

INSTRUCTIONS FOR INSERTION
NEW HAMPSHIRE RERP

Revision Number: 2

Date of Revision: August, 1986

To facilitate the incorporation of Revision 2 into the NHRERP, the volumes that pertain to the Seabrook Station (Volumes 1, 2, 4, 4A, 4B, 5, 6, 16, 17, 18, 18A, 19, 20, 21, 21A, 22, 23, 24, 25, 26, 26A, 27, 28, 29, 30, 31, 32, 33, 35, 36 and 38) have been republished in their entirety, and distributed as complete volumes in binders with tabs. The specific paragraphs are denoted by a revision bar annotated with the numeral 2 on the right hand margin. Those volumes that are unique to the Vermont Yankee Station (Volumes 3, 8, 10, 11, 12, 13, 14 and 15) have not yet been republished.

Please note that Volume 7, Seabrook Station Alert and Notification Design Report and Volume 9, Vermont Yankee Alert and Notification Design Report will no longer be controlled as volumes of the NHRERP. Future references to these documents should be by title rather than by a NHRERP volume designation.

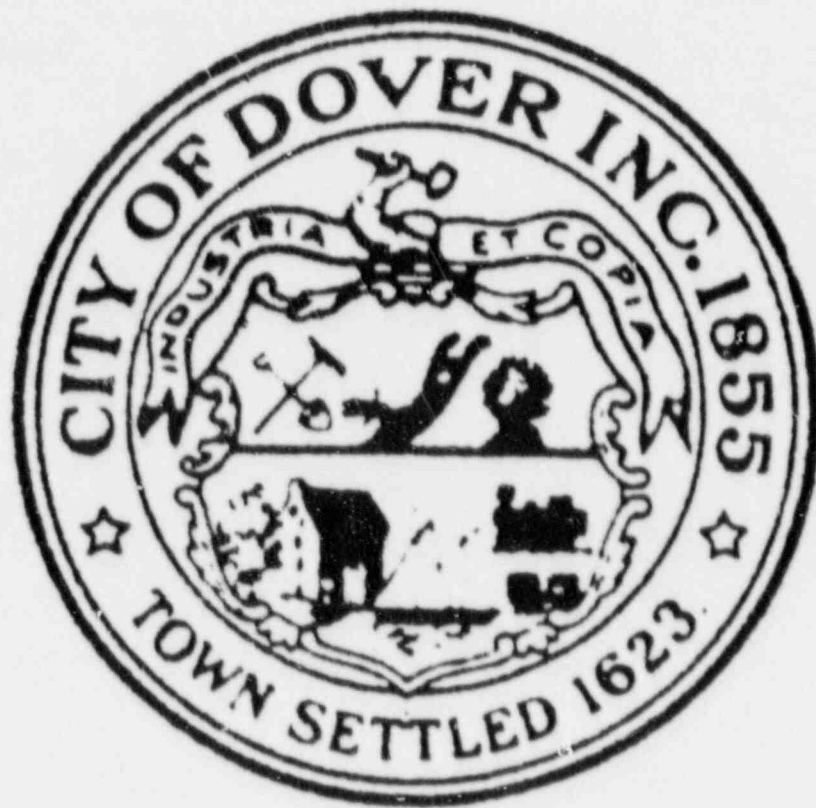
In addition, NHRERP Volume 34, Durham Host Plan and Volume 37, Nashua Host Plan have been deleted.

Remove the "Record of Revisions" form from each volume of your copy of the NHRERP, Rev. 1 and place in the front of the Rev. 2 copy. Enter each revision on the Record of Revisions form as they are received.

8802100377 871006
PDR ADOCK 05000443
G PDR

Radiological Emergency Response Plan

**City of
Dover, N.H.**



*Prepared In Cooperation With
New Hampshire Civil Defense Agency
Technological Hazards Division*



HOST PLAN FOR
CITY OF DOVER, NEW HAMPSHIRE

TABLE OF CONTENTS

I. GENERAL

A. Purpose of the Dover Host Plan	I - 1
B. Glossary of Terms	I - 2
C. Abbreviations and Acronyms	I - 6
D. Authorities	I - 7
E. References	I - 8
F. Situation	I - 9
G. Organization and Responsibilities	I - 12
H. Emergency Preparedness	I - 21

II. DESCRIPTIONS OF EMERGENCY RESPONSE FUNCTIONS

A. Purpose of Section II	II - 1
B. Notification of Public Officials	II - 2
C. Emergency Communications	II - 4
D. Public Information	II - 6
E. Emergency Facilities and Equipment	II - 7
F. Reception Center Operation	II - 12
G. Mass Care Shelter Operation	II - 17
H. Recovery and Re-entry	II - 20
I. Exercises and Drills	II - 21
J. Training	II - 22

III. CHECKLISTS OF EMERGENCY PROCEDURES

A. Purpose of Section III	III - 1
B. City Manager	III - 2
C. Emergency Program Manager	III - 4
D. Public Safety Dispatcher	III - 6
E. Host Facilities Coordinator	III - 8
F. Fire Chief	III - 10

APPENDICES

A. Individual/Agency Call List	
B. Decontamination Facility	
C. NJREG 0654 Cross Reference	
D. Communications Equipment	

TABLE OF CONTENTS (cont.)

LIST OF FIGURES

Figure 1	Emergency Response Organization, City of Dover	I - 13
Figure 2	New Hampshire Radiological Emergency Response Organization	I - 14
Figure 3	24 - Hour Notification Fan Out Scheme, City of Dover	II - 3
Figure 3A	Town of Dover Internal Simplified Block Diagram	II - 5b
Figure 3B	Town of Dover Simplified External Communications Network	II - 5c
Figure 4	Dover Facilities & Traffic Control Points	II - 19

LIST OF TABLES

Table 1	Populations of Municipalities Wholly or Partially Within 10 Miles of Seabrook Station	I - 10
Table 2	City of Dover, Responsibility Matrix	I - 13a
Table 3	Mass Care Shelters	II - 18

RECORD OF REVISIONS

This plan is reviewed periodically by local and State officials to ensure its adequacy and timeliness. It is the responsibility of the Town's Civil Defense Director to revise the plan, as necessary, on an annual basis.

The plan has been updated and revised as of the date shown on the Notice of Revision Sheet. All Notice of Revision Sheets and filing instructions are filed behind this sheet. All pages on which revisions have been made appear with the revision reference in the lower right corner. Specific locations of revisions are identified by a vertical bar and revision number in the right hand margin adjacent to the text which has been revised. If page numbers only have changed there will be no revision bars, only the notation in the lower right hand corner.

<u>Revision No.</u>	<u>Date of Revision</u>	<u>Date Entered</u>	<u>Person Entering Revision</u>

DISTRIBUTION LIST

<u>Number of Controlled Copies</u>	<u>Document Holder</u>
2	Emergency Program Manager
1	City Manager
1	Dispatch Center (SOC)
1	Public Works
1	Police Chief
1	Fire Chief
1	EMS Fire Department
1	Police Dispatch
1	School Superintendent
1	Wentworth Douglas Hospital
1	Governor
1	Attorney General
1	William Colburn - Human Services
1	Yankee Atomic Electric Co.
1	USNRC/Atomic Safety Licensing Board
1	Richard Hampe
1	Eric Falkenham
1	DPHS/Director
1	NH Yankee (Education Center)
1	NHCD (Document Control Center)
1	NHCD (IFO)
1	NHCD (EOC)
1	NH Yankee (EOF)

I. GENERAL

A. PURPOSE OF THE DOVER HOST PLAN

This Host Plan is designed to provide the City of Dover with organizational procedures and a description of the actions that would be necessary to receive evacuees from parts of the Seabrook Station Emergency Planning Zone (EPZ) in the event of a radiological emergency at Seabrook Station Nuclear Power Plant.

Dover would host evacuees from Greenland, Hampton, Hampton Falls, North Hampton, New Castle, and Rye, New Hampshire. Other New Hampshire host communities in the Seabrook EPZ are Rochester, Manchester and Salem.

| 2

The Plan also describes the support available from external agencies required to establish and maintain host facility operations in Dover which will provide emergency services and/or shelter for evacuees.

B. GLOSSARY OF TERMS

Purpose

The purpose of this section is to provide a common reference for terms and phrases used in this Plan.

Glossary

Access Control	The prevention of unauthorized people from entering a specific area. Road barriers and traffic control will be used to effect access control. The controlled area may include all or a part of the 10-mile Emergency Planning Zone (EPZ) or may be adjusted in order to bound an Exclusion Area established by NHDPHS to control and monitor areas which may have become radiologically contaminated.
ALERT	An ALERT is the second lowest level of emergency classification. Declaration of an ALERT indicates events in progress which involve an actual or potential, substantial degradation of the level of safety at the nuclear power plant. Any radioactive releases associated with this classification level are expected to be limited to small fractions of the EPA Protective Action Guideline exposure levels.
Emergency Broadcast System (EBS)	Network of radio stations which provides direct link between responsible public officials and the public. EBS stations broadcast instructions describing what steps the public should take.
Emergency Classification Level	The level at which an incident at a nuclear power plant has been classified by the plant operator. Each level triggers a set of predetermined actions by the off-site Emergency Response Organization.

Emergency Operations Centers (EOC) Locations designated by the State and local Emergency Response Organizations as assembly areas for their respective staffs. These facilities are the central command and control points for their respective Emergency Response Organizations.

Emergency Planning Zones (EPZ) The area covered by the Radiological Emergency Response Plan. The boundary for the Ingestion Pathway EPZ is a 50-mile radius from the plant. The boundary of the Plume Exposure EPZ is chosen to accommodate practical planning considerations and to conform as closely as possible to a 10-mile radius. The actual EPZ boundary may be more or less than 10 miles from the plant.

Emergency Response Organization The combination of State, local, Federal, and private agencies designed specifically to provide offsite capability to implement emergency responses.

Exclusion Area The area established to control access to an evacuated area. An Exclusion Area is established after an area has been evacuated and its purpose is to control the spread of contamination and provide security.

GENERAL EMERGENCY Of the four Emergency Classifications, a GENERAL EMERGENCY is most severe. It may involve substantial degradation or melting of the reactor's radioactive core with potential for loss of containment integrity. Releases are expected to exceed the EPA Protective Action Guideline exposure levels beyond the power plant site boundary area.

Incident Field Office (IFO) The IFO is the location in close proximity to the Plume Exposure EPZ from which NH Civil Defense Agency will coordinate with the plant and with Federal, State, and local emergency response organizations. The IFO supplements the emergency response capability of the State EOC in Concord.

Key Officials Official representatives of State, local and Federal government or private organizations that have a specified role in the emergency response organization and have been authorized or directed by NRCDA to perform specified emergency response functions.

Mass Care Shelter The location at which evacuees are fed and housed after transport from the Reception Center.

Media Center The location where news media representatives obtain news information concerning an emergency at a nuclear power plant. The Public Information Representatives at the Media Center will gather, coordinate, and release information as it becomes available.

Plume An elongated and usually open and mobile mass of material that is dispersing through the atmosphere. In the case of a nuclear power plant, the material consists of radioactive particles and gases.

Plume Exposure Pathway The pathway through which individuals may be exposed to radioactive material due to (a) whole body external exposure due to gamma radiation from the Plume and from deposited material, and (b) inhalation of radioactive particles or gasses such as radioactive iodine, xenon or krypton from the passing radioactive Plume.

Protective Action Emergency measures to be taken by the public to mitigate the consequences of an accident by minimizing the radiological exposures that would likely occur if such actions were not undertaken. Examples are access control, sheltering, and evacuation.

Protective Action Guidelines (PAGs) The numerically projected dose level criteria of radiation which act as trigger points for initiating protective response actions.

Reception Center The location at which the State provides services for any evacuated population in need of public assistance. Decontamination, registration, food and shelter can be arranged by the emergency workers at a Reception Center.

Site The property owned by the utility in the immediate area of the nuclear power plant site.

SITE AREA EMERGENCY A SITE AREA EMERGENCY indicates an incident which involves actual or likely major failures of plant functions needed for the protection of the public. Radiological releases, if any, are not expected to exceed the EPA Protective Action Guideline exposure levels except near the site boundary.

Support Agencies State and private agencies which provide personnel, equipment, facilities or special knowledge to support the implementation of the emergency response.

UNUSUAL EVENT An UNUSUAL EVENT is the least severe of the emergency classifications. Declaration at this level indicates that an incident which may lead to a potential degradation of the level of safety at the nuclear power plant has taken place.

C. ABBREVIATIONS AND ACRONYMS

ARC	American Red Cross
ARES	Amateur Radio Emergency Services
DHS	Division of Human Services
DPHS	Division of Public Health Services
EBS	Emergency Broadcast System
EMS	New Hampshire Emergency Medical Service
EOC	Emergency Operations Center
EPA	U.S. Environmental Protection Agency
EPZ	Emergency Planning Zone
FEMA	Federal Emergency Management Agency
IFO	Incident Field Office
MC	Media Center
NHCDA	New Hampshire Civil Defense Agency
NHRERP	New Hampshire Radiological Emergency Response Plan
NHY	New Hampshire Yankee
NRC	U.S. Nuclear Regulatory Commission
PAG	Protective Action Guidelines (Promulgated by EPA)
PIO	Public Information Officer
RADEF	Radiological Defense
SA	Salvation Army

12

12

D. AUTHORITIES

RSA107-B, relative to Nuclear Planning and Response Programs, is intended to protect the health and welfare of New Hampshire citizens through the initiation of a program to provide for the formulation of an RERP and procedures for implementing the RERP. Several sections of the civil defense statutes apply to local community plans. First, while the lead responsibility for developing and implementing the RERP lies with the State Civil Defense Agency, "Affected local units of government are to cooperate in that effort as well." (RSA 107-B:1) Second, "Civil Defense means the preparation for and carrying out of all emergency functions to prevent loss from natural or man made disasters." (RSA 107:2) Finally, "In response to such disasters local organizations for civil defense are authorized to exercise emergency powers with regard to time-consuming procedures and formalities prescribed by law." (RSA 107:10)

2

City - New Hampshire Revised Statutes, As Amended:

- 107:5
- 107:7
- 107:8 a, e
- 107:10
- 107:11
- 107:12
- 107:14
- 107:18
- 107:B:1
- 107:B:6

State - See New Hampshire Radiological Emergency Response Plan

E. REFERENCES

City - City of Dover Emergency Management Plan.

State New Hampshire Revised Statutes Annotated, As Amended:

Chapter 125, "Radiation Protection and Control Program."

Chapter 125B, "New England Compact on Radiological Health Protection."

State of New Hampshire Radiological Emergency Response Plan.

Federal - NUREG-0654/REP-1, Revision 1, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants." (Published jointly by the U.S. Nuclear Regulatory Commission and Federal Emergency Management Agency.)

FEMA ECS-1, "Guidelines for Emergency Response Team Plans." Federal Emergency Management Agency.

F. SITUATION

The New Hampshire Yankee (NHY) operates a nuclear-powered electric generating facility in Seabrook, New Hampshire.

The Nuclear Regulatory Commission (NRC) and the Federal Emergency Management Agency (FEMA) have issued guidance for the development of radiological emergency plans on the part of NRC licensees, State, and local governments.

A Plume Exposure Emergency Planning Zone (EPZ), which extends for approximately ten miles around Seabrook Station, has been established and a series of protective actions developed for residents within the EPZ. These protective actions include:

Access control which precludes radiological exposure of people by restricting their entrance into potential exposure areas.

Sheltering which minimizes radiological exposure by shielding people from a radioactive plume using existing residential, commercial, and industrial buildings.

Evacuation which would remove people from potential exposure areas.

If evacuation is implemented, Dover will be the jurisdiction in which evacuees from Greenland, Hampton, Hampton Falls, North Hampton, New Castle, and Rye will be hosted if all or part of these towns are evacuated. The term "hosting" refers to the registration of evacuees, radiological monitoring, and, if necessary, decontamination of evacuees, and the provisions for the sheltering (care and feeding) of evacuees.

Table 1 shows the resident and mean peak populations of Greenland, Hampton, Hampton Falls, North Hampton, Rye, New Castle, and other communities in the Seabrook EPZ.

TABLE 1
POPULATIONS OF MUNICIPALITIES WHOLLY OR PARTIALLY
WITHIN 10 MILES OF SEABROOK STATION

<u>New Hampshire</u>	<u>Resident Population</u>	<u>Peak Population</u>	
		<u>Summer Weekend</u>	<u>Summer Midweek</u>
Brentwood	2,039	2,039	2,039
East Kingston	1,262	1,556	1,479
Exeter	11,744	13,361	14,339
Greenland	2,225	2,443	2,541
Hampton	13,234	36,635	34,337
Hampton Falls	1,474	2,050	1,982
Kensington	1,385	1,564	1,520
Kingston	5,085	5,207	5,393
New Castle	621	749	718
Newfields	868	1,143	1,452
Newton	3,744	3,802	3,787
North Hampton	3,638	5,561	5,405
Portsmouth	26,881	31,906	35,238
Rye	5,099	9,685	8,621
Seabrook	8,158	19,626	18,515
South Hampton	699	1,367	1,324
Stratham	3,445	3,875	4,239
<u>Massachusetts</u>			
Amesbury	14,258	17,454	19,359
Merrimac	4,420	5,242	6,079
Newbury	5,479	10,206	9,683
Newburyport	16,414	21,986	24,544
Salisbury	6,726	29,702	22,502
West Newbury	3,296	4,133	4,630

Source: Sections 2, 5, and 6 of the "Evacuation Time Estimates and Traffic Management Plan Update", Vol. 6 of the State of New Hampshire Radiological Emergency Response Plan.

Although most of the evacuated population (resident and transient) present during a radiological emergency might require assistance such as radiological monitoring, decontamination, or emergency social services, it is expected that less than twenty percent of the resident population will require shelter. This estimate is based on the previous experience of FEMA and ARC in a wide spectrum of natural and man-made disasters. In all probability, a high percentage of the transient population will return home or continue with their vacation or business in other areas and not require shelter.

Dover has the facilities to shelter about 7,000 evacuees. If additional capacity is required, NHCDA and the NH Division of Human Services will arrange for additional facilities and communities to accommodate all evacuees.

G. ORGANIZATION AND RESPONSIBILITIES

In the State of New Hampshire there are two levels of government involved in radiological emergency response activities. Most responsibilities are assumed by the State agencies included in the State Emergency Response Organization. These agencies, and their responsibilities, are described in Vol. 1, Section 1.7 of the NHRERP. The responsibilities for local emergencies in New Hampshire are assumed at the municipal level; several cities and towns, rather than counties, within the Emergency Planning Zone, provide the facilities and personnel for local emergency response.

The City of Dover is one of 21 local governments that become part of the State's offsite Emergency Response Organization in the event of an accident at Seabrook Station. Seventeen of the communities are located within the Plume Exposure EPZ; four more communities, including Dover, are designated host communities that would provide Reception Center capabilities for any evacuation of the Seabrook EPZ. The responsibilities of the various entities included in the State's Emergency Response Organization are outlined in Vol. 1, Section 1.2 of the NHRERP.

The local Emergency Response Organization in the City of Dover is governed by a City Manager who is responsible for the command and control of the City's emergency organization. During a radiological incident at Seabrook Station, the City Manager would be in direct charge of all emergency operations for the City. The emergency organization of the City's personnel is shown in Figure 1.

The responsibilities assigned to various agencies involved with emergency response activities in the City of Dover are listed below and summarized in Table 2.

Dover's primary contact for information, recommendations, and resource support will be with NHCOA. They will coordinate all the additional support and resources required by Dover to meet a radiological emergency at Seabrook Station. The relationship of all pertinent external agencies (i.e., State, Federal, utility, and private) is shown on Figure 2.

