

TABLE OF CONTENTS (Cont'd)

Section 5 Design Features

5.1	Site	5.1-1
5.2	Containment	5.2-1
5.3	Auxiliary Equipment	5.3-1

Section 6 Administrative Controls

6.1	Responsibility	6-1
6.2	Organization	6-1
6.3	(Deleted)	6-2a
6.4	Training	6-3
6.5	Review and Audit	6-3
6.6	Reportable Event Action	6-9
6.7	Safety Limit Violation	6-9
6.8	Procedures	6-10
6.9	Reporting Requirements	6-10
6.10	Record Retention	6-14
6.11	Radiation Protection Program	6-15
6.12	(Deleted)	6-15
6.13	High Radiation Area	6-15
6.14	Environmental Qualification	6-16*
6.15	Integrity of Systems Outside Containment	6-16
6.16	Iodine Monitoring	6-16
6.17	Post Accident Sampling	6-17
6.18	Process Control Plan	6-17
6.19	Offsite Dose Calculation Manual	6-17
6.20	Major Changes to Radioactive Waste Treatment Systems	6-18

*Issued by NRC Order dated 10-24-80

ADMINISTRATIVE CONTROLS

6.1 RESPONSIBILITY

6.1.1 The Vice President & Director Oyster Creek shall be responsible for overall facility operation. Those responsibilities delegated to the Vice President & Director as stated in the Oyster Creek Technical Specifications may also be fulfilled by the Deputy Director. The Vice President & Director shall delegate in writing the succession to this responsibility during his and/or the Deputy Directors absence.

6.2 ORGANIZATION

6.2.1 Corporate

6.2.1.1 An onsite and offsite organization shall be established for unit operation and corporate management. The onsite and offsite organization shall include the positions for activities affecting the safety of the nuclear power plant.

6.2.1.2 Lines of authority, responsibility and communication shall be established and defined from the highest management levels through intermediate levels to and including operating organization positions. These relationships shall be documented and updated as appropriate, in the form of organizational charts. These organizational charts will be documented in the Updated FSAR and updated in accordance with 10 CFR 50.71e.

6.2.1.3 There shall be an individual executive position having corporate responsibility for measures needed to ensure acceptable performance of the staff in operating, maintaining, and providing technical support in the plant so that continued nuclear safety is assured.

6.2.2 FACILITY STAFF

6.2.2.1 There shall be an individual management position in the onsite organization having responsibility for overall unit operation and shall have control over those resources necessary for safe operation and maintenance of the plant.

6.2.2.2 The facility organization shall meet the following:

- a. Each on duty shift shall include at least the following shift staffing:
 - ° One (1) group shift supervisor
 - ° Two (2) control room operators
 - ° Three (3) equipment operators - one may be a Radwaste Operator
- b. At all times when there is fuel in the vessel, at least one licensed senior reactor operator shall be on site and one licensed reactor operator should be at the controls.
- c. At all times when there is fuel in the vessel, except when the reactor is in COLD SHUTDOWN or REFUEL modes, two licensed senior reactor operators and two licensed reactor operators shall be on site, with at least one licensed senior reactor operator in the control room and one licensed reactor operator at the controls.

- d. At least two licensed reactor operators shall be in the control room during all reactor startups, shutdowns, and other periods involving planned control rod manipulations.
- e. All CORE ALTERATIONS shall be directly supervised by either a licensed Senior Reactor Operator or Senior Reactor Operator Limited to Fuel Handling who has no other concurrent responsibilities during this operation.
- f. An individual qualified in radiation protection measures shall be on site when fuel is in the reactor.
- g. A Fire Brigade of at least 5 members shall be maintained onsite at all times. The Fire Brigade shall not include the minimum shift crew necessary for safe shutdown of the facility or any personnel required for other essential functions during a fire emergency.
- h. Each on duty shift shall include a Shift Technical Advisor except that the Shift Technical Advisors position need not be filled if the reactor is in the refuel or shutdown mode and the reactor is less than 212°F.
- i. Administrative procedures shall be developed and implemented to limit the working hours of unit staff who perform safety-related functions.

