

APPENDIX C

U. S. NUCLEAR REGULATORY COMMISSION
REGION IV

NRC Inspection Report: 50-313/85-02
50-368/85-02

Licenses: DPR-51
NPF-6

Dockets: 50-313
50-368

Licensee: Arkansas Power & Light Company
P. O. Box 511
Little Rock, Arkansas 72203

Facility Name: Arkansas Nuclear One (ANO), Units 1 and 2

Inspection At: ANO Site, Russellville, Arkansas

Inspection Conducted: February 4-8, 1985

Inspector: Charles A. Hackney 4-9-85
C. A. Hackney, Emergency Preparedness Analyst Date

Approved: J. B. Baird 4/9/85
J. B. Baird, Chief, Emergency Preparedness Section Date

L. E. Martin 4/15/85
L. E. Martin, Chief, Reactor Project Section A Date

Inspection Summary

Inspection Conducted February 4-8, 1985 (Report 50-313/85-02; 50-368/85-02)

Areas Inspected: Routine, unannounced inspection of the ANO emergency preparedness program changes, knowledge and performance of emergency duties, audits and emergency exercise objectives. The inspection involved 44 inspector-hours onsite by one NRC inspector.

Results: Within the scope of the inspection, one violation (use of unapproved procedure, paragraph 6) and one deviation (incomplete corrective action, paragraph 6) were identified.

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DETAILS

1. Persons Contacted

Licensee Personnel

- *F. Van Buskirk, Emergency Planning Coordinator
- *B. Bata, Quality Assurance Engineer
- *J. M. Levine, General Manager, ANO
- *T. H. Cogburn, Special Projects Manager, ANO
- *D. B. Lomax, Plant Licensing Supervisor, ANO
- *D. W. Boyd, Emergency Planning Coordinator
- *L. W. Humphrey, Plant Administrative Manager
- *J. R. Ward, Training Supervisor
- *J. D. Vandergriff, Training Supervisor

State of Arkansas

- C. Meyer, State Coordinator
- W. Lawton, Planning Specialist

NRC

- W. D. Johnson, Senior Resident Inspector
- P. Harrell, Resident Inspector

Federal Emergency Management Agency (FEMA)

- **A. Lookabaugh, Regional Assistance Committee (RAC) Chairman, Region VI

The NRC inspector also held discussions with other station and corporate personnel in the areas of health physics, operations, emergency response organization, quality assurance, training and records management.

*Denotes those present at the exit interview.

**Contacted via Telephone.

2. Licensee Action on Previous Inspection Findings

a. Open Items Closed Based on Plan Revision

The following open items, which were related to concerns identified during previous emergency plan reviews, were closed based on a major revision of the plan which combined the Arkansas Nuclear One Emergency Plan and the Contingency Plan. The amended plan will be reviewed by the NRC Region IV office to determine compliance with the requirements

of 10 CFR 50.47(b), 10 CFR Part 50, Appendix E and the guidance of NUREG-0654.

(Closed) Open Items (50-313/8122; 50-368/8121) identified as follows:

B-1, 3, 5, 7	J-1, 5, 6, 10A
C-1C	K-3, 6, 7
F-1, 2	M-1, 2, 3, 4
G-2	N-2C, 2D
H-1, 2, 4, 10	O-2, 4
I-2, 7, 8, 10	P-9

b. Open Items Closed Based On Licensee's Response

(Closed) Open Item (50-313/8122-01; 50-368/8121-01) - The licensee had written a position task analysis for the emergency preparedness coordinators. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-53; 50-368/8121-53) - The licensee developed emergency plan implementing procedure (EPIP) 1904.05 for determining stability class. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-58; 50-368/8121-58) - The licensee developed a procedure checklist. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-81; 50-368/8121-81) - The licensee developed EIPs 1903.14 and 1903.50 concerning release of information to the public and the emergency organization. The licensee response appeared adequate.

