

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Reports No. 50-454/8503⁸4(DRSS); 50-455/8503⁴8(DRSS)

Dockets No. 50-454; 50-455

Licenses No. NPF-37; CPPR-131

Licensee: Commonwealth Edison Company
P.O. Box 767
Chicago, IL 60690

Facility Name: Byron Nuclear Generating Station, Units 1 and 2

Inspection At: Byron Site, Byron, IL

Inspection Conducted: September 9-13, 1985

Inspectors: *T. Ploski*
T. Ploski
Team Leader

10/3/85
Date

T. Ploski for
J. Patterson

10/3/85
Date

Approved By: *M. P. Phillips*
M. P. Phillips, Chief
Emergency Preparedness Section

10/4/85
Date

Inspection Summary

Inspection on September 9-13, 1985 (Reports No. 50-454/85038(DRSS);
No. 50-455/85034(DRSS))

Areas Inspected: Routine, unannounced inspection of the following areas of the emergency preparedness program: Licensee action on previously identified items; emergency plan activations; emergency detection and classification; protective action recommendations; notifications and communications; changes to the emergency preparedness program; shift staffing and augmentation; knowledge and performance of duties (training); dose calculation and assessment; licensee audits; and maintenance of emergency preparedness. The inspection involved 150 inspector-hours onsite by two NRC inspectors and two consultants.

Results: One violation of NRC requirements was identified.

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DETAILS

1. Persons Contacted

Commonwealth Edison Company

*R. Querio, Station Manager
*R. Ward, Assistant Superintendent, Administrative and Support Services
*R. Pleniewicz, Assistant Superintendent, Operations
*T. Higgins, Training Supervisor
*W. McNeill, Training Instructor
*J. VanLaere, Rad Chem Supervisor
*M. Whitemore, GSEP Coordinator
*W. Burkamper, Quality Assurance Supervisor, Operations
*A. Britton, Quality Assurance Inspector
*A. Chomacke, ONSG
*J. Langa, Compliance Department
S. Sober, Health Physicist
B. Scott, Health Physicist
L. Bushman, Rad Chem Foreman
R. Colglazier, Health Physicist
S. Barrett, Chemistry Department
T. Tulon, Operating Engineer
T. Joyce, Operating Engineer
P. Harmon, Fire Brigade Training Instructor
J. Schrock, Shift Engineer
R. Franklin, Shift Engineer
A. Kimbler, Shift Engineer
W. Kouba, Station Control Room Engineer
P. Allen, Station Control Room Engineer
L. Bunner, Station Control Room Engineer
S. Campbell, Central Files Supervisor
C. Bennett, Environmental Health Physicist, CECO
D. St. Clair, Tech Staff Supervisor
D. Popkins, Shift Foreman
G. Frantz, Shift Foreman
H. Krist, Assistant Security Administrator
R. Branson, Master Electrician

Non-Commonwealth Edison Personnel

J. Fairow, Illinois Emergency Services and Disaster Agency
S. Brooks, Ogle County Sheriff's Department
S. Walters, Byron Fire Protection District
J. Lobel, Rockford Memorial Hospital

*Indicates those who attended the September 13, 1985 exit interview.

2. Licensee Action on Previously Identified Items

(Open) Item Nos. 50-454/85015-01 and 50-455/85010-01: During the 1985 emergency preparedness exercise, the offsite environmental monitoring team's performance was weak, as evident from the following: inadequate contamination control practices; uncertainty in operating the SAM II; and failure to follow procedure EG-3 when taking radiation surveys. In its formal response to this exercise weakness, the licensee indicated that remedial training would be completed by September 30, 1985. The inspector determined that this training was progressing on schedule for persons who may be assigned to offsite teams. Also, it was evident from records of a September 1985, environmental monitoring drill that greater emphasis had been placed on the weak points identified during the 1985 exercise. This item remains open pending completion of remedial training and evaluation of offsite monitoring team performance during the next exercise.

