



UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION II  
101 MARIETTA STREET, N.W.  
ATLANTA, GEORGIA 30303

OCT 11 1984

Report Nos.: 50-321/84-38 and 50-366/84-38

Licensee: Georgia Power Company  
P. O. Box 4545  
Atlanta, GA 30302

Docket Nos.: 50-321 and 50-366

License Nos.: DPR-57 and NPF-5

Facility Name: E. I. Hatch 1 and 2

Inspection Conducted: September 12-17, 1984

Inspector: A. L. Cunningham  
A. L. Cunningham

10/08/84  
Date Signed

Approved by: W. E. Cline  
W. E. Cline, Section Chief  
Division of Radiation Safety and Safeguards

10/9/84  
Date Signed

SUMMARY

Scope: This routine, unannounced inspection involved 36 inspector-hours on site in the emergency preparedness areas.

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

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## REPORT DETAILS

### 1. Licensee Employees Contacted

- \*H. Nix, General Manager
- \*J. E. Collins, Site Emergency Preparedness Coordinator
- \*D. F. Moore, Training Manager
- \*R. W. Zavadwoski, Manager, Health Physics/Chemistry
- \*P. E. Fornel, QA Site Manager
- \*R. K. Moxley, QA Field Representative
- \*J. Nikitos, Engineering Supervisor
- S. Ewald, Manager, Radiation Control
- J. M. Diluzio, Emergency Preparedness Coordinator
- D. J. Elder, QA Field Representative
- H. Sims, Acting Supervisor, Nonlicensing Training
- N. Purdin, Emergency Preparedness Training Specialist
- \*C. R. Goodman, Plant Engineer

NRC Resident Inspector

\*P. Holmes-Ray

\*Attended exit interview

### 2. Exit Interview

The inspection scope and findings were summarized on September 14, 1984, with those persons indicated in paragraph 1 above. The subject matter of Inspector Followup Item 50-321/84-02-03, 50-366/84-02-03 referenced herein was discussed. The inspector later contacted the licensee via telephone on September 17, 1984, and informed management that the above referenced IFI was closed; however, its subject matter was elevated to an unresolved item pending further evaluation (paragraph 7). The licensee acknowledged the finding.

### 3. Licensee Action on Previous Inspection Findings

This item was not addressed during this inspection.

### 4. Unresolved Items

Unresolved items are matters about which more information is required to determine whether they are acceptable or may involve noncompliance or deviations. A new unresolved item identified during this inspection is discussed in paragraph 7.

5. Emergency Detection and Classification (82201)

This area was reviewed to verify that a standard emergency classification and action level scheme was used by the licensee pursuant to 10CFR50.47(b)(4), 10CFR50-Appendix E.IV.C, and specific criteria defined in NUREG-0654, Section II.D.

The Hatch Emergency Plan (Section D) and Implementing Procedures were reviewed. Emergency Action Levels (EALs), both in the plan and implementing procedures, via HNP-4855, "Classification of Emergencies," HNP-4853, "Emergency Classification and Prompt Offsite Dose Assessment Based on Main Stack Effluent," and Operator Manual for Classification of Emergency Matrix of Emergency Action Levels vs Plant Event (Appendix A to Operator Manual) were found to be consistent with guidance promulgated in NUREG-0654. The EALs were based on inplant and stack monitor values and corresponding dose rates. Review of licensee documentation disclosed that appropriate State and local agencies responsible for offsite activation and protective action decision-making were afforded the opportunity to annually review and concur in the EALs.

No violations or deviations were identified.

6. Protective Action Decision (82202)

A detailed review of the licensee's Emergency Plan (Section J) and implementing procedure HNP-4854, "Protective Decisions and/or Protective Action Guidelines to State and Local Authorities", disclosed that staff responsibilities and authorities were assigned by the licensee to assess accidents and render protective action recommendations consistent with 10CFR50.47(b)(9) and (b)(10), 10CFR50-Appendix E, and NUREG 0654.II.i and II.J.

Interviews with several staff members responsible for making protective action decisions and recommendations were discussed in paragraph 6 of NRC Inspection Report Nos. 50-321/84-02 and 50-366/84-02. The violations identified therein, viz, 84-02-01 (Operations Supervisors inadequately trained in protective action recommendations) and 84-02-02 (Failure to follow Federal Guidance) were previously reviewed and closed as defined in paragraph 3 of NRC Inspection Report Nos. 50-321/84-29 and 50-366/84-29. Resolution of the above cited violations was based upon the inspector's verification that the corrective actions committed to by the licensee as stated in their letter of March 30, 1984, were implemented as required.

The above items were further discussed with licensee representatives during this inspection. The inspector had no additional questions regarding protective action decisions. No violations or deviations were identified.

## 7. Notifications and Communications (82203)

This area was inspected pursuant to the requirements of 10CFR 50.47(b)(5) and (b)(6), 10CFR 50-Appendix E.IV.D and IV.E, and the guidance promulgated in NUREG-0654 to assure that the licensee maintained a capability for notifying and communicating among licensee personnel, offsite supporting agencies and authorities, and the population within the EPZ in the event of an emergency. Inspection disclosed that notification and communications methods and procedures were consistent with the regulatory criteria and guidance cited above.