The following is a synopsis of the various responsibilities assumed by the local, State, Federal, and utility officials:

FIGURE 1
EMERGENCY RESPONSE ORGANIZATION
CITY OF DOVER

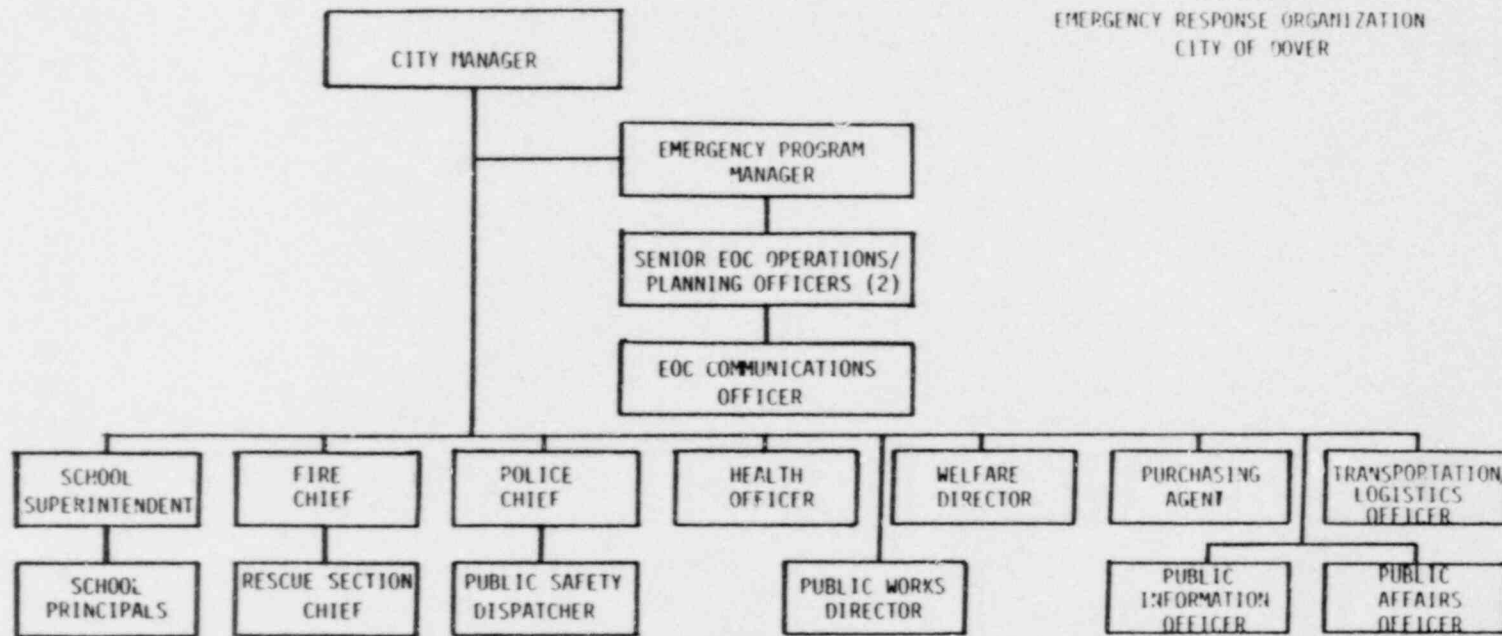


TABLE 2

City of Dover
RESPONSIBILITY MATRIX

EMERGENCY RESPONSE AGENCY								
EMERGENCY RESPONSE FUNCTIONS	Local	State	NHCDA	DPHS	School Officials	DHS	Red Cross	Salvation Army
Coordination and Continuity	P							
Notification of Public Officials	P							
Emergency Communications	P							
Public Information		P						
Medical Support	P							
Food, Bedding, & Clothing							P	S
Security/Traffic Control	P							
Allocation of Facility Space					P			
Reception Center Management & Operation	S					P		
Monitoring and Decontamination	S			P				
Mass Care Center Management & Operations	S						P	S

P - Primary Responsibility
 S - Support Responsibility

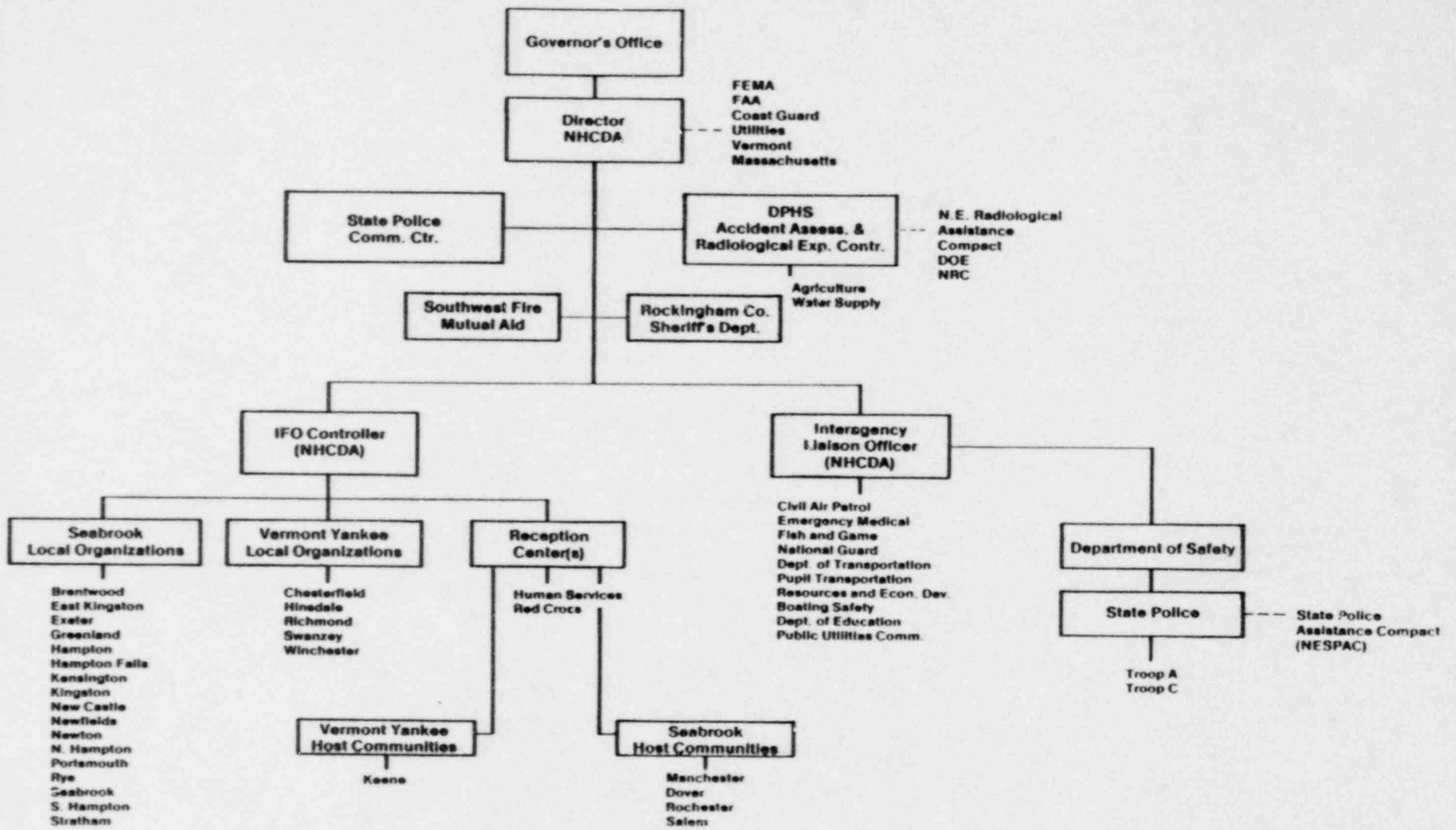


FIGURE 2 New Hampshire Radiological Emergency Response Organization

City

1. City Manager will:

- o Provide overall command and control of hosting operations from the Dover EOC.
- o Release any necessary public information related specifically to Dover's emergency response activities.
- o Request any required supplemental support or resources from NHCDA.

2. Emergency Program Manager will:

- o Coordinate and conduct training, drills, and exercises as scheduled by NHCDA.
- o Coordinate, update and distribute changes to emergency plans for Dover. 1/2
- o Assist local and private agencies in the preparedness planning of the physical layout, traffic flow, and space requirements at the Reception Center and mass care shelters.
- o Provide coordination and continuity for all emergency response operations in Dover. 1/2
- o Consolidate requests for support and resources from City departments and present them to the City Manager.
- o Act as liaison between State agencies and the City Manager.
- o Provide space in the District Court Building for the Dover EOC.
- o Arrange for space in Dover for Selectmen, staff and other officials who were evacuated. 1/2

3. EOC Communications Officer will:

- o Provide communications, as required, for the Reception Center and mass care shelters.
- o Provide communications between City officials and NHCOA.

4. EOC Operations/Planning Officer will:

- o Activate the EOC and maintain its operation.

5. Police Chief will:

- o As part of the emergency preparedness planning, designate traffic control and security points as well as traffic patterns to be used at the Reception Center and mass care shelters. This will be coordinated with the Emergency Program Manager. Personnel and equipment requirements should be evaluated and compared with existing resources. Anticipated deficiencies should be reported to the Emergency Program Manager.
- o Provide traffic control within the City limits.
- o Provide law enforcement and security to Reception Center and mass care shelters.

6. Public Safety Dispatcher will:

- o Notify the appropriate City officials of an emergency situation.

7. Fire Chief will:

- o As part of the emergency preparedness planning, designate personnel and areas at the Reception Center to be used for personnel and equipment decontamination and impoundment. This will be coordinated with the Emergency Program Manager.
- o Provide available equipment and personnel to support DPHS in personnel and equipment decontamination at the Reception Center.
- o Support the Dover Emergency Organization with manpower and equipment.

8. Transportation/Logistics Officer:

- o Provide transportation for evacuees from the Reception Center to mass care shelters using available buses.

9. Public Works Director will:

- o Provide manpower, vehicles and equipment to support the emergency response.

10. School Superintendent will:

- o As part of the emergency preparedness planning, assist the school principals in evaluating and allocating space for the functions that will be required in the school facilities designated as the Reception Center and mass care shelters. Coordinate this with the Emergency Program Manager.
- o Coordinate the use of school facilities in Dover as Reception Center and mass care shelters.
- o Provide transportation of evacuees between the Reception Center and mass care shelters, if required.

11. School Principals will:

- o As part of the emergency preparedness planning, allocate space in their facilities to accommodate the various agencies that will be part of the emergency response team. Coordinate this with the School Superintendent and Emergency Program Manager.
- o Provide building facilities and support staff as requested by the School Superintendent.

12. Dover Rescue Section Chief will:

- o Coordinate emergency medical services and transportation with the DPHS and the local hospital.

13. Health Officer will:

- o Assist the DHS, DPHS, and ARC in identifying and treating health problems of evacuees.

14. Dover Human Services Director will:

- o Provide and coordinate social services and psychiatric social workers.
- o Coordinate special care for the aged.

15. Purchasing Agent will:

- o Provide administrative assistance to department heads in procuring emergency equipment and supplies. (Such procurements will first be coordinated with the City Manager, City Attorney, and City Finance Director for legal or financial implications.)

16. Public Information Officer will:

- o Provide public information related specifically to Dover's emergency response activities, via radio station WTSN, after coordination with NHODA and approval by the City Manager.
- o Refer people with questions to the rumor control call-in number.
- o The Public Information Officer will be assisted by the EOC Public Affairs Officer.

State

The responsibilities of the various State agencies involved in offsite emergency response activities are outlined in Vol. 1, Section 1.3 of the New Hampshire Radiological Emergency Response Plan (NHRERP). That document outlines responsibilities common to all agencies in the NH Emergency Response Organization as well as the specific responsibilities of each agency. The City of Dover is particularly dependent on the State agencies listed below:

1. Governor's Office will:

- o Provide overall command and control of New Hampshire's Emergency Response Organization.

2. New Hampshire Civil Defense Agency will:

- o Direct the State Emergency Response Organization on the Governor's behalf.
- o Coordinate all requests from Dover for support and resources.

- o Coordinate with FEMA.
- o Notify host communities of an emergency situation and the anticipated need for host facilities.

3. Division of Public Health Services will:

- o Provide radiological monitoring and decontamination services for evacuees, their belongings, and their vehicles.

4. Division of Human Services will:

- o Administer the operation of the Reception Center.
- o Provide emergency social services in the Reception Center and mass care shelters.

5. State Police will:

Provide access and traffic control on State roads.

6. National Guard will:

Provide logistical support as required.

Federal

Federal support is anticipated only when the City of Dover and the State of New Hampshire resources for emergency response have been exhausted. Any requests for Federal support of offsite emergency response activity would be made only through the New Hampshire Civil Defense Agency. The procedures for requesting Federal support, the areas in which the support may be necessary and the agencies from whom the support is expected, are outlined in Vol. 1, Section 1.4 of the NHRERP.

1/2

Utility

New Hampshire Yankee (NHY) is responsible for a wide variety of activities in support of offsite emergency response. These activities are outlined in the utility's Seabrook Station Radiological Emergency Response Plan.

Other

1. American Red Cross will:
 - o Operate mass care shelters.
 - o Provide food and bedding for evacuees.

2. Salvation Army will:
 - o Assist the ARC in providing supplies to the mass care shelters.

3. District Nursing Association will:
 - o Provide inoculation and immunization clinics under the supervision of the Health Officer.
 - o Provide special care for the disabled.

Letters of Agreement

Letters of Agreement are contained in Volume 5 of the NHRERP.

2

H. EMERGENCY PREPAREDNESS

All Dover emergency response personnel identified in this Plan should attend training, drills and exercises as requested by the Dover Emergency Program Manager. These activities should be carried out on a routine basis, prior to any emergency, to ensure that the City is prepared to act as a host community. In addition, the Emergency Program Manager will:

- o Coordinate and conduct training, drills and exercises as scheduled by NHCDA.
- o Annually update emergency plans, if required, record and distribute revisions.
- o Annually schedule meetings with NHCDA, DHS, the School Superintendent, School Principals, Police Chief, Fire Chief, and Public Works Director to discuss the physical layout and space requirements for the Reception Center and mass care shelters.
- o Ensure the Police Chief is familiar with hosting operations and is capable of providing traffic control for the Reception Center and mass care shelters.
- o Annually review the physical layout of the Dover EOC located in the District Court Building. Coordinate this with the Police Chief.

II. DESCRIPTIONS OF EMERGENCY RESPONSE FUNCTIONS

A. PURPOSE OF SECTION II

This section describes the individual functions that comprise a planned response to a radiological emergency at the Seabrook Station Nuclear Power Plant. It describes how the City of Dover will be notified and what response actions will occur in this host community.

The emergency response functions are:

1. Notification of Public Officials
2. Emergency Communications
3. Public Information
4. Emergency Facilities and Equipment

B. NOTIFICATION OF PUBLIC OFFICIALS

The Public Safety Dispatcher will be notified at the ALERT and/or higher ECL by the NHCDA local Liaison via commercial telephcns or by radio. The Public Safety Dispatcher will verify the message by a call back to the NHCDA and will then contact the key members of the Dover Emergency Response Organization.

The people to be contacted by the Public Safety Dispatcher include:

- City Manager
- Emergency Program Manager
- Police Chief
- Fire Chief
- Health Officer
- School Superintendent
- Purchasing Agent
- Public Works Director
- Welfare Director
- Transportation Officer
- Public Information Officer
- Finance Officer

No action will be taken until notification is received from the NHCDA.

Upon the decision by the Governor to evacuate all or a portion of the EPZ, or if the Governor/NHCDA decides that emergency conditions at Seabrook Station are such that an evacuation may be imminent, the NHCDA will request the activation of the Dover Reception Center(s). The 17 communities within the EPZ will be notified and the audible alerting system will be activated. The Emergency Broadcasting System will then instruct the public on the actions to be taken.

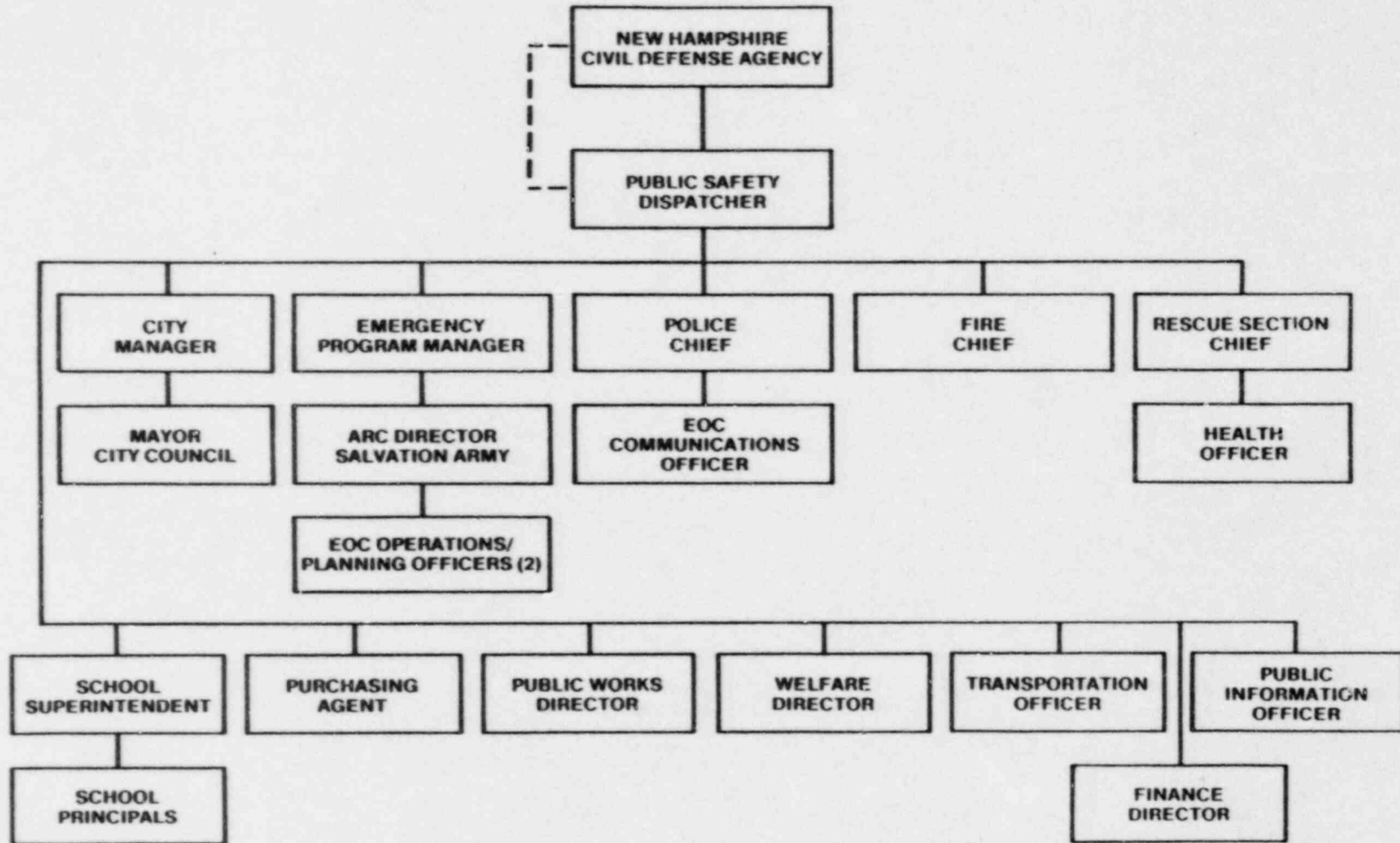
The NHCDA will initiate the official evacuation notification of Dover by contacting the Public Safety Dispatcher via commercial telephone or by radio. The Public Safety Dispatcher will verify the message by a call back to the NHCDA and will then contact the aforementioned key members of the Dover Emergency Response Organization.

Figure 3 outlines the City's notification fanout scheme.

The City of Dover maintains 24-hour notification capabilities with a Public Safety Dispatcher on duty on a 24-hour basis.

FIGURE 3

24-HOUR NOTIFICATION FAN-OUT SCHEME
CITY OF DOVER



LEGEND

NOTIFICATION ———
VERIFICATION - - -

VOL. 13

II-3

REV. 2 5/85

C. EMERGENCY COMMUNICATIONS

City of Dover Communications System Description

The City of Dover is served by a sophisticated communications network. The Public Safety Communications Center dispatches all public safety agencies in Dover.

Initial notification of an incident at Seabrook Station to the Dover Emergency Response Organization would occur as follows: At the Alert level, NHCOA will initiate the official notification of Dover by contacting the Public Safety Dispatcher via commercial telephone or by radio. The Public Safety Dispatcher will verify the message by a call back to NHCOA and will then contact the key members of the Dover Emergency Response Organization.

The Public Safety Dispatcher will receive subsequent updates and information from RCD until the EOC becomes operational. Once the EOC is operational it will become the focus of emergency communications for the town.

The EOC will be located in the City Hall which is the location of the Public Safety Communications Center. This dispatch area has been equipped with enhanced communications capabilities to handle additional communications associated with the RERP. An emergency power generator has been installed at this location.

Because of the relatively larger size of Dover public safety agencies the communications that occur must necessarily be divided among various channels. Essentially each department within the city will coordinate their activities on their normal operating frequencies through the Public Safety Communications Center. These communications will be monitored and directed from the EOC by the department heads. Most of the emergency communications equipment discussed in this section is used by the various public safety agencies on a day-to-day basis. For this reason, many of the systems are in constant use or are tested frequently. No system is tested less frequently than once a month. In addition, the entire emergency communications system is tested for use in a radiological emergency response during bi-annual exercises. Sufficient equipment exists to cover for equipment removed for service or repair.

The Communications Network consists of four subsystems which are described below.

1. The New Hampshire Civil Defense Command and Control Network

Once the EOC is operational this system will provide the primary Command and Control mechanism and provide notifications and informational updates to the EOC, (EPZ and Host) and the IFD in Newington.

This system allows all of the EPZ and Host communities local EOCs the ability to communicate with each other.

All of the radios installed as part of this network have a built-in selective call feature which will allow one station to selectively alert another station. The stations at the IFD and the State EOC also have the ability to transmit an "allcall" signal which will alert all of the stations in this system simultaneously.

Normal system communications are relayed through a VHF-Low band repeater. In the event the system experiences a high amount of radio traffic, the repeat function will be disabled and the IFD dispatcher will assume control of the repeater and will control the communications that occur on the system.

Communications that occur on this system will take place in a "clear voice" mode. All communications that occur on the system are linked back to the State EOC in Concord. The State EOC can operate the repeater and communicate to the local EOCs should that become necessary.

NOTE: All key components of this system have a backup electrical source in place or in the process of being installed.

2. Local Dispatch Radio Network

This is a network used by the Dover Public Safety Communications Center to communicate with the city agencies on a daily basis. This network uses one set of frequencies for police communications and a separate set of frequencies for fire communications.