3. Emergency Plan Activations

The inspector reviewed records related to the activation of the Generating Stations Emergency Plan (GSEP) for the period November 1, 1984 through August 31, 1985. The GSEP was activated on six occasions during this period. All six Unusual Event declarations were appropriate. Notifications of the NRC and State agencies were adequately documented. The review included the following documents and contacts:

- Licensee Event Reports
- Shift Engineer's Logs
- Copies of Nuclear Accident Reporting System (NARS) Forms
- Illinois Emergency Services and Disaster Agency (IESDA)
- Event Notification Worksheets, used by the licensee to document telephone conversations with the NRC Headquarters Duty Officer.

The inspector determined that the licensee initially notified NRC Headquarters within the required time period following each emergency declaration. The licensee is responsible for having the capability to notify responsible State and local governmental agencies within about fifteen minutes after any emergency declaration. The following table summarizes initial notification information for both State and Ogle County for the Byron Station's GSEP activations:

GSEF ACTIVATIONS

NOVEMBER 1984 - AUGUST 1985

<u>Date</u>	<u>Declaration Time</u>	<u>State Agencies^a Initially Notified</u>	<u>Ogle County^b Initially Notified</u>	<u>Elapsed^c Time (Minutes)</u>
March 14, 1985	2209	2215	2220	11
April 17, 1985	1033	1047	1059	26
June 16, 1985	0539	0545	0555	16
July 27, 1985	2101	2105	2116	15
August 1, 1985	2030	2033	2045	15
August 29, 1985	1700	1702	1710	10

^aSimultaneous notification of IESDA and Illinois Department of Nuclear Safety (IDNS).

^bTimes listed are the later of the times in licensee and IESDA records.

^cBased on IESDA records

^cFrom declaration time to notification of both State and county agencies.

As evident from the table, the licensee initially notified IESDA and IDNS on the average about six minutes after the emergency declarations. Elapsed time from emergency declaration to initial notification of State and local governmental agencies averaged about fifteen minutes. Thus, based on records of actual emergency plan activations through August 1985 for the Byron Station, the licensee has adequately demonstrated the capability to initially notify State and local governmental agencies in a timely manner.

Based on the above findings, this portion of the licensee's program is acceptable.

4. Emergency Detection and Classification (82201)

The inspectors conducted walkthroughs with three teams, each consisting of a Shift Engineer (SE) and a Station Control Room Engineer (SCRE), regarding their abilities to detect and classify several emergency conditions and to perform all initial offsite notifications. It was clear to all individuals that the SE had the ultimate responsibility for declaring an emergency. Interviewees demonstrated good teamwork and exhibited adequate familiarity with the Station's Emergency Action Levels (EALs), relevant emergency plan implementing (BZP-series) procedures, use of the NARS dedicated telephone equipment and message forms, and use of the Emergency Notification System (ENS) communications equipment and associated Event Notification Worksheets.

Emergency classifications described in the GSEP, Byron Annex, and in procedure BZP 200-A1 were the Transportation Accident, Unusual Event, Alert, Site Area Emergency, and General Emergency. All but the first class were consistent with the four emergency classes described in 10 CFR 50, Appendix E, Part IV.C and NUREG 0654, Revision 1. The EALs included inplant conditions and onsite and offsite radiological monitoring results. The EALs were evaluated versus the regulatory guidance, as part of the 1985 review of Revision 1 to the Byron Annex, and found to be in accordance with the guidance, including those EALs which referenced Byron Status Trees. The inspector determined that the Status Trees were worded such that a user would also be directed to the appropriate EALs, as listed in BZP 200-A1, in order to make an emergency classification decision.

Upon comparing the EALs listed in Revision 1 of the Byron Annex and in procedure BZP 200-A1, the inspectors identified typographical errors in the Annex's Table of EALs for the following conditions:

- Condition 2, Alert EAL - work "exceeded" was repeated.
- Conditions 7 through 9, Site Area Emergency EALs - portions of these EALs were listed under the General Emergency EAL column
- Condition 27B, General Emergency EAL - The equation contained an incorrect exponent.
- Condition 28, second Unusual Event EAL - the exponent was missing.

