

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Reports No. 50-373/86002 (DRSS); 50-374/86002 (DRSS)

Docket Nos. 50-373; 50-374

Licenses No. NPF-11; NPF-18

Licensee: Commonwealth Edison Company  
Post Office Box 767  
Chicago, IL 60690

Facility Name: LaSalle County Nuclear Generating Station, Units 1 and 2

Inspection At: LaSalle Site, Seneca, IL

Inspection Conducted: January 6-10, 1986

Inspectors: *T. Ploski*  
T. Ploski

1/30/86  
Date

*J. Foster*  
Foster

1/20/86  
Date

*Monte P. Phillips*

Approved By: Monte P. Phillips, Chief  
Emergency Preparedness  
Section

1/30/86  
Date

Inspection Summary

Inspection on January 6-10, 1986 (Reports No. 50-373/86002(DRSS); 50-374/86002(DRSS))

Areas Inspected: Routine, unannounced inspection of the following areas of the emergency preparedness program: licensee actions on previously-identified items; activation of the emergency plan; emergency detection and classification; protective action decisionmaking; notifications and communications; changes to the emergency preparedness program; shift staffing and augmentation; knowledge and performance of duties (training); licensee audits; and maintaining emergency preparedness. The inspection involved 140 inspector-hours onsite by two NRC inspectors and two consultants.

Results: Of the ten areas inspected, two violations were identified in two areas (shift staffing and augmentation and maintaining emergency preparedness). Since one of the violations met the criteria of 10 CFR Part 2, Appendix C, Section V.A for self-identified violations, no notice of violation will be issued for that violation.

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## DETAILS

### 1. Persons Contacted

- \*G. Diederich, Station Manager
- \*C. Sargent, Production Superintendent
- \*R. Bishop, Services Superintendent
- \*W. Huntington, Assistant Superintendent, Operations
- \*R. Jeisy, Quality Assurance Supervisor
- \*L. Aldrich, Rad/Chem Supervisor
- \*K. Klotz, GSEP Coordinator
- \*J. Spangler, GSEP Training Instructor
- \*T. Novotney, Support Services Training Group Leader
- R. Crawford, Training Department Supervisor
- P. Welsh, Office Supervisor
- S. Seroka, Central Files Clerk
- B. Polark, Records Clerk
- L. Melander, Licensee Operator Training Instructor
- J. Lewis, Rad/Chem Foreman
- D. Hieggelke, ALARA Coordinator
- P. LeHeney, Shift Foreman
- J. Damron, Shift Foreman
- R. Roy, General Training Instructor
- S. Harmon, Licensed Operator Training Instructor
- J. Atchley, Shift Engineer
- W. Sly, Shift Engineer
- J. Shetterly, Shift Engineer
- R. McConnaughay, Shift Foreman
- G. Swihart, Station Control Room Engineer
- D. Leggett, Station Control Room Engineer
- T. Hammerich, Technical Staff
- A. Settles, Technical Staff
- J. Schmeltz, Operations Supervisor

\*Indicates those attending the January 10, 1986 exit interview.

### 2. Licensee Action on Previously-Identified Items

(Open) Open Items 373/84018-01 and 374/84024-01: There was a lack of procedural guidance regarding the formulation and documentation of adequately detailed followup messages to offsite authorities, per the guidance in NUREG 0654, Revision 1, and Section 6.1 of the GSEP. The inspectors determined that the following corporate emergency implementing procedures had been revised to adequately address the frequency and content of periodic followup messages to the State, per the guidance in NUREG 0654, Revision 1, and Revision 5 to the generic Generating Stations Emergency Plan (GSEP): Corporate Command Center Director, Intelligence Director, Recovery Manager, and Advisory Support Director. Followup message documentation would be accomplished without use of a standardized form. The inspectors determined that the LaSalle Station's GSEP Coordinator was in the process of revising LZP-series procedures to provide guidance to the Acting Station Director, Station Director, and

Technical Director regarding the formulation, approval, transmittal, and documentation of periodic followup messages to the State. This item remains open pending issuance of these LZF-series procedures and the successful demonstration of the sending of adequately detailed, periodic followup messages from the Station and offsite emergency response facilities during a future exercise.