(Closed) Open Item (50-313/8122-09; 50-368/8121-09) - The licensee had developed and implemented a formal training program. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-12; 50-368/8121-12) - The NRC inspector held discussions with the ANO emergency preparedness staff and determined that task analyses had been developed for the duty emergency coordinator and incident response director. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-20; 50-368/8121-20) - The licensee had developed a formal classroom training program for onsite, offsite, and non-AP&L employees. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-48; 50-368/8121-48) - The licensee had installed and declared operational the gaseous effluent radiological monitoring system (GERMS). The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-49; 50-368/8121-49) - The licensee had incorporated meteorological data and other variables in the dose calculation program. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-50; 50-368/8121-50) - The NRC installed the Health Physics Network telephone system for coordinating radiological dose assessment. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8122-52; 50-368/8121-52) - The licensee had developed the GERMS and provide a programmed hand calculator for a backup. EIPs 1904.01 and 1904.08 had been revised to reflect use of the GERMS and hand calculator. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8211-38; 50-368/8209-38) - A procedure had been developed for the media response center, EPIP 1903.14. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8211-40; 50-368/8209-40) - Procedures 1903.14 and 1903.50 had been developed for handling rumor control. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8408-08; 50-368/8408-08) - Procedure EPIP 1903.10I had the incident response directors signature approval line for releasing information to the offsite agencies. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8408-10; 50-368/8408-10) - Procedure EPIP 1903.23 had a statement that the shift operations supervisor shall be notified of medical emergencies. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8423-03; 50-368/8423-03) - The licensee had provided additional information concerning the tone alert radios. The licensee will gather and maintain records to demonstrate that the tone alert radios are maintained for prompt public notification. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8113-01; 50-368/8111-01) - The technical support facility will be reviewed for adequacy during the NRC emergency response facility inspection.

(Closed) Open Item (50-313/8113-02; 50-368/8114-02) - The licensee had obtained radiological monitoring equipment for detecting radioiodine to 10⁶ microcuries per cubic centimeter in the field using a silver zeolite filter. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8113-03; 50-368/8111-03) - The licensee and the state had initiated training for offsite support groups. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8113-04; 50-368/8111-04) - The licensee had added one health physics technician and one radiochemist to the minimum staffing requirements. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8305-01; 50-368/8305-01) - The technical support center equipment list had been modified to include 25 respirators and 25 anti-contamination suits. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8408-04; 50-368/8408-04) - Procedure EPIP 1903.51 described how the official turnover is conducted. The licensee's response appeared adequate.

(Closed) Open Item (50-313/8423-03; 50-368/8423-03) - This item is closed based on a letter dated January 3, 1985, from Frank Wilson, State of Arkansas, to Gary Jones, Federal Emergency Management Agency Region VI, updating the status of tone alert radios.

c. Item Remaining Open

(Open) Violation (50-313/8319-01; 50-368/8319-02) - This item involved the failure to conduct emergency preparedness program reviews in full compliance with the requirements of 10 CFR 50.54(t). Licensee corrective action on this item was considered to be incomplete and appeared to deviate from the corrective action commitment made to the NRC. (see paragraph 6)

3. Changes To The Emergency Preparedness Program

The Arkansas Nuclear One Emergency Plan and Contingency Plan were combined into one document. The NRC is presently reviewing the revised plan changes. The NRC inspector reviewed plant safety committee (PSC) meeting minutes, safety review committee (SRC) minutes and a meeting agenda for the emergency preparedness steering committee. The NRC inspector did not see any reference to the revised plan being reviewed according to 10 CFR 50.54(q), however, the July 3, 1984, SRC minutes reflect that the format of the plan would be in accordance with the NUREG-0654 format.

Further, the June 21, 1984, PSC minutes reflect under item 14 that the plan conforms to the NUREG-0654 criteria.

The NRC inspector selected several emergency preparedness procedures that had been changed and reviewed the station records to determine if procedures had been distributed within the 30-day limit. All of the procedures that were checked had met the 30-day requirement.