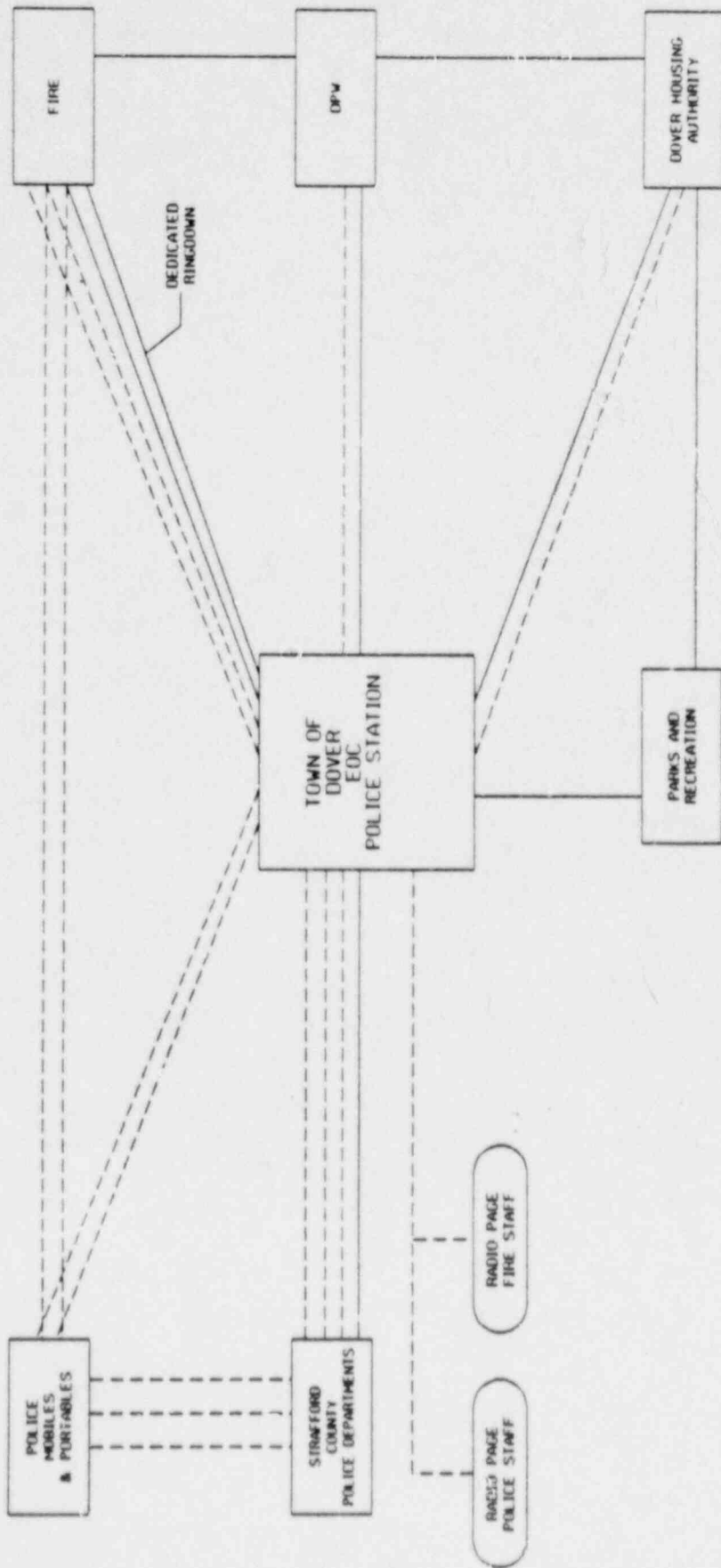
3. Amateur Radio, ARES Radio System

A (2) meter programmable base station capable of operating on all (2) meter frequencies will be available. The ARES network is a backup system to the NHODA Command and Control radio system and will allow the local EOC additional channels to communicate with the IFD and other EPZ and Host communities.

4. Commerical Telephones

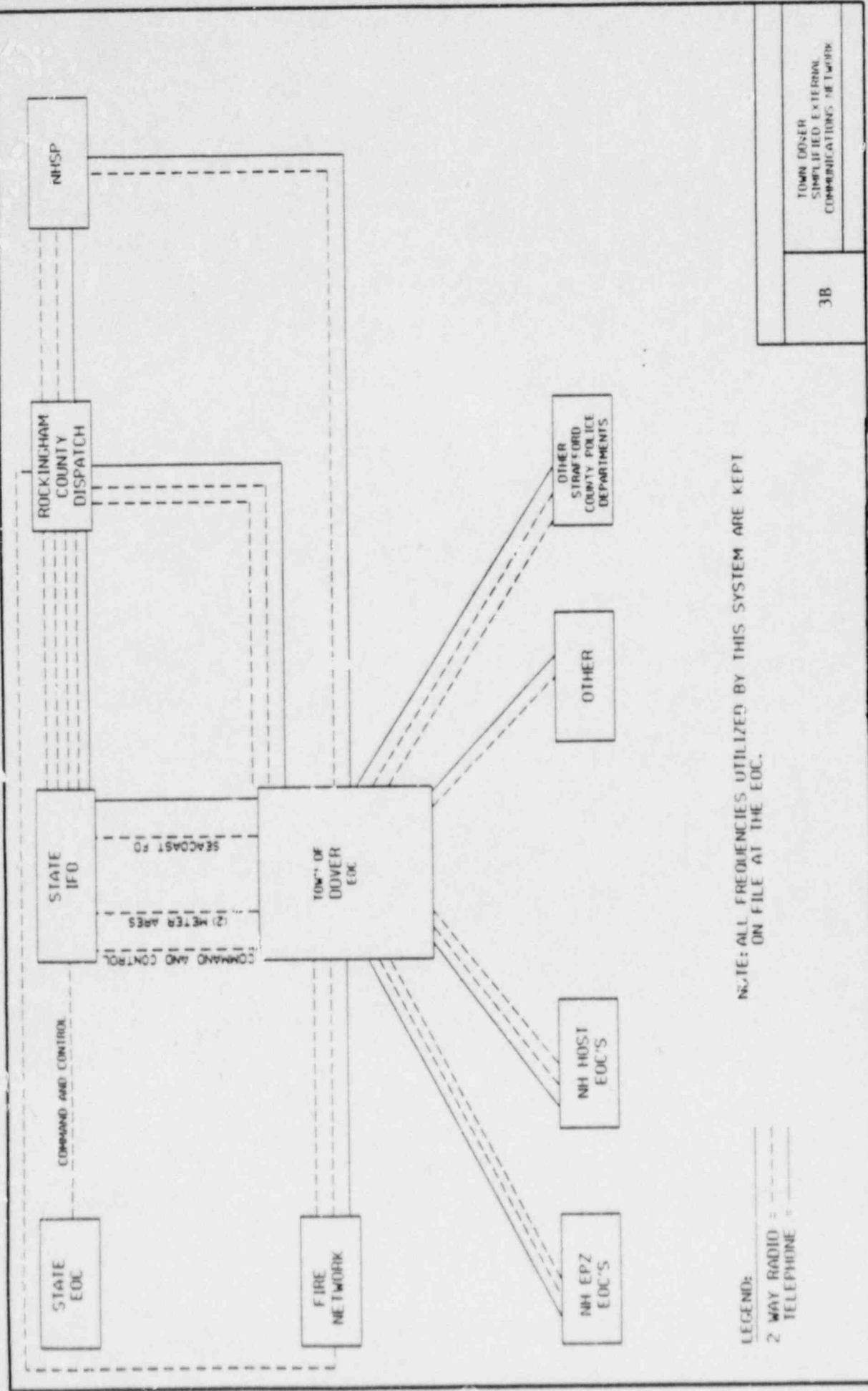
The EDC is equipped with additional trunk lines to accomodate the additional traffic that may be associated with the RERP.

NOTE: Sufficient radio equipment is available for operation of the Reception Center and Mass Care Shelters. Supporting State agencies will supply their own radio communications equipment as required.



NOTE: ALL FREQUENCIES UTILIZED BY THIS SYSTEM ARE KEPT ON FILE AT THE EOC.

LEGEND:
 2 WAY RADIO : - - - - -
 TELEPHONE : - - - - -



NOTE: ALL FREQUENCIES UTILIZED BY THIS SYSTEM ARE KEPT ON FILE AT THE EOC.

LEGEND:
 ——— 2 WAY RADIO
 - - - - TELEPHONE

TOWN OF DOVER
SIMPLIFIED EXTERNAL
COMMUNICATIONS NETWORK

3B

D. PUBLIC INFORMATION

"Public information" refers to the dissemination of official public information through the news media during a radiological emergency and the recovery and re-entry period immediately following the emergency. Careful coordination of news releases among all involved agencies and Seabrook Station is essential to ensure consistency of information to preclude public confusion and, thus, facilitate orderly and efficient responses.

A representative of the Governor and/or NHCDA will coordinate news releases with the utility and Massachusetts' agencies from the Media Center at the Newington Town Hall in Newington, NH. This is the only location at which major news media support will be offered. Dover officials can also obtain emergency information by contacting the NHCDA by telephone at the IFO/ECF at Newington Station in Newington, the State EOC in Concord, or via the Civil Defense radio network. State personnel will also monitor the operation of NHY and staff the rumor control center. This center will actively seek to identify rumors and remedy them by prompt, accurate news releases. Likewise the utility will maintain, and the State personnel will monitor a public information telephone number that residents may call for plant status information. Details on the operation of the Media Center and the rumor control activity are provided in Vol. 1, Section 2.3 of the NHRERP.

Since the State maintains the responsibility for public information, and public education (in accordance with Volume 1, Section 2.3 of the NHRERP) the City is not required to participate in media relations. The City Manager may choose to deal with local news media. All news releases formulated by the City Manager and released by the Public Information Officer will be limited to the status of emergency response activities in the City of Dover. Briefings on plant status and accident assessment will be conducted only by Federal, State and utility officials from the Media Center. The City Manager should notify the State personnel in the Media Center, in advance, their intent to hold any local briefing including the nature of information to be released. The City Manager should provide copies of any written releases to the Media Center in advance of issuing them to the media.

E. EMERGENCY FACILITIES AND EQUIPMENT

There are three sets of emergency facilities used to support offsite emergency response for Seabrook Station: utility-operated facilities, State-operated facilities and locally-operated facilities. These facilities and their relationships to emergency response activities for the City of Dover are described below.

1. Utility-Operated Facilities

There are three utility-operated facilities that have significant roles in offsite emergency response. These are the Emergency Operations Facility (EOF), the control room and the Media Center.

The power plant Control Room provides the initial and follow-up notifications to the State until the EOF is activated. Information concerning the reactor status, utility dose projections and monitoring data is transferred to State personnel located in the EOF by the utility in accordance with the utility's emergency plan. No local emergency response personnel are involved with activities at these facilities. The EOF is co-located with the IFD in Newington Station, Newington.

The Media Center is the central coordination point from which information about the incident and the emergency response will be released to representatives of the news media. In the Media Center public information officials of the utility, as well as State and Federal officials, will coordinate their activities. Rumor control is also conducted from the Media Center. The State Public Information Officers located in the Media Center have a direct dedicated communications link with the State EOC. The Media Center may be a source of information to the Dover Emergency Response Organization, however, no participation in issuance of news releases and press briefings by local officials is expected.

2. State-Operated Facilities

The State operates five emergency response facilities, plus the Reception Centers for Seabrook Station. Those that play a key role in Dover's emergency response are the State Emergency Operations Center (EOC), the Incident Field Office (IFO) and one of the Reception Centers. | 2

The State Emergency Operations Center (EOC) is the central command center for the offsite emergency response by the State and affected municipalities in New Hampshire. The State EOC is located in the NHCOA offices at State Office Park South, 107 Pleasant Street, Concord, NH. The NHCOA is responsible for the operation of this facility.

The IFO is the State facility located closest to Seabrook Station. It is the facility from which the NH Civil Defense Agency will communicate with State emergency workers and local Emergency Response Organizations. State field operations are directed from the IFO. The IFO, which is co-located with the EOF at the Newington Station in Newington, New Hampshire, receives direction from the State EOC in Concord, NH.

Reception Centers are operated to accommodate the emergency service needs of evacuees leaving the EPZ in the event an evacuation is recommended. For the Seabrook Station EPZ, there are four Reception Centers. The Dover Reception Center at Dover High School will host residents of Hampton, Hampton Falls, North Hampton, Greenland, New Castle and Rye, New Hampshire. In a Reception Center, evacuees are registered and provided temporary services. These facilities will not be used to house evacuees for prolonged periods of time. In the event mass care services become necessary they will be provided in satellite mass care centers operated by the American Red Cross. The centers will be selected and opened based upon the level of demand for this service. | 2

A decontamination center will be located with the Reception Center. Removal of radioactive material from individuals and/or equipment that may have been contaminated will occur in these | 2

facilities. If special procedures or equipment are required, those requiring them will be transferred to hospitals equipped to treat radiologically exposed people (see Volume 1, Section 2.8 of the NHRERP for a list of hospitals). Decontamination will be conducted in accordance with DPHS procedures, by local personnel, and under direct supervision by DPHS.

2

3. Locally-Operated Facilities

The Seabrook Plume Exposure EPZ is served by a system of local dispatch centers and by Emergency Operations Centers (EOCs) for each of the 17 municipalities within the EPZ and the 4 host communities surrounding the EPZ. These facilities provide Police, Fire, and emergency medical dispatching for the local municipalities in their respective service areas.

2

The Dover EOC, located in the City Hall, 2nd Floor Conference Room, will be the center for direction and control of the emergency response in Dover. This facility has ample space to accommodate all key City officials. The EOC will be activated upon notification by NHCDA of an evacuation recommendation. The following EOC positions shall be staffed by the incumbent or his designated representative:

2

City Manager
Mayor/Councilmen (as required)
Emergency Program Manager
EOC Operations Officer
EOC Communications Officer
Police Chief
Public Safety Dispatcher
Fire Chief
Public Works Director
School Superintendent
Dover Rescue Section Chief
Health Officer
Public Information Officer
Welfare Director

Purchasing Agent
Finance Director
Transportation/Logistics Officer
Red Cross Chapter Chairperson
Salvation Army Representative

From the EOC, Dover provides the following services:

a. Facilities for Evacuated Town Officials

The Emergency Program Manager will arrange for facilities in the Quality Inn which the officials of evacuated jurisdictions can use as temporary town offices.

b. Medical

Medical support will be supplied by the Rescue Section Chief of the Fire Department. Wentworth Douglas Hospital will provide shelter for evacuated patients who need skilled nursing care. If the hospital is full, patients from Webster at Rye will be brought to the Dover House Health Care, and patients from Seacoast Health Care Center, Hampton, will be brought to an alternate facility.

2

c. Food, Bedding and Clothing

The Dover Chapter, ARC will coordinate the acquisition of food, bedding and clothing for evacuees at shelters. The Chapter has agreements with local establishments to augment normal Red Cross supplies. Public schools generally have enough food on hand to last for a day, which will be sufficient time for the Red Cross to assemble their resources.

d. Security/Traffic Control

The Dover Police Department will manage traffic-control points. The Police Department will also provide security for the EOC, the Reception Center and mass care shelters. If additional staffing or equipment is necessary, assistance may be obtained

from the New Hampshire State Police and/or National Guard. Such requests for assistance will be made through the NHCOA at the State EOC.

e. Supplies

Dover will provide interim supplies (i.e., clothing, food, soap, bags, etc.) to the Reception Center, decontamination center and mass care shelters as needed to assist State agencies or the ARC. These supplies will be obtained through requisition.

4. Emergency Equipment

Radiological monitoring equipment consisting of forty-three survey instruments (CDV-700) will be used at Dover by the NHCOA. The Fire Chief will store, inventory and operationally check units in his possession quarterly. These instruments will be used to check evacuees for contamination prior to entering the Reception Center. Supplemental monitoring equipment, as required, will be provided through the State EOC, in Concord, during an emergency.

F. RECEPTION CENTER OPERATION

The Reception Center is the facility to which all evacuees who require registration, radiological monitoring, emergency social services, and/or shelter will report. The Reception Center is located at Dover High School (see Figure 4 in Section G). A secondary facility, if necessary, will be established at Dover Junior High School.

The allocation and use of space will be coordinated with the Dover High School Principal. There will be separate areas for reception and decontamination. The Principal will maintain the normal support staff of the school to run the facility (i.e., mechanical systems, cafeteria, administration, etc.).

The New Hampshire Division of Human Services (DHS) will provide personnel to manage the Reception Center.

The DHS will see that the Reception Center functions are undertaken by the available emergency workers. These functions are described as follows:

1. Registration - Registration will involve filling out and filing registration forms for all personnel receiving emergency support services through the Reception Center. Registration will be undertaken using pre-printed forms provided by the State of New Hampshire. The completed forms will be useful for tracking the locations of evacuees and for providing written records of support requested and received at the Reception Center. This function may be handled directly by DHS staff or delegated to other emergency response workers made available during an emergency.
2. Coordination of Remote Rendezvous - The Reception Center will be the designated location for evacuated persons to meet other people. Such remote rendezvous may include parents meeting children that have been evacuated directly from school; working spouses, who work outside the EPZ, meeting non-working spouses that have been evacuated; and friends, neighbors and relatives meeting each other

to confirm that evacuations have been successfully completed. This function, which overlaps with registration, includes designating and providing waiting areas for groups, families and individuals, as well as providing a filing system to accommodate the locating and reuniting of displaced persons. Remote rendezvous coordination may be undertaken by DHS staff directly or by other emergency response workers available at the Reception Centers.

3. Message Center - A message center will be established at the Reception Center. The message center will provide facilities for leaving brief written messages for evacuees. The messages may be requests for telephone calls, forwarding addresses or other brief pertinent messages to be left for registered evacuees. (The message center will not provide for live communication between evacuees and remotely located persons.) The message center may be operated either by the DHS personnel or volunteers and other emergency response workers available at the Reception Center.
4. Distribution of Emergency Clothing and Materials - It is possible that some people may be exposed to a radioactive Plume before or during evacuation. These people may require a change of clothes, uncontaminated toilet articles and other materials. The Reception Center will distribute available clothing, materials and equipment to those persons in need of such items. The distribution function includes gathering and distributing the available resources, not providing them. For instance the Salvation Army may provide emergency clothing to be distributed at each Reception Center. The distribution function may be handled directly by the DHS staff or delegated to available emergency response volunteers.
5. Information and Recreation - Evacuees of the Seabrook Station EPZ will have been displaced from homes and jobs. It will be necessary to provide information and recreation for persons temporarily located at the Reception Center. Information can be provided by supplying public access to televisions and radios at the Reception

Center. Availability of television and radio may be supplemented by direct release of information by public officials at the Reception Center. Recreation demands might be met by providing not only television and radio, but by providing any available entertainment (e.g., movies from a local library, services for children, reading materials, or playing cards as available). The information and recreation function may be implemented directly or delegated by the DHS.

6. Medical Services References - Many evacuees leaving the Seabrook Station Plume Exposure EPZ will lose access to medical facilities and personnel they normally use. Others may require prescription medications or supplies that have been left behind or which have run out since departure from residences in the EPZ. The Reception Center must provide a reference service to see that evacuees are introduced to alternate sources of medical service. The reference service will be handled by DHS staff directly and supplemented by New Hampshire Public Health staff in coordination with the Dover Health Officer.

7. Congregate Care Reference - It is likely that most of any population evacuated from the Seabrook Station EPZ will be self-sufficient. They will temporarily relocate to the homes of friends or relatives that live outside the EPZ. A fraction of the evacuating population, however, may seek temporary public feeding and shelter at mass care shelters. The Reception Center will direct these people to available mass care shelters. Congregate care will not be provided at the Reception Center itself. The DHS will provide for the reference service and the American Red Cross will provide the mass care shelters. The ARC will have a representative at the Reception Center to act as liaison between the Reception Center and mass care shelters.

Congregate care will not be provided at the Reception Center itself. The DHS will provide for the reference service and the American Red Cross will provide the mass care shelters. The ARC will have a representative at the Reception Center to act as liaison between the Reception Center and mass care shelters.

8. Monitoring and Decontamination - The DPHS will supervise radiation monitoring and decontamination services carried out by local staff. The monitoring will be provided to ensure that contaminated personnel and goods are identified and properly handled. Contaminated personnel and goods will be identified and segregated prior to entry to the Reception Center proper. Decontamination will be done in accordance with Appendix B of this plan.

2

The monitoring and decontamination activities will be undertaken by the New Hampshire Civil Defense staff in cooperation with Dover RD in the host community. As necessary the Civil Defense staff will be supplemented by volunteers. The Dover Fire Department under the direction of the DPHS will wash down any vehicles or belongings found to be in need of decontamination.

9. Traffic and Crowd Control - It is possible that a large number of cars and people will seek access to each Reception Center. As a result traffic control officers will be needed to supervise arriving and directing traffic and parking. Likewise, Police officers will be needed to expedite the pedestrian traffic to appropriate service areas in the Reception Center. Should the Reception Center become crowded it will also be desirable to have Police officers on hand to maintain order. The traffic and crowd control function will be handled by the Dover Police Department.
10. Reception Center Manager - It is necessary to have a manager for the Reception Center. The manager will see that the Reception Center is put on standby and opened, as necessary. The manager will see that adequate facilities and equipment are present. The manager will also see that each of the preceding nine functions is being properly

provided. The manager will be the person responsible for communicating with other elements of the New Hampshire Emergency Response Organization. These communications will include status reports to the State Emergency Operations Center and requests for any support needed to keep the Reception Center operating smoothly. The Reception Center manager position will be filled by a full time Division of Human Services employee familiar with emergency management. The alternate Reception Center manager may be designated by the Emergency Program Manager.

11. Volunteers - The Fire Chief or designee will be responsible for maintaining a list of trained monitors and decontamination personnel.

2

G. MASS CARE SHELTER OPERATION

A mass care shelter is a facility where evacuees are fed and housed. Evacuees who require shelter will be taken from the Reception Center to one of the mass care shelters in Dover. The Woodman Park School will be the first shelter activated. When the Woodman Park School approaches capacity, additional facilities will be opened in the order shown in Table 3. The locations of these facilities are shown on Figure 4. | 2

The buses used in the evacuation will also be used to transport evacuees from the Reception Center in the Dover High School to the various mass care shelters. The Police Department will provide directions and traffic control at the Reception Center and will provide security for the mass care shelters.

The American Red Cross will provide the manpower to manage and operate the shelters. The ARC will supply food and bedding for evacuees. Other available supplies including clothing will be provided as available. The Salvation Army may assist the ARC in this function.