(Closed) Open Items 373/84018-05 and 374/84024-05: Personnel assigned to the dedicated GSEP Van exhibited unfamiliarity with the operation of some of its equipment. Replacement TLDs were not available to the offsite monitoring team utilizing this vehicle during the 1984 exercise. The inspectors determined that implementing Procedure LZF 1320-1 had been revised to better identify those technician and management individuals who could be assigned to the GSEP Van. All personnel who were so identified in the current revision of LZF 1320-1 had received additional classroom and "hands-on" training on the van. Environs Group (EG-series) Procedure EG-19 indicated what equipment was to be included in the GSEP Vans, and which personnel were assigned responsibility for maintaining and inventorying the equipment. Ten environmental TLDs were included in each van's equipment inventory listing. This item is considered closed.

(Closed) Open Items 50-373/85002-01 and 50-374/85002-01: The poor judgement exercised by the licensee in failing to provide timely training to support the Environs Director position and the licensee's lack of attention in allowing this condition to persist could have resulted in confusion and loss of time during an actual GSEP event when attempting to fill the position through normal procedures. The licensee must make provisions to ensure that this position can always be filled within the 60 minute limitations imposed by LZF-1320-1. By January 1985, the licensee had allowed the number of individuals fully qualified to function as Environs Director to shrink to one. The inspectors reviewed training records which indicated that three persons were currently fully qualified to serve as an onsite Environs Director, as indicated in Procedure LZF 1320-1. This item is considered closed.

### 3. Emergency Plan Activations

(Closed) Open Items No. 373/850XX-01 through -08 and 374/850XX-01 through -08: Activations of the Generating Stations Emergency Plan (GSEP). The inspectors reviewed licensee, NRC, and Illinois Emergency Services and Disaster Agency (IESDA) records associated with the fourteen emergency plan activations which occurred between January 22 and December 31, 1985. As indicated in the following table, the State of Illinois and the NRC were initially notified in a timely manner following each emergency declaration. The inspectors also concluded that each event had been properly classified, based on a review of the following types of information: LaSalle Station's Emergency Action Levels; Licensee Event Reports (LERs); and Shift Engineer's Logs.

GSEP ACTIVATIONS

January 22 - December 31, 1985

<u>Date</u>	<u>Declaration Time</u>	<u>Emergency Class</u>	<u>State Agencies<sup>1</sup> Initially Notified</u>	<u>NRC<sup>2</sup> Initially Notified</u>
2/2/85	1115	Unusual Event	1116	1120
2/8/85	1205	Unusual Event	1214	1220
2/15/85	1030	Unusual Event	1036	1035
2/15/85	1240	Unusual Event	1245	1240
2/17/85	0845	Unusual Event	0845	0900
2/26/85	0925	Unusual Event	0930	0932
3/21/85	1330	Unusual Event	1342	1335
4/17/85	1940	Alert	1950	1945
5/31/85	2225	Unusual Event	2225	2225
6/29/85	0826	Unusual Event	0829	0829
8/22/85	2300	Unusual Event	2305	2303
9/27/85	1800	Unusual Event	1810	1816
10/16/85	0645	Unusual Event	0650	0657
12/25/85	0050	Unusual Event	0050	0110

<sup>1</sup>Times listed are the later of the times in licensee and IESDA records.

<sup>2</sup>Times listed are the later of the times in licensee and NRC records.

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

4. Emergency Detection and Classification (82201)

The inspectors reviewed the Generating Stations Emergency Plan (GSEP), LaSalle Annex to the GSEP, Emergency Plan Implementing (LZP-series) Procedures, and other relevant procedures. Walkthroughs were conducted with three Shift Engineers (SEs), two Station Control Room Engineers (SCREs), one Shift Foreman (SF), and one Station Director. These personnel were asked a series of questions relating to the GSEP, and were presented with a scenario in order to ascertain whether they could properly detect and classify an emergency; perform the required offsite notifications; and make appropriate onsite and offsite protective action decisions. As Acting Station Director, the SE was responsible for emergency classification decisions; however, should the SE become incapacitated, the SF and then the SCRE would be in the line of succession to the SE. During the walkthrough scenarios, all personnel demonstrated the capability to detect and correctly classify emergency situations.

During the previous routine inspection (Reports No. 50-373/85002(DRSS) and 50-374/85002(DRSS)), the inspectors recommended that the Station's Emergency Action Levels (EALs) not be needlessly duplicated in Procedures LZP 1200-1 (Classification of GSEP Conditions) and LZP 1310-1 (Notifications). The inspectors determined that LZP 1310-1 had been revised to delete the Station's EALs. Thus, the EALs were only found in the LaSalle Annex to the GSEP and in LZP 1200-1.