In the event that unforeseen problems require substantial amounts of overtime to be used or during extended periods of shutdown for refueling, major maintenance or major plant modifications, on a temporary basis, the following guidelines shall be followed:

- a. An individual should not be permitted to work more than 16 hours straight, excluding shift turnover time.
- b. An individual should not be permitted to work more than 16 hours in any 24-hour period, nor more than 24 hours in any 48-hour period, nor more than 72 hours in any seven day period, all excluding shift turnover time.
- c. A break of at least eight hours should be allowed between work periods, including shift turnover time.
- d. In a, b, and c above, the time required to complete shift turnover is to be counted as break time and is not to be counted as work time.
- e. Except during extended shutdown periods, the use of overtime should be considered on an individual basis and not for the entire staff on a shift.

Any deviation from the above guidelines shall be authorized by the Department Managers, or higher levels of management, in accordance with established procedures and with documentation of the basis for granting the deviation.

- j. The Manager Plant Operations and the Group Shift Supervisor require Senior Reactor Operators licenses. The Control Room Operators require a Reactor Operators license.

6.2.2.3 Individuals who train the operating staff and those who carry out the health physics and quality assurance function shall have sufficient organizational freedom to be independent from operating pressures, however, they may report to the appropriate manager on site.

6.3 Deleted

6.4 TRAINING

6.4.1 A retraining program for operators shall be maintained and shall meet the requirements of 10CFR Part 55. Replacement training programs for licensed operators shall meet the requirements of 10CFR Part 55.

6.4.2 A training program for the Fire Brigade shall be maintained.

6.5 REVIEW AND AUDIT

6.5.1 TECHNICAL REVIEW AND CONTROL

The Vice President of each division within GPU Nuclear Corporation shall be responsible for ensuring the preparation, review, and approval of documents required by the activities described in 6.5.1.1 through 6.5.1.5 within his functional area of responsibility as assigned in the GPUN Review and Approval Matrix. Implementing approvals shall be performed at the cognizant manager level or above.

ACTIVITIES

6.5.1.1 Each procedure required by Technical Specification 6.8 and other procedures including those for tests and experiments which are important to a safety, and changes thereto which are important to safety, shall be prepared by a designated individual(s)/group knowledgeable in the area affected by the procedure. Each such procedure, and change thereto, shall be reviewed for adequacy by an individual(s)/group other than the preparer, but who may be from the same division as the individual who prepared the procedure or change.

6.5.1.2 Proposed changes to the Appendix "A" Technical Specifications shall be reviewed by a knowledgeable individual(s)/group other than the individual(s)/group who prepared the change.

6.5.1.3 Proposed modifications to facility structures, systems and components important to safety shall be designed by an individual/organization knowledgeable in the areas affected by the proposed modification. Each such modification shall be reviewed by an individual/group other than the individual/group which designed the modification but may be from the same division as the individual who designed the modification.

6.5.1.4 Proposed tests and experiments that are important to safety shall be reviewed by a knowledgeable individual(s)/group other than the preparer but who may be from the same division as the individual who prepared the tests and experiments.

6.5.1.5 Investigation of all violations of the Technical Specifications including the preparation and forwarding of reports covering evaluation and recommendations to prevent recurrence, shall be reviewed by a knowledgeable individual(s)/group other than the individual/group which performed the investigation.

6.5.1.6 Events requiring 24-hour written notification to the Commission shall be reviewed by an individual/group other than the individual/group which prepared the report.

6.5.1.7 Special reviews, investigations or analyses and reports thereon as requested by the Vice President & Director Oyster Creek shall be performed by a knowledgeable individual(s)/group.

6.5.1.8 The Security Plan and implementing procedures shall be reviewed by a knowledgeable individual(s)/group other than the individual(s)/group which prepared them.

6.5.1.9 The Emergency Plan and implementing procedures shall be reviewed by a knowledgeable individual(s)/group other than the individual(s)/group which prepared them.

6.5.1.10 Review of every unplanned onsite release of radioactive material to the environs including the preparation and forwarding of reports covering evaluation shall be performed by a knowledgeable individual(s)/group. Recommendations and disposition of the corrective action to prevent recurrence shall be sent to the Vice President & Director Oyster Creek.

6.5.1.11 Major changes to radwaste systems shall be reviewed by a knowledgeable individual(s)/group other than the individual(s)/group which prepared them.