Based on the above findings, this portion of the licensee's program is acceptable; however, the following item should be considered for improvement:

- The licensee should eliminate typographical errors in the EALs listed in Table BYA 5-1 of the Byron Annex.

5. Protective Action Decisionmaking (82202)

The GSEP, Byron Annex, and appropriate BZP-series procedures indicated that the SE, who is on-shift 24 hours per day, is the Acting Station Director and, as such, has the undelegatable responsibility for making offsite protective action recommendations until properly relieved. The GSEP and related procedures specified the line of succession in the event that the SE would become incapacitated or otherwise unable to perform his responsibilities as Acting Station Director. During the Control Room walkthroughs described in Paragraph 4 of this report, various aspects of onsite and offsite protective action decisionmaking were addressed. All personnel were clearly aware of the SE's responsibility for making an offsite recommendation following any General Emergency declaration and all were adequately familiar with procedural guidance for formulating such a recommendation and transmitting it to State and County officials. The GSEP and procedural guidance for formulating offsite protective action recommendations were consistent with current regulatory guidance.

The procedural guidance, found in BZP 300-A2, included copies of Table 6.3-1 and Figure 6.3-1 of the generic GSEP. During the walkthroughs Control Room personnel exhibited some difficulty in reading the smaller print in the protective action recommendation flowchart reproduced in BZP 300-A2. At least one individual expressed momentary confusion by the references in the procedure's table and figure to "Table 6.3-1" or "Figure 6.3-1", which are identifiers associated with the generic GSEP, but not in BZP 300-A2.

All those interviewed were adequately familiar with the procedural guidance dealing with the assembly, accountability of all onsite personnel and subsequent evacuation guidance for non-essential onsite personnel. The procedural guidance was consistent with the GSEP and regulatory guidance.

Based on the above findings, this portion of the licensee's program is acceptable; however, the following items should be considered for improvement:

- A more legible copy of the protective action decisionmaking flowchart should be incorporated in BZP 300-A2.
- Protective action decisionmaking guidance reproduced and incorporated in BZP 300-A2 should not refer to Table 6.3-1 and Figure 6.3-1, which are their identifiers in the generic GSEP.

6. Notifications and Communications (82203)

The licensee's provisions for notifying appropriate offsite organizations of emergency plan activations have been described in the GSEP and Byron Annex. Specific, adequately detailed guidance regarding offsite notifications was found in the following BZP-series procedures: 100-T1, 300-A1, 310-1, 310-2, 310-3 and 310-5. Notifications to IDNS and IESDA have been accomplished using the NARS system. In the event of a General Emergency declaration, the NARS system provides the capability for the licensee to directly contact both State and County emergency organizations. Should the NARS and/or Emergency Notification System (ENS) become inoperable, backup commercial telephone numbers for normal and off-hours have been provided for the relevant governmental agencies in the appropriate BZP procedures and in the GSEP Telephone Directory, which has been updated quarterly by corporate staff. The inspectors determined that dedicated communications equipment had been installed in the onsite and offsite emergency response facilities as described in the GSEP and Byron Annex, with the exception of the ENS line in the Emergency Operations Facility (EOF). The licensee indicated that progress has been made with NRC Headquarters regarding installation of the EOF's ENS line, and that a November 1985 operability date was now anticipated. Backup power supplies to emergency communications equipment have been identified in Inspection Reports No. 454/83056(DRMSP) and No. 455/83039(DRMSP).

Adequate copies of the NARS Form used to document initial notifications to State agencies were available in the Control Room and Technical Support Center (TSC). Copies of the Event Notification Worksheet, used to document conversations between onsite licensee personnel and the NRC Operations Center, were available in the Control Room. The worksheet, found in procedure 1250-T4, was a modified version of the NRC Headquarters Duty Officer's Event Form. Based on records of actual GSEP events and conversations with Control Room personnel, the inspectors concluded that this worksheet had been utilized as intended and provided useful guidance to Control Room personnel regarding anticipating the Duty Officer's information needs, as well as serving as a readily available means of documenting conversations with the Duty Officer.

