50-324, 325/93-04-01: Failure to maintain controlled copies of PEPs in the ERF.

This item is closed based on the discussion in Section 2.

- b. (Closed) IFI 50-324, 325/93-04-03: Verify and validate EAL flow charts are consistent with control room indications.

This item is closed based on the discussion in Section 3.

- c. (Open) VIO 50-324, 325/93-04-03: Failure to adequately maintain the EOF/TSC auxiliary diesel generator

In the event of a loss of normal power, the EOF/TSC had the capability of being supplied power from an EOF/TSC emergency diesel generator. A previous inspection (IR 93-04) had issued violation 93-04-02 for failing to adequately maintain the EOF/TSC emergency diesel generator. The inspector noted that since the last inspection, the licensee had performed work on the EOF/TSC emergency diesel generator and inspections were performed, procedures were written, and acceptance tests were run. As part of the evaluation process for the corrective actions associated with the violation, the inspector observed the licensee perform the EOF/TSC monthly diesel engine inspection using procedure OPM-ENG505, "Maintenance Instructions for the Covington Diesel Generator, Model 7123-7305" and the monthly generator and engine inspection using procedure OPM-GEN008, "Covington Diesel Generator Electrical Inspections." During the generator test, G005, the inspector observed:

- OPM-GEN008, the electrical test for the EOF/TSC EDG was inadvertently skipped for six months due to a scheduling error, and was only performed the last two months.
- The procedure did not clearly state and the individuals performing the procedure did not understand the proper operation of the generator alarm panel during testing.
- Two of the three load shed breakers, #11 and #13, did not trip as required. An ACR was written concerning this problem during the previous monthly test and had not been corrected.

- Breaker 2-TSC-EMP-1, which was in series with the emergency generator output breaker, tripped when the generator tried to assume the EOF/TSC electrical loads and had to be manually reset. The breaker should not have tripped. An ACR was written concerning this problem during the previous monthly test and had not been corrected.

This item remains open pending licensee resolution of the above discrepancies.

8. Exit Interview

The inspection scope and results were summarized on May 6, 1994 with those persons indicated in Paragraph 1. There were no dissenting remarks by the licensee. No proprietary information was reviewed during this inspection.

The licensee was informed in a telephone conversation on May 26, 1994, that the failure to update PEP Appendix A on a quarterly basis as discussed in Paragraph 2 was being characterized as a Non-Cited Violation. There were no dissenting remarks by the licensee.

<u>Item Number</u>	<u>Status</u>	<u>Description and Reference</u>
50-324, 325/94-11-01	Closed	NCV - Failure to update PEP Appendix A on a quarterly basis (Paragraph 2).

9. Abbreviations And Acronyms

ACR	Adverse Condition Report
CFR	Code of Federal Regulations
EAL	Emergency Action Level
EDG	Emergency Diesel Generator
ENS	Emergency Notification System
EOC	Emergency Operations Center
EOF	Emergency Operating Facility
EP	Emergency Preparedness
ERF	Emergency Response Facility (TSC, EOF, OSC)
ERFIS	Emergency Response Facility Information System
ERO	Emergency Response Organization
ERP	Emergency Response Plan
EWNS	Emergency Warning Notification System
IFI	Inspector Follow-Up Item
IN	Information Notice
INPO	Institute of Nuclear Power Operations
IR	Inspection Report
LPC	Level Pressure Control
NAD	Nuclear Assessment Department
NCV	Non-Cited Violation
NOUE	Notice Of Unusual Event
OSC	Operational Support Center

PAR	Protective Action Recommendation
PEP	Plant Emergency Procedure
SPDS	Safety Parameter Display System
TS	Technical Specification
TSC	Technical Support Center

IFS Data Entry Form

SPECIFY ALL THAT APPLY Page of

Reviewed By: _____
Date: 10/11/94
Title Name: SKRINICK
Report Transmittal Date: _____
Lead Inspector: ELJ

Reactor/Generator Inspection (IFS Option 1) _____
Items Opened (Y/N): _____
License Inspection (IFS Option 2) _____
SRI (Y/N): _____
Letter (Y/N): _____
Class (Y/N): _____
Doclet Released/P21 Items (IFS Option 4) _____
Error Log Number: _____
LER Name (IFS Option 5) _____
Error LER Number: _____
Non-Doclet Released Items (IFS Option 6) _____

Responsible Org. Code: 24112
Report End Date: 05/26/94
Region: II

Report NBR: 24-11
Doclet NBR: 50-324
A 24-11
B 50-325
C _____

Materials Only
License NBR

Update? (Y/N): N Opened IRLER/P21 LOG/IFS Number: _____

**Sequence NBR: 01 Item Type: NCV **Severity: _____ **Supplement: _____

Status	UPD VR	Proj. Closeout	Actual Closeout	Materials Only		
A	<u>24-11</u>	____/____/____	____/____/____	10 CFR	License Cond.	Tie Down
B	_____	____/____/____	____/____/____	_____	_____	_____
C	_____	____/____/____	____/____/____	_____	_____	_____