6.5.1.12 Individuals responsible for reviews performed in accordance with 6.5.1.1 through 6.5.1.4 shall include a determination of whether or not additional cross-disciplinary review is necessary. If deemed necessary, such review shall be performed by the appropriate personnel. Individuals responsible for reviews considered under 6.5.1.1 through 6.5.1.5 shall render determinations in writing with regard to whether or not 6.5.1.1 through 6.5.1.5 constitute an unreviewed safety question.

RECORDS

6.5.1.13 Written records of activities performed under specifications 6.5.1.1 through 6.5.1.11 shall be maintained.

QUALIFICATIONS

6.5.1.14 Responsible Technical Reviewers shall meet or exceed the qualifications of ANSI N18.1-1978 Section 4.6 or 4.4 for applicable disciplines or have 7 years of appropriate experience in the field of his specialty. Credit towards experience will be given for advanced degrees on a one for one basis up to a maximum of two years. These Reviewers shall be designated in writing.

6.5.2 INDEPENDENT SAFETY REVIEW

FUNCTION

6.5.2.1 The Vice President of each division within GPU Nuclear Corporation shall be responsible for ensuring the periodic independent safety review of the subjects described in 6.5.2.5 within his assigned area of safety review responsibility, as assigned in the GPUN Review and Approval Matrix.

6.5.2.2 Independent safety review shall be completed by an individual/group not having direct responsibility for the performance of the activities under review, but who may be from the same functionally cognizant organization as the individual/group performing the original work.

6.5.2.3 GPU Nuclear Corporation shall collectively have or have access to the experience and competence required to independently review subjects in the following areas:

- a. Nuclear power plant operations
- b. Nuclear engineering
- c. Chemistry and radiochemistry
- d. Metallurgy
- e. Nondestructive testing
- f. Instrumentation and control
- g. Radiological safety
- h. Mechanical engineering
- i. Electrical engineering
- j. Administrative controls and quality assurance practices
- k. Emergency plans and related organization, procedures and equipment
- l. Other appropriate fields associated with the unique characteristics of Oyster Creek

6.5.2.4 Consultants may be utilized as determined by the cognizant Vice President to provide expert advice.

RESPONSIBILITIES

6.5.2.5 The following subjects shall be independently reviewed by the functionally assigned divisions:

- a. Written safety evaluations of changes in the facility as described in the Safety Analysis Report, of changes in procedures as described in the Safety Analysis Report, and of tests or experiments not described in the Safety Analysis Report, which are completed without prior NRC approval under the provisions of 10CFR 50.59(a)(1). This review is to verify that such changes, tests or experiments did not involve a change in the Technical Specifications or an unreviewed safety question as defined in 10CFR 50.59(a)(2). Such reviews need not be performed prior to implementation.
- b. Proposed changes in procedures, proposed changes in the facility, or proposed tests or experiments, any of which involves a change in the Technical Specifications or an unreviewed safety question as defined in 10CFR 50.59(c). Matters of this kind shall be reviewed prior to submittal to the NRC.
- c. Proposed changes to Technical Specifications or license amendments related to nuclear safety shall be reviewed prior to submittal to the NRC for approval.
- d. Violations, deviations, and reportable events which require reporting to the NRC in writing. Such reviews are performed after the fact. Review of events covered under this subsection shall include results of any investigations made and the recommendations resulting from such investigations to prevent or reduce the probability of recurrence of the event.
- e. Written summaries of audit reports in the areas specified in section 6.5.3 and involving safety related functions.
- f. Any other matters involving safe operation of the nuclear power plant which a reviewer deems appropriate for consideration, or which is referred to the independent reviewers.

QUALIFICATIONS

6.5.2.6 The independent reviewer(s) shall either have a Bachelor's Degree in Engineering or the Physical Sciences and five (5) years of professional level experience in the area being reviewed or have 9 years of appropriate experience in the field of his specialty. An individual performing reviews may possess competence in more than one specialty area. Credit toward experience will be given for advanced degrees on a one-for-one basis up to a maximum of two years.

RECORDS

6.5.2.7 Reports of reviews encompassed in Section 6.5.2.5 shall be prepared, maintained and transmitted to the cognizant division Vice President.