The inspector determined that 1985 communications equipment tests had been conducted in accordance with regulatory requirements and commitments in the GSEP. All tests had been adequately documented. The inspector also observed a portion of the monthly onsite equipment checks that were efficiently performed by a licensee representative. The equipment checks were thorough, incorporating facsimile and computer terminal equipment in addition to telephone and radio equipment. Corrective actions on the few identified problems were promptly initiated.

Based on the above findings, this portion of the licensee's program is acceptable.

7. Changes to the Emergency Preparedness Program (82204)

The staff indicated its approval of Revision 1 to the Byron Annex in a letter to the licensee dated April 26, 1985. Several inconsistencies between the Annex and the generic GSEP were noted in that correspondence, regarding out-of-date Annex descriptions of several emergency response facilities and the licensee's method of initially notifying State and local authorities of an onsite emergency. In addition to these items, the inspectors determined that Section 4.1.1.2 of the Annex stated that any offsite protective action recommendations would be provided to County officials, rather than to both State and County officials as indicated in the GSEP and procedures. Section 8.1 did not indicate that the Station has also been entirely responsible for conducting semi-annual, off hours staff augmentation drills. Section 8.1 did not indicate that the licensee has annually reviewed the Station's EALs with offsite authorities and has made provisions for making available to offsite authorities the results of independent audits which dealt with the adequacy of the station's interfaces with State and local emergency support organizations.

The inspector examined the licensee's provisions for preparing, internally reviewing, and distributing new or revised BZP-series procedures. These provisions were adequately described in various BAP-series procedures. A procedures coordinator was responsible for selecting personnel, pre-designated as having the qualifications to review one or several categories of information, who would then be tasked to review a BZP-series procedure. The coordinator was able to identify exactly who in the review

chain currently had possession of a specific revision. Following review and approval by the Station Manager and completion of a safety evaluation, procedure distribution to holders of controlled copies of procedure manuals would occur. Onsite distribution to both individuals and work locations having controlled copies of procedure manuals was accomplished by file clerks, rather than by internal mailings. Manual holders were still required to acknowledge receipt and correct filing of the changes to their manuals by written form sent to Central Files. Offsite distribution of procedure changes also required that those authorized to possess controlled procedures acknowledge receipt and filing of any changes via form sent to Central Files. The inspector spot checked records of several recent revisions to BZP-series procedures and determined that the described preparation, review, and distribution procedures had been followed.

Based on the above findings, this portion of the licensee's program is acceptable; however, the following items should be considered for improvement:

- The Byron Annex should indicate that both State and County officials will be directly provided any offsite protective action recommendations that are issued.
- The Annex should indicate that the Station is entirely responsible for conducting semi-annual, off-hours staff augmentation drills.
- The GSEP or Annex should indicate that the licensee annually reviews the Station's EALs with appropriate offsite officials and that results of independent audits addressing the adequacy of the Station's interfaces with State and local emergency support organizations are made available to those organizations.

8. Shift Staffing and Augmentation (82205)

The licensee's provisions for the minimum shift staff and for augmenting this staff were reviewed and were found to have met the goals of Table B-1 of NUREG 0654, Revision 1. Provisions for onsite staff augmentation for each emergency class were adequately described in the GSEP, BZP 300-A5, and in BZP 600-series procedures. Provisions included adequate guidance on what constituted a minimum staff needed to declare certain emergency response facilities fully operational. The licensee's call tree procedure and prioritized call list for staff augmentation identified at least two persons for each key position in the onsite emergency organization. Personnel assignment and associated telephone number information has been updated quarterly by the GSEP Coordinator. BZP 600-series procedures also included lists needed by certain Station Group directors in order to contact vendors of various supplies and services. Such lists have also been updated quarterly and were available in the onsite emergency response facilities.