The allocation and use of space in all the facilities listed in Table 3 will be coordinated directly with the persons in charge of each facility. In the case of schools, the principals will maintain the normal support staffs of the schools to run the school facilities (i.e., mechanical systems, cafeterias, administration, etc.). The Health Officer and Rescue Section Chief will assist the DHS, as required, with referrals for medical services and emergency medical transportation, as required. If supplementary emergency medical transportation is anticipated, the Dover Rescue Section Chief should contact the State EMS Coordinator through the NHCDA. | 2

TABLE 3
MASS CARE SHELTERS

<u>Facility</u>	<u>Address</u>	<u>Shower/ Toilet</u>	<u>Telephone Number</u>	<u>Capacity¹</u>
1. Woodman Park School	Silver Street	yes/yes		600
2. St. Thomas Aquinas High School	Dover Point Road	yes/yes		1200
3. Dover Junior High Sch.	Locust Street	yes/yes		600
4. Horne Street School	Horne Street	yes/yes		500
5. Garrison School	Morningside Drive	yes/yes		250
6. Dover Recreation Center ²	Washington Street	yes/yes		150
7. Municipal Building Auditorium	Central Avenue	no/yes		300
8. Dover Baptist Church Hall	Washington Street	no/no		200
9. St. Charles Church Basement	Central Avenue	no/yes		200
10. St. John's Methodist Hall	Rutland Street	no/2 baths		200
11. St. Mary's Church Hall	Chestnut & Third Streets	yes/yes		300
12. Masonic Temple	Washington Street & Central Avenue	no/yes		200
13. Loyal Order of Elks Hall	Durham Road	no/4 baths		500
14. Dover Hebrew Temple Hall	Fourth Street	no/no		100

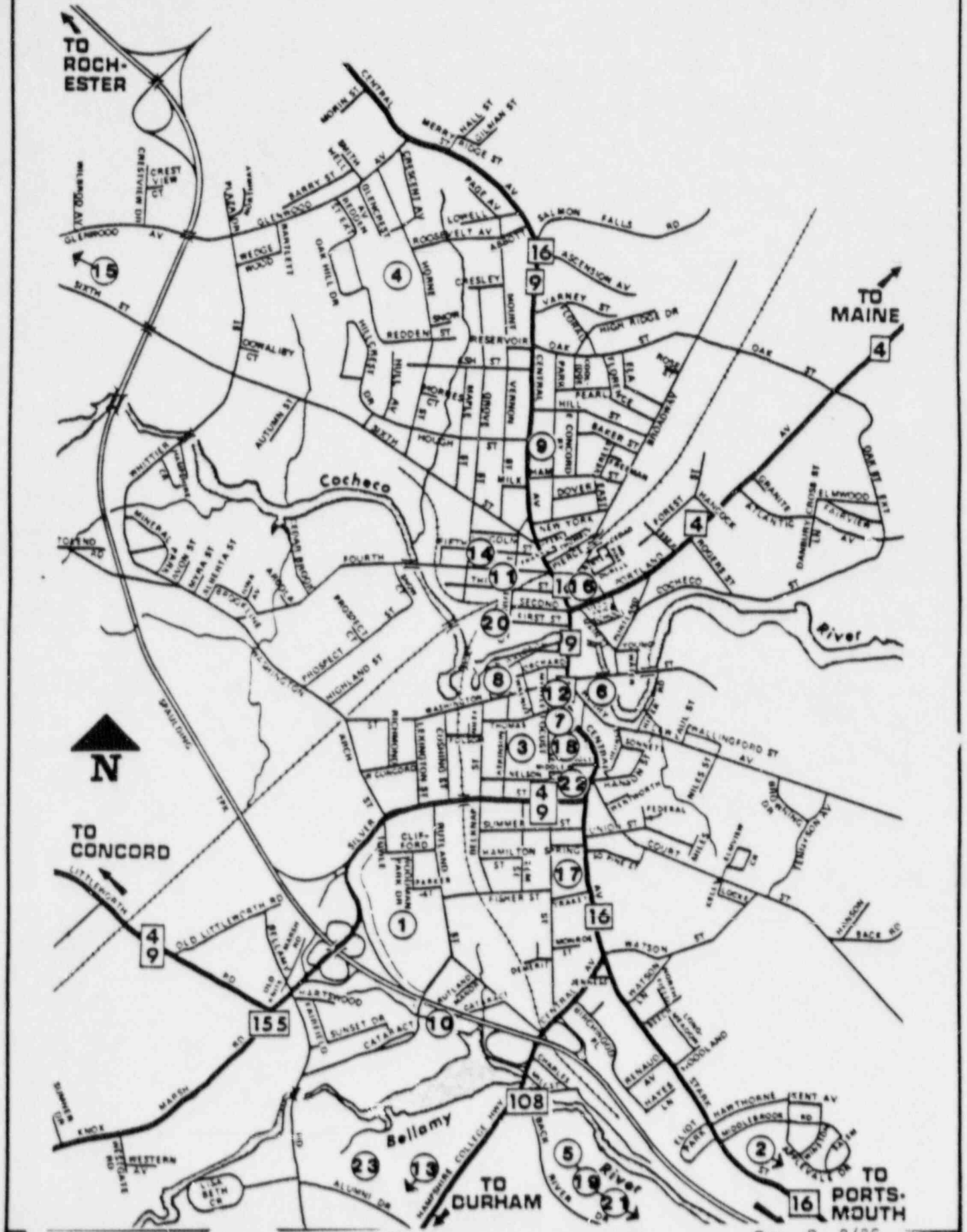
TABLE 3
MASS CARE SHELTERS

<u>Facility</u>	<u>Address</u>	<u>Shower/ Toilet</u>	<u>Telephone Number</u>	<u>Capacity¹</u>
15. Hellenic Hall	Longhill Road	no/yes		400
16. St. Jean's Hall ²	Central Avenue	no/yes		100
17. St. Joseph's Church Hall	Central Avenue	no/yes		200
18. St. Thomas' Church Hall	Hale Street	no/yes		200
19. Back River Community Hall	Back River Road	no/yes		50
20. Loyal Order of the Moose Hall	Chestnut Street	no/yes		150
21. Simpson's Pavilion ² (unheated)	Back River Road	no/yes		150
22. First Parish Church (2 halls)	Central Avenue	no/yes		400
23. Dover High School ²	Durham Road	yes/yes	(School Superintendent)	2500

1. Capacities estimated by Dover Emergency Program Manager

2. Denotes no cafeteria

FIGURE 4
DOVER FACILITIES & TRAFFIC CONTROL POINTS



H. RECOVERY AND RE-ENTRY

Recovery in offsite areas consists of establishing plans and procedures for deciding when and how to relax protective measures, including returning to evacuated areas. In New Hampshire, the decision to initiate recovery and re-entry operations is made by the Governor, who will base his decision on the recommendations of the DPHS and the NHCOA.

Once an area has been evacuated, residents will be restricted from entering the affected area until the DPHS has determined that dose commitment levels for the general public and the requirements of the New Hampshire rules for the control of radiation are not exceeded. If the levels are exceeded, individuals will be allowed to enter only after the radioactivity has decayed to background levels or appropriate decontamination is completed. If the levels are higher than background, but less than those prescribed for the general population, individuals may be allowed to enter the area and advised to wash paved surfaces and vehicles that were left in the affected area prior to resuming normal activity.

Recovery orders from the State will be coordinated with the Dover and the evacuated Town Emergency Response Organizations. A recovery committee will be established after the evacuated Town officials have determined how long it will take to re-establish the Emergency Response Organizations.

This coordination will provide for an orderly return to normal activity as local officials are prepared to provide normal municipal services and responses to questions on re-entry issues that will be raised by the returning evacuees.

Recovery instructions will be broadcast to the public via the Emergency Broadcast System. These advisories will explain what actions the public should take or that the area is considered safe, how traffic should proceed, what actions should be taken to clean contaminated surfaces and what precautions to follow for food and water supplies. These advisories may suggest that sensitive segments of the population such as women who are pregnant and children delay their return.

I. EXERCISES AND DRILLS

Exercises and drills are the methods by which plans and procedures are tested. Exercises are realistic, planned simulations of accidents, designed and conducted to simulate actual emergency conditions as closely as possible. Their purpose is to evaluate portions of emergency response capability.

Drills are preplanned simulations in which the participants are tested on one or more procedures, or aspects of the Plan. The primary purpose of drills is to train individuals in a controlled situation. Drills may be conducted with Dover alone or in conjunction with State or utility drills.

FEMA requires periodic drills and an annual exercise to assess the adequacy of emergency plans. The NHODA may request that the City of Dover participate in exercises. The Emergency Program Manager will coordinate with State and local organizations/agencies in scenario development and inform local organizations/agencies of the extent of their participation.

J. TRAINING

Training is necessary to ensure that emergency response personnel in Dover are familiar with their responsibilities and proficient in their ability to carry out their detailed procedures which might involve specific technical knowledge.

The NHCDA will conduct a comprehensive training session for all emergency response personnel. The Dover Emergency Program Manager, in conjunction with the NHCDA, will schedule the appropriate people for this course. Topics to be included are:

- o Notification
- o EOC Operation
- o Communications
- o Logistics
- o Traffic Control
- o Radiation
- o Reception Center Operation
- o Mass Care Shelter Operation
- o Exercises and Drills
- o Decontamination

Training records will be maintained by the Dover Emergency Program Manager and include a lesson plan outline. Initial training will be scheduled expeditiously for newly assigned personnel while refresher training will be scheduled at a maximum interval of one year.

III. CHECKLISTS OF EMERGENCY PROCEDURES

A. PURPOSE OF SECTION III

This section provides checklist procedures to be followed in the event emergency conditions at the Seabrook Station Nuclear Power Plant require an evacuation of all or a portion of the EPZ. These emergency procedures are for use by the City Manager, Emergency Program Manager, the Public Safety Dispatcher, Host Facilities Coordinator, and Fire Chief.

B. CITY MANAGER

This checklist of procedures for the City Manager of Dover is to be used in the event that emergency conditions at the Seabrook Station Nuclear Power Plant may result in or have resulted in an evacuation recommendation. If the City Manager cannot be contacted or is otherwise unavailable, the emergency duties and responsibilities of the City Manager shall be taken over by the Emergency Programs Manager.

- | | <u>NOTE</u> | <u>TIME</u> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|
| 1. Receive notification from NHCDA through the Dover Public Safety Dispatcher via telephone of emergency conditions at Seabrook Station which may result in an evacuation or have resulted in an evacuation recommendation. NHCDA will request the activation of the Reception Center. | _____ | 2 |
| 2. Report to the Dover EOC in the City Hall, 2nd Floor Conference Room | _____ | 2 |
| 3. Keep up to date with public information releases on radio station WOKQ (97.5 FM). Additional stations also in the Emergency Broadcast System (EBS) are WHEB (750 KHZ AM), WWNH (930 KHZ AM), WTSN (1270 KHZ AM), WAVI (1380 KHZ AM), WMYF (1540 KHZ AM), WJNH (91.3 MHZ FM), WCYT (96.7 MHZ FM), WOKQ (97.5 MHZ FM), WHEB (100.3 MHZ FM), and WERZ (101.7 MHZ FM), | _____ | 2 |
| 4. In coordination with the School Superintendent, contact the Dover High School Principal and request preparations be made to ready the Reception Center for the Division of Human Services. | _____ | |
| 5. Ensure the Emergency Program Manager has established communications with the State EOC, IFO/EOF and Reception Center. | _____ | |

CITY MANAGER (cont'd)

NOTE TIME

6. Have mass care shelters notified. _____
7. Have the Police Chief prepare to direct evacuees to the Reception Center, provide traffic control and security. _____
8. Have the Health Officer go to the Reception Center to assist DHS and DPHS in health matters and referrals. _____
9. If DHS personnel will not arrive at the Reception Center prior to evacuees, appoint a temporary Reception Center Supervisor, (The Dover High School Principal will normally be the alternate.) _____
10. Stand by to assist the Reception Center, decontamination center and mass care shelters as needed. _____
11. If requested by DHS, DPHS or ARC, provide needed supplies through special requisition. Maintain documentation of items procured. _____
12. If required, provide space and communications for evacuated Emergency Response Organizations. _____
13. Assist DHS and ARC in providing information to evacuees on re-entry. _____
14. Maintain an event and communications log. _____

C. EMERGENCY PROGRAM MANAGER

This checklist of procedures for the Emergency Programs Manager of the City of Dover is to be used in the event that emergency conditions at the Seabrook Station Nuclear Power Plant may result in or have resulted in an evacuation recommendation. If the City Manager cannot be reached by the Public Safety Dispatcher or if the City Manager is otherwise unavailable, the emergency duties and responsibilities of the City Manager shall also be taken over by the Emergency Programs Manager.

2

NOTE TIME

1. Receive notification from NHCDA through the Dover Public Safety Dispatcher via telephone of emergency conditions at Seabrook Station which may result in an evacuation or have resulted in an evacuation recommendation. NHCDA will request the activation of the Reception Center.

2

2. Contact the following emergency response personnel using the phone list in Appendix A:

- EDC Operations/Planning Officers
- EDC Communications Officer
- American Red Cross Representative
- Salvation Army Representative

2

3. Report to the Dover EDC in the City Hall, 2nd Floor Conference Room.

4. If the City Manager has not reported to the Dover EDC, assume his duties (see Section III.B for checklist) until relieved.

5. Establish and maintain communications with the State EDC, IFD and Reception Center.

EMERGENCY PROGRAM MANAGER (cont'd)

NOTE TIME

6. Ensure that the EOC Operations/Planning Officers and EOC Communications Officer have assumed their emergency positions and facilities and equipment are operable. _____
7. Keep the City Manager informed of discussions with State agencies. _____
8. Consolidate requests for support and resources from City departments and discuss with City Manager. _____
9. Assist in logistical arrangements and resource allocation for the Reception Center and mass care shelters. _____
10. If required, provide space at the Quality Inn for evacuated Selectmen, staff and other officials. _____
11. Maintain an Event and Communications Log. _____
12. Ensure that the Fire Chief designates a person to act as Facilities Coordinator to maintain liaison between the reception center, the decontamination center and the local EOC. _____
13. If you receive notification that the decontamination center is to be opened, direct the Fire Chief to activate local monitoring personnel to staff the decontamination center. _____

D. PUBLIC SAFETY DISPATCHER

This checklist of procedures for the Public Safety Dispatcher of the City of Dover is to be used in the event that emergency conditions at the Seabrook Station Nuclear Power Plant warrant an ALERT or higher ECL to be declared and/or require an evacuation and subsequent activation of the Dover Emergency Response Organization and Reception Center(s). The Public Safety Dispatcher is responsible for notifying the members of the Dover Emergency Response Organization.

NOTE TIME

1. Receive notification from NHODA that an ALERT or higher ECL has been declared at Seabrook Station, and/or that the potential for an evacuation exists or that an evacuation has been recommended. Record the notification message, the caller's name and phone number.

Name _____
Phone Number _____

2. Verify the message with a call back to NHODA at the IFD (If the IFD has not been activated contact the State EOC (

3. Notify the following (see Appendix A for phone numbers):

City Manager _____
Mayor _____
Emergency Program Manager _____
Police Chief _____
Fire Chief _____
Public Works Director _____
School Superintendent _____
Public Information Officer _____
Transportation Officer _____
Health Officer _____
Welfare Director _____
Purchasing Agent _____
Finance Director _____

NOTE TIME

4. If the Emergency Program Manager cannot be reached,
then notify the following:

Assistant Emergency Program Manager
EOC Operations/Planning Officer
EOC Communications Officer

5. Maintain an Event and Communications Log.

E. HOST FACILITIES COORDINATOR

1. Receive notification to report to the Reception and Decontamination Centers. _____

2. Upon arrival, meet with the Reception Center Manager, the DPHS Supervisor, Police Officials, Civil Defense Authorities, and other fire officials to confirm a means of on-site communications (using messengers, school intercom system, radios, etc.) and to review status of the facility. _____

3. Establish contact with the local EOC and confirm the telephone number where you can be reached if radio communications are not available. _____

4. In coordination with the Senior Firefighter, the DPHS Supervisor, the Reception Center Manager, and the ranking police official assure proper set-up of the facility (see Appendix B2) as well as outside vehicle monitoring and parking areas prior to arrival of evacuees. _____

5. Report any unmet personnel or equipment needs to the local EOC. _____

6. Prior to receiving evacuees, identify personnel which may provide emergency medical treatment on-site and notify all facility personnel (through their supervisors) of how to access this emergency medical help. _____

7. Coordinate with the local EOC on obtaining additional replacement clothing if initial Decontamination Center supplies appear insufficient. _____

8. Notify the DPHS Supervisor of the estimated time of arrival of the additional clothes. _____

9. Monitor vehicle and evacuee processing to assure the facility is operating effectively and assist in resolving problem areas with facility supervisory personnel. _____

10. In the opinion of the DPHS Supervisor, if the Decontamination Center becomes overcrowded or too contaminated to effectively monitor and decontaminate evacuees, notify the local EOC of the need to activate Decontamination Center B. _____
11. Receive notification from the local EOC that Decontamination Center B has been activated and is ready to receive evacuees. _____
12. Inform the DPHS Supervisor of Center B activities and notify Vehicle and Registration Entrance Monitoring Areas to refer contaminated evacuees to Center B by distributing strip maps. _____
13. In the event Student Waiting Areas at the Reception Center become overcrowded, coordinate with the local EOC on opening back-up waiting facilities. _____
14. Upon receiving information on the radiological emergency condition from the local EOC, keep facility supervisory personnel aware of current incident status. _____
15. After termination of the Reception, Decontamination and Mass Care operations, assist in returning all facilities to their pre-incident status in coordination with the local EOC and state agencies. _____

F. FIRE CHIEF

This checklist of procedures for the Fire Chief of the city of Dover is to be used in the event that emergency conditions at the Seabrook Station Nuclear Power Plant warrant an ALERT or higher EOL to be declared and require an evacuation and subsequent activation of the Manchester Emergency Response Organization and Reception Center. The Fire Chief is responsible for activating and providing personnel to staff the decontamination centers.

Note Time

1. Receive notification from the Dover Police Dispatcher via telephone of emergency conditions at Seabrook Station that may result in or have resulted in an evacuation.
2. Activate the decontamination center.
3. Contact a "Senior Firefighter" to operate the decontamination center in accordance with Appendix B.
4. Appoint a Host Facilities Coordinator for coordination of activities at the decontamination center.
5. Maintain lists of trained decontamination center personnel and assure assignment of personnel to the decontamination center as required.

APPENDIX A

INDIVIDUAL/AGENCY CALL LIST

Appendix A

INDIVIDUAL/AGENCY CALL LIST

<u>City of Dover</u>	<u>Name</u>	<u>Home</u>	<u>Work</u>
City Manager	Reynold Perry		
Mayor	Jesse Andrew Galt		
Police Chief	Charles Reynolds		
Fire Chief	David Bibber		
Dover Rescue Section Chief	Lt. David Keeler		
Public Works Director	Pierre Bouchard		
School Superintendent	Gerald Daley		
(Dispatcher for School Department)			
School Principals	(to be notified by Superintendent)		
St. Thomas Aquinas H.S.	Brian Newhall, Principal		
Acting Emergency Program Manager	David Bibber		
EOC Communications Officer	William Dodge		
Public Information Officer	Paul LeBlanc		
Transportation Officer	Robert Elliot		
Health Officer	Beatrice Fogg		
Human Services Director	Margaret Seymour		
Purchasing Agent	Dan Kelly		
Finance Director	Jeff Harrington		

2

INDIVIDUAL/AGENCY CALL LIST

State

NHCDA (EOC)

or

NHCDA (IFO/EOF)

DHS

DPHS

State Police

National Guard

Rumor Control

1/2

Other

American Red Cross

Chairperson

Joel Sherburne

Disaster Chairperson

Vacant

Salvation Army

Capt. Mike Copeland

(Rochester Chapter)

1/2

APPENDIX B
DECONTAMINATION FACILITY

APPENDIX B
DECONTAMINATION FACILITY

CONTENTS:

Overview

B1 Senior Firefighter Checklist

B2 Procedures for Opening a Decontamination Center

B3 Description of Staffing, Functions and Attire

B4 Monitoring Methods

B5 Decontamination Methods

B6 Monitoring Equipment and Operational Procedures

B7 Decontamination Center Close Down

B8 Supply Inventory

B9 Call List

APPENDIX B
DECONTAMINATION CENTER OPERATIONS OVERVIEW

This Appendix provides procedures to be followed by Host Community monitoring and decontamination personnel in the set-up and operation of a Decontamination Center.

The New Hampshire Division of Public Health Services (DPHS) is responsible for control of the host community monitoring and decontamination operation. A DPHS representative has been assigned to the Decontamination Center to provide supervision to the Center and to work with local fire and other Reception Center officials.

The Host Community decontamination facility will provide for evacuees, emergency worker, vehicle and equipment monitoring and decontamination. There will be a primary and secondary facility for monitoring and decontamination in the Host Community. These facilities can operate in tandem when the need exists to serve large numbers of people, or the secondary facility can be used should the previous facility become unusable.

Plume Exposure EPZ emergency workers will be monitored and decontaminated during the first 12 hours post-incident at their community's Host Community Decontamination Center. After the worker's vehicle is monitored and parked, the worker will report to the waiting area for contaminated individuals and identify him/herself as an emergency worker to Control Point monitors. Dosimetry will be collected here and referred to the DPHS Supervisor. After 12 hours post-incident the Manchester Decontamination Center will be operated for emergency worker decontamination for the duration of the incident.

The operation of the Decontamination Center has been divided into five functional areas (See Appendix B3):

I. Decontamination Administration

The DPHS Decontamination Supervisor, the Host Facilities Coordinator and the Senior Firefighter are the on-site lead personnel. The DPHS Decontamination Supervisor will maintain communications with the DPHS EOC Radiological Health Technical Advisor (RHTA) for technical advice on matters related to decontamination of evacuees and emergency workers.

II. Exterior Operations

Exterior operations are all monitoring and initial decontamination efforts which take place prior to a person entering the Decontamination Area. Vehicle monitoring, Registration Area monitoring and Control Point monitoring and primary decontamination are all exterior operations.