The inspectors determined that the licensee was in the final stages of revising the Station's EALs as part of a Task Force effort to improve the EALs for all its nuclear generating stations. The licensee anticipated that the revised LaSalle Station EALs would be issued soon after the April 1986 exercise. The inspectors reviewed the current EALs and noted that the General Emergency EAL for Condition No. 15 (Loss of Fission Product Barriers) had been revised to indicate that 2000 R/hour activity in containment and loss of two of three barriers with an imminent loss of the third barrier were both required in order to classify the situation as a General Emergency. The inspectors determined that the latest available draft of the revised EALs had corrected this particular EAL so that a General Emergency would be classified if either 2000 R/hour activity were in containment or if two barriers had been lost and loss of the third was imminent.

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

5. Protective Action Decisionmaking (82202)

As Acting Station Director, the SE has been given the authority and responsibility for issuing offsite protective action recommendations until properly relieved. All SEs, SCREs, the SF, and the Station Director interviewed during this inspection were aware of this responsibility and of the requirement to issue an offsite recommendation within about 15 minutes following any General Emergency declaration. During the walkthroughs, all Acting Station Directors and the Station Director demonstrated the capabilities to make correct onsite protective

action decisions, and to formulate acceptable offsite recommendations using the procedural guidance found in LZP 1200-5, GSEP Guidelines for Recommended Offsite Protective Actions and in LZP 1110-1, Station Director Implementing Procedure. This procedural guidance was the same as that found in the generic GSEP and conformed to current NRC guidance. However, LZP 1200-5 did not adequately refer to offsite evacuation time estimate data found in Table LA6-1 and Figure LA6-5 of Revision 3 to the LaSalle Annex. During the walkthroughs, several persons, including the Station Director, exhibited some difficulty in locating these evacuation time estimate data. In addition, several persons exhibited difficulty reading the flow chart titled "Recommended Protective Actions - General Emergency" which was found, in reduced scale, in LZP 1110-1 and LZP 1200-5 and was also posted in the Technical Support Center (TSC). Full scale copies of this flow chart were found in the generic GSEP.

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

- Procedure LZP 1200-5 should either contain the evacuation time estimate data found in the LaSalle Annex to the GSEP, or provide an explicit location in the Annex where it may be found.
- Legible copies of the "Recommended Protective Actions - General Emergency" flowchart should be available in LZP 1110-1 and LZP 1200-5, and should also be posted in the TSC.

#### 6. Notifications and Communications (82203)

The licensee's provisions for notifying appropriate offsite organizations of emergency plan activations at the LaSalle Station have been described in Section 6.0 of the GSEP, the LaSalle Annex, and in Procedures LZP 1110-1 and 1310-1. Notifications have been accomplished using the NARS system which links the Control Room, Technical Support Center (TSC), and Emergency Operations Facility (EOF), with the Illinois Emergency Services and Disaster Agency and the Illinois Department of Nuclear Safety. In the event of a General Emergency, the NARS can also be used to directly reach county officials. Should NARS become inoperable, backup commercial telephone numbers for normal and off-hours have been provided for government agencies in the GSEP Telephone Directory, LZP 1310-1, and LZP 1700-1. The inspectors determined that the NARS and other dedicated communications equipment had been installed in the onsite emergency response facilities and the EOF as described in the GSEP and LaSalle Annex. Adequate copies of the NARS Form used to document initial notifications to State agencies were readily available in the Control Room, TSC, and EOF. The inspector reviewed all communications drill records for 1985 and determined that all required communications tests had been conducted and adequately documented.

The licensee's commitment regarding content and frequency of periodic followup messages to appropriate State and local authorities was contained in Section 6.1 of the GSEP. Message content was in conformance with Criterion E.4 of NUREG 0654, Revision 1. In Revision 5 to the GSEP, which

became effective during November 1985, the licensee stated that periodic followup messages would be transmitted at least hourly. Followup message frequency had not been specified in the previous GSEP revision. During walkthroughs with SEs, SCREs, and a Station Director, some individuals were unaware of the commitment to transmit followup messages at least hourly. The inspectors determined that the GSEP Coordinator was in the process of revising LZP 1110-1 (Station Director Implementing Procedure) and LZP 1130-1 (Technical Director Implementing Procedure) to provide more detailed guidance regarding the frequency, formulation, approval, transmittal, and documentation of periodic followup messages to State and local officials. These procedure revisions were expected to be ready for implementation by the April 1986 exercise.