The inspector reviewed records of off-hours staff augmentation drills that had been conducted in September 1984 and March 1985, in accordance with the semi-annual drill commitment in the GSEP and Byron Annex. The

drills were adequately documented and demonstrated the licensee's capability to adequately augment onshift personnel in a timely manner following an emergency declaration.

Based on the above findings, this portion of the licensee's program is acceptable.

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

The licensee's Production Training Center (PTC) has overall responsibility for ensuring that all licensee, contractor, and other personnel granted unescorted access privileges receive annual training of general aspects of the GSEP and Byron Annex. The Station's Training Department has administered this training and has adequately supplemented it with site-specific information on the Station's emergency alerting systems and associated personnel response actions.

The Training Department has provided additional annual training to persons assigned to specific positions in the onsite emergency organization. Training requirements for all but one Station Group director position were specified in BTP 300-T2, the Byron Station EPIP Training Matrix. The matrix did not specify the training required for Operational Support Center (OSC) Directors, who were Shift Foremen in the normal plant organization. A review of the Shift Foremen's training records indicated that all had completed, within the annual period, the equivalent training as that given Station Directors which included procedure BZP 400-2, the Role and Staffing of the OSC. The inspectors examined the training records of fifteen other persons identified by name as being assigned to various Station Group director positions and determined that all had completed, within the annual period, all training specified in BTP 300-T2. In addition to annual training on specific implementing procedures, Station Group directors were also required to complete annual training on eighteen subject areas derived from the GSEP and Byron Annex. The inspector reviewed lesson plans for this additional GSEP training and determined that they were adequately detailed.

In addition to the annual training requirements on the GSEP and implementing procedures, operating shift personnel have been kept informed of revisions to relevant emergency plan implementing procedures as part of a periodic required reading program administered by the Station's Training Department. Completion of periodic required reading assignments has been documented by sign-off sheets which have been monitored by Training Department personnel. The licensee indicated that it has been developing written tests for persons assigned key positions in the onsite emergency organization, as part of its efforts to receive INPO accreditation for the emergency preparedness training effort.

Besides records reviews and the SE/SCRE walkthroughs previously described in this inspection report, the inspectors conducted walkthroughs with one or more persons assigned to all but the lead position (Station Director) in the Station Group. Persons who participated in or observed the June 1985 exercise were exempted from these walkthroughs. All persons interviewed demonstrated adequate understandings of their emergency

duties. During these interviews the inspectors learned that the OSC Directors' training did not include familiarization training within the OSC itself, which served as a large meeting room during normal plant operations.

Based on the above findings, this portion of the licensee's program is acceptable; however, the following items should be considered for improvement:

- The annual training requirements for the OSC Director position should be specified in the Byron Station EPIP Training Matrix.
- Persons assigned as OSC Directors should receive some familiarization training within the workspace that is reconfigured to become the OSC during an emergency.

10. Dose Calculation and Assessment (82207)

The inspector reviewed the licensee's offsite dose calculation and assessment methods as contained in the Environmental Director (ED-series) procedures. The ED-series procedures contained step-by-step instructions for performing computerized and manual dose calculations for ground level or elevated releases, monitored and unmonitored release pathways, and field monitoring teams' measurements. Procedures also addressed acquisition of real-time and forecast meteorological information.

Walkthroughs were conducted with several licensee personnel assigned to the Environs Director position in the emergency organization. Those interviewed demonstrated adequate familiarity with the ED-series procedures and the manual and computerized methods of performing offsite dose calculations. One individual did, however, exhibit some uncertainty when the Station's computer momentarily went off line during an attempted demand poll of onsite meteorological data. The individual could not locate procedural guidance for accessing an offsite computer through which the data could have been accessed.

Based on the above findings, this portion of the licensee's program is acceptable; however, the following item should be considered for improvement:

- The ED-series procedures should contain guidance on how to access a compatible offsite computer in the event that the station's computer cannot be accessed.