The revised emergency plan was sent from the AP&L office in Little Rock, Arkansas, to the NRC within the 30-day requirement. According to the AP&L records, five copies were sent to the NRC on August 29, 1984.

No violations or deviations were identified.

4. Shift Staffing and Augmentation

The NRC inspector reviewed the staffing requirements and how the staffing requirements would be met. Table B-1 of the emergency plan did not reflect that the EOF director would be in the EOF with the appropriate staff in 1 hour. This item had been discussed with AP&L during an inspection October 31 - November 4, 1983. On May 10, 1984, AP&L met with Mr. R. L. Bangart and Mr. J. B. Baird, NRC Region IV, to discuss the NRC concern. Further, on July 13, 1984, AP&L sent the NRC staff a proposal for resolution of the EOF staffing concern.

The NRC inspector informed AP&L management at the exit meeting that the EOF, TSC and OSC staffing times and required activation were considered to be an unresolved item (50-313/8502-03; 50-368/8502-03). The NRC Region IV is responsible for completing the review and initiating appropriate action on this issue.

The NRC inspector noted that the last unannounced shift augmentation had been conducted on September 12, 1981, and the augmentation did not include the EOF staffing. The NRC inspector stated that AP&L should consider conducting an unannounced augmentation drill to demonstrate the current capability for full augmentation. This will be considered an open item as follows:

(Open) Open Item (50-313/8502-04; 50-368/8502-04) - Conduct an unannounced emergency response organization augmentation drill to assure full response for the TSC, OSC, EOF, and radiological monitoring capabilities.

No violations or deviations were identified.

5. Knowledge and Performance of Duties

The NRC inspector reviewed Section 0, paragraph 4.0 of the emergency plan and EPIP 1063.21. Further, the NRC inspector reviewed selected training attendance reports, attended different emergency preparedness classes, and discussed emergency response activities with key onsite emergency team members.

The NRC inspector determined that there was an established emergency preparedness training program for both onsite and offsite personnel. The NRC inspector reviewed EPIP 1063.21, Revision 4, and noted that Section 3.0 did not reference the training requirements specified in 10 CFR 50.47(b)(15), and 10 CFR 50 Appendix E IV.F. Further, EPIP 1063.21 differed from the plan by allowing a written examination to be given in lieu of formal training to AP&L personnel assigned emergency response responsibilities. The plan and the procedure should be consistent; this will be considered an open item as described below.

The NRC inspector determined that the revised licensed operator training program had not been completed and retraining of licensed operators may not start until late March 1985. The NRC inspector attended portions of several emergency preparedness lectures and noted that the training instructors utilized training aids and provided additional information to the students with handouts.

The NRC inspector interviewed two duty emergency coordinators and two shift operations supervisors and noted that they were knowledgeable of reporting requirements, timely notification, and authorities and responsibilities.

(Open) Open Item (50-313/8502-05; 50-368/8502-05) - Revise EPIP 1063.21 to be compatible with the emergency plan in regard to formal classroom training and written examinations.

No violations or deviations were identified.

6. Audits

The NRC inspector reviewed Quality Assurance Administrative Procedure QAA-3, Revision 4; Quality Assurance Procedure QAP-13; ANO Unit 1 Technical Specifications 6.5.2.8.d.; and Quality Assurance Program, Sections 18.3.2 and 18.4.1. The NRC inspector also reviewed an AP&L letter dated November 25, 1983, in response to a Notice of Violation issued on October 27, 1983, which identified a violation (50-313/8319-01; 50-368/8319-02) of emergency program review requirements. In the response AP&L stated that procedure QAP-13 had been revised to include the 10 CFR 50.54(t) elements regarding an evaluation for adequacy of interfaces with state and local governments and of licensee drills, exercises, capabilities, and procedures. The NRC inspector reviewed the AP&L response to the violation and determined that the QAP-13 Checklist, which implements revised procedure QAP-13, did not fully address the elements regarding evaluation for adequacy of interfaces with state and local governments. For example, QAP-13 element 5.6.3.g, which required verifying the interface between state and local governments and AP&L's emergency plans and procedures, was not addressed in the QAP-13 Checklist. This was considered to be in deviation from the licensee's corrective action commitment (50-313/8502-02; 50-368/8502-02).