This functional area serves as the triage for our operation by "spreading out" the population using the initial vehicle monitoring. Evacuees from contaminated vehicles will first receive monitoring at the Control Point and evacuees from clean vehicles first receive monitoring at the registration Area Entrance.

This system, following good health physics practice, allows personnel to monitor large numbers of evacuees during peak periods.

2

III. Interior Operations

Interior Operations are all monitoring and decontamination activities which take place in the Decontamination Area. Buffer zone monitoring, and shower area monitoring and decontamination are included in this functional area.

IV. Student Area Operations

In the event of a contaminating radiological incident, monitoring of students will occur while awaiting parent pick-up. Monitors will be dispatched by the DPHS Supervisor to the Student Waiting Areas to check students for contamination. If a student is contaminated, the METTAG will be used to indicate this and parents will be advised to take the student to the Decontamination Center.

2

V. Health Care Host Facility Operations

In the event of a contaminating radiological incident, monitoring of evacuated hospital patients and nursing home residents will occur at their host health care facilities. A monitoring team will be dispatched by the DPHS Supervisor to the facility to perform monitoring of patients and residents from the various EPZ facilities to check for contamination. If a resident or patient is contaminated, monitoring teams will coordinate with the host facility and the DPHS Supervisor on the method of decontamination.

2

INABILITY TO DECONTAMINATE

Contaminated open wounds are not decontaminated at the Decontamination Center, but are referred to a medical facility by the DPHS Supervisor.

Individuals unable to be decontaminated at the Center will be referred to the DPHS Supervisor. He/She will, with advice/direction passed through the State EOC DPHS RHTA from the Director, DPHS, determine the appropriate course of action. This may range from a follow-up monitoring at a later date for low contamination levels, to referral to medical authorities for internal contamination. The Director, DPHS, in conjunction with the DPHS Supervisors and the EOC RHTA, may establish action thresholds in advance and according to the nature and scope of a radioactive release.

EQUIPMENT

Decontamination Center equipment will be maintained at the Host Community Fire Headquarters. The Host Community Fire Chief will be responsible for replacement and routine maintenance of supplies. Upon Reception and Decontamination Center activation, equipment will be dispatched to the Center.

APPENDIX B1
SENIOR FIREFIGHTER CHECKLIST

1. Receive notification to open the Decontamination Center. _____
2. Contact the initial set-up team and have them report to the Decontamination Center. (See Appendix B9, Call List) _____
3. Assure that the Decontamination Kit (See Appendix B8 for Contents) is brought from the Fire Headquarters to the Center. _____
4. Remove all nonessential people from the designated decontamination area. _____
5. Issue dosimetry and complete Dosimetry-KI Report Form (See Appendix B6, Form 1) and Radiological Equipment Log (See Appendix B6, Form 2). _____
6. Prepare area for receipt of possibly contaminated individuals by putting the Decontamination Center into operation (See Appendix B2). _____
7. Consult with the DPHS Supervisor to review the status of the equipment on hand and to discuss the specific duties (See Appendix B3) to be performed for the duration of this emergency. _____
8. Determine with the DPHS Supervisor the need for additional personnel, equipment, information or radiological technical advice. _____

POINTS FOR CONSIDERATION

- . Bringing in additional staff to increase the facility's capability (See Appendix B3)
- . Establishing the Secondary Decontamination Center.
- . Necessary supplies to replenish the initial stock
- . Rotation of Staff

9. Request from the Host Facilities Coordinator any additional supplies/equipment/personnel needed. _____
10. Assure that staff follow any additional instructions given by the DPHS Supervisor. (See Appendices B4 and B5 for monitoring and decontamination procedures.) _____
11. Insure that personnel dosimetry is read every half hour and that the reading is recorded. _____
12. Periodically conduct area monitoring according to procedures in Appendix B4. Area monitoring must be done frequently when large numbers of contaminated individuals are being processed. Report findings to DPHS Supervisor. _____
13. Close Decontamination Center upon notification from DPHS Supervisor (See Appendix B7). _____

APPENDIX B2
PROCEDURE FOR OPENING A DECONTAMINATION
CENTER (PRIMARY AND SECONDARY)

1. Remove all people from the interior Decontamination Center area. _____

2. Set up the interior area as shown on Form 5 for the primary center or Forms 7 and 8 for the secondary center.
 - A. Remove any unnecessary equipment or material from the designated area. _____

 - B. Set up radiation signs, yellow rope, tape or other appropriate barriers (i.e., close doors) in order to clearly delineate the area. _____

 - C. Line large garbage containers with plastic trash bags. _____

 - D. Cover the floors of both the buffer zone and the decontamination area with plastic material and paper (shower area) and secure coverings to the floor with tape. _____

 - E. Cover all stationary devices in the designated area which are not needed for the operation of the Decontamination Center with plastic. _____

 - F. Isolate the air system from the rest of the building. _____

 - G. Put radiation detection instruments and the report forms on tables at the monitoring points. _____

 - H. Place decontamination materials and necessary administrative supplies on tables in the Decontamination Center. _____

 - I. Attach the flexible shower hoses to showers for use. Insure that the water source flow and temperature will be adjustable for the comfort of the contaminated person. _____

3. Prepare exterior area as shown on Forms 1, 2, 3 and 4 for the Primary Center, or Form 6 for the Secondary Center.

A. Establish traffic and evacuee flow by erecting barriers and posting signs for

- . Vehicle monitoring and parking _____
- . Student Entrance/Parent Pick-Up and Reception Center Entrance _____
- . Evacuee Monitoring (All points) _____

B. Distribute radiation detection instruments and equipment to all monitoring areas. _____

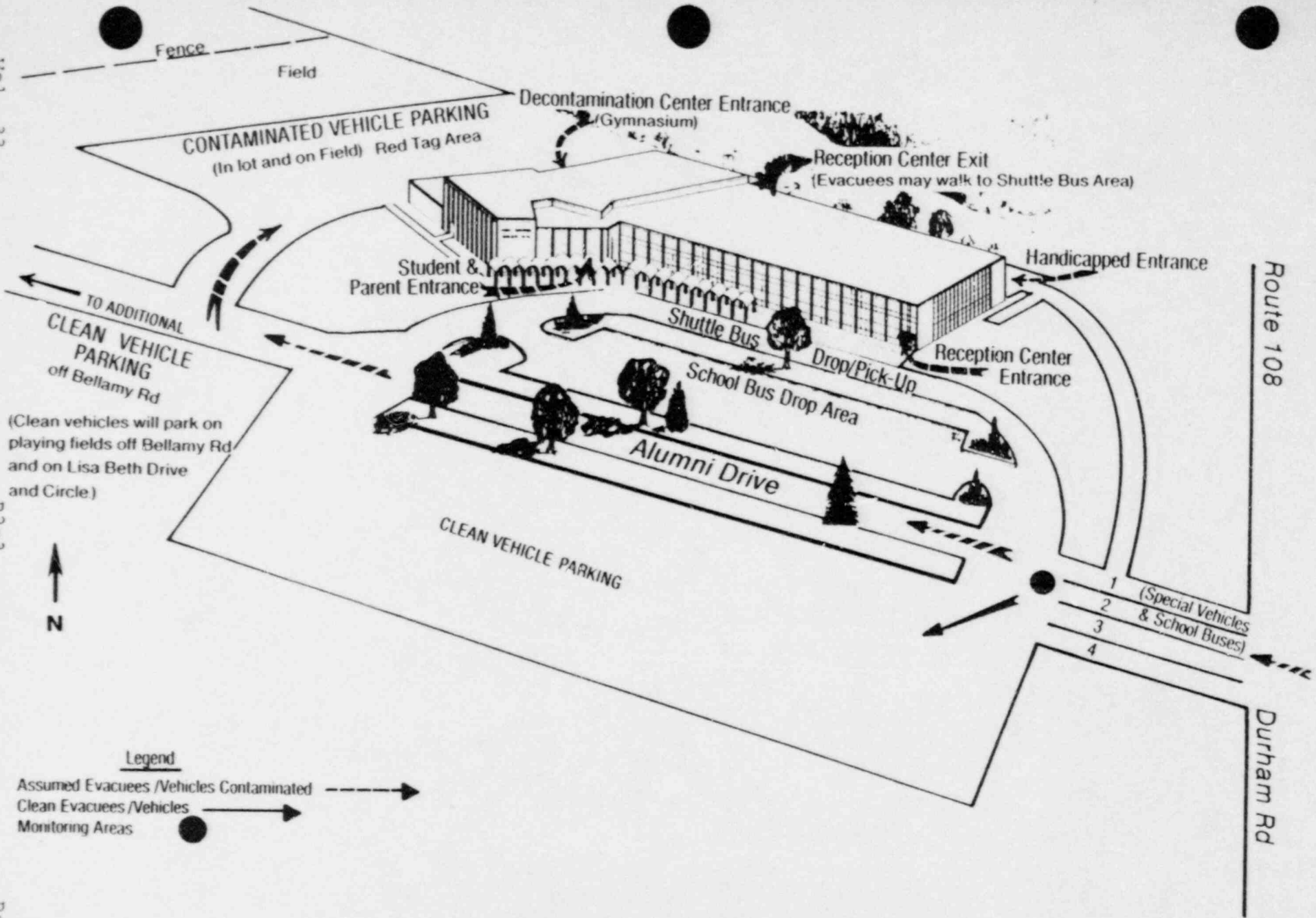
C. At Registration Entrance monitoring area (at the front of each line) place a plastic sheet down for each incoming line. _____

D. Remove any unnecessary equipment and have obstructing vehicles removed. _____

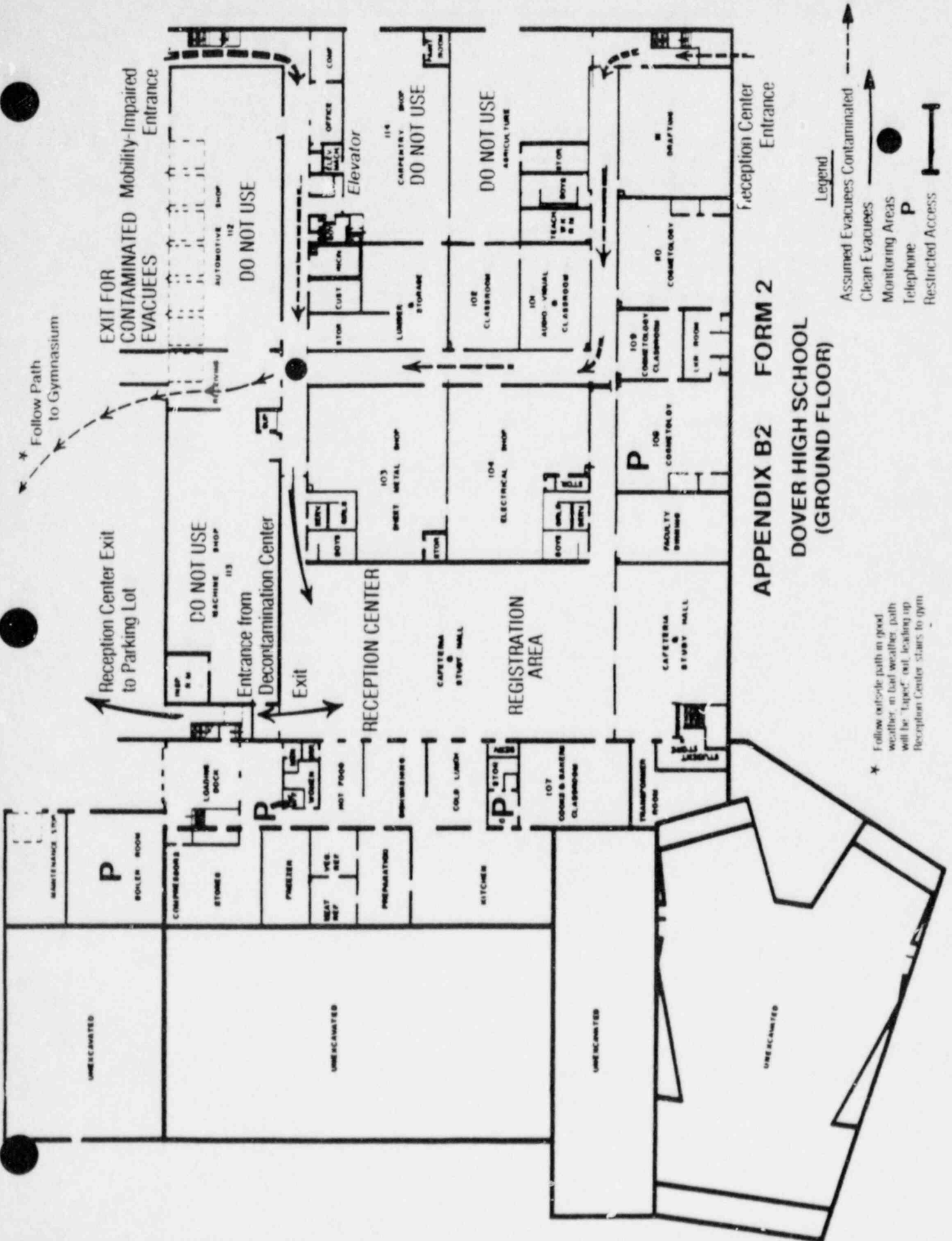
4. Make operational check of dosimeters and of radiation instruments (See Appendix B6). _____

5. Wear appropriate protective clothing in order to perform the duties assigned (See Appendix B3). _____

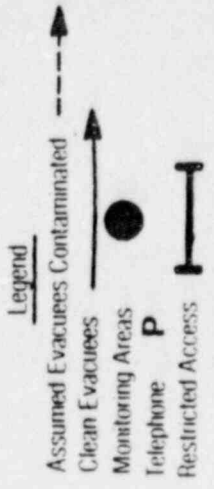
6. Make operational check of Internal Communication Radios and assure the DPHS Supervisor has a radio. _____



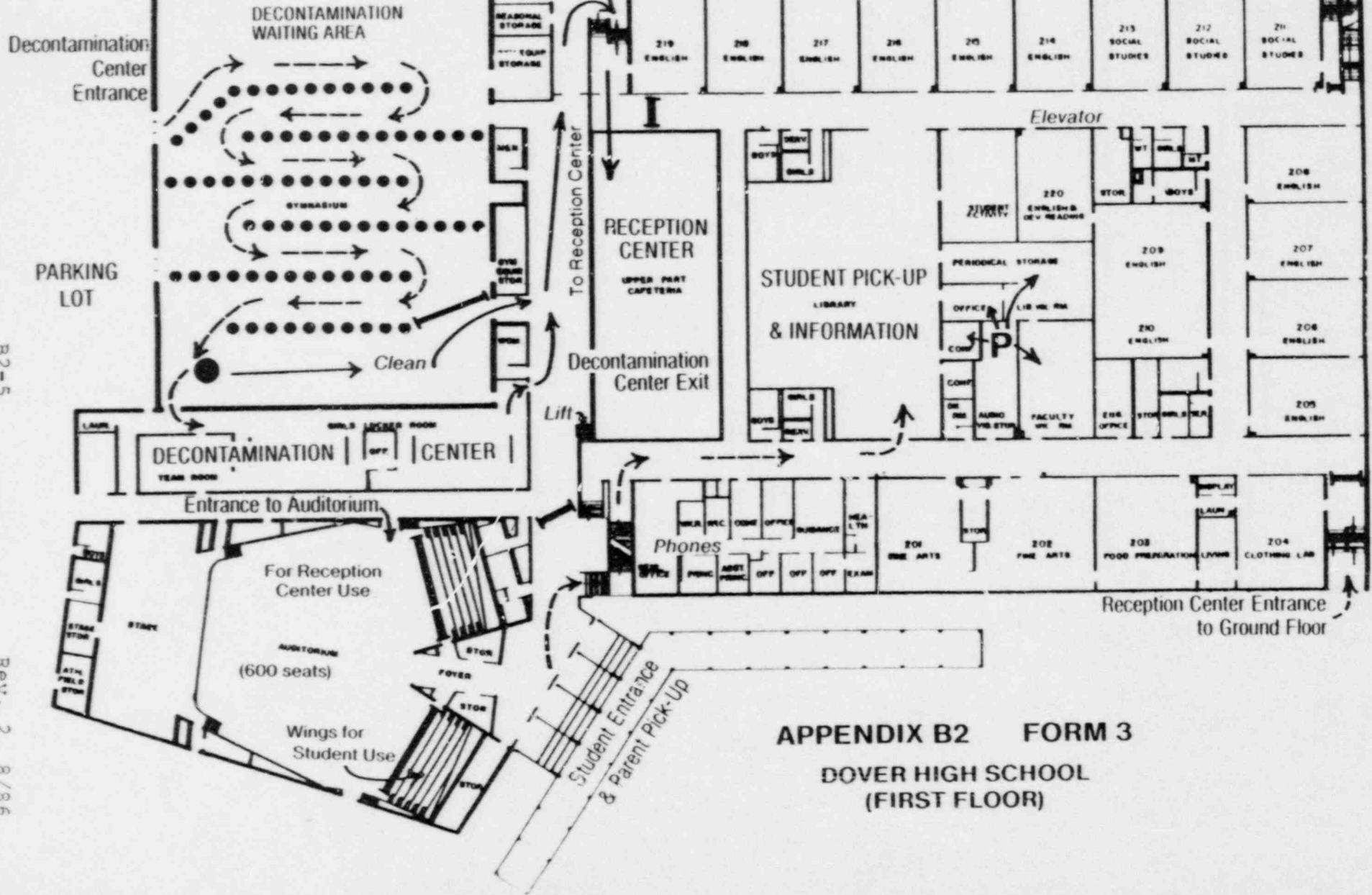
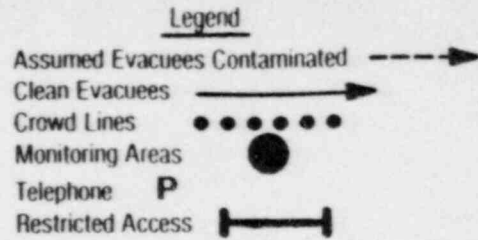
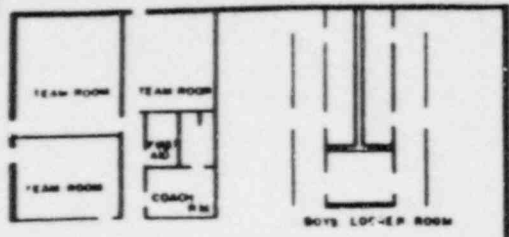
**APPENDIX B2 FORM 1
RECEPTION CENTER & DECONTAMINATION CENTER A
DOVER HIGH SCHOOL**



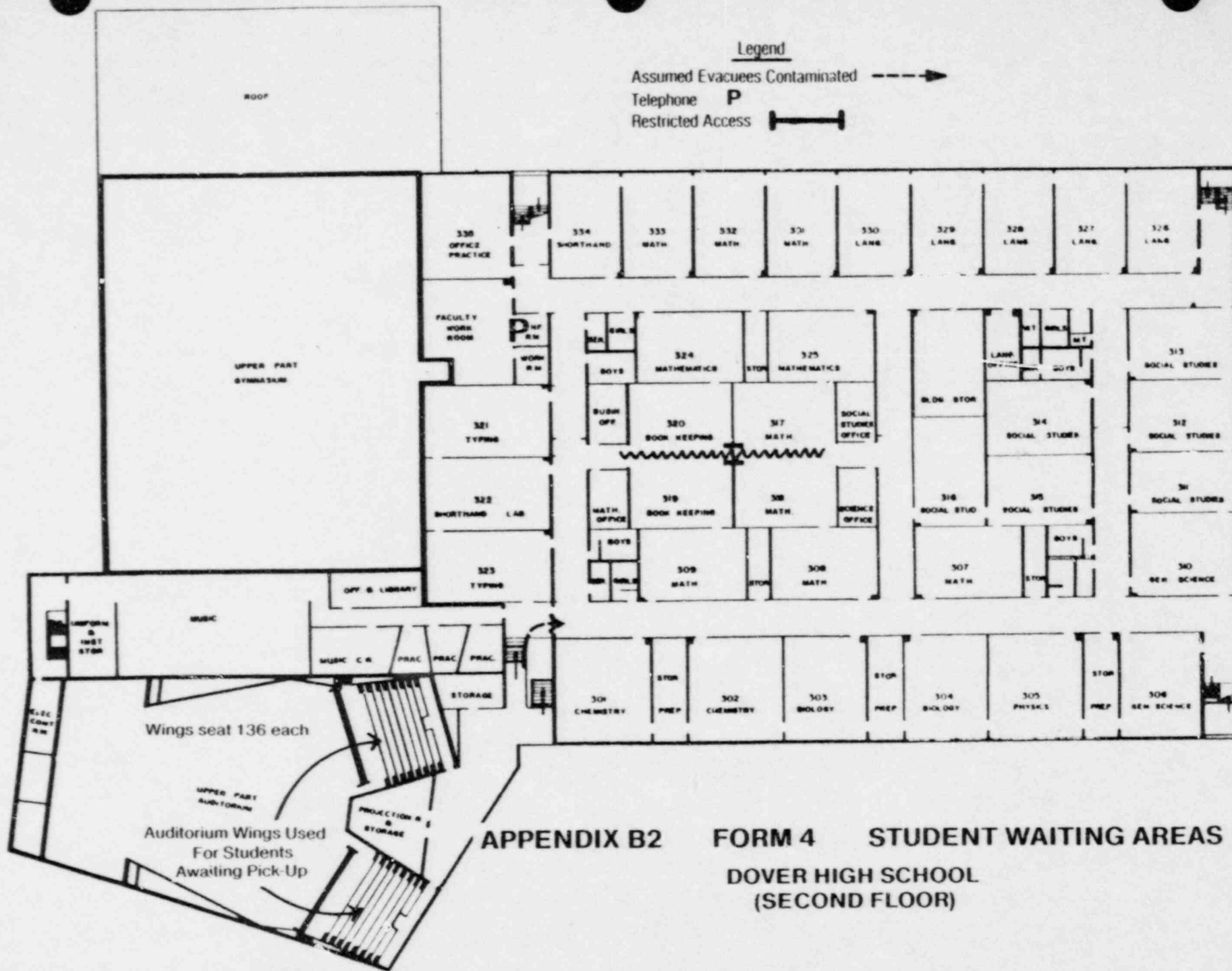
**APPENDIX B2 FORM 2
DOVER HIGH SCHOOL
(GROUND FLOOR)**



* Follow outside path in good weather; in bad weather path will be "taped" and leading up Reception Center stairs to gym