6.5.3 AUDITS

6.5.3.1 Audits of facility activities shall be performed under the cognizance of the Vice President - responsible for Quality Assurance. These audits shall encompass:

- a. The conformance of facility operations to provisions contained within the Technical Specifications and applicable license conditions at least once per 12 months.
- b. The performance, training and qualifications of the facility staff at least once per 12 months.
- c. The results of actions taken to correct deficiencies occurring in facility equipment, structures, systems or method of operation that affect nuclear safety at least once per six months.
- d. The Facility Emergency Plan and implementing procedures at least once per 12 months.
- e. The Facility Security Plan and implementing procedures at least once per 12 months.
- f. The Fire Protection Plan and implementing procedures at least once per 24 months.
- g. The performance of activities required by the Operational Quality Assurance Plan to meet the criteria of Appendix 'B', 10CFR50, at least once per 24 months.
- h. The radiological environmental monitoring program and the results thereof at least once per 12 months.
- i. The OFFSITE DOSE CALCULATION MANUAL and implementing procedures at least once per 24 months.
- j. The PROCESS CONTROL PROGRAM and implementing procedures for radioactive wastes at least once per 24 months.
- k. Any other area of facility operation considered appropriate by the IOSRG or the Office of the President-GPUNC.

6.5.3.2 Audits of the following shall be performed under the cognizance of the Vice President - responsible for technical support:

- a. An independent fire protection and loss prevention program inspection and audit shall be performed annually utilizing either qualified off-site licensee personnel or an outside fire protection firm.
- b. An inspection and audit of the fire protection and loss prevention program, by an outside qualified fire consultant at intervals no greater than 3 years.

RECORDS

6.5.3.3 Audit reports encompassed by sections 6.5.3.1 and 6.5.3.2 shall be forwarded for action to the management positions responsible for the areas audited within 60 days after completion of the audit. Upper management shall be informed per the Operations Quality Assurance Plan.

6.5.4 INDEPENDENT ONSITE SAFETY REVIEW GROUP (IOSRG)

STRUCTURE

6.5.4.1 The IOSRG shall be a full-time group of engineers experienced in nuclear power plant engineering, operations and/or technology, independent of the facility staff, and located onsite.

ORGANIZATION

6.5.4.2

- a. The IOSRG shall consist of a manager and staff members who meet the qualifications of 6.5.4.5. Group expertise shall be multidisciplined.
- b. The IOSRG shall report to a Director level position in the assigned GPUN Division.

FUNCTION

6.5.4.3 The periodic review functions of the IOSRG shall include the following on a selective and overview basis:

- 1) Evaluation for technical adequacy and clarity of procedures important to the safe operation of the facility.
- 2) Evaluation of facility operations from a safety perspective.
- 3) Assessment of facility nuclear safety programs.
- 4) Assessment of the facility performance regarding conformance to requirements related to safety.
- 5) Any other matter involving safe operation of the nuclear power plant that the manager deems appropriate for consideration.

AUTHORITY

6.5.4.4 The IOSRG shall have access to the facility and facility records as necessary to perform its evaluations and assessments. Based on its reviews, the IOSRG shall provide recommendations to the management positions responsible for the areas reviewed.

QUALIFICATIONS

6.5.4.5 IOSRG engineers shall have either (1) a Bachelor's Degree in Engineering or appropriate Physical Science and three years of professional level experience in the nuclear power field which may include technical supporting functions or (2) eight years of appropriate experience in nuclear power plant operations and/or technology. Credit toward experience will be given for advance degrees on a one-to-one basis up to a maximum of two years.

RECORDS

6.5.4.6 Reports of evaluations and assessments encompassed in Section 6.5.4.3 shall be prepared, approved, and transmitted to the IOSRG division management and the management positions responsible for the areas reviewed.

6.6 REPORTABLE EVENT ACTION

6.6.1 The following actions shall be taken for REPORTABLE EVENTS:

- a. The Commission shall be notified and a report submitted pursuant to the requirements of Section 50.73 to 10 CFR Part 50; and
- b. Each REPORTABLE EVENT shall be reported to the cognizant manager and the cognizant division Vice President and the Vice President & Director Oyster Creek. The functionally cognizant division staff shall prepare a Licensee Event Report (LER) in accordance with the guidance outlined in 10 CFR 50.73(b). Copies of all such reports shall be submitted to the functionally cognizant division Vice President and the Vice President Director & Oyster Creek.

