

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Report No. 50-341/92006(DRSS)

Docket No. 50-341

License No. NPF-33

Licensee: Detroit Edison Company  
6400 North Dixie Highway  
Newport, MI 48166

Facility Name: Fermi 2 Nuclear Power Plant

Inspection At: Fermi Site, Newport, Michigan

Inspection Conducted: April 7-10, 1992

Inspector:

*J. W. McCormick-Barger for*  
Heather Simons

4/17/92  
Date

Approved By:

*J. W. McCormick-Barger*  
J. W. McCormick-Barger, Chief  
Emergency Preparedness Section

4/17/92  
Date

Inspection Summary

Inspection on April 7-10, 1992 (Report No. 50-341/92006(DRSS))

Areas Inspected: Routine, announced inspection of the Fermi 2 Nuclear Power Plant's Emergency Preparedness Program (EP) including the following areas: followup on actual emergency plan activations (IP 82701) and operational status of the EP program (IP 82701).

Results: No violations, deviations or deficiencies were identified. The EP program continues to be well maintained. Management involvement in the program was strong. One concern was identified with the maintenance and testing of the HVAC system in the Emergency Operations Facility which will be tracked as an open item.

## DETAILS

### 1. Persons Contacted

W. S. Orser, Senior Vice President  
S. G. Catola, Vice President, Nuclear Engineering and Services  
D. R. Gipson, Assistant Vice President  
R. A. Newkirk, General Director Regulatory Affairs  
A. C. Settles, Director, Nuclear Licensing  
L. Bregni, Supervisor, Radiological Emergency Response Planning  
R. B. Stafford, General Director, Nuclear Assurance  
L. Goodman, Director, Nuclear Quality Assurance  
D. Drotar, Supervisor, Nuclear Training  
K. Morris, Emergency Response Planner  
J. Kauffman, Emergency Response Specialist  
R. A. Webster, Emergency Response Specialist  
C. Schuman, System Engineer  
D. Varwig, Lead Auditor  
J. Joy, Senior Compliance Engineer  
J. Pendergast, Compliance Engineer

All of the above listed individuals attended the NRC exit interview held on April 10, 1992.

The inspector also contacted other licensee personnel during the course of the inspection.

### 2. Licensee Action on Previously Identified Items (IP 82701)

During this inspection, the inspector reviewed a concern which was identified in Report No. 50-341/920C4(DRP). This concern deals with determining who is responsible for maintaining a road which connects an area called Stony Point to a main evacuation route. The licensee and township officials are working together to resolve this issue.

This issue should not impact an evacuation of the Stony Point area. The "Estimate of Evacuation Times" (October 1990, revised May 1985), for Fermi Nuclear Power Plant does not take this road into account when calculating the evacuation times for the Stony Point Area, nor does the study highlight this road as an evacuation route. The licensee has agreed to keep the inspector informed of any problems which may arise as a result of this issue.

(Open) Open Item No. 50-341/91023-01 : During the 1991 annual emergency preparedness exercise, the declaration of the General Emergency by the Emergency Director in the Technical Support Center was untimely.

The licensee has revised lesson plan CP-ER-832, "Emergency Classification and Protective Action Recommendations", to emphasize the classification of emergencies based on loss of fission product barriers. In addition, an emergency response planner gave a session during operator requalification training which focused on specific classification case studies. Following

the 1991 annual exercise, a memo highlighting lessons learned was distributed to all members of the Emergency Response Organization. This item will remain open pending demonstration of the licensee's ability to adequately classify emergencies during the 1992 exercise.

3. Emergency Plan Activations (IP 82701)

There were no emergency plan activations in 1991 or 1992 to the beginning of this inspection. During this inspection, the licensee declared an Unusual Event on April 7, 1992 because of a Technical Specifications required shutdown. This event was properly classified and timely notifications were made to the State and counties. The self evaluation of this event will be reviewed during a future inspection.

No violations or deviations were identified.