Title: Failure to update Appendix A on a Quarterly Basis (55 character width)
Closeout Org: _____ Closeout EMP: _____ Contact EMP: _____ Procedure: 82701 Funct Area: _____
Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: 1/1/1

Description: Failure to update PEP-Appendix A on a Quarterly Basis

Update? (Y/N): Y Opened IRLER/P21 LOG/IFS Number: _____

**Sequence NBR: _____ Item Type: _____ **Severity: _____ **Supplement: _____

Status	UPD VR	Proj. Closeout	Actual Closeout	Materials Only		
A	_____	____/____/____	____/____/____	10 CFR	License Cond.	Tie Down
B	_____	____/____/____	____/____/____	_____	_____	_____
C	_____	____/____/____	____/____/____	_____	_____	_____

Title: _____ (55 character width)
Closeout Org: _____ Closeout EMP: _____ Contact EMP: _____ Procedure: _____ Funct Area: _____
Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: 1/1/1

Description: SEE CLOSE OUT FORM ON BACK

Optional Fields

Severity, Supplement, and NOV/NNC only applicable for Violators; EA Number only applicable for Escalated Enforcement Items.
Sequence NBR is not applicable for doclet released/P21, LER, or non-doclet related items.

ITEMS CONTINUED? (Y/N): _____

IFS DATA ENTRY CODES

Inspection report numbering:

50-396/91-02 06
Docket Number/Year- Report Number- Sequence Number

NOTE: For Sequence No. enter last two digits in form.

Status: O - Open; C - Closed; W - Withdrawn; N - Not Applicable

ORGANIZATION CODE		SALP FUNCTIONAL AREA		CAUSE CODE	
Code	Title	Code	Description	Code	Meaning
2311	Plant Systems		OPERATIONAL REACTORS	10	Related to Procedure, Instruction, Drawing
2312	Materials and Processes	ENG	Engineering/Technical Support -	11	Lack of Procedure
2313	Test Programs		Operating Reactors	12	Inadequate Procedure
		MS	Maintenance/Surveillance	20	Engineering or Design Deficiency
2321	Operator Licensing A	OPS	Plant Operations	21	Inadequate Testing
2323	Operational Programs	PS	Plant Support	30	Personnel Error
2324	Operator Licensing B			31	Cognitive Error (person knowledgeable - Just an Error)
			CONSTRUCTION REACTORS		
2411	Radiological Effluents & Chemistry	AUX	Auxiliary Systems	32	Communication Error
		CONF	Containment, Major Structures, and Major Steel Supports	33	Potential Wrongdoing
2412	Emergency Preparedness			34	Personnel Error Due to Lack of or Inadequate Training
2413	Facility Radiation Protection	ELEC	Electrical Equipment and Cables	40	Supervision / Management Control
2421	Safeguards Section	EIS-C	Engineering/Technical Support - Construction Reactors	41	Inadequate Resources - Equipment or Staffing
2423	Nuclear Facility Safety			50	Equipment Failure
2424	Radiation Safety Protection	INST	Instrumentation	51	Aging
		MECHC	Mechanical Components	52	Random Equipment Failure
		N/A	Not Applicable	53	External (Tornado, Lightning)
2210	Technical Support	OTH-R-C	Other special area for Construction/Preoperational Testing	60	Other
2221	Reactor Projects 1A				
2222	Reactor Projects 1B				
2231	Reactor Projects 2A	OTH-R-O	Other special area for Operations/Startup Testing		
2232	Reactor Projects 2B				
2241	Reactor Projects 3A	PIPE	Piping Systems and Support		
2242	Reactor Projects 3B	SAQV-C	Safety Assessment/Quality Verification		
2251	Reactor Projects 4A				
2252	Reactor Projects 4B	SAQV-O	Safety Assessment/Quality Verification		
		SF	Soils and Foundations		
				NOTES	
ITEM TYPE		SUPPLEMENT NO.		EA Number Entered by OE	
Type	Description	Code	Description		
EEI	Escalated Enforcement Item	1	Reactor Operations		
DEV	Deviation	2	Facility Construction		
IFI	Inspection Follow-up	3	Safeguards		
URI	Unresolved Issue	4	Health Physics 10 CFR Part 20		
VIO	Violation	5	Transportation		
LER	Licensee Event Report	6	Fuel Cycle and Materials Operations		
P21	Part 21	7	Miscellaneous Matters		
BU	Bulletin	8	Emergency Preparedness		
CDR	Construction Deficiency Report				

IFS Data Entry Form (continued)

Update? (Y/N): _____ Opened IRLER/P21 LOG/IFS Number: _____

***Sequence NBR: _____ Item Type: _____ **Severity: _____ **Supplement: _____

Status	UPD VR	Proj. Closeout	Actual Closeout	Metatars Only		
A	_____	____/____/____	____/____/____	10 CFR	License Cond.	Tie Down
B	_____	____/____/____	____/____/____	_____	_____	_____
C	_____	____/____/____	____/____/____	_____	_____	_____

Title: _____ (55 character width)

Closeout Org: _____ Closeout EMP: _____ Contact EMP: _____ Procedure: _____ Funct Area: _____

Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: ____/____/____

Text: _____

Update? (Y/N): _____ Opened IRLER/P21 LOG/IFS Number: _____

***Sequence NBR: _____ Item Type: _____ **Severity: _____ **Supplement: _____

Status	UPD VR	Proj. Closeout	Actual Closeout	Metatars Only		
A	_____	____/____/____	____/____/____	10 CFR	License Cond.	Tie Down
B	_____	____/____/____	____/____/____	_____	_____	_____
C	_____	____/____/____	____/____/____	_____	_____	_____

Title: _____ (55 character width)

Closeout Org: _____ Closeout EMP: _____ Contact EMP: _____ Procedure: _____ Funct Area: _____

Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: ____/____/____

Text: _____

Update? (Y/N): _____ Opened IRLER/P21 LOG/IFS Number: _____

***Sequence NBR: _____ Item Type: _____ **Severity: _____ **Supplement: _____

Status	UPD VR	Proj. Closeout	Actual Closeout	Metatars Only		
A	_____	____/____/____	____/____/____	10 CFR	License Cond.	Tie Down
B	_____	____/____/____	____/____/____	_____	_____	_____
C	_____	____/____/____	____/____/____	_____	_____	_____

Title: _____ (55 character width)

Closeout Org: _____ Closeout EMP: _____ Contact EMP: _____ Procedure: _____ Funct Area: _____

Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: ____/____/____

Text: _____

IFS DATA ENTRY CODES

Inspection report numbering: 50-396/91-02-06
 Docket Number/Year: Report Number - Sequence Number

NOTE: For Sequence No. enter last two digits in form.

Status: O - Open; C - Closed; W - Withdrawn; N - Not Applicable

ORGANIZATION CODE		SALP FUNCTIONAL AREA		CAUSE CODE	
Code	Title	Code	Description	Code	Meaning
2311	Plant Systems	ENG	OPERATIONAL REACTORS Engineering/Technical Support -	10	Related to Procedure, Instruction, Drawing
2312	Materials and Processes		Operating Reactors	11	Lack of Procedure
2313	Test Programs	MS	Maintenance/Surveillance	12	Inadequate Procedure
		OPS	Plant Operations	20	Engineering or Design Deficiency
		PS	Plant Support	21	Inadequate Testing
2321	Operator Licensing A			30	Personnel Error
2323	Operational Programs			31	Cognitive Error (person knowledgeable -
2324	Operator Licensing B				Just an Error)
		AUX	CONSTRUCTION REACTORS Auxiliary Systems	32	Communication Error
2411	Radiological Effluents & Chemistry	CONT	Containment, Major Structures, and Major Steel Supports	33	Potential Wrongdoing
2412	Emergency Preparedness	ELEC	Electrical Equipment and Cables	34	Personnel Error Due to Lack of or Inadequate Training
2413	Facilities Radiation Protection	ETS-C	Engineering/Technical Support - Construction Reactors	40	Supervision / Management Control
2421	Safeguards Section		Instrumentation	41	Inadequate Resources - Equipment or Staffing
2423	Nuclear Materials Safety	INST	Mechanical Components	50	Equipment failure
2424	Radiation Safety Protection	MECHC	Mechanical Components	51	Aging
		N/A	Not Applicable	52	Random Equipment Failure
2210	Technical Support	OTH-C	Other special area for Construction/Preoperational Testing	53	External (Tornado, Lightning)
2221	Reactor Projects 1A			60	Other
2222	Reactor Projects 1B				
2231	Reactor Projects 2A	OTH-D	Other special area for Operations/Startup Testing		
2232	Reactor Projects 2B	PIPE	Piping Systems and Support		
2241	Reactor Projects 3A	SAQV-C	Safety Assessment/Quality Verification		
2242	Reactor Projects 3B				
2251	Reactor Projects 4A	SAQV-D	Safety Assessment/Quality Verification		
2252	Reactor Projects 4B	SF	Soils and Foundations		
				NOTES	
ITEM TYPE		SUPPLEMENT NO.		EA Number Entered by OE	
Type	Description	Code	Description		
EEI	Escalated Enforcement Item	1	Reactor Operations		
DEV	Deviation	2	Facility Construction		
IFI	Inspection Follow-up	3	Safeguards		
URI	Unresolved Issue	4	Health Physics 10 CFR Part 20		
VIO	Violation	5	Transportation		
LER	Licensee Event Report	6	Fuel Cycle and Materials Operations		
P21	Part 21	7	Miscellaneous Matters		
BU	Bulletin	8	Emergency Preparedness		
CDR	Construction Deficiency Report				

INSPECTION FOLLOWUP SYSTEM (IFS)

SPEED CLOSEOUT / FOLLOWUP FORM

DOCKET NO(S).	1	5	0	-	3	2	4	RESPONSIBLE INDIVIDUAL: <u>G. W. Salyers</u> FACILITY: <u>Lawnswick</u>
	2	5	0	-	3	2	5	
	3							

AFFECTED UNITS			ITEM TYPE	REPORT NUMBER	SEQ. NO.	CLOSEOUT REPORT NO.			ITEM STATUS
1	2	3							
X	Y		VI	93-04	01	94-11			S
Y	X		IFI	93-04	03	94-11			S