6.7 SAFETY LIMIT VIOLATION

6.7.1 The following actions shall be taken in the event a Safety Limit is violated:

- a. If any Safety Limit is exceeded, the reactor shall be shut down immediately until the Commission authorizes the resumption of operation.
- b. The Safety Limit violation shall be reported to the Commission and the Vice President and Director Oyster Creek.
- c. A Safety Limit Violation Report shall be prepared. The report shall be submitted to the Vice President and Director Oyster Creek. This report shall describe (1) applicable circumstances preceding the violation, (2) effects of the violation upon facility components systems or structures, (3) corrective action taken to prevent recurrence.
- d. The Safety Limit Violation Report shall be submitted to the Commission within 10 days of the violation.

6.8 PROCEDURES

6.8.1 Written procedures shall be established, implemented, and maintained that meet or exceed the requirements of the Nuclear Regulatory Commission's Regulatory Guide 1.33 (the applicable revision is identified in the GPU Nuclear Operational Quality Assurance Plan) and as provided in 6.8.2 and 6.8.3 below.

Written procedures shall be adopted and maintained to implement the:

Process Control Plan
Offsite Dose Calculation Manual

6.8.2 Each procedure and administrative policy of 6.8.1 above, and changes thereto, shall be reviewed as described in 6.5.1.1 and approved as described in 6.5.1 prior to implementation and periodically as specified in the Administrative Procedures.

6.8.3 Temporary changes to procedures 6.8.1 above may be made provided:

- a. The intent of the original procedure is not altered.
- b. The change is approved by two members of GPUNC Management Staff authorized under Section 6.5.1.12 and knowledgeable in the area affected by the procedure. For changes which may affect the operational status of facility systems or equipment, at least one of these individuals shall be a member of facility management or supervision holding a Senior Reactor Operator's License on the facility.
- c. The change is documented, subsequently reviewed and approved as described in 6.8.2 within 14 days of implementation.

6.9 REPORTING REQUIREMENTS

In addition to the applicable reporting requirements of 10 CFR, the following identified reports shall be submitted to the Administrator of the NRC Region I office unless otherwise noted.

6.9.1 ROUTINE REPORTS

- a. Startup Report. A summary report of plant startup and power escalation testing shall be submitted following (1) receipt of an operating license, (2) amendment to the license involving a planned increase in power level, (3) installation of fuel that has a different design or has been manufactured by a different fuel supplier, and (4) modifications that may have significantly altered the nuclear, thermal, or hydraulic performance of the plant. The report shall address each of the tests identified in the FSAR and shall in general include a description of the measured values of the operating conditions or characteristics obtained during the test program and a comparison of these values with design predictions and specifications. Any corrective actions that were required to obtain satisfactory operation shall also be described. Any additional specified details required in license conditions based on other commitments shall be included in this report.

Startup reports shall be submitted within (1) 90 days following completion of the startup test program, (2) 90 days following resumption or commencement of commercial power operation, or (3) 9 months following initial criticality, whichever is earliest. If the Startup Report does not cover all three events (i.e., initial criticality, completion of startup test program, and resumption or commencement of commercial power operation), supplementary reports shall be submitted at least every three months until all three events have been completed.