Procedural guidance regarding the notification requirements of 10 CFR 50.72 was contained in Procedure LZP 1310-1, Notifications. The inspectors toured the Control Room and determined that a copy of the NRC Duty Officer's Event Notification Worksheet, transmitted to power reactor licensees via IE Information Notice No. 85-78, was displayed in the immediate vicinity of the Emergency Notification System (ENS) telephone. Conspicuous display of this worksheet was intended to assist Control Room personnel in anticipating the information needs of the NRC following a notification call per the requirements of 10 CFR 50.72. Based on walkthroughs and a review of SE's Logs maintained during actual emergency plan activations, the inspectors concluded that Control Room documentation of calls to the NRC Duty Officer mainly consisted of an entry in the SE's Log indicating when the NRC Operations Center had been called and who was the person contacted.

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

7. Changes to the Emergency Preparedness Program (82204)

The licensee's provisions for preparing, reviewing, and distributing new or revised Emergency Plan Implementing Procedures (LZP-series) remained unchanged from the last two routine inspections and were described in the Station's administrative procedures. The Training Supervisor remained a mandatory member of the review group to better ensure that the Training Department would remain aware of any new or revised procedures which could impact the Station's emergency preparedness training program.

By correspondence dated November 1985, the NRC received Revision 5 to the generic GSEP. This document is being reviewed by Regional staff. The licensee indicated that the next revision to the LaSalle Annex to the GSEP was expected to be issued during the first quarter of 1986. This annex revision would not, however, include the Station's revised EALs which were expected to be issued soon after the April 1986 exercise. The licensee also indicated that plant management was considering a relocation of the Operational Support Center (OSC) to a conference room near the TSC. A

final decision on this possible relocation was expected prior to the 1986 exercise. The licensee agreed to keep the staff informed of its decision regarding the possible OSC relocation.

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

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 meet 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, LZP 1110-1, and in LZP 1320-1. Section 4.4 of Revision 5 to the GSEP and Attachment E to LZP 1110-1, Station Director Implementing Procedure, specified the minimum staffing requirements in order for the Corporate Command Center (CCC), TSC, or Emergency Operations Facility (EOF) to assume command and control of emergency response activities. Section 4.2 of Revision 5 to GSEP and LZP 1320-1, Augmentation of Plant Staffing, also indicated that all Station Group Directors, except the OSC Director, were required to report to the TSC following any Alert declaration.

Section 8.5 of the generic GSEP stated that names and telephone numbers of persons in the GSEP organization shall be reviewed and updated quarterly, which the inspectors interpreted to mean every 90 days plus a grace period of 25 percent (23 days). The current Revision 15 to LZP 1320-1, which contained the aforementioned information for the onsite emergency organization, was dated September 27, 1985. Beginning with Revision 13 to this procedure, the inspectors determined that revisions to LZP 1320-1 had typically been dated 105 to 110 days after the previous revision; however Revision 15 was dated about 145 days after the previous revision. The dates of Revisions 12-15 were September 28, 1984; January 17, 1985; May 4, 1985; and September 27, 1985. At the exit interview the licensee committed to issue Revision 16 to LZP 1320-1 prior to the end of the 25 percent grace period, which would be January 19, 1986. The licensee also indicated that administrative measures would be decided upon and promptly implemented to better ensure that future revisions to this procedure would be issued in a timely manner, per the GSEP requirement. Failure to issue Revision 15 to LZP 1320-1 within a quarter plus a 25 percent grace period from the issuance of Revision 14 constitutes a Severity Level V violation of NRC requirements (Supplement VIII). However, in view of the licensee's commitment to promptly initiate corrective measures, no written response is necessary.