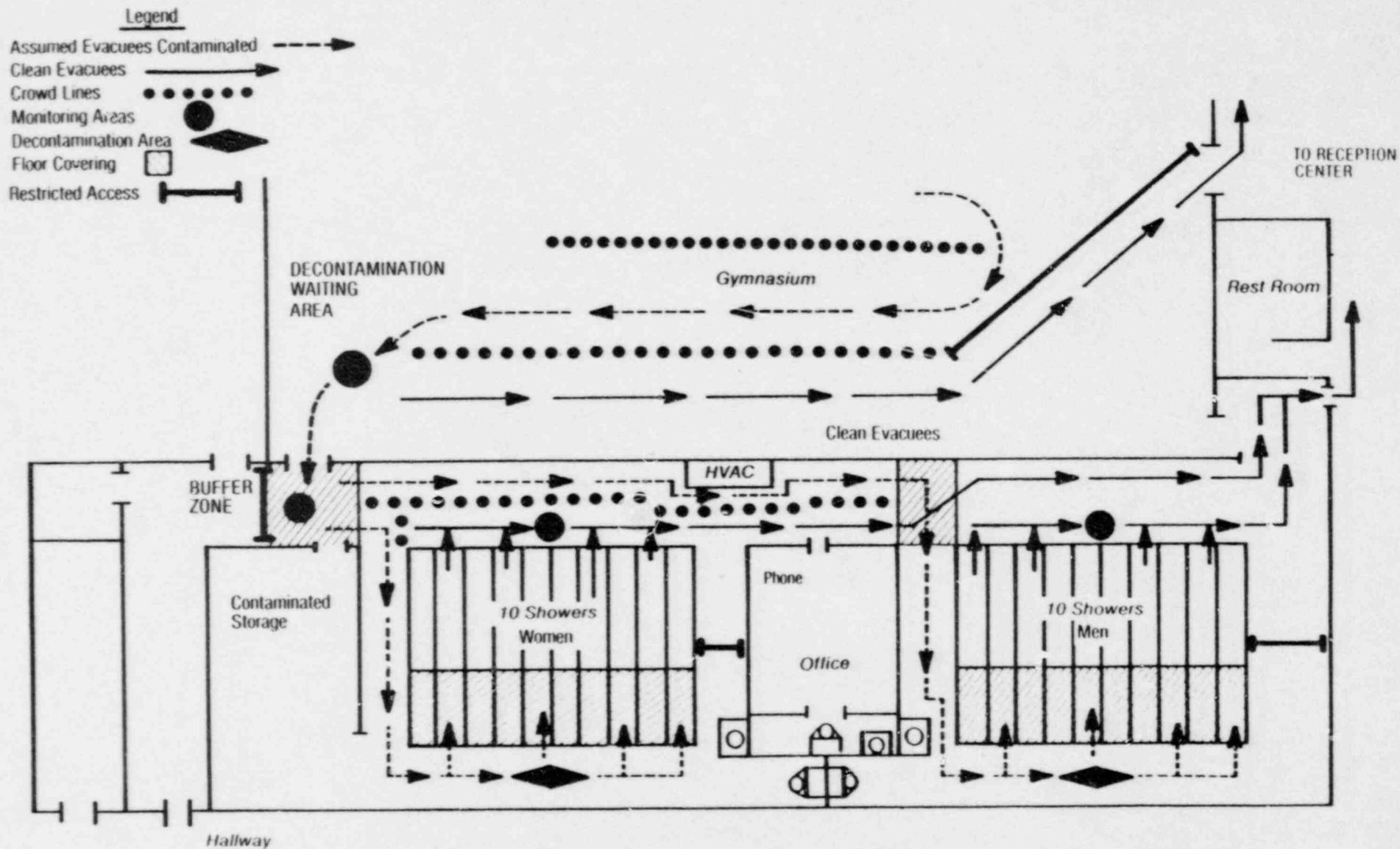


APPENDIX B2 FORM 3
DOVER HIGH SCHOOL
(FIRST FLOOR)



APPENDIX B2 FORM 4 STUDENT WAITING AREAS
DOVER HIGH SCHOOL
(SECOND FLOOR)

APPENDIX B2 FORM 5 DECONTAMINATION AREA A DOVER HIGH SCHOOL

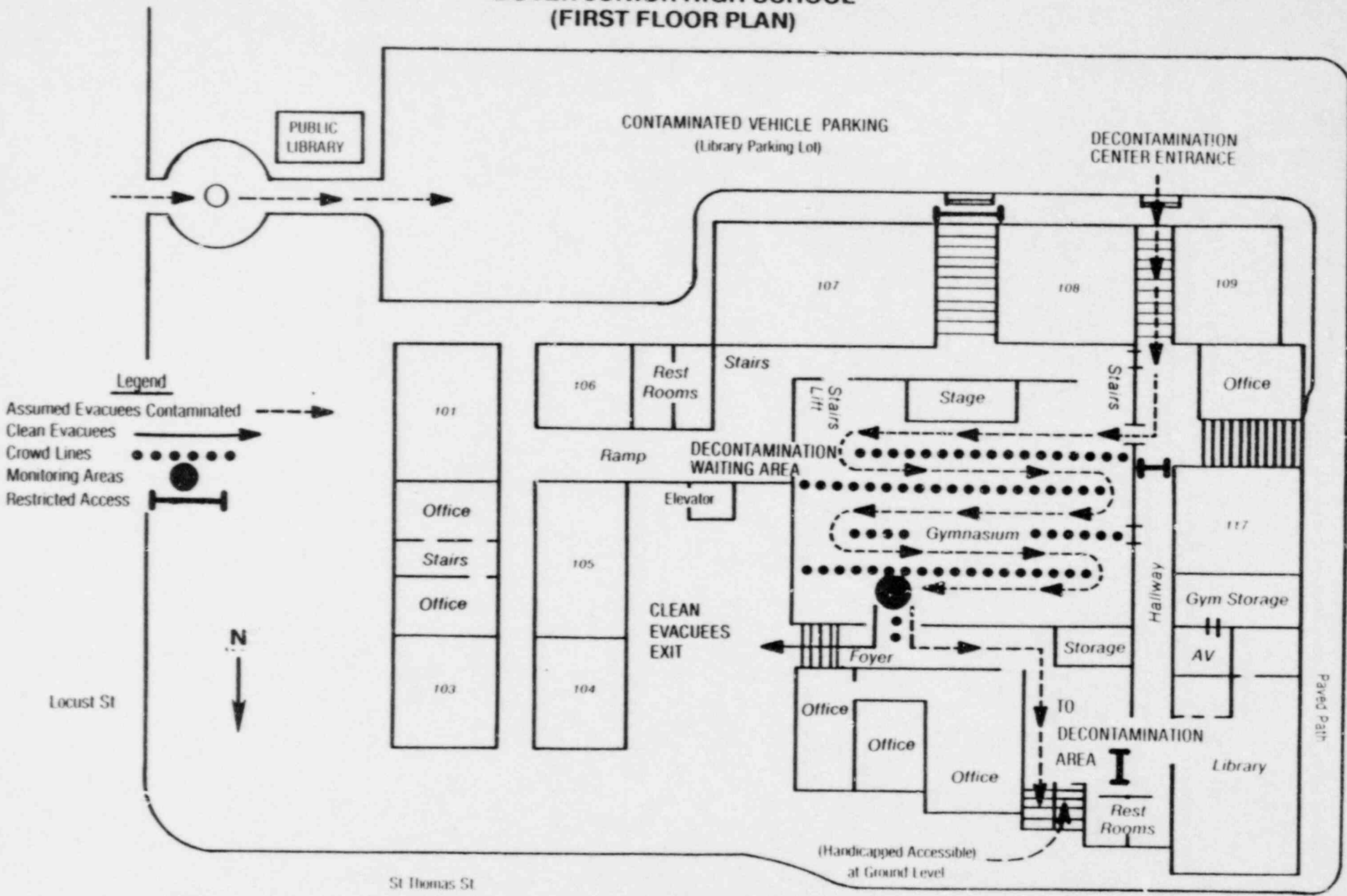


APPENDIX B2 FORM 6 DECONTAMINATION CENTER B
 DOVER JUNIOR HIGH SCHOOL
 (FIRST FLOOR PLAN)

Vol. 23

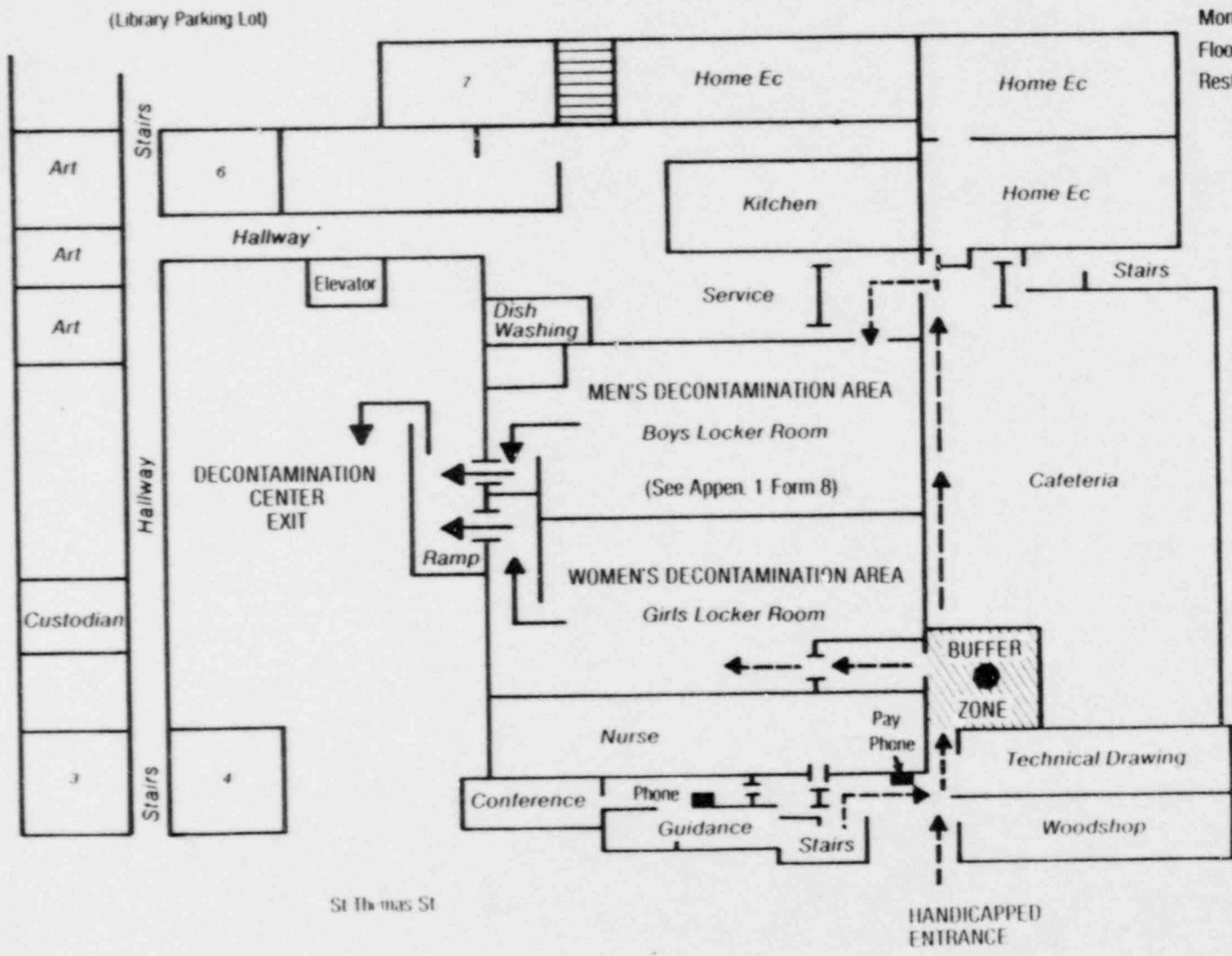
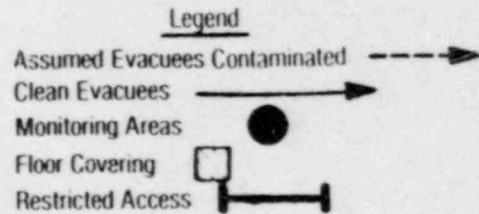
B2-00

Rev. 2 8/86



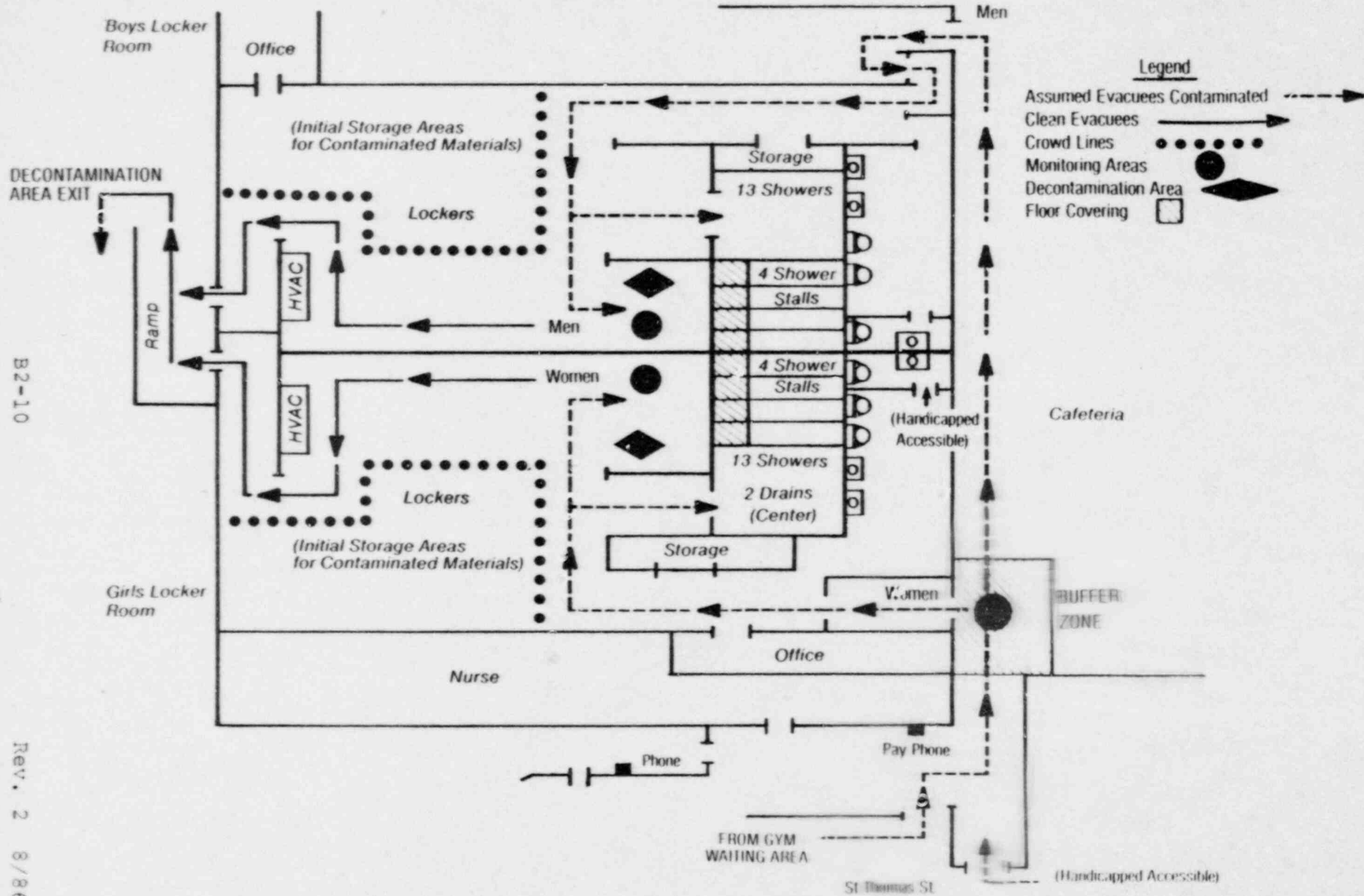
APPENDIX B2 FORM 7 DECONTAMINATION CENTER B

DOVER JUNIOR HIGH SCHOOL (GROUND FLOOR PLAN)



APPENDIX B2 FORM 8 DECONTAMINATION AREA B

DOVER JUNIOR HIGH SCHOOL (LOCKER AREA)



APPENDIX B3
DESCRIPTION OF STAFFING FUNCTIONS AND ATTIRE

2

The operation of a decontamination facility is divided into the following functional areas:

- o Decontamination Administration
- o Interior Operations
 - (Monitoring)
 - (Decontamination)
- o Exterior Operations
 - (Control Point)
 - (Registration Area Monitoring)
 - (Vehicle Monitoring)
- o Student Area Operations
- o Health Care Host Facility Operations

Each functional area operates on a team basis for staffing. If a decision is made to augment any operation, additional teams are added, not to exceed the level which the physical layout of the facility will support. Table 1 shows the staffing for each functional area, for the initial set-up and operating teams, and for the additional teams that may be added. (The staffing for the primary and secondary Decontamination Centers are presented):

2

TABLE 1
FUNCTIONAL AREA STAFFING

<u>Primary Center</u>	<u>Initial Staff</u>	<u>Additional Staff</u>	<u>Total</u>
Decon Admin	2	1	3
Interior-Monitoring	3	5	8
Interior-Decon	2	4	6
Exterior-Control Point	2	4	6
Exterior-Reg. Area Monitoring	3	6	9
Exterior-Vehicle Monitoring	4	7	11
Student Area	2	2	4
Health Care Facility	2	2	4
	<u>20</u>	<u>31</u>	<u>51</u>

2

2

TABLE 1 (Cont.)

<u>Secondary Center</u>	<u>Initial Staff</u>	<u>Additional Staff</u>	<u>Total</u>	
Decon Admin	2	1	3	2
Interior-Monitoring	3	5	8	
Interior-Decon	2	4	6	
Exterior-Screening	2	4	6	
Exterior-Reg. Area Monitoring	3	6	9	
Exterior-Vehicle Monitoring	<u>4</u>	<u>7</u>	<u>11</u>	2
	16	27	43	

DECONTAMINATION CENTER ADMINISTRATION

Staff: DPHS Supervisor
Clerical Person

2

Attire: Laboratory Coats
(Paper coveralls and shoe covers when in the interior of the center)

Responsibilities include:

1. Monitor Decontamination Facility personnel dosimetry records.
2. Work with the Senior Firefighter and Host Facilities Coordinator to identify and secure additional supplies, equipment and personnel.
3. Oversee Decontamination Facility operations, noting deviations from procedures to the Senior Firefighter.
4. Oversee Student and Host Health Care Facility monitoring.
5. Establish and maintain contact with the State EOC DPHS RHTA.
6. Establish communications with:
 - Reception Center Manager
 - Ranking police official on site
 - Host Facilities Coordinator
 - Secondary facility (if activated)
 - Medical facilities
7. Request technical guidance, through EOC DPHS RHTA, from the Director, DPHS, on handling and/or referral of emergency workers and individuals from the general population who cannot be decontaminated.
8. When emergency workers from EPZ communities are processed through the Decontamination Facility, collect their dosimetry and Dosimetry-KI Report Form, and as necessary include them in the Radiological Screening Program.

Interior Operations

Staff: Decontamination Staff - local
Monitoring Staff - local

Attire: "Scrub" suit
Tyvek coverall
Shower cap
Pair of PVC boots (taped around cuff)
Plastic apron
Pair of surgical gloves
Pair of nitrile gloves (taped around cuff)

Function: Decontamination staff will assist evacuees and contaminated emergency workers with local and general decontamination in the wash areas.

Monitoring staff will survey contaminated individuals within the Buffer Zone and/or the Decontamination Area. They will inform the decontamination staff of areas of contamination, will re-survey to determine if contamination is removed, will complete personnel radiological monitoring report forms and will provide completed forms to DPHS Supervisor for final disposition.

Exterior Operations

Staff: Control Point Monitor - local
Registration Area Monitors - local
Vehicle Monitors - local

Attire: Normal firefighter equipment

Functions: The Control Point Monitor will be stationed at the immediate entrance to the interior Decontamination Area. The Control Point Monitor will thoroughly monitor all individuals determined by other exterior monitors to be contaminated and all individuals whose vehicles were contaminated. This monitor can perform primary decontamination by collecting contaminated clothing/personal effects.

Vehicle monitors will screen all vehicles arriving at the Reception Center. Contaminated vehicles will be logged, and directed to a segregated parking area for later decontamination.

Registration Area Monitors will monitor all individuals approaching the Reception Center for registration. Individuals found contaminated will be directed to the control point for further monitoring and, if necessary, to begin decontamination procedures.

Student Area Operations

Staff: Monitor(s)

Attire: Laboratory coats or Firefighter equipment
Rubber gloves

Function: To monitor arriving students being evacuated from EPZ schools. Levels of contamination detected will be recorded on class rosters for dissemination to parents/guardians at the time of student pickup, and to DPHS Supervisor. Upon completion of monitoring, carry out simple decontamination (hand washing and removal and collection of contaminated outer clothing). Students with high levels of contamination will be referred to the DPHS Supervisor for disposition.

