

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION II 101 MARIETTA STREET, N.W. ATLANTA, GEORGIA 30303

AUG 0 2 1984

Report Nos.: 50-280/84-23 and 50-281/84-23

Licensee: Virginia Electric and Power Company Richmond, VA 23261

Docket Nos.: 50-280 and 50-281

License Nos.: DPR-32 and DPR-37

Facility Name: Surry 1 and 2

Inspection Dates: July 9-11, 1984

Inspection at Surry site near Williamsburg, Virginia

Inspector: V. K. Wecker T. R. Decker Approved by: V. K. Allery W. E. Cline, Section Chief Division of Radiation Safety and Safeguards

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SUMMARY

Areas Inspected

This routine, unannounced inspection involved 20 inspector-hours on site in the areas of emergency preparedness.

Results

Of the areas inspected, no violations or deviations were identified.

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REPORT DETAILS

1. Persons Contacted

Licensee Employees

*R. F. Saunders, Station Manager *B. R. Parkhurst, Emergency Planning Coordinator

Other licensee employees contacted included office personnel.

*Attended exit interview.

2. Exit Interview

The inspection scope and findings were summarized on July 11, 1984, with those persons indicated in paragraph 1 above.

3. Changes to the Emergency Preparedness Program (82204)

This area was reviewed pursuant to the requirements of 10 CFR 50.54(q) and 10 CFR 50, Appendix E, paragraphs IV. and V. to determine if changes were made to the program since the last inspection and to note how these changes affected the overall state of emergency preparedness.

The inspector discussed the licensee's program for making changes to the emergency plan and implementing procedures. The licensee's Administrative Procedure, ADM-60 dated March 29, 1984, governing changes including review and approval of changes to the plan, was reviewed by the inspector. The inspector verified that the emergency plan and emergency procedures were reviewed and approved by management. It was noted that all changes to the emergency plan and implementing procedures were submitted to NRC within 30 days of such changes as required by 10 CFR 50.54(q) and 10 CFR 50, Appendix E, paragraph V. Based on a review of selected changes to the licensee's emergency plan and emergency procedures, the inspector determined that these changes did not decrease the level of emergency preparedness.

The inspector toured the new EOF and TSC under construction. These units were not operational and therefore no plan or procedure changes have been made to address the new facilities. The inspector noted that the construction did not affect the interim facilities.

The organization and management of the emergency preparedness program were reviewed. The inspector verified that there were no significant changes in the organization or assignment of responsibility for the plant and corporate emergency planning staffs since the last inspection. The inspector's discussion with licensee representatives also disclosed that there were no significant changes in the organization and staffing of the offsite support agencies since the last inspection.

No violations or deviations were identified in this program area.

4. Shift Staffing and Augmentation (82205)

This area was inspected pursuant to the requirements of 10 CFR 50.47(b)(2) and 10 CFR 50, Appendix E, paragraphs IV.A. and C. to verify that shift staffing for emergencies was adequate, both in numbers and in functional capability, and that administrative and physical means were available and consistently maintained to augment the emergency organization in a timely manner.

Shift staffing and functional capabilities of all shifts were reviewed and compared against the guidance of Table B-1 of NUREG-0654. The licensee's level of staffing and capabilities were consistent with respect to the Table B-1 guidance.

Inspection of Section 5 of the Emergency Plan (Organizational Control of Emergencies) and EPIP 3.01 (Callout of Emergency Response Personnel) showed that the licensee established and maintained an on-call system to assure that essential offshift personnel were available when needed. Review of the licensee's offshift call-in procedure also disclosed that procedural requirements appear to assure that the minimum staffing goals given in Table B-1 of NUREG-0654 will be met.

The inspector discussed staff augmentation times with licensee representatives. Licensee studies indicated that Table B-1 augmentation times could be met. The inspector indicated that augmentation times will be inspected during the upcoming exercise.

No violations or deviations were identified in this program area.

5. Public Information Program (82209)

This area was inspected pursuant to the requirements of 10 CFR 50.47(b)(7) and 10 CFR 50, Appendix E, paragraph IV.D. to verify that basic emergency planning information was disseminated to the public in the plume exposure pathway emergency planning zone (EPZ) on an annual basis.

The licensee has developed an emergency response information brochure for use by the public residing in the 10-mile EPZ. By letter of June 13, 1984, the licensee informed the Region II office of its intent to discontinue the pamphlet in favor of incorporating the emergency information in a calendar format. These information calendars will be designed to meet the "Public Education and Information Standards and Criteria" as stated in NUREG-0654. The Information Calendar which will replace the emergency information pamphlet has been approved by the State Office of Emergency and Energy Services. The information contained in the calendar will be reviewed by Regional inspectors at a later date.

Means for disseminating information to the transient population were discussed with licensee representatives. The means used by the licensee to inform transient populations of appropriate emergency response measures and actions include notices in phone books and dissemination of public information brochures to tourist attractions in the area as well as local public schools, hospitals and universities. The licensee's program is not complete, however, in that it does not provide information for transients at local recreation areas such as boat ramps and a nearby wildlife refuge. This inspection follow-up item was discussed with the licensee (50-280, 281/84-23-01) and will be reviewed during a subsequent inspection.

In addition to the public information brochure, licensee representatives indicated that the public information program also includes public speaking engagements and lectures at the local schools. The inspector also reviewed a description of the public information program discussed in the licensee's Emergency Plan.

No violations or deviations were identified in this program area.

6. Licensee Audits (82210)

This area was inspected pursuant to the requirements of 10 CFR 50.47(b)(14) and (16) and 10 CFR 50.54(t) to determine that the licensee had performed an independent review or audit of the emergency preparedness program.

Records of audits of the licensee emergency preparedness program pursuant to 10 CFR 50.54(t) were reviewed. The records showed that independent audits of the program were conducted by the Operations and Maintenance QA group. The most recently completed audit follow-up reports were issued on August 13 and December 12, 1983, respectively. An audit of the emergency preparedness program at the station was being completed at the time of the inspection.

Audit report findings and recommendations were presented to plant and corporate management. A review of past audit reports indicates the licensee complied with the five-year retention requirement for such audit reports.

The licensee's program for follow-up action on audits, drills, and exercise findings was reviewed. Licensee procedures require followup on deficient areas identified during audits, drills, and exercises. The inspector reviewed licensee records dated December 12, 1983, which indicated that appropriate corrective action was taken on identified problems. The licensee established a tracking system to serve as a management tool in following up on actions taken on deficient areas.

Licensee emergency plans and emergency procedures require critiques following exercises and drills. A review of a postexercise report showed that critiques were held following the annual exercise. The records showed that deficiencies were discussed in the critiques and recommendations for corrective action were made.

No violations or deviations were identified in this program area.