The licensee has conducted semi-annual, off-hours augmentation drills to demonstrate the capability to adequately augment on shift personnel following an emergency declaration. The inspectors reviewed the records of the semiannual drills conducted during 1985 and concluded that both were successful and had been adequately documented. However, the inspectors noted that after both drills the GSEP Coordinator had to provide several dedicated callers with the current revision to LZP 1320-1, as such persons had not used the current revision during the call drills. The inspectors also learned that two of four persons listed in Revision 15 to LZP 1320-1

for the Maintenance Director position had recently been assigned to other company positions not located at the LaSalle Station. Based on discussions with the Training Department staff and the GSEP Coordinator, the inspectors were assured that the next revision to LZP 1320-1 would delete both persons from the Maintenance Director roster and that two replacements were already scheduled to complete all position training requirements later in January 1986. However, the inspectors concluded that there was no formal administrative mechanism in existence for ensuring that persons responsible for calling members of the onsite emergency organization would be informed of additions or deletions to the persons identified in LZP 1320-1 between quarterly updates of this procedure. The inspectors determined that all other director positions in the onsite emergency organization had at least three persons fully trained and still assigned to the LaSalle Station.

The licensee must implement administrative measures to better ensure that dedicated GSEP callers are provided with the current revision to LZP 1320-1 when it becomes effective, and that GSEP callers and other key members of the onsite emergency organizations are promptly informed of changes to the personnel listings in LZP 1320-1 that may occur between quarterly procedure revisions. This is an Open Item. (50-373/86002-01 and 50-374/86002-01)

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

The inspectors examined lesson plans, tests, required reading packages, and individuals' training records related to 1985 emergency preparedness training given to members of the onsite emergency organization. Revision 1 to Training Department document TP-GSEP listed annual procedure (LZP-series) training requirements for each director position in the TSC, plus GSEP communicators, emergency medical team members, fire brigade personnel, onsite and offsite radiation monitoring teams, and dedicated GSEP callers. The basic annual training program consisted of required reading of relevant LZP-series procedures; a classroom training session based on these procedures and lesson plans supplied in final draft form by the licensee's Production Training Center (PTC); and a lecture on the overall GSEP. In 1985, the Training Department also began giving written examinations based on relevant LZP-series procedures and PTC lesson plans to all persons assigned to director positions in the TSC. Based on training records checks and discussions with Training Department staff, the inspectors determined that this annual training effort had been completed during the period June - early October, 1985.

In addition to this annual training effort, the Training Department has continued issuing LZP Change Summary Memoranda, roughly about one month after the end of each calendar quarter, to the following members of the onsite emergency organization: TSC directors, communicators, Radiation Chemistry Technicians (through their Training Coordinator), accident assessment personnel, and GSEP callers. These memoranda listed new or revised LZPs for the previous quarter and summarized the associated changes. Persons receiving these memoranda were required to read the documents and return a signed training completion form. The Training Department Supervisor would initiate corrective action when informed of someone's failure to return a completion form by the due date. Based on

training records checks, the inspectors concluded that this training mechanism had been successfully employed during 1985 and that the training staff was monitoring the training completion status for the most recently issued memorandum.

The inspectors reviewed the 1985 emergency preparedness training program for SEs, SCREs, Shift Foremen, and Nuclear Station Operators (NSOs). All persons in the line of succession to the SE received the same training on Acting Station Director responsibilities as was given the SEs. Annual training, which was completed by the fourth quarter of 1985, consisted of required reading on relevant LZP-series procedures; a lecture developed from PTC lesson plans addressing the overall GSEP, emergency response facilities, Station Director duties, OSC Director duties, the Safety Parameter Display System, the Point History Program, and Station Group support personnel; and a written examination. In addition to this training effort, emergency preparedness items were included during four of the six training shifts for each crew during 1985. Topics covered during training shift included emergency detection and classification, offsite notifications, protective action decisionmaking, and radioactive release rate determination methods. Licensed personnel were also given periodic required reading packages, at least one of which included emergency preparedness related items.

In addition to records reviews, the inspectors conducted walkthroughs with emergency organization personnel other than those mentioned earlier in this report. The inspectors interviewed two Technical Directors, an Operations Director, three OSC Directors, two Rad/Chem Directors, and two communicators. All personnel exhibited an adequate knowledge of their emergency responsibilities.

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

10. Licensee Audits (82210)

The inspectors reviewed the records of Quality Assurance (QA) Department audits and surveillances of the Station's emergency preparedness program conducted during 1985. All records were complete, readily available, and indicated that QA staff had adequately tracked corrective actions taken on negative findings. Onsite Audit QAA 01-85-19 and Offsite Audit 01-85-II were adequate in scope and depth regarding the requirements of 10 CFR 50.54(t). The QA Supervisor indicated that emergency preparedness topics had been included in two other 1985 audits, namely a hazardous materials audit and a security audit. However, the inspectors noted that references to emergency preparedness in these audits were quite basic, addressing whether or not an emergency plan or certain letters of agreement were existent. The method by which representatives of offsite support agencies could be informed of audit findings addressing the adequacy of the Station's interface with offsite groups was discussed at the 1985 annual meeting with offsite agency representatives.