Health Care Host Facility Operations

Staff: Monitor(s) - local

Attire: Laboratory coats or Firefighting equipment
Rubber gloves

Functions:

Will be dispatched by the DPHS Supervisor to monitor arrivals from evacuated EPZ health care facilities at host facilities. Will refer all individuals found contaminated to host facility medical staff and DPHS Supervisor for disposition. Will record levels of contamination on the Personnel Radiological Monitoring Report Form (App. B4-Form 6) and will begin simple decontamination (hand washing and collection of contaminated clothing and bedding). Completed forms will be provided to DPHS Supervisor.

2

APPENDIX B4
MONITORING METHODS

- I. Vehicle Monitoring: There are two methods for completion of vehicle monitoring: in-depth monitoring and a simple screening. The primary shall be the in-depth process. Change to the screening process will occur only upon direction from DPHS Supervisor. The screening process differs from the in-depth in that it only detects the presence of contamination in the most likely places and defers to a later time a complete monitoring of each contaminated vehicle. Both in-depth monitoring and screening have the same initial process and vehicle disposition. Monitoring of internal areas of vehicles will take place after all people have been processed through the decontamination center.

Initial Procedures

- Verify operability of equipment frequently as per Appendix B5.
- Open the shield on the probe. Secure the probe in a surgical glove, making sure fingers aren't dangling. Put on headphones so that you may observe the position of the probe rather than watch the meter readings.
- Determine background radiation levels. Re-check background from time to time with and without probe cover.
- Place the probe 1/2 to 1 inch from the vehicle being monitored, being careful not to touch the vehicle. Avoid contact with potentially contaminated surfaces of the vehicle to prevent contaminating yourself.

In-Depth Procedures

- Monitor the entire external area of the vehicle. Areas most likely to be contaminated are the wheelwells, radiator grill and air filter.
- Begin survey of vehicle at the bottom of the vehicle and work upwards, monitoring all external surfaces.
- Monitoring of internal areas of vehicles will be done for contaminated vehicles after the people have been processed.

Screening Procedures

- Monitor the wheelwells, radiator grill, outside door handles and air filter.

Disposition Procedures

- A vehicle is considered CONTAMINATED if there is a reading of 100 cpm or more above background (this limit may be adjusted by DPHS Supervisor according to prevailing radiation levels outside). Do not confuse background radiation with your readings; contamination would be apparent by a sustained increase on the visual meter reading (Selector Switch on X 1 range), and also by a marked increase in the audible indication from the headphones. The audio response makes it possible to pinpoint any contaminated areas on the vehicle.
- If the vehicle is contaminated, fill out the Vehicle Radiological Monitoring Report Form, (see Form 1).
- Identify vehicles on the front window with a sticky patch:
GREEN = CLEAN
RED = EXTERNALLY CONTAMINATED ONLY
- Issue to all occupants of each vehicle a METTAG. If the car is contaminated remove the green tab on all METTAGs given to the occupants. See Form 2 attached.
- Provide the occupants with the appropriate public letters, if they do not already have them. See Forms 3 and 4.
- Direct occupants of contaminated vehicles to the control point monitoring location and occupants of clean vehicles to the registration area monitoring location.
- Direct the driver to the appropriate parking area.
- Direct all Emergency Workers from EPZ communities to report their status as emergency workers to the Control Point Monitors.

II. Personnel Monitoring

A. Registration Area Monitoring Student Area Monitoring

- Verify operability of equipment frequently as per Appendix B6.
- Open the shield on the probe. Secure the probe in a surgical glove making sure glove fingers aren't dangling. Put on headphones so that you may observe the position of the probe rather than watch the meter readings.
- Determine background radiation levels. Re-check background from time to time with and without probe cover.
- Place the probe about 1/2 to 1 inch from the body of the individual being monitored, being careful not to touch the individual.
- Monitor the hands first, then top of head and shoulders, the thyroid area and feet. Time taken should be approximately 1 minute. At the Registration Area, when an individual is found contaminated, the monitoring stops and the person is immediately referred to the Control Point.
- A person is considered CONTAMINATED if there is a reading of 100 cpm or more above background (this limit may be adjusted by DPHS according to prevailing radiation levels outside). Do not confuse background radiation with your readings; contamination would be apparent by a sustained increase on the visual meter reading (Selector Switch on X 1 range), and also by a marked increase in the audible indication from the headphone. The audio response makes it possible to practically pinpoint any contaminated areas on the individual.

- ° If an individual in the Registration Entrance Area is found to be contaminated:
 - Tear off green and yellow tabs on METTAG. (See Form 2)
 - Circle portion of body diagram on METTAG corresponding to contaminated area on person.
 - Record the CDV 700 reading on the METTAG.
 - Direct the person to the Control Point in the Decontamination Center Waiting Area.

- ° If an individual is not contaminated:
 - Tear all colored tabs from METTAG, leaving the black tab showing.
 - Stamp the METTAG with an identifying stamp.
 - Allow the person to proceed with registration.

- ° If a student is found to be contaminated:
 - Carry out simple decontamination.
 - If contamination is removed, issue a METTAG with all colored tabs removed, leaving the black tab, and stamp the METTAG with identifying stamp.
 - If contamination is not removed, issue a METTAG with the green and yellow tabs removed. Circle the portion of the body diagram on the METTAG corresponding to the contaminated area on the person, and record the CDV 700 reading on the METTAG.

- ° If a student is found to be not contaminated, issue a METTAG with all colored tabs removed, leaving the black tab, and stamp the METTAG with the identifying stamp.

- ° For all students, record METTAG control numbers on the class rosters and, if found, level of contamination.

- ° Provide a copy of the class roster to DPHS Supervisor.

B. Control Point Monitoring
Decontamination Monitoring

- If a person identifies him/herself as an emergency worker from an EPZ community, collect their dosimetry and Dosimetry-KI Report Form. Pass this material immediately and directly to the DPHS Supervisor. Process the person in accordance with the following steps.
- Verify operability of equipment frequently as per Appendix B6.
- Open the shield on the probe. Secure the probe in a surgical glove making sure glove fingers aren't dangling. Put on headphones so that you may observe the position of the probe rather than watch the meter readings.
- Determine background radiation levels. Re-check background from time to time with and without probe cover.
- Place the probe about 1/2 to 1 inch from the body of the individual being monitored, being careful not to touch the individual.
- DO NOT MOVE the probe too fast - only about 1 inch per second. The average personnel monitoring should be performed in 3 - 5 minutes per individual.
- Monitor the hands first, then have the person assume the "spread-eagle" position (Refer to Form 5).
 - If hands are contaminated cover with plastic baggies, surgical gloves or plastic wrap until monitoring survey is completed.
- Then move the probe according to Form 5.
- Monitor the front and back of the body. Pay particular attention to covering the thyroid area in the throat.
 - To monitor bottoms of feet, have person lean against a wall (with hands covered if contaminated) for balance while he/she lifts one foot at a time.

- ° A person is considered CONTAMINATED if there is a reading of 100 cpm or more above background (this limit may be adjusted by DPHS according to prevailing radiation levels outside). Do not confuse background radiation with your readings; contamination would be apparent by a sustained increase on the visual meter reading (Selector Switch on X 1 range), and also by a marked increase in the audible indication from the headphone. The audio response makes it possible to practically pinpoint any contaminated areas on the individual.
- ° If an individual is found to be contaminated at the Control Point:
 - Carry out simple decontamination (removal of contaminated outer clothing) and complete the Personal Belongings List (see Form 7).
 - If simple decontamination removes the contamination, remove all colored tabs from the METTAG, leaving the black tab showing, stamp with identifying stamp and send the person to the Registration Area.
 - If simple decontamination is not sufficient, pass the person to the interior area for further monitoring and decontamination. Identify on the METTAG diagram the location(s) of contamination and the CDV-700 readings.
- ° If an individual is found not to be contaminated at the Control Point, remove all colored tabs from the METTAG, leaving the black tab. Stamp the METTAG with identifying stamp, and send the person to the Registration Area.

- ° When a contaminated individual is passed from the Control Point, the Decontamination Monitor will repeat the monitoring process and fill out and stamp the Personnel Radiological Monitoring Report Form (see Form 9, attached). Send the contaminated individual to a Decontamination Staff Worker.
- ° Re-monitor individuals after decontamination and complete the appropriate section of the Personnel Radiological Monitoring Report Form.
- ° If the individual is no longer contaminated detach all colored tabs from the METTAG, leaving the black tab. Stamp the METTAG with the identifying stamp, and send the person to the Registration Area.
- ° If the individual continues to show contamination, repeat the decontamination effort.
- ° Re-monitor after the second decontamination attempt and complete the appropriate section of the Personnel Radiological Monitoring Report Form.
- ° If the individual is no longer contaminated after the second decontamination effort, detach all colored tabs from the METTAG, leaving the black tab. Stamp the METTAG with the identifying stamp, and send the person to the Registration Area.
- ° If the second re-monitoring shows remaining contamination:
 - Cover the area with sterile dressing, and have the person wait.
 - Hand the Personnel Radiological Monitoring Report Form to the DPHS Supervisor for use in discussion with the State EOC DPHS RHTA on disposition of the person.
- ° If the DPHS Supervisor releases the person to continue with registration, detach all colored tabs from the METTAG, leaving the black tab. Stamp the METTAG with the identifying stamp, and provide the person with directions to the Registration Area.

- ° If any person shows signs of internal contamination (as evidenced by contamination in the regions of the ears, mouth, eyes, or nose), complete the Personnel Radiological Monitoring Report Form and provide it directly to the DPHS Supervisor, for use in discussion with the state EOC DPHS RHTA on disposition of the person.
- ° For Decontamination Monitors: 2
 - Turn over all completed Personnel Radiological Monitoring Report Forms, for individuals who were successfully decontaminated, to the DPHS Supervisor.
- ° For both Control Point Monitors and Decontamination Monitors: 2
 - Clothing collected because of contamination must be bagged in a separate bag for each individual, with a copy of the Personnel Belongings List. A corner of the METTAG bearing the METTAG ID number must be attached to the List. All bags must be placed in a secured storage area.

C. Host Health Care Facilities Monitoring

- ° Verify operability of equipment frequently as per Appendix B6.
- ° Open the shield on the probe. Secure the probe in a surgical glove making sure glove fingers aren't dangling. Put on headphones so that you may observe the position of the probe rather than watch the meter readings.
- ° Determine background radiation levels. Re-check background from time to time with and without the probe cover.
- ° Place probe 1/2 to 1 inch from the body of the individual being monitored, being careful not to touch the individual.
- ° DO NOT MOVE the probe too fast - only about 1 inch per second. The average personnel monitoring should be performed in 3 - 5 minutes per individual.

- ° Move the probe according to Form 5. | 2
- ° Monitor the front and back of the body. Pay particular attention to covering the thyroid area in the throat. | 2
- ° A person is considered CONTAMINATED if there is a reading of 100 cpm or more above background (this limit may be adjusted by DPHS according to prevailing radiation levels outside). Do not confuse background radiation with your readings; contamination would be apparent by a sustained increase on the visual meter reading (Selector Switch on X 1 range), and also by a marked increase in the audible indication from the headphone. The audio response makes it possible to practically pinpoint any contaminated areas on the individual. | 2
- ° If a person is contaminated, complete the Personnel Radiological Monitoring Report Form (see Form 6). Inform the senior medical staff member of the Host Health Care Facility and complete, with health facility assistance, simple decontamination (washing exposed skin surfaces, and collecting and bagging contaminated clothing and bedding).
- ° If contamination remains, inform the senior medical staff member of the Host Health Care Facility and the DPHS Supervisor, who, between them, will determine what further steps should be taken.
- ° Bag all collected contaminated personnel clothing, place a completed copy of the Personnel Belongings List (see Form 7) in the bag and provide a copy to the Host Health Care Facility Administrator.
- ° Turn over all completed Personnel Radiological Monitoring Report forms to the DPHS Supervisor.
- ° Bring all bags of contaminated material back to the Decontamination Center and secure in the Contaminated Storage Area. | 2

III. PROCEDURES FOR AREA MONITORING

- ° Verify operability of equipment frequently as per Appendix B6.
- ° Open the shield on the probe. Secure the probe in a surgical glove making sure glove fingers aren't dangling. Put on headphones so that you may observe the position of the probe rather than watch the meter readings.
- ° Determine background radiation levels. Re-check background from time to time with and without probe cover.
- ° Place the probe about $\frac{1}{2}$ to 1 inch from the area being monitored, being careful not to touch the area.
- ° Move the probe slowly on the suspected area.
- ° An area is considered CONTAMINATED if there is a reading of 100 cpm or more above background. Do not confuse background radiation with your readings; contamination would be apparent by a sustained increase on the visual meter reading (Selector Switch on X 1 range), and also by a marked increase in the audible indication from the headphones. The audio response makes it possible to practically pinpoint any contaminated areas.
- ° If the area is contaminated, remove the plastic material (if present), and cover with clean plastic material and secure with duct tape.
- ° Report all findings to the DPHS Supervisor.

2

APPENDIX B4 - FORM 2
 MEDICAL EMERGENCY TRIAGE TAG
 (METTAG)

No 27827 No 27827

Yellow

No 27827

White

Medicor's Stamp Here

Black

Red

Yellow

Green

Yellow

Rx

White

Black

Red

Yellow

Green

PUBLIC LETTER

Those of us from the public safety services welcome you to our city. We understand the difficulty you are having and the stress you are under. Through this letter we hope to answer some of your questions and ease the process of this temporary relocation.

The Reception Center will provide:

- Registration Services: In order to help reunite families and loved ones and to assist you with other needs, it is necessary that all people be registered. Please stay in line and listen for instructions from Reception Center authorities.
- A Meeting Area: After registration is complete, meeting areas will be provided so families and friends may be reunited. Our filing system will serve in locating displaced persons.
- A Message Center: Persons may telephone and leave written messages for you at our message center. Because of limited telephone lines, no phone calls may be made here but you may leave written messages instead.
- Information and Recreation: During your temporary stay here we will keep you well informed of news relating to the incident. Our staff will set-up radios, televisions and games and assist in any way possible to make your Reception Center stay more tolerable.
- Assistance with Special Needs: If you have special medical needs such as getting medication or medical attention, please let the first staff people you see know so that they may assist you through the registration process.
- Referral to Food and Lodging: If you need a place to stay or if we think your stay at the Reception Center will be a long one, you will be referred to a Mass Care Center. Here the Red Cross will provide food and lodging. Transportation will be provided to these centers.
- Assistance with Pets: Pets will not be allowed in the Reception Center. If you have a pet with you, leave the pet in the car and notify our staff at the Registration Area. We will assist you find boarding for your pet if necessary.

Please follow all police directions in parking. For those parked a long distance from the school, shuttle bus service will be available. Thank you for your cooperation in helping us help you.

APPENDIX B4 - FORM 4
PUBLIC LETTER
ON DECONTAMINATION PROCEDURES

You have been given this supplement to our initial letter because there has been an incident at the Seabrook Station with a release of a radioactive "cloud". The following paragraphs describe how you will be checked for and, if needed, cleaned of any radioactive contamination. For your safety, please follow all directions from our Reception and Decontamination Center staff.

After your vehicle is directed into the facility area, it will be monitored for radioactive "dirt." If your car is "dirty", a red sticker will be placed on your windshield and each person in your car will be given a special tag. Attach the tag through a button hole or belt loop. Assist your children with the tag. This tag will be used to chart your progress through the decontamination process.

PLEASE DO NOT WRITE ON OR TEAR THE TAG! DON'T LOSE IT!

A "dirty" car will be directed to a special parking lot where your car will be safe. It will be cleaned of this radioactive dirt after all the people have been taken care of.

After shutting your car off, leave the keys in the ignition. Get out of the car without touching the outside of the vehicle. Push the door closed with your foot.

Follow signs and directions to the Decontamination Area. Since there is a chance that radioactive "dirt" could be on your person, firefighters there will check you with a special device used to measure radiation. If any contamination is on you, the firefighters will proceed with decontamination. This may range from a change of clothes to a complete shower. Notify our staff if you have any wounds before washing or showering!

Once you are clean of all contamination, if necessary, you will be given fresh clothes and then directed to the Registration Area where you will be assisted further. At the Registration Area you will be asked to show your stamped tag to our staff.

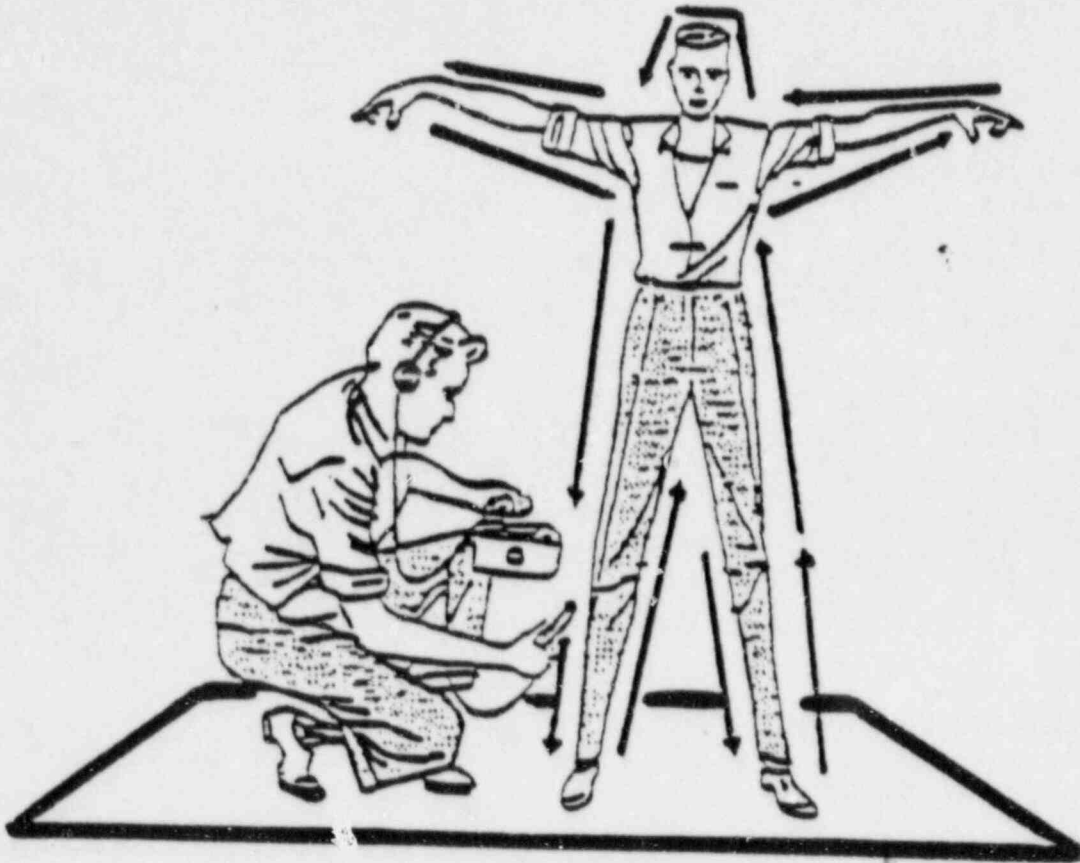
If your car was clean of any radioactive contamination, a green sticker will be placed on your windshield and each person in the car will be given a special tag. Like before, attach the tag to your person and assist your children.

Your car will then be directed to a clean parking area. Lock the car as you normally would and go to the Reception Center entrance.

Get in line at the Reception Center entrance. A firefighter will quickly monitor you for radioactive "dirt" as a safety precaution. If you are free of contamination, you will be allowed into the Reception Center. If you have radioactive "dirt" on you, the firefighter will refer you to the Decontamination Area.

Please follow all directions given to you in order to keep yourself and others safe from contamination. Thank you for your cooperation during this trying time.

APPENDIX B4 - FORM 5
ILLUSTRATION 1



PERSONNEL MONITORING

METTAG TAB # _____

APPENDIX B4 - FORM 7
DECONTAMINATION CENTER
PERSONAL BELONGINGS LIST

INDIVIDUAL: _____
ADDRESS: Street _____
City _____ State _____ Zip _____
Telephone (____) _____

CONTAMINATED VALUABLES LEFT AT DECONTAMINATION CENTER

The following contaminated items have been left for decontamination at the Decontamination Center:

CASH	/RING	/OTHER
CHECKS	/JEWELRY (Describe)	/
GLASSES	/	/
DENTURE(S): Upper Lower	/	/
DENTURE: Partial Plate(s)	/	/
PROSTHESIS	/	/
WATCH	/	/

The above is an accurate list of valuables left at the Decontamination Center.

SIGNATURE OF OWNER _____
DATE: _____ SIGNATURE DECON PERSONNEL _____

Attach one copy to plastic bag containing belongings;
One copy to Owner; & one copy to Decontamination Center.

RELEASE OF VALUABLES TO OWNER

I hereby state that I am again in full possession of my personal property which was left at the Decontamination Center to be decontaminated.

DATE: _____ SIGNATURE _____
WITNESS _____

DECONTAMINATION METHODS

2

I. PERSONNEL DECONTAMINATION

Decontamination is essentially the physical removal of radioactive "dirt" from the skin. There are three (3) methods used at the Decontamination Center:

- A. Local Decontamination
- B. General Decontamination, and
- C. Local and General Decontamination

Generally, decontamination should begin from the highest point of contamination and proceed to the lowest point. If there is only localized contamination, it should be handled directly. General bathing would merely spread such contamination. Most of the radioactive material will be removed during the first decontamination effort.

- o The initial step in decontamination is to remove carefully all contaminated clothing and to place it in a personally identified plastic bag and fill out a Personal Belongings List (see B4 Form 7).
- o Then the contaminated area should be dry wiped and, if possible, damp wiped.
- o Make an effort not to contaminate hairy areas which are initially free of radioactivity. You may need to place a shower cap on the evacuee.
- o Use precautions in order to prevent contamination from entering body openings.

