



Nebraska Public Power District

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NLS970014

January 21, 1997

U.S. Nuclear Regulatory Commission
Attention: Document Control Desk
Washington, D.C. 20555-0001

Gentlemen:

Subject: Reply to a Notice of Exercise Weakness
NRC Inspection Report No. 50-298/96-22
Cooper Nuclear Station, NRC Docket 50-298, DPR-46

Reference: 1. Letter to G. R. Horn (NPPD) from T. P. Gwynn (USNRC) dated December 16, 1996, "NRC Inspection Report 50/298/96-22 and Notice of Exercise Weakness"

The Nebraska Public Power District (NPPD) hereby submits its response to the Exercise Weakness identified in NRC Inspection Report No. 50-298/96-22. This inspection documented the results of the NRC inspection conducted on November 18-21, 1996. This inspection included a review of the implementation of the emergency plan and procedures during the Cooper Nuclear Station (CNS) biennial emergency preparedness exercise. The NRC identified one exercise weakness during its inspection of CNS for failure to continually maintain personnel accountability in the Control Room Simulator and Technical Support Center. The District self-identified this weakness in the November 19, 1996 Exercise Critique. An explanation of this weakness, and the corrective actions taken and planned, is presented in the attachment to this letter.

Should you have any questions concerning this matter, please contact me.

Sincerely,

P. D. Graham
Vice President of Nuclear Energy

/dnm
Attachment

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cc: Regional Administrator
USNRC - Region IV

Senior Project Manager
USNRC - NRR Project Directorate IV-1

Senior Resident Inspector
USNRC

NPG Distribution

REPLY TO IR 50-298/96-22, NOTICE OF WEAKNESS
COOPER NUCLEAR STATION
NRC DOCKET NO. 50-298, LICENSE DPR-46

During NRC inspection activities conducted November 18-21, 1996, one inspection finding (exercise weakness) was identified. The particular exercise weakness and the District's reply are set forth below:

Exercise Weakness

"During the exercise, personnel accountability was not maintained as required by Emergency Plan Implementing Procedure 5.7.10, "Personnel Assembly and Accountability," Revision 10. The following examples were noted in the control room simulator. . . . It should be noted that the same process is used in the actual control room (i.e., not an exercise artificiality).

First, the written record of movement into and out of the control room simulator was not maintained on Attachment 2 to Emergency Plan Implementing Procedure 5.7.10, "Continuous Accountability Log." Examples included:

- *People who did sign out on the accountability log did not always enter a destination.*
- *There were several entries where the time entered in the "time in" column was after the time entered in the "time out" column.*

Second, based on accountability logs, the number of people accounted for in the control room simulator did not match the number of exercise participants present. Examples included:

- *At 12:08 p.m., the inspectors counted 9 exercise participants in the control room simulator; the accountability logs indicated there were 20 people.*
- *At 2:20 p.m., the inspectors counted 8 exercise participants in the control room simulator; the accountability logs indicated there were 21 people.*

The failure to maintain continuous accountability was identified as an exercise weakness due to the potential impact on personnel safety (298/9622-01). . . .

Personnel accountability and access control processes were not fully understood or uniformly applied in the technical support center. The following examples were observed:

- *At 10:30 a.m., a security officer noted that individuals had entered and exited via the technical support center's unmonitored back door but did not take appropriate action to address the problem.*
- *Procedures defining access to the technical support center during emergency events were ambiguous concerning required controls. As a result, implementation varied regarding personnel briefings involving expected industrial and radiation hazards.*
- *After the accountability announcement at 8:53 a.m., a security officer mistakenly logged technical support center entries by hand. This incorrect action delayed access, caused confusion, clogged the hallway outside the technical support center, and delayed facility activation. Although this situation was quickly corrected, the results lingered.*

The personnel accountability issues identified in the technical support center are considered part of the exercise weakness described . . . above (298/9622-01)."

Admission or Denial of Exercise Weakness

The District admits to the exercise weakness.

Reason for Exercise Weakness

The use of Procedure 5.7.10, Attachment 2 was not rigorously followed in the Control Room Simulator. Security officers did not ascertain the time personnel left the Control Room Simulator and intended destination in every instance. The Attachment 2's were readily available; however, the security officers involved were unfamiliar with their location. This aspect of the exercise weakness was caused by failure to adequately train security officers on where the accountability log is located and its proper use.