- b. Annual Exposure Data Report. Routine exposure data reports covering the operation of the facility during the previous calendar year shall be submitted prior to March 1 of each year. Reports shall contain a tabulation on an annual basis of the number of station, utility, and other personnel (including contractors) receiving exposures greater than 100 mrem/year and their associated man rem exposure according to work and job functions. (This tabulation supplements the requirements of 10 CFR 20.407), e.g., reactor operations and surveillance, inservice inspection, routine maintenance, special maintenance (describe maintenance), waste processing, and refueling. The dose assignment to various duty functions may be estimates based on pocket dosimeter, TLD, or film badge measurements. Small exposures totalling less than 20% of the individual total dose need not be accounted for. In the aggregate, at least 80% of the total whole body dose received from external sources shall be assigned to specific major work functions.
- c. Monthly Operating Report. Routine reports of operating statistics and shutdown experience shall be submitted on a monthly basis which will include a narrative of operating experience, to the U.S. Nuclear Regulatory Commission, with a copy to the Regional Office, no later than the 15th of each month following the calendar month covered by the report.
- d. Semiannual Radioactive Effluent Release Report: A report of radioactive materials released from the Station during the preceeding six months shall be submitted to the NRC within 60 days after January 1 and July 1 of each year. Each report shall include the following information:
 - (1) a summary by calendar quarter and by radionuclide of the quantities of radioactive liquid and gaseous effluents from the Station,
 - (2) a summary of radioactive solid waste shipped from the Station including:
 - (a) Physical description of the waste
 - (b) classification of the waste, per 10 CFR Part 61
 - (c) solidification agent (if solidified)
 - (d) total volume shipped
 - (e) total quantity of radioactive material shipped (curies)
 - (f) best knowledge of identify of principal radionuclides
 - (3) a description of any changes to the PCP or ODCM,

- (4) a summary of meteorological data collected during the year shall be included in the report submitted within 60 days after January 1 of each year. Alternatively, summary meteorological data may be retained by GPU Nuclear and made available to the NRC upon request.
- e. Annual Radiological Environmental Report: A report of radiological environmental surveillance activities during each year shall be submitted before May 1 of the following year. Each report shall include the following information required in Specification 4.16 for radiological environmental surveillance:
 - (1) a summary description of the radiological environmental monitoring program,
 - (2) a map and a table of distances and directions (compass azimuth) of locations of sampling stations from the reactor,
 - (3) results of analyses of samples and of radiation measurements, (In the event some results are not available, the reasons shall be explained in the report. In the event the missing results are obtained, they shall be reported to the NRC as soon as is reasonable.)
 - (4) deviation(s) from the environmental sampling schedule in Table 4.16.1.
 - (5) identification of environmental samples analyzed when instrumentation was not capable of meeting detection capability in Table 4.16.2.
 - (6) a summary of the results of the land use survey,
 - (7) a summary of the results of licensee participation in an NRC approved inter-laboratory crosscheck program for environmental samples.
 - (8) results of dose evaluations to demonstrate compliance with 40 CFR Part 190.10a.

Basis: 6.9.1.e:

An annual report of radiological environmental surveillance activities includes factual data summarizing results of activities required by the surveillance program. In order to aid interpretation of the data, GPUN may choose to submit analysis of trends and comparative non regional radiological environmental data. In addition, the licensee may choose to discuss previous radiological environmental data as well as the observed radiological environmental impacts of station operation (if any) on the environment.

6.9.2 REPORTABLE EVENTS

The submittal of Licensee Event Reports shall be accomplished in accordance with the requirements set forth in 10 CFR 50.73.

6.9.3 UNIQUE REPORTING REQUIREMENTS

Special reports shall be submitted to the appropriate NRC office within the time period specified for each report. These reports shall be submitted covering the activities identified below pursuant to the requirements of the applicable reference specification.

- a. Materials Radiation Surveillance Specimen Reports (4.3A)
- b. Integrated Primary Containment Leakage Tests (4.5)
- c. Results of required leak tests performed on sealed sources if the tests reveal the presence of 0.005 microcuries or more of removeable contamination.
- d. Inoperable Fire Protection Equipment (3.12)
- e. Core Spray Sparger Inservice Inspection (Table 4.3.1-9)

Prior to startup of each cycle, a special report presenting the results of the inservice inspection of the Core Spray Spargers during each refueling outage shall be submitted to the Commission for review.

- f. Liquid radwaste batch discharge exceeding Specification 3.6.B.1.
- g. Main condenser offgas discharge without treatment per Specification 3.6.D.1.
- h. Dose due to radioactive liquid effluent exceeding Specification 3.6.J.1.
- i. Air dose due to radioactive noble gas in gaseous effluent exceeding Specification 3.6.L.1.
- j. Air dose due to radiiodine and particulates exceeding Specification 3.6.M.1.
- k. Annual total dose due to radioactive effluents exceeding Specification 3.6.N.1.
- l. Records of results of analyses required by the Radiological Environmental Monitoring Program.
- m. Failures and challenges to Relief and Safety Valves

Failures and challenges to Relief and Safety Valve which do not constitute an LER will be the subject of a special report submitted to the Commission within 60 days of the occurrence. A challenge is defined as any automatic actuation (other than during surveillance or testing) of Safety or Relief Valves.