4. Operational Status of the Emergency Preparedness Program (IP 82701)

a. Emergency Plan and Implementing Procedures

The licensee continued to review and update their Emergency Plan annually. The NRC reviewed and approved the most current revision of the Emergency Plan. A review of the revisions made to the Emergency Plan indicated that major changes had not been made, and these changes had not adversely affected the overall state of emergency preparedness. Minor changes were made to enhance and refine the Emergency Plan.

The licensee continued to update and revise the emergency plan implementing procedures (EPIPs) as necessary. The EPIPs were maintained consistent with the Emergency Plan. The EPIPs related to assembly and accountability were reviewed in detail. Procedures EP 530, "Assembly and Accountability of Personnel Within the Protected Area and Evacuation of the Owner Controlled Area" and EP 505-01, "Security Force" provide adequate instructions for the assembly and accountability of plant personnel. In addition, adequate provisions existed for accounting for large numbers of contractors which may be present during an outage.

Minimum staffing during normal operations was also reviewed. It was noted that the licensee's Emergency Plan minimum staffing commitment required three Nuclear Supervising Operators (NSOs) on shift. One of these NSOs was the dedicated communicator during an emergency. The licensee's Technical Specifications require a minimum staff of only two NSOs. The licensee was considering changing the dedicated communicator from an NSO to a different on-shift staff member. This communicator would generally be communicating with the State and county officials. Therefore, staffing this position with a less technically knowledgeable person should not have an impact on these communications.

Current copies of the emergency plan and implementing procedures were found to be maintained and readily available in the emergency response facilities and the control room.

No violations or deviations were identified.

b. Emergency Facilities, Equipment, Instrumentation and Supplies

Tours were conducted through the Technical Support Center (TSC), Operational Support Center (OSC), Control Room (CR), Emergency Operations Facility (EOF), and the alternate EOF. Each facility was well maintained and in an operational state of readiness. Inspection of a small, random sample of essential equipment, instrumentation and supplies did not reveal any problem areas.

The alternate EOF was found to be adequate for providing a backup location should the EOF be unavailable. The alternate EOF would provide sufficient communication and dose assessment capabilities.

The following facility improvements were noted:

- The OSC had been rearranged to make the work area more spacious;
- a four way direct line telephone circuit between the CR, TSC, OSC and EOF was being installed;
- new computers were added in the TSC and EOF; and
- a new, dedicated Radiological Emergency Team vehicle was purchased for use in offsite monitoring.

Through discussions with cognizant licensee personnel, it was discovered that there were inadequate operating procedures and no scheduled testing or preventive maintenance performed on the EOF HVAC system. This item was also identified by the licensee's Nuclear Quality Assurance staff during the annual emergency preparedness audit. The HVAC system was only run during drills and exercises. To correct this problem, the licensee informed the inspector that their Technical Group will provide a description of how to operate the EOF HVAC. Information on panel indications will also be provided. The information will describe what indications are expected for proper system operation. Typical information will include proper damper position indication and differential pressure across the filter. In addition, the system will be run at least annually to determine if it is operating properly. If a problem is detected, Business Management will be responsible for having the system serviced. If a HEPA filter is replaced, the Technical Group will be responsible for post maintenance testing. Business Management will be responsible for having preventive maintenance performed on the system. The Technical Group will determine what preventive maintenance is necessary and at what frequency. The lack of scheduled preventive maintenance and testing on the EOF HVAC system is an open item (No. 50-341/92006-01).

Emergency communications systems surveillance records for the emergency response facilities were reviewed and found to be complete and thorough. The licensee's inventory records for emergency supplies were reviewed and found to have been completed as detailed in appropriate procedures.

No violations or deviations were identified.

c. Organization and Management Control

There has been one change in the licensee's normal organization which affects the emergency preparedness (EP) program since the last routine inspection. The Supervisor, Radiological Emergency Response Planning (RERP), now reports to the General Director, Regulatory Affairs. Under the previous organization, the Supervisor, RERP, reported directly to the Vice President, Nuclear Engineering and Services. This change did not have a negative impact on the EP program. The General Director, Regulatory Affairs deals with the daily aspects of the program while the Vice President, Nuclear Engineering and Services retains the oversight function of the program as stated in the Emergency Plan.