The NRC inspector reviewed QAP-13, Section 5.6.3, and QA Audit Checklist, Item 6.1. Item 6.1 stated, "Have letters of agreement for emergency assistant from local support groups been reviewed within the previous two

years?" The explanation for a satisfactory mark was "The letters of agreement in the ANOEP are dated in 1983, thereby indicating a review was made." The ANO emergency plan had a letter of agreement between AP&L and the University of Arkansas Medical Sciences-Hospital dated April 1, 1981, and March 31, 1981, respectively. Further, the Nuclear Power Plant Emergency Response Voluntary Assistance Agreement was dated July 1, 1982, and signed by AP&L July 20, 1982. This indicated to the NRC inspector that the auditors' review of this area was superficial.

The NRC inspector noted that the QAP-13 used for the July 6, 1984, audit had "new format Rev 3, draft 2-23-1984," written on the upper right hand corner of the cover sheet. Further, the QAP-13 draft was found to have hand drafted revisions. The cover sheet did not have the QA Manager's signature for the February 23, 1984, draft; although, only one substantive change was made in the draft QAP-13. This was in violation of the ANO Technical Specifications Section 6.5.2.8.d; Quality Assurance Program, Sections 18.3.2 and 18.4.1; and QAA-3, paragraph 5.1.5.3 which require approval by the QA Manager prior to use in an audit. (50-313/8502-01; 50-368/8502-01).

In addition, the following inconsistencies between the QAP-13 procedure and QAP-13 Checklist were noted:

- Procedure QAP-13, Section 5.6.3.g, stated "verify that the state and local governments emergency plans properly interface with AP&L's emergency plans and procedure." Checklist QAP-13, Section 6.0, which references QAP-13, Section 5.6, did not address this element.
- Procedure QAP-13, Section 5.17.3.f stated "verify that results of the annual QA audit report, which pertain to the adequacy of interface with State and Local governments, are made available to the appropriate State and Local governments." Checklist QAP-13, Section 17.0, which references QAP-13, Section 5.17, did not address this element.

7. Emergency Exercise Objectives

The NRC inspector met with representatives from the Federal Emergency Management Agency (FEMA) Region VI, State of Arkansas, and Arkansas Power & Light to review the April 1985 exercise objectives. One issue discussed was the extent that the four counties would participate in the exercise with the state. The state representatives stated that the extent of participation by the counties would depend on a final decision on which counties would be affected by the accident scenario. The NRC inspector recommended that AP&L call out their backup response personnel for initial activation of the response to allow emergency response team members which had limited involvement in previous exercises to participate. Further, it was recommended that the backup team be allowed to participate in a significant portion of the exercise. The NRC inspector noted that the AP&L exercise objectives appeared to support exercising the major elements of the licensee's emergency response capabilities.

8. Unresolved Items

Unresolved items are matters about which more information is required in order to ascertain whether they are acceptable items, items of noncompliance, or deviations. An unresolved item disclosed during the inspection is discussed in paragraph 4.

9. Exit Meeting

The NRC inspector met with the licensee representatives denoted in paragraph 1 on February 8, 1985, and summarized the scope and findings of the inspection activities. The NRC inspector discussed the emergency response facility activation concerns and stated that the concerns would be an unresolved item with NRC Region IV responsible for additional action. The NRC inspector discussed the use of QAP-13 which appeared to have been used while in draft form without the QA Manager's prior approval. This was reported to the licensee as an unresolved item with AP&L to provide any additional documentation to verify that QAP-13, Rev. 3, was approved prior to being implemented. Review of additional documentation provided by AP&L subsequent to this inspection showed that the draft QAP-13 was used for the audit without the QA Manager's prior approval; therefore, this item was resolved as a violation of NRC requirements.