6.10 RECORD RETENTION

6.10.1 The following records shall be retained at least five years:

- a. Records and logs of facility operation covering time interval at each power level.
- b. Records and logs of principle maintenance activities, inspections, repair and replacement of principal items of equipment related to nuclear safety.
- c. All Licensee Event Reports.
- d. Records of surveillance activities, inspections and calibrations required by these technical specifications.
- e. Records of reactor tests and experiments.
- f. Records of changes made to operating procedures.
- g. Records of radioactive shipments
- h. Records of sealed source leak tests and results.
- i. Records of annual physical inventory of all source material of record.

6.10.2 The following records shall be retained for the duration of the Facility Operating Licensee:

- a. Record and drawing changes reflecting facility design modifications made to systems and equipment described in the Final Safety Analysis Report.
- b. Records of new and irradiated fuel inventory, fuel transfers and assembly burnup histories.
- c. Records of facility radiation and contamination surveys.
- d. Records of radiation exposure for all individuals entering radiation control areas.
- e. Records of gaseous and liquid radioactive material released to the environs.
- f. Records of transient or operational cycles for those facility components designed for a limited number of transients or cycles.
- g. Records of training and qualification for current members of the plant staff.
- h. Records of inservice inspections performed pursuant to these technical specifications.

- i. Records of reviews performed for changes made to procedures or equipment or reviews of tests and experiments pursuant to 10 CFR 50.59.
- j. Records of reviews by the Independent Onsite Safety Review Group.
- k. Records for Environmental Qualification which are covered under the provisions for paragraph 6.14.
- l. Records of the service lives of all snubbers, including the date at which the service life commences, and associated installation and maintenance records.
- m. Records of results of analyses required by the Radiological Environmental Monitoring Program.

6.10.3 Quality Assurance Records shall be retained as specified by the Quality Assurance Plan.

6.11 RADIATION PROTECTION PROGRAM

Procedures for personnel radiation protection shall be prepared consistent with the requirements of 10 CFR 20 and shall be approved, maintained and adhered to for all operations involving personnel radiation exposure.

6.12 (Deleted)

6.13 HIGH RADIATION AREA

6.13.1 In lieu of the "control device" or "alarm signal" required by paragraph 20.203(c)(2) of 10 CFR 20, each high radiation area in which the intensity of radiation is greater than 100 mrem/hr but less than 1000 mrem/hr shall be barricaded and conspicuously posted as a high radiation area and entrance thereto shall be controlled by requiring issuance of a Radiation Work Permit (RWP).

NOTE: Health Physics personnel shall be exempt from the RWP issuance requirement during the performance of their assigned radiation protection duties, provided they are following plant radiation protection procedures for entry into high radiation areas.

An individual or group of individuals permitted to enter such areas shall be provided with one or more of the following:

- a. A radiation monitoring device which continuously indicates the radiation dose rate in the area.
- b. A radiation monitoring device which continuously integrates the radiation dose rate in the area and alarms when a pre-set integrated dose is received. Entry into such areas with this monitoring device may be made after the dose rate levels in the area have been established and personnel have been made knowledgeable of them.
- c. A health physics qualified individual (i.e. qualified in radiation protection procedures) with a radiation dose rate monitoring device who is responsible for providing positive exposure control over the

activities within the area and who will perform periodic radiation surveillance at the frequency in the RWP. The surveillance frequency will be established by Radiological Controls management.

6.13.2 Specification 6.13.1 shall also apply to each high radiation area in which the intensity of radiation is greater than 1000 mrem/hr. In addition, locked doors shall be provided to prevent unauthorized entry into such areas and the keys shall be maintained under the administrative control of operations and/or radiation protection supervision on duty.