The RERP group was well staffed. The Chemistry Technician who was assigned to the RERP group on a temporary assignment is now a permanent Emergency Response Specialist. The RERP group consists of a Supervisor, three Emergency Response Specialists, and a secretary. The division of responsibilities within the group was good and reflects each person's expertise.

The licensee had put together a scenario development working group which consists of about 25 people from 12 different disciplines within the plant to develop challenging scenarios for drills and exercises.

Adequate number of personnel were identified for specific lead and support positions in the Emergency Response Organization (ERO). The licensee maintained at least three qualified individuals to fill each ERO position. The emergency callout list was updated on a monthly basis and the emergency response telephone directory was updated quarterly.

No violations or deviations were identified.

d. Emergency Preparedness Training

The current training program was reviewed with the Supervisor, RERP Training, including a review of the training matrix requirements, lesson plans, training records and recent improvements to the program.

The training matrix appropriately delineated what training was necessary for each position. Several lesson plans were reviewed in detail and found to be adequate in scope and depth. The computer tracking system was effective in tracking personnel qualifications in the emergency response organization (ERO). The training program was well organized. Courses were scheduled in advance, anticipating the requalification needs of ERO personnel. Management continued to show strong support for RERP training. If personnel assigned to the ERO failed to maintain their qualifications, they were denied protected area access. All personnel completed the appropriate training in 1991. The inspector did a random check to ensure personnel assigned to the ERO had been properly trained. The inspector did not note any discrepancies.

Records of the emergency preparedness drills were reviewed. All 1991 health physics, medical augmentation and post-accident sampling requirements were successfully met. Drill performance during the facility integrated drills needed improvement as was noted on the facility critiques. Problems were noted in emergency classification and notification. The licensee generated action items to ensure correction of these problems. The inspector noted that during one drill, the scenario postulated a loss of Control Room annunciators. The relevant Emergency Action Level (EAL) required the declaration of an Alert when all or most of the Control Room annunciators were lost. The operators did not classify this event as an Alert because they did not feel "all or most" of the annunciators were lost. The licensee agreed to examine this EAL to see if "Loss of all or most Control Room annunciators" could be better defined.

During 1991, the licensee conducted monthly callout drills to ensure the operability of the callout system, whereas these drills were only required semi-annually. These drills involved over 500 long distance telephone calls. It was identified by the QA department that the documentation of these drills would be more meaningful if an evaluation was done on the timeliness of augmentation. The Emergency Response Specialist responsible for these drills revised the evaluation method to assess timeliness of augmentation.

During 1991, the licensee also conducted tabletop drills in the ISC, OS<sup>2</sup> and EOF to strengthen and maintain emergency response skills.

No violations or deviations were identified.

e. Independent Reviews/Audits

The licensee's Nuclear Quality Assurance (QA) group performed an audit of the RERP program every twelve months. The 1992 audit was well done and fully satisfied the requirements of 10 CFR 50.54(t). This audit took an in-depth look at the RERP program. The audit was highly performance based. Interviews were conducted with offsite officials in order to assess the adequacy of interface between the

licensee and offsite organizations. The audit also included observations from an integrated facility drill. All records were complete and readily available.

The auditors made eight meaningful observations which included the concern on maintenance of the EOF HVAC system. The RERP group responded to these observations even though a response was not required by the QA department. The response was thorough and timely.

No violations or deviations were identified.

5. Open Items

Open items are matters which have been discussed with the licensee, which will be reviewed further by the inspector, and which involve some action on the part of the NRC or licensee, or both. An open item disclosed during the inspection is discussed in Section 4.b.

6. Exit Interview

The inspector met with licensee representatives denoted in Paragraph 1, on April 10, 1992. The inspector reviewed the scope and findings of the inspection and indicated that the licensee continued to have a well maintained emergency preparedness program. Management involvement in the program was strong. One concern was identified with the maintenance and testing of the HVAC system in the Emergency Operations Facility which will be tracked as an open item.

The licensee indicated that the information discussed was not of a proprietary nature.