Three surveillances of the emergency preparedness program were performed during 1985, the most recent being the observation of various activities during the July exercise. One of the other two surveillances addressed the cleanliness of a decontamination facility. This surveillance was credited as both a Health Physics and an Emergency Preparedness surveillance. The other 1985 surveillance involved the observation of a fire drill which included the participation of a local fire department. The licensee indicated that the next emergency preparedness surveillance would occur when QA staff would attend a January 1986 exercise scenario development meeting.

The inspectors discussed QA Department guidance regarding emergency preparedness surveillance requirements with the QA Supervisor. The Standard QA Surveillance Schedule indicated that at least one such surveillance was required annually. The only formal guidance regarding subject matter for emergency preparedness surveillances was contained in QA Surveillance Checklist OP-40, which addressed only observation of an exercise scenario development meeting. The inspectors expressed concern regarding what types of meaningful findings could result from an auditor's attending a scenario development meeting which could lead to improving the emergency preparedness program or verifying the adequacy of the program. The QA Supervisor indicated that more than the minimum number of emergency preparedness surveillances would be conducted during 1986. However, 1986 surveillance topics and frequency had apparently not yet been finalized. The licensee's QA Department must develop and implement additional guidance regarding appropriate subject matter for surveillances of a Station's emergency preparedness program, other than that contained in checklist OP-40. This is an Open Item (50-373/86002-02 and 50-374/86002-02).

In addition, the following item should be considered for improvement:

- The Quality Assurance Department's surveillance schedule should be modified to indicate that more than one emergency preparedness surveillance must be conducted annually. Surveillances should be scheduled periodically throughout an annual period.

#### 11. Maintaining Emergency Preparedness

The inspectors reviewed the GSEP Coordinator's records of the following types of drills: annual assembly/accountability; annual environs; annual medical; semi-annual Health Physics drills, which included collection and analyses of samples using the High Range Sampling System; semi-annual off-hours augmentation; and periodic communications drills. Drill and annual exercise records were complete and indicated that all had been conducted and critiqued per regulatory requirements and the GSEP commitments. Drills had been conducted independent of the annual exercise. The assembly/accountability drill was conducted on a weekday and had involved about 880 persons. The GSEP Coordinator made a presentation about site access requirements during the training provided offsite support agency personnel in association with the annual medical drill. Corrective actions on items identified during the licensee's drill or exercise critiques were initially decided upon by the GSEP Coordinator and the Rad/Chem Supervisor. Relatively minor corrective actions or those to be

acted upon by corporate staff were so annotated directly on the drill records. More substantial onsite corrective actions were tracked using the Station's Action Item Record (AIR) system. References to initiated AIR forms were also found on the drill records. The GSEP Coordinator also noted on appropriate drill records when no corrective actions had been deemed necessary.

In September 1985, the annual meeting was held at the Mazon EOF with representatives of offsite support organizations for the Dresden, LaSalle County, and Braidwood Stations. The agenda included an overview of the GSEP, including the onsite and corporate emergency response organizations; the licensee's response actions associated with emergency classification; emergency class definitions and example Emergency Action Levels (EALs); offsite protective action decisionmaking; emergency communications systems; the Stations' fire protection and security programs; and the licensee's Quality Assurance program, including the method by which offsite agency representatives can obtain relevant audit results. Attendance lists were available for these annual meetings in addition to agendas and more detailed notes for some of the presentations. In November 1985 the licensee's corporate staff informed the inspector that no 1985 annual media briefing had taken place for those media who would normally be invited to attend this presentation for the LaSalle County Station. Failure to conduct this briefing is contrary to 10 CFR 50.54(q) as implemented by Section 8.2 of the generic GSEP. The previous media briefing for the Station had taken place shortly before the October 1984 exercise, and the next briefing was scheduled to take place several days prior to the April 1986 exercise, thus no briefing was conducted at LaSalle during 1985. However, 1985 briefings were held at Dresden in April and Braidwood in November. Although a letter from the State of Illinois indicated that "virtually the same" representatives would have been invited to LaSalle as were invited to Braidwood and Dresden, the licensee could not document whether all individuals on the LaSalle list were included at Dresden or Braidwood. The licensee had been relying on the State of Illinois to conduct these briefings in the past. The licensee representative indicated that to correct this problem in the future, the licensee would be conducting these briefings. Since this violation was identified by the licensee, would have been a Severity Level V, was reported by the licensee, will be corrected with the April training, and no previous similar violations have been issued; all of the conditions in 10 CFR Part 2, Appendix C, Section V.A have been met for self-identified violations and no notice of violation will be issued.