11. Licensee Audits (82210)

The inspector examined the records of the independent audits and surveillances of the emergency preparedness program, which were conducted by the licensee's Quality Assurance (QA) Department. Records of the following audits were reviewed: onsite audit QAA 06-84-II; onsite audit QAA 06-85-19; and offsite audit 06-85-II. Each audit was adequately documented and was adequate in scope and depth of questions, regarding the regulatory requirements of 10 CFR 50.54(t). Reference documents from which audit questions were developed included the following: 10 CFR Part 50; Technical Specifications; the GSEP and Byron Annex; and the

emergency plan implementing procedures. Negative responses to audit questions were categorized as findings, open items, or observations, which are analogous to the NRC's categorizations of violations or open items, unresolved items, and improvement items, respectively. It was apparent from the audit records that all responses to finding had been received and followed-up by QA auditors' in a timely manner, while previous audits' observations could be specifically incorporated in subsequent audits.

Records of the following surveillances were reviewed: QAS 06-85-48; QAS 06-85-115; QAS 06-85-143; QAS 06-85-237; and QAS 06-85-305. The first three surveillances were essentially documentation of a QA auditor observing emergency preparedness exercise scenario development meetings, while QAS 06-85-237 was the QA auditors' evaluation of the annual exercise. The final surveillance was an auditor's evaluation of the annual medical drill. All surveillances were adequately documented. The inspector concluded that the surveillances of the exercise and medical drill were more meaningful subjects for surveillances versus scenarios development meetings.

Although not specifically stated in the Byron Annex, the licensee has made provisions for making available to representatives of appropriate State and local government organizations the audit and surveillance results addressing the Station's interface with offsite emergency support organizations. Offsite officials were to be informed of the availability of such records during the annual emergency preparedness meeting held by the licensee.

The inspector reviewed the GSEP Coordinator's records associated with actual GSEP events. The coordinator has been required to evaluate the adequacy of records generated by the Station during GSEP events, as well as the timeliness of all offsite notifications. The inspector determined that the GSEP Coordinator had been performing this task in a satisfactory manner.

The inspector also reviewed the GSEP Coordinator's records associated with tracking progress made on corrective actions on items identified during NRC inspections or licensee drills. The records were adequately detailed and indicated that timely corrective actions had been initiated on exercise or drill weaknesses and appropriate improvement items that had been identified.

Based on the above findings, this portion of the licensee's program is acceptable.

12. Maintaining Emergency Preparedness

The inspectors determined that the licensee's Letters of Agreement with local emergency support organizations were current. An inspector also contacted management level representatives of the Ogle County Sheriff's Office, Byron Fire Protection District, and Rockford Memorial Hospital. Persons contacted expressed no dissatisfaction with emergency preparedness training that had been provided by the licensee and all were adequately aware of their organizations' roles in the event of an emergency at the Byron Station. Based on discussions with the licensee's

training instructors, the inspectors learned that representatives of the Fire Protection District had participated to some extent in some of the Station's fire drills, while the Station's fire brigade had completed some training at the District's training facility.

The inspectors examined records of the September 1984 and 1985 offsite agency meetings. The records indicated that appropriate State and local officials had been invited. The 1985 meeting agenda included the following topics: the GSEP; overview of the Station's Fire Protection and Security Plans; discussion of EALs; and a overview of the licensee's QA Program.

The licensee has conducted or was scheduled to conduct during the annual period all emergency preparedness drills required by the regulations and committed to in the GSEP and Byron Annex. All drills that have been completed had been critiqued and adequately documented, including any corrective actions that had been initiated as a result of identified weaknesses.