Licensee procedure HNP-4860 - "Testing of Emergency Communication System," requires that all communication systems will be tested at least once a month, and that such tests will be conducted during the second week of each month. The procedure further specifies that test results will be recorded in Data Package 1 as appended to the procedure. Review of communication system test records conducted during a previous inspection (NRC Inspection Report Nos. 50-321/84-02, 50-366/84-02) disclosed that the data package for May 1983, was missing. It was further disclosed that licensee personnel did not verify by any form of record or communication that the subject tests were conducted as required. This finding was identified as Inspector Followup Item (IFI) 84-02-03 in paragraph 7 of the above cited NRC Inspection Report.

The referenced finding, viz, IFI-84-02-03, was evaluated during the current inspection. Inspection disclosed the following: (1) to date (i.e., at time of inspection) the licensee possessed no record to verify that the monthly communication test was conducted in May 1983; (2) no attempt was made by the licensee to contact any offsite agency to verify or confirm that the subject test was conducted; (3) a data package for the May 1983 test was drafted and introduced into plant records. The data was predicated on the following assumptions; (a) the original data package for the subject communications test was lost; (b) assuming a worst case basis, the results presented in the package for May 21, 1983, were predicated on tests conducted in April 1983 and June 1983; therefore, test results should be consistent with those recorded for April and June. This finding was discussed with licensee representatives prior to and during the exit interview. The inspector later informed licensee management via telephone on October 17, 1984, that IFI 84-02-03, as cited in paragraph 7 of NRC Inspection Report 50-321/84-02, 50-366/84-02, was closed; however, the subject matter of the IFI was upgraded to an unresolved item, pending further review and evaluation (50-321/84-38-01, 50-366/84-38-01). Licensee management acknowledged the finding.

## 8. Changes to the Emergency Preparedness Program (82204)

The inspector reviewed changes to the Emergency Plan, Implementing Procedures and records verifying that the procedures were reviewed by the Procedures Review Board (PRB) and management prior to implementation. Changes to procedures were assigned a PRB number and were signed by the PRB Secretary and by the appropriate department heads. The inspector verified

that the procedures were handled in accordance with Procedure HNP-9 ("Procedure Writing, Use, and Control"). According to licensee representatives, recent changes to the emergency plan and its procedures did not decrease the effectiveness of the plan. The licensee concluded that review by the NRC prior to implementation was not required. This finding was confirmed by the inspector.

Subsequent to NRC Inspection Nos. 50-321/84-02, 50-366/84-02, the most significant implementing procedural change was confined to HNP-4854 - "Protective Decisions and/or Protective Action Guidelines to State and Local Authorities" (Revision 13, 03/29/84). This item was discussed in paragraph 6 above.

9. Knowledge and Performance of Duties (Training) (82206)

This area was inspected pursuant to the requirements of 10CFR50.47(b)(15) and (14) and 10CFR50-Appendix E, paragraph IV.F to assure that emergency response personnel understood their emergency response roles and could perform their assigned functions.

The emergency training program for licensed and non-licensed personnel was reviewed. Selected lesson plans and representative records of several key emergency response personnel were also reviewed. The interviews of Operations Supervisors regarding emergency detection and classification, including walkthroughs based on emergency operation procedures previously described in paragraph 5 of the NRC Inspection Report Nos. 50-321/84-02, 50-366/84-02, indicated an acceptable level of training. The training program appeared to be consistent with the above cited regulatory requirements and the guidance promulgated in NUREG-0654 Section II-0.

No violations or deviations were identified.

10. Public Information (82209)

This item was inspected pursuant to the requirements of 10 CFR 50 Appendix E Part IV D.2 and the guidance promulgated in NUREG-0654 Section II.G. The licensee distributes a brochure to the populace within the plume EPZ which provides the following information regarding plant Hatch emergency preparedness plan: (1) listing of emergency telephone numbers, local radio and TV stations used during an emergency; (2) regional map detailing routes to emergency reception centers; (3) brief, but comprehensive instructions defining required public response to radiological emergencies; (4) distribution of brochures in local motels/hotels to provide the transient population with required emergency information.

Inspection further disclosed that the licensee annually posts emergency information in the yellow pages of local telephone directories detailing emergency telephone numbers and other pertinent emergency instructions. Subject brochures are available to the public and rate payers at Georgia Power Company offices within the EPZ and the Plant Hatch visitors center.

The public information program is consistent with regulatory requirements and guidance criteria cited above.

No violations or deviations were identified.

11. Audits (82210)

This area was inspected pursuant to requirements of 10CFR50.54(t) and Technical Specification 6.5 Appendix A to License Nos. DPR-57 and NPF-5 to assure that independent audits of the emergency preparedness program were performed at least every twelve months.

A detailed review of audit records and reports disclosed that six independent audits of the emergency preparedness program were conducted during January 1, 1983, through August 28, 1984, by the licensee's Quality Assurance Division. All audits conducted complied, at least, with the minimum required frequency.

Audit records and reports disclosed that all requirements of the emergency plan and implementing procedures, including the licensee's interface with state and local governments were evaluated. Audit report findings and recommendations were routinely presented to plant and corporate management. A review of past audit reports indicated that the licensee complied with the five year retention requirement for such documents.

The licensee's program for followup actions regarding audits, drills, and exercise findings were reviewed and determined to be consistent with licensee procedures. Inspection disclosed that corrective actions were implemented for problems identified, and a tracking system was established as a management tool to assure that follow-up actions and commitments were completed as required.

No violations or deviations were identified in this program area.