The examples given in the exercise report for the number of people accounted for in the Control Room Simulator not matching the number of exercise participants present (a contributor to the weakness) is not accurate. The accountability log contained names of the exercise controllers, evaluators, and security personnel in the simulator in addition to players. That is why it did not match the number of players; but all players were accounted for. The inclusion of controllers, evaluators, and security personnel (actually in the hallway) to the accountability log is an exercise artificiality. While the District concedes this to be an exercise conduct problem, it is not a personnel safety issue. This contributor to the exercise weakness was caused by the failure to provide clear instructions to the controller/evaluator groups to not use accountability logs which are for player use only.

The examples given in the exercise report of security officers noting that individuals had entered and exited the Technical Support Center (TSC) via an unmonitored back door without taking appropriate action and mistakenly logging in TSC entries by hand after the accountability announcement at 8:53, were due to the following:

Security officers were not adequately trained on their responsibilities when posted at the TSC door and were not provided additional instructions by the Security Coordinator as appropriate.

The example in the exercise report of ambiguity in procedures defining access to the TSC during emergencies was due to the Positional Instruction Manuals not containing specific instructions for the Chemistry/Radiological Protection Coordinator or Security Coordinator with regard to this issue.

It should be noted that the District had self-identified the exercise weakness for both the Control Room Simulator and the TSC.

Corrective Steps Taken and Results Achieved

Training was completed on January 17, 1997 for security officers on the proper use of Procedure 5.7.10, when posted at the Control Room, TSC, and EOF for accountability purposes.

Procedure 5.7.10 and additional copies of the accountability log have been located in the Secondary Alarm Station as of January 15, 1997. The Secondary Alarm Station is located near the Control Room so that the log will be readily available to security officers responding to the Control Room.

The CNS EP Drill and Exercise Desk Guide was revised on January 15, 1997 to include guidance for controllers and evaluators not to use accountability logs. This will ensure that the subject is covered during controller and evaluator training sessions conducted prior to drills and exercises.

The Security Coordinator's Positional Instructional Manual was revised on December 9, 1996 to:

Provide instructions with regard to restricting ERO movement to officers posted at the TSC door depending on scenario specific conditions as determined by the Chemistry/Radiological Protection Coordinator.

Provide instructions with regard to Emergency Response Organization (ERO) personnel movement outside of emergency response facilities.

Provide instructions to limit the number of doors personnel may use to enter or exit the TSC to only one.

The Chemistry/Radiological Protection Coordinator's Positional Instructional Manual was revised on December 9, 1996 to:

Add a caution statement to be observed with regard to entering and exiting the TSC if a hazardous environment exists outside the TSC habitability envelope.

Provide instructions to restrict movement outside of the TSC if emergency conditions dictate.

Provide instructions to coordinate ERO movement with the Radiological Control Manager and Security Coordinator EOF.

Provide instructions to coordinate a plant-wide announcement to advise ERO personnel of movement restrictions including areas to be avoided, special precautions, and any special or additional monitoring needed.

The Radiological Control Manager's Positional Instructional Manual was revised on December 9, 1996 to:

Add a caution statement regarding egress and ingress of personnel in the EOF if a hazardous environment exists outside the EOF habitability envelope.

Provide instructions for restricting ERO personnel movement outside the EOF if emergency conditions dictate.

The Logistics Coordinator's Positional Instructional Manual was revised on December 9, 1996 to:

Add a caution statement regarding egress and ingress of personnel in the EOF if a hazardous environment exists outside the EOF habitability envelope.

Provide instructions to follow instructions provided by the Radiological Control Manager with regard to restricting ERO personnel movement.

Provide instructions to coordinate with security personnel posted at the EOF doors and provide them with instructions concerning personnel egress and ingress.

Corrective Steps That Will Be Taken To Avoid Further Exercise Weaknesses

No additional actions are required to avoid further exercise weaknesses concerning continuous accountability. Personnel accountability shall continue to be scrutinized during scheduled drills in 1997.

Date When Full Compliance Will Be Achieved

The District is currently in full compliance.

ATTACHMENT 3 LIST OF NRC COMMITMENTS

Correspondence No: NLS970014

The following table identifies those actions committed to by the District in this document. Any other actions discussed in the submittal represent intended or planned actions by the District. They are described to the NRC for the NRC's information and are not regulatory commitments. Please notify the Licensing Manager at Cooper Nuclear Station of any questions regarding this document or any associated regulatory commitments.

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