The inspector reviewed the following inventory procedures and associated records for 1985: LZP 1550-1, First Aid Facility Monthly Surveillance; LZP 1550-2, Environs Sampling Supplies Inventory; LZP 1550-3, Decontamination Facilities Monthly Surveillance; LZP 1550-4, Hospital Health Physics Supplies Quarterly Surveillance; and LZP 1550-5, TSC Quarterly Surveillance. All 1985 inventories had been completed and adequately documented. The inspector examined the TSC's emergency equipment lockers and one environs team kit and determined that all supplies were in place as indicated on the most recent inventory forms. The inspector also determined that survey instruments in the environs kit

had current calibration stickers. However, the inspector noted that a check source was stored about one foot from the kit's low range dosimeters and TLDs, although further check source separation was easily possible.

During evaluation of records associated with actual emergency plan activations, the inspectors determined that the GSEP Coordinator had completed an "Actual GSEP Events Review Checklist," per the requirement of LZP 1530-1 prior to November 1985, and LZP 1540-1 subsequent to that time. Deletion of LZP 1530-1 and creation of LZP 1540-1 resulted in some modification and improvement to the evaluation checklist. Based on discussions with the GSEP Coordinator and the Training Department Supervisor, the inspectors determined that both had discussed the various completed checklists during the year and that the latter could choose to discuss problems identified on the checklists during subsequent licensed operator training sessions. The Training Supervisor would, however, assume that the GSEP Coordinator's evaluations had been properly done.

The inspectors noted that the coordinator always signed the 1985 checklists as both preparer and reviewer, while a member of the Training Department signed as another reviewer. The inspectors' review of completed 1985 checklists indicated that some of the earlier checklists had not been properly completed, as evidenced by the fact that several NARS forms were incomplete, yet the associated checklists had indicated no problems had been identified during the coordinator's review. Also, the completed checklist for the April 1985 Alert led the inspectors to conclude that both the TSC and OSC had been fully operational. However, TSC records were scanty, OSC records were not included, and there were no indications in the SE's Log that the TSC's Station Director had ever relieved the SE of Station Director responsibilities. Based on discussions with several key individuals involved in this event, the inspectors concluded that the brief Alert had been terminated prior to any transfer of emergency responsibilities from Control Room to TSC staff. The inspectors noted that the revised checklist had deleted an item which required the coordinator to indicate whether a correct classification decision had been made. While some checklist items appropriately required an entry to indicate when an action had taken place, these items did not always also require an entry to indicate whether the timeliness of these actions satisfied regulatory requirements. The checklist also did not contain provisions for indicating whether any corrective actions were initiated or completed as a result of the evaluation.

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

- Check sources kept in environs team kits should be separated as much as possible from low range dosimetry and TLDs also stored in these kits.

- Someone having emergency preparedness expertise besides the GSEP Coordinator should review and approve completed "Actual GSEP Events Review Checklists" prior to their being forwarded to the Training Department for possible discussion in licensed operator training sessions.
- The "Actual GSEP Events Review Checklist" should include the following: an item requiring the evaluator to decide whether the event classification was appropriate; an item to indicate whether any corrective actions were initiated and completed as a result of the evaluation; and wherever appropriate, items should indicate both the times that actions were taken and whether the actions were timely versus regulatory requirements and guidance.

## 12. Exit Interview

The inspectors met with those licensee representatives denoted in Paragraph 1 at the conclusion of the inspection to present and discuss their preliminary findings. The licensee committed to issue the next revision to LZP 1320-1 on or before January 19, 1986. The licensee also agreed to inform regional staff of its decision regarding the possible relocation of the Operational Support Center. The licensee agreed to consider the items discussed and indicated that none of the information was proprietary in nature.