The inspector examined 1985 records of inventories of emergency supplies and kits, identified in procedure BZP 500-4 and associated checklists, which were conducted before or during this inspection. The inventory instructions contained in the procedure and checklists were clear. Documentation of completed inventories was adequate. Inventories of supplies found in the emergency response facilities and kits used by environmental monitoring teams had been performed during the first two weeks of January and April 1985. The procedure stated that these inventories were to be done "quarterly," rather than sometime "during the quarter". While emergency supplies in the Emergency Operations Facility (EOF) had again been inventoried in early July 1985, the inspectors determined that prior to this inspection the most recent documented inventories of the TSC and OSC emergency supplies had occurred in early April 1985. The inspectors learned that the GSEP Coordinator had recognized in late August that he had not yet received completed inventory checklists for all quarterly inventories that should have been completed in July. The Coordinator had so indicated in a note addressed to the foreman responsible for personnel normally assigned the inventory tasks.

BZP 500-4 also instructed that any items identified as missing shall be replaced and so indicated on the inventory checklists as corrected, and that checklist items having change-out schedules were to be replaced as stated. The inspector examined the emergency supplies stored in the TSC, OSC, and both environmental monitoring team kits. The following discrepancies from these instructions were noted in the most recently documented inventories:

TSC Supplies:

- Two survey meters and two probes were to be available. Only one survey meter and one probe were found.
- BZP 500-T6 stated that "there was a 6-month limit on film" badges. Twenty-four film badges were dated January 1985 and another was dated August 1984.

OSC Supplies:

- Two survey meters were to be available. Only one was found.
- BZP 500-T7 stated that "there was a 6-month limit on film" badges and finger rings. The film badges and finger rings were dated January 1985.

Environmental Monitoring Team Kits:

- Gold Team Kit - No discrepancies
- Black Team Kit - One survey instrument bagged and left in the "on" position. Used (dirty) soil and vegetation sample containers, used cartridges.

The inspector concluded that the Black Team Kit had been used in the September 6, 1985 environmental monitoring drill. The condition of this kit's contents gave the appearance of not having been inventoried after use. Procedure BZP 500-4 did not contain inventory requirements for emergency supplies and kits following their use. The licensee must develop and implement procedural guidance to ensure that emergency supplies and kits shall be inventoried after use and that missing or expended items shall be replaced in a timely manner. This is an Open Item (454/85034-01 and 455/85038-01).

Promptly after being informed that inventories of emergency supplies in the TSC and OSC had not been documented since early April 1985 and that evidence of missing or expended items had been discovered upon inspection of these supplies and an environmental monitoring team kit, the licensee initiated the following corrective actions:

- Inventory of the TSC and OSC emergency supplies and monitoring team kits.
- Establishment of a reminder system to the GSEP Coordinator from Central Files, as to when periodic inventory records were due for specific emergency kits and supplies.

Despite these prompt corrective actions, the licensee's failure to complete quarterly inventories of TSC and OSC emergency supplies since early April 1985 together with the failure to follow procedural requirements regarding periodic replacement of associated film badges and finger rings constitute a Severity Level IV violation of NRC requirements (Supplement VIII). However, in view of the licensee's prompt initiation of adequate corrective measures, no written response to this violation is necessary.

13. Onsite Meteorological Monitoring Program

The inspector examined the licensee's corrective actions following lightning damage to components of the onsite meteorological monitoring system in mid-August 1985. The licensee reported the inoperability of these components per the requirement of Technical Specification 3.3.3.4.

The inspector determined that the lightning strike had damaged fuses in the communications link between the meteorological tower and the Control Room's strip chart recorders for certain meteorological parameters. The licensee's meteorological contractor was onsite within an acceptable eighteen hours of the lightning strike and ascertained that the sensors had not been damaged or rendered out of calibration limits. The communications line was repaired and the strip chart recorders were all recalibrated by the evening of August 20, 1985. During the time period from the lightning strike to the completion of repair and recalibration activities, onsite meteorological data was available in the Control Room and TSC through the use of the Station's PRIME computer or the Offsite Dose Calculation System (ODCS).

Based on the above findings, the licensee's corrective action was timely and acceptable.

14. Exit Interview

The inspectors met with licensee representatives denoted in Paragraph 1 at the conclusion of the inspection to present and discuss their preliminary findings. The licensee agreed to consider the items discussed and stated that none of the information was proprietary in nature.