6.14 ENVIRONMENTAL QUALIFICATION

A. By no later than June 30, 1982 all safety-related electrical equipment in the facility shall be qualified in accordance with the provisions of: Division of Operating Reactors "Guidelines for Evaluating Environmental Qualification of Class IE Electrical Equipment in Operating Reactors" (DOR Guidelines); or, NUREG-0588 "Interim Staff Position on Environmental Qualification of Safety-Related Electrical Equipment," December 1979. Copies of these documents are attached to Order for Modification of License DPR-16 dated October 24, 1980.

B. By no later than December 1, 1980, complete and auditable records must be available and maintained at a central location which describe the environmental qualification method used for all safety-related electrical equipment in sufficient detail to document the degree of compliance with the DOR Guidelines or NUREG-0588. Thereafter, such records should be updated and maintained current as equipment is replaced, further tested, or otherwise further qualified.

6.15 INTEGRITY OF SYSTEMS OUTSIDE CONTAINMENT

The licensee shall implement a program to reduce leakage from systems outside containment that would or could contain highly radioactive fluids during a serious transient or accident to as low as practical levels. This program shall include the following:

- 1) Provisions establishing preventive maintenance and periodic visual inspection requirements, and
- 2) System leak test requirements, to the extent permitted by system design and radiological conditions, for each system at a frequency not to exceed refueling cycle intervals. The systems subject to this testing are (1) Core Spray, (2) Containment Spray, (3) Reactor Water Cleanup, (4) Isolation Condenser and (5) Shutdown Cooling.

6.16 IODINE MONITORING

The licensee shall implement a program which will ensure the capability to accurately determine the airborne iodine concentration in vital areas* under accident conditions. This program shall include the following:

- a. Training of personnel,

*Areas requiring personnel access for establishing hot shutdown condition.

- b. Procedures for monitoring, and
- c. Provisions for maintenance of sampling and analysis equipment.

6.17 POST ACCIDENT SAMPLING

The following program shall be established, implemented, and maintained.

A program has been established which will ensure the capability to obtain and analyze reactor coolant, radioactive iodines and particulates in plant gaseous effluents, and containment atmosphere samples under accident conditions. The program shall include the following:

- a. Training of personnel in sampling and analysis
- b. Procedures for sampling and analysis
- c. Provisions for verifying operability of the System.

6.18 PROCESS CONTROL PLAN

- a. GPU may change the Process Control Plan provided each change is submitted to the Commission by inclusion in the Semiannual Radioactive Material Release Report for the period in which the change is made effective and contains:
 - (1) Sufficiently detailed information to support the rationale for the change,
 - (2) a determination that the product waste form will conform to the requirements of 10 CFR Part 61.56.
- b. Change(s) shall become effective after review and approval in accordance with Section 6.8.2.

6.19 OFFSITE DOSE CALCULATION MANUAL

- a. GPU may make changes to the Offsite Dose Calculation Manual (ODCM) provided each change is submitted to the Commission in the Semiannual Radioactive Material Release Report for the period in which the change is more effective. The submittal shall contain:
 - (1) sufficiently detailed information to support the rationale for the change.
 - (2) a determination that the change will not substantially reduce the ability of dose calculations or setpoint determination to assess compliance with Specifications, and
- b. Change(s) shall become effective after review and approval in accordance with Section 6.8.2.

6.20 MAJOR CHANGES TO RADIOACTIVE WASTE TREATMENT SYSTEMS

- a. Each modification to a radioactive waste treatment system which does not involve an unreviewed safety question:
 - (1) Shall be performed in accordance with the provisions of 10 CFR Part 50.59, except
 - (2) The description of the modification and a written safety evaluation which includes the bases for the change shall be submitted as part of the annual FSAR update, and
 - (3) Shall become effective upon review and approval by the Vice President and Director.

Basis: 6.20

The radioactive waste treatment systems are those systems described in the Final Safety Analysis Report (FSAR) and amendments thereto that are used to maintain control over radioactive materials in liquid and gaseous effluents and in solid waste packages for shipment offsite to a radioactive waste disposal facility and that are required to meet the conditions in Specification 3.6.B, 3.6.D, and 3.1.4. The NRC is notified of major changes to these radioactive waste treatment systems under the provisions of 10 CFR Part 50.59 and Part 50.71, the FSAR update.