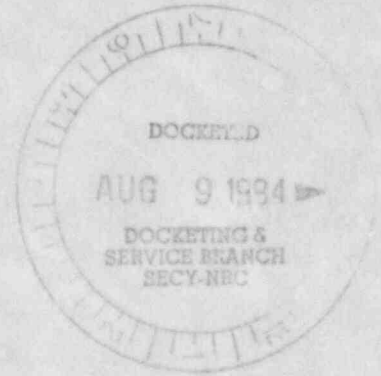


50-322 OL-3

SC EP 73

I-SC-73  
2/8/84



DOCKET NUMBER  
50-322(OL-3)

FEBRUARY 8, 1984

NUCLEAR REGULATORY COMMISSION

Docket No. 50-322-OL Official Exh. No. SCEP73  
in the matter of Shoreham - Emergency Planning

Staff \_\_\_\_\_ IDENTIFIED \_\_\_\_\_  
Applicant \_\_\_\_\_ RECEIVED \_\_\_\_\_  
Intervenor  \_\_\_\_\_ REJECTED \_\_\_\_\_  
Cont'g Offr \_\_\_\_\_  
Contractor \_\_\_\_\_ DATE 6/15/84  
Other \_\_\_\_\_ Witness \_\_\_\_\_  
Reporter R. Eyster

Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

PLAYERS DID NOT CHECK THEIR DOSIMETRY.

## Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

• Most of the dosimetry specifics was not my assignment, therefore I did not observe most of these actions. However, the transfer control point conductor I was with never checked his dosimeter ~~readings~~.

## Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

### TRANSFER POINT (NORWOOD AVE PROPERTY)

GENERALLY THINGS WENT SURPRISINGLY SMOOTH  
MY MAIN CONCERN IS THAT AT LEAST THREE TRANSFER PT.  
CORD. WOULD BE REQUIRED IN A REAL EMERG. ONE  
TO DISPATCH ROUTE PACKETS, ONE TO LOG IN & KEEP  
TRACK OF BUSES DISPATCHED, AND ONE TO GUIDE  
THE TRANSFER OF PEOPLE FROM ONE BUS TO ANOTHER.

THERE WAS SOME CONFUSION ABOUT WHAT ORDER  
(ON THE DISPATCH CHART) SHOULD THE BUS ROUTES BE  
DISPATCHED. AFTER SOME ANAL. THE BUSES WERE  
DISPATCHED CORRECTLY.

AT CERTAIN TIMES IT WAS DIFFICULT FOR THE  
CORD. TO DISPATCH BUSES & MONITOR THE RADIO TOO.

I DID SEE ONE PLAYER CHECK HIS DOSIMETRY  
ONCE. THE OTHERS I DID NOT SEE CHECK AT ALL  
DURING THE 2 1/2 HRS. OUT @ THE TRANSFER POINT.

THERE IS NO LIGHTING PROVIDED @ THE TRANSFER  
PT.

A FEW BUS DRIVERS (4 OUT OF 30) COMPLAINED  
OF INACCURACIES IN THEIR MAPS. (WRONG STREET NAMES,  
ONE MAP WAS MISSING 3 PAGES) ALL DRIVERS WERE ABLE  
TO COMPLETE THEIR ROUTES THOUGH.

LONG ISLAND LIGHTING COMPANY and  
LOCAL EMERGENCY RESPONSE ORGANIZATION  
NUCLEAR EMERGENCY PREPAREDNESS EXERCISE

SHEET 1 OF 2

OBSERVER CONTROLLER LOG SHEET

Name: ~~XXXXXXXXXXXXXXXXXXXX~~

Date: 2.5.84

Location: TRANSFER POINT (NORWOOD AVE)  
(P. J. STAGING AREA)

TIME

OBSERVATION/COMMENT

1:15 PM	TRANSFER POINT CONT. (T.P.C.) WERE TOLD EVAC. READ.
1:30 PM	T.P.C. LEAVE STAGING AREA (W/RADIO, & DISPATCH PACKETS) (CONES UNAVAIL.)
1:45 PM	T.P.C. ARRIVE C NORWOOD AVE. PROPERTY TRANSFER POINT. (T.P.C. CHECKS IN ON RADIO)
	NO SIGN IDENTIFYING PROPERTY EXISTS. WHICH COULD CAUSE CONFUSION TO T.P.C.
	NO LIGHTING IS PROVIDED @ SITE.
2:07 PM	FIRST BUS IS DISPATCHED.
	SOME CONFUSION AS TO THE ORDER SHOULD BE ON BUS SCHEDULE. AFTER SOME ANAL. CORRECT ORDER IS USED.
	DOSIMETRY IS NOT BEING CHECKED.
	SOME CONFUSION ON HOW, WHEN & WHERE BUSES SHOULD BE DISPATCHED TO RELOCATION CENTER
	AT CERTAIN TIMES T.P.C. BECAME VERY BUSY DISPATCHING BUSES. AND THE RADIO COULD NOT BE SUFFICIENTLY MONITORED.

### Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

- NO DOSIMETRY CHECKS WERE TAKEN.
- PRENTISS E.O.C. MAPS WERE NOT AVAILABLE FOR DECONTAMINATION.

IV. Dosimetry and Exposure Control

	Yes	No	N/A	N/O
1. Was dosimetry issued to all personnel dispatched into the EPZ?	<u>X</u>	_____	_____	_____
2. Were dosimetry records properly completed?	<u>X</u>	_____	_____	_____
3. Were personnel exposures periodically checked?	_____	<u>X</u>	_____	_____
4. Were personnel exposures tracked?	_____	<u>X</u>	_____	_____
5. Were personnel dispatched into the EPZ given thyroid blocking agents?	_____	_____	<u>X</u>	_____
6. Were they instructed in its use?	_____	_____	<u>X</u>	_____

IV. Dosimetry and Exposure Control

	Yes	No	N/A	N/O
1. Was dosimetry issued to all personnel dispatched into the EPZ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Were dosimetry records properly completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Were personnel exposures periodically checked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Were personnel exposures tracked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Were personnel dispatched into the EPZ given thyroid blocking agents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Were they instructed in its use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>



FEBRUARY 15, 1984

### Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

Dosimetry went very smooth in the staging area. However, in the field personal exposures were not checked. This is a habit that should be broken.

Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

The traffic guide did not check his dosimeter every 15 min. as required, only when we arrived at TCP

IV. Dosimetry and Exposure Control

	Yes	No	N/A	N/O
1. Was dosimetry issued to all personnel dispatched into the EPZ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Were dosimetry records properly completed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Were personnel exposures periodically checked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Were personnel exposures tracked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Were personnel dispatched into the EPZ given thyroid blocking agents?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Were they instructed in its use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

IV. Dosimetry and Exposure Control

	Yes	No	N/A	N/O
1. Was dosimetry issued to all personnel dispatched into the EPZ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Were dosimetry records properly completed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Were personnel exposures periodically checked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Were personnel exposures tracked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Were personnel dispatched into the EPZ given thyroid blocking agents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Were they instructed in its use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

IV. Dosimetry and Exposure Control

	Yes	No	N/A	N/O
1. Was dosimetry issued to all personnel dispatched into the EPZ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Were dosimetry records properly completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Were personnel exposures periodically checked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Were personnel exposures tracked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Were personnel dispatched into the EPZ given thyroid blocking agents?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Were they instructed in its use?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

In general, the emergency workers observed did know about dosimeter readings and the maximum radiation levels they were allowed to be exposed to. But, they did not periodically check their dosimeters.

IV. Dosimetry and Exposure Control

	Yes	No	N/A	N/O
1. Was dosimetry issued to all personnel dispatched into the EPZ?	<u>X</u>	_____	_____	_____
2. Were dosimetry records properly completed?	_____	_____	<u>X</u>	_____
3. Were personnel exposures periodically checked?	_____	_____	<u>X</u>	_____
4. Were personnel exposures tracked?	_____	<u>X</u>	_____	_____
5. Were personnel dispatched into the EPZ given thyroid blocking agents?	<u>X</u>	_____	_____	_____
6. Were they instructed in its use?	<u>X</u>	_____	_____	_____



Summary

In your own words, describe and evaluate the demonstrated activities, capabilities and resources, or lack thereof, covered by this section. Put the facts recorded in the "yes/no" questions in perspective. Explain the deficiencies, and also note the exceptionally good performance.

2

3. TRAFF GUIDES AND TR POINT CSIBS OBSERVED NOT TO DO PERIODIC CHECK.

5. FORMS FOR KI GIVEN OUT BUT NOT ORDER FROM EUC TO DISBURSE KE GIVEN.