A. Localized Decontamination

- o Lightly wet the contaminated area using luke warm water. Water should be used in such a way as to avoid splashing outside the shower or sink.
- o Use soap or detergent and gently work up a lather (for some individuals, use HYPOALLERGENIC soap).

- o wash the area for one or two minutes. Soft surgical brushes or gauze sponges are used to wash contaminated areas of the skin. Care should be taken not to abrade the skin. Frequently, abrasion and redness of the skin may not be visible for hours. Hair, nails and skin folds should receive special attention.
- o After washing, the involved areas of the person's body should be rinsed thoroughly, dried, surveyed and the results recorded. Levels of contamination will generally decrease by about a factor of ten with the first decontamination effort.
- o The washing, rinsing, drying and resurveying should be repeated a second time if the level found is more than 100 cpm above background. All survey readings should be done in an adjacent clean area of the shower or room.
- o In some cases, there may be localized areas of residual contamination that persists in spite of the two decontamination efforts. If it is, for example, a small area of the skin, a plastic covering can be taped over the area; on a hand, a surgical glove may be taped; or, for the hair, a surgical cap may be worn. For all unsuccessful decontamination efforts, disposition of the individual is the responsibility of the DPHS Supervisor.

B. General Decontamination

- o Showering is recommended when:
 - 1) the individual is uniformly contaminated over a large portion of the body, and/or
 - 2) the local decontamination would require too much time and result in delays in decontamination of other personnel.

- o Shower procedures for decontamination:
 - It is imperative that the individual's dignity be maintained to the highest degree possible.
 - Lightly wet the most highly contaminated area(s) using luke warm water. Water should be used in such a way as to avoid splashing.
 - Use soap or detergent and gently work up a lather on the contaminated area(s).
 - Wash the area for one to two minutes. Soft surgical brushes or gauze sponges are used to wash contaminated areas of the skin.
 - Pay particular attention to hair, armpits, fingernails and body orifices.
 - After the washing, the involved area(s) of the individual's body should be rinsed thoroughly.
 - Then a complete shower is taken. At no time should a shower take more than ten (10) minutes.
 - Dry and resurvey a second time.

- If, in spite of two (2) decontamination efforts, residual contamination of more than 100 cpm above background persist, disposition of the individual is the responsibility of the DPHS Supervisor.

C. Local and General Decontamination

- o A combination of showering and the local decontamination, as appropriate, is recommended in situations where:

An individual is contaminated over a large portion of the body but has contaminated areas such as hands, fingernails, hair, etc., which are contaminated to much higher levels than other portions of the body.

In these cases, the areas of high contamination should be pre-washed with soap and water, followed by a complete shower.

D. Miscellaneous

- o After decontamination, individuals are provided with clean clothing, if necessary.
- o Contaminated water should be flushed into ordinary drains. Faucets or shower heads should be left open to insure dilution in accordance with the NH Rules for the Control of Radiation.

II. VEHICLE DECONTAMINATION

- o After having been surveyed, vehicle is identified on the front window with a sticky patch:

GREEN = CLEAN

RED = EXTERNALLY CONTAMINATED ONLY

- o Ensure that all areas of contamination on the vehicle have been identified and accurately recorded on the Vehicle Contamination Report Form.
- o When complete vehicle monitoring demonstrates internal contamination these vehicles will be stored in a secure area until decontamination by DPHS.
- o Vehicles that are only externally contaminated can be sent, after the occupants are clean and have received the appropriate procedures and directions, to a vehicle wash (see Form 1 for procedures).
- o These vehicles are remonitored at the Decontamination Center to verify that contamination has been removed. Repeat decontamination procedures if any contamination remains. If after a second decontamination attempt contamination remains, leave the vehicle in the vehicle "Contaminated" area until Radiation Division of DPHS arrives to clean up the area.
- o Cars internally contaminated can be released to the owner only by DPHS staff after a determination has been made that the contamination poses no threat to the health of the occupants. This determination may occur during the recovery phase.

III. EMERGENCY WORKER SUPPLIES AND EQUIPMENT DECONTAMINATION

- o Items that can be washed to remove contamination can be recovered by the emergency worker when the decontamination is completed.

- o Items that cannot be washed must be tagged with information regarding the level of contamination, owner, etc., bagged when possible, and stored in a secure area. This material can be released only by DPHS staff after appropriately decontaminated, or the level of contamination has fallen to the point of posing no harm to the owner/operator. This may occur during the recovery phase.

PROCEDURE AND DIRECTIONS IN DRIVING YOUR VEHICLE TO THE
CAR WASH OR THE LARGER VEHICLE WASH

This procedure is for externally contaminated vehicles only.

1. Notify the firefighter responsible for your vehicle that you are ready to go to the vehicle wash.

Do not use your vehicle without first seeing the firefighter because you could get contaminated.

2. Follow the firefighter's instructions in getting into your vehicle.
3. Once in the vehicle, do not get out (except for an emergency) until the vehicle has been washed.
4. Close all vents. Do not use the vehicle's heater or air conditioner and close all vents and windows and do not open them even if it is uncomfortable.
5. Do not eat, drink or smoke in the vehicle.
6. For your protection, after the vehicle has been washed, come back to the Reception Center so your vehicle may be re-monitored.
7. For you and your loved ones protection, follow the firefighter's instructions!

MONITORING EQUIPMENT AND OPERATIONAL PROCEDURES

A. CDV-700 SURVEY RATE METER

Operations Check for CDV-700

1. Check visually to see that fresh batteries are in place. If not, insert them, observing the indicated polarity.
2. Turn the selector switch to the x10 range.
3. Allow 30 seconds for warm-up time.
4. Open the probe shield and place the open area directly against the check source. There should be a deflection of the meter needle indicating that the instrument is responding to radiation.
5. Determine the background radiation level by setting the instrument on the most sensitive scale (x1) and observing it for about 30 seconds.

B. EXPOSURE MEASURING INSTRUMENTS

Decontamination personnel will not be allowed to receive more than 5R total exposure unless sanctioned by DPHS Director.

1. Thermoluminescent Dosimeter

- a. Thermoluminescent dosimeters (TLD) measure radiation absorption or dose and are highly accurate, but they must be read by special instruments. The TLDs record doses of gamma radiation.
- b. Emergency workers should clip the TLD and the self-reading dosimeters to their inside clothes somewhere between the neck and waist.
- c. Each emergency worker should retain their individual TLD until the end of the emergency when the TLD's should be returned to the DPHS Supervisor.

2. Self-reading Dosimeters

- a. Self-reading dosimeters enable emergency workers to continually keep track of individual radiological exposure. However, self-reading dosimeters are not as accurate as TLD's and also only record gamma radiation.
- b. All serial numbers of dosimeters and other radiological equipment issued to the emergency worker will be recorded on the Radiological Equipment Log (Form 2).
- c. Each emergency worker will be given two self-reading dosimeters to wear while inside the risk area. One dosimeter will serve as a back-up for the other.
 - (i) CDV-138 or DCA-862 dosimeters can measure between 0-200 milliroentgens of gamma radiation, and would be the primary dosimeter used by emergency workers in radiological response.
 - (ii) CDV-730 or DCA-822 dosimeters can measure between 0-20 roentgens of gamma radiation and would serve as the back-up dosimeters for emergency workers.
- d. Since the self-reading dosimeters do not have their own batteries, they must be charged or zeroed before they can be used. V-750 dosimeter charges are used to zero dosimeters for accuracy and recording purposes. You should zero your dosimeters before use. Read them and record your exposure on the "Dosimetry-KI Report Form" (Form 1).
- e. Dosimeters should be read every half hour and the reading recorded.
- f. Reading and Charging a Dosimeter:
 - Point the dosimeter at a source of light - even a match or a flashlight will do - and observe the position of the hairline indicator. If the line is visible and less than

about one quarter up-scale, record the reading. If the line is above one-quarter scale or not visible, the dosimeter must be zeroed.

- To operate the dosimeter charger, loosen the thumbscrew in the top or bottom center of the charger with a coin and remove the bottom of the case. Install a battery, observing polarity (+ and -), and reassemble.
- Position the charger on a flat, steady surface. Unscrew the cap on the charging contact and place the end of the dosimeter (opposite the pocket clip and eyepiece) on the charging contact of the charger.
- Apply a firm downward pressure. You should see a meter scale and hairline while looking through the dosimeter. If no line is visible, rotate the control knob of the charger until a line appears.
- Set the line on, or slightly above, zero using the control knob.
- Be sure to read the self-reading dosimeter with a light source immediately after zeroing because the setting can shift slightly after removal from the charger.
- To read the dosimeter at any time, point it at a source of light and note the reading by looking through the dosimeter. Your accumulated exposure, in Roentgens or Milliroentgens (R or mR), is the number you now read less your initial reading.

DOSIMETRY—KI REPORT FORM

(Please print, legibly)
Emergency Worker's Name _____

Social Security Number _____
Emergency Worker's Organization _____

Home Address _____

Town/City _____
Emergency Worker's Signature X

MISSION NO	MISSION DESCRIPTION	DATE	CD V 730 or DCA 622 (0-20R)		MISSION TOTAL	SERIAL NO	CD V-138 (0-200mR)		MISSION TOTAL
			BEFORE	AFTER			BEFORE	AFTER	
1			R	R	R		mR	mR	mR
2			R	R	R		mR	mR	mR
3			R	R	R		mR	mR	mR
4			R	R	R		mR	mR	mR
5			R	R	R		mR	mR	mR
			TOTAL	TOTAL	R		TOTAL	TOTAL	mR

DOSIMETRY INSTRUCTIONS: Read the CD V-730 (DCA-622) and CD V-138 each half hour. Do not exceed 1 R cumulative total. The TLD gives an accurate reading of the total dose and therefore should be used only by one person. Forward the TLD with this form (see form distribution below)

THYROID GLAND SCREENING CHECK

Upon completion of the mission, or as directed, each emergency worker must undergo "decontamination monitoring" at a decontamination monitoring station or a mass care/decontamination center. Monitoring personnel at these stations will complete a "Decontamination Monitoring Report Form" for you. Additionally emergency workers should be screened for radioactive uptake in the thyroid gland and the results recorded here. Medical referral action level for the thyroid check is 100 cpm above background or higher when using the CD V-700 survey meter

CD V 700 Serial No _____ Reading _____

Signature of Monitor X

KI RESPIRATORS: Take KI only on the direction of your supervisor. Take one tablet (130 mg) once a day. If you have any adverse reaction to the drug, discuss your taking KI and report to your supervisor.

Date	Time	Amount Taken							
			Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							
		1 Tablet/130 mg							

APPENDIX B7

DECONTAMINATION CENTER CLOSE DOWN

Closing down a Decontamination Center entails four steps staggered over a period of time. These are:

- A. Shutdown
- B. Removal of contaminated material and contaminated waste
- C. Decontamination
- D. Monitoring

A. Shutdown

Upon authorization from State EOC DPHS Director, via RHTA, to DPHS Supervisor, the Decontamination Center can be closed. The Decontamination Staff should remove their last set of protective clothing and place it in the available plastic containers. The order of removal of this attire is similar to that used when handling septic patients, with the gloves removed last. As shoe covers are removed, each attendant should step across the junction between the contaminated and clean areas. Here the attendant should be carefully monitored and, if found free of contamination, should pass through the clean area. If attendants are contaminated, they should change clothes, wash to remove local contamination or take a general shower, and be resurveyed. When all attendants have left the area, it should be roped off, access restricted, and all material and equipment should be left until a representative of DPHS who is knowledgeable in special surveying and decontamination, arrives to clean up the area.

B. Removal of Contaminated Material and Contaminated Waste

During the recovery phase, the DPHS Radiological Health Program will store the equipment and supplies that cannot be washed, contaminated personal effects, and the contaminated waste.

The contaminated personal effects, and supplies and equipment, will be controlled by DPHS until properly clean, natural decay of the contamination occurs, or, if either is not feasible, the material will be treated as contaminated waste. The owners will be informed of the decision and, if available, when and where the material can be recovered.

Contaminated waste will be disposed of by the state through established contracts procedures with qualified radioactive waste handlers, and in conformance with rules promulgated by the DPHS Radiological Health Program for control of radiation.

C. Decontamination

As soon as possible after shutdown, DPHS staff will survey the Decontamination Facility to determine if, and where, contamination must be removed. The removal will be carried out by local and state staff, under DPHS supervision, to a level of contamination in conformance with rules promulgated by the DPHS Radiological Health Program for the control of radiation. Until the survey of the facility and necessary decontamination is accomplished, use of the facility must be restricted.

D. Monitoring

Routine environmental monitoring may be carried out by state staff around the facility, along the sewer system and at the effluent outflow point for the municipality, prior to and after shutdown. Such monitoring will be carried out to detect the presence of contamination that may pose a threat to the health of the community. Should such levels be detected, the Director, DPHS, will make appropriate recommendations to NHCOA and the Governor as may be necessary to protect the municipality.

SUPPLY INVENTORY

OF EACH DECONTAMINATION FACILITY KIT

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
CDV-700 Survey Meter with headphones CDV-138 or DCA-862 Dosimeters, 0-200mR CDV-730 or DCA-622 Dosimeters, 0-20R CDV-750 Dosimeter Chargers				New Hampshire Civil Defense Agency
Potassium Iodide	10 Bottles			
"Scrub" clothes (\$4.00 each new; 2.00 each used)	3 doz. lg. tops (used) 3 doz. lg. pants (new) 1 doz. lg. tops (new) 4 doz. sm. tops (new) 4 doz. sm. pants (new)			Elliot Hospital Manchester, NH 03103 contact: David Kaczmarek
Exam gloves (\$4.75/box)	10 boxes (500 pr.)			
Small Dial soaps (\$84.00/case)	1 box			
Shampoo - castelle soaps (\$1.75/box)	4 boxes			
Scrub brushes (\$6.75/box)	4 boxes			
Disposable wash towels (\$34.00/case)	2 cases (30 units)			
Surgical Masks (\$7.75/box)	2 boxes (100 units)			
2" Dermicil Tape (\$6.25/box)	6 boxes (36 units)			
5" x 9" Dressings (\$2.30/box)	10 boxes			

*Many of these items may be obtained locally if necessary.

APPENDIX B8 (Cont.)

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
Shoe covers (\$25.00/case)	(200 pair)			
Tyvek coveralls (\$60.00/box)	2 boxes (50 units)			
Cotton swabs (\$3.70/box)	1 box (1000 units)			
Masking tape 1" (\$1.99/roll)	10 rolls			Hammar Industrial Supply, Inc. 592 Harvey Road Manchester, NH 03103 Contact: Jack Etter
Duct tape (\$4.00/roll)	10 rolls			
Taylor Tarp. (\$4.00/roll)				
10' x 12' (\$8.00)	4			
8' x 10' (\$5.33)	4			
Scissors (\$3.29 pair)	4 Pairs			
Retractable utility knife	6			
Car wash (\$1.49/car)	6 cars			
Car wash brushes (\$8.06/brush)	2			
12" squeegee (\$5.84/brush)	2			
Tapered poles (\$2.43/pole)	4			
Sponge Mop (\$7.04/mop)	3			
Sponge Mop refills (\$3.14/refill)	6			

*Many of these items may be obtained locally if necessary.

APPENDIX B8 (Cont.)

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
600' 3/8" polypropylene rope (yellow) (\$.09/foot)	1 roll			
8' x 100', 6 mil polyethylene (\$16.20/roll)	3 rolls			
Large garden trash bags (\$2.09/box)	9 boxes			
Trash bags (\$22.46/box)	1 box (250 units)			
Bucket (\$4.86/unit)	4			
Signs: Entrance (\$.74)	1			
Men (\$.74)	1			
Women (\$.74)	1			
Exit (\$.59)	2			
Trash Can (\$11.99/unit)	4			
Black & Decker Dustbuster Plus (\$33.94 each)	4			Service Merchandise Co., Inc. 65 State Street Manchester, NH
Flashlight with D batteries (\$3.97 each)	12 packages (24 units)			
#91014 Blue vinyl aprons (\$22.00/dz)	1 dozen			Safety Equipment, Inc. 142 Merrimac Street Manchester, NH 03103
Caution tape 3" x 1000' (\$27.00/roll)	1 roll			
G-211-13R American Allsafe Goggles (5.50/pair)	12 pair			Contact: Art Ruszenas

*Many of these items may be obtained locally if necessary.

APPENDIX B6 (Cont.)

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
#1020 (XL) Lakeland Tyvek coveralls (\$55.00/case)	3 cases (25 units)			
#1018 (L) Lakeland Tyvek coveralls (\$60.00/case)	3 cases (25 units)			
T-205 Yellow coded safety tape (\$7.70/roll)	5			
Yellow PVC boots (\$5.50/pair) (3) size 10 - (2) 16" - (1) 10" (1) size 11 - 16" (2) size 13 - 16"	6			
CTS-28 28" traffic cones (\$10.18 each)	10			
LA-111-EB Nitrile gloves (size 9) (\$13.90/dz)	1 dozen			
5110-PE Sign "No smoking, eating or drinking in this area" (\$4.40/sign)	2			
Stop/slow paddle sign (\$12.20 each)	2			

*Many of these items may be obtained locally if necessary.

APPENDIX B8 (Cont.)

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
2756 5 1/2 lb. irregular 20" x 40" bath towels (\$18.65/doz)	30 dozen			Craig Supply Co., Inc. 99 Madbury Road. P.O. Box "CC" Durt , NH 03824 Contact: Hunter Brownley or Randy Dumont
Disposable shower caps (\$75.00/case)	1 case (1000 units)			P.W.A. Monarch 51 Beechem Street Everett, MA 02149 Contact: Larry Parrotta
Neutrogena Hypoallergenic soap - original formula (\$1.88/bar) Rubber bands (\$.39/pkg.) Zip-loc sandwich bags (\$1.53/box) Zip-loc large bags (\$1.59/box)	6 Bars 5 pkgs. 9 boxes 1 box			Osco Drug #956 111 South Willow Street Manchester, NH
Medical emergency triage tag (METTAG)	20,000 tags			NH-EMS Regional Office 955 Auburn Street Manchester, NH Contact: Dave Dow Larry Rupp

*Many of these items may be obtained locally if necessary.

APPENDIX B8 (Cont.)

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
3 x 5 index cards (\$.43/100)	1000 (10 pkgs.)			The Paper Center 394 Second Street Manchester, NH 03102 Contact: Harold "Pip" Adams
Clipboards (\$1.23/each)	24			
Pencils (\$1.19/each)	12 dozen			
Ruled Pads (\$5.59/dozen)	3 dozen			
Battery-Powered pencil sharpener (\$3.99 each)	4			
C" - size batteries (\$.49 each)	12			
Stapler (\$7.96 each)	4			
Staples (\$.98/box - 5000 units)	2 boxes			
Colored (red/green) stick-on labels (\$65.00)				
Paper roll (\$100.00)	1 roll			
Ink pad & stamp (\$7.50 set)	5 sets			
Remote handling thongs	2			
Flexible hose with showerhead and handle				
Paper rolls				
Black polyethylene	1 roll			

*Many of these items may be obtained locally if necessary.

APPENDIX B8 (Cont.)

ITEMS	QUANTITY	QUANTITY USED	BALANCE	*WHERE OBTAINED
Portable radios Administrative materials: Personnel Radiological Monitoring Report Forms Vehicle Monitoring Report Forms Personnel Belongings List Personnel Exposure Records Maps to the Secondary Decontamination Center Signs and Directional Aids Public Information Notices	3 radios			

*Many of these items may be obtained locally if necessary.

APPENDIX B9

CALL LIST

The Call List will be completed when training of the Fire Department is completed. It will record the names of all trained individuals, in a quantity sufficient to provide the complete staffing indicated in Appendix B3. The actual composition of a "primary" and "second shift" capability cannot be done because of the changing work shifts of a Fire Department. Rather, a "pool" arrangement is anticipated, with a core group of Fire Fighters designated as a first response unit because of their demonstrated ability to establish and run a center while the rest of the Department is mobilizing to support them.

APPENDIX C

NUREG-0654 CROSS REFERENCE

APPENDIX C
NUREG 0654 CROSS REFERENCE

NUREG-0654 Evaluation Criteria	RERP Sections
A.1.a	I-G
A.1.b	I-G
A.1.c	Figures 1 and 2
A.1.d	I-G
A.1.e	II-B, Appendix A
A.2.a	I-G, Table 2
A.2.b	I-D
A.3	Volume 5, NHRERP
A.4	I-G, Appendix A
C.1.c	I-G
C.2.a	I-E
C.4	I-6, Volume 5, NHRERP
D.3	I-B
D.4	III
E.1	II-B
E.2	II-B
E.5	II-D
E.6	Volume 1, NHRERP
E.7	Volume 1, NHRERP
F.1.a	II-B, II-C
F.1.b	II-C, Appendix D
F.1.c	Volume 1, NHRERP
F.1.d	Volume 1, NHRERP
F.1.e	II-B

F.2	II-C; II-F, Volume 1, NHRERP
F.3	II-I, Volume 1, NHRERP
G.1	II-D
G.2	II-D
G.3.a	II-D
G.4.a	II-D
G.4.b	II-D
G.4.c	II-D
G.5	II-D
H.3	II-E
H.4	II-E
H.10	II-E
H.11	Appendix B
I.7	Volume 1, NHRERP
I.8	Volume 1, NHRERP
J.10.b	Table 1
J.10.d	II-E
J.10.h	II-F
J.12	II-F, Appendix B
L.1	II-F
L.4	II-F
M.1	II-H
N.1	II-I, NHRERP 3.1.5
N.2	II-I, NHRERP 3.1.5
N.3	II-I, NHRERP 3.1.5

N.4	II-I, NHRERP 3.1.5
N.5	II-I, NHRERP 3.1.5
O.1	II-J
O.4	II-J, NHRERP 3.2.3
O.5	II-J
P.1	II-J
P.2	I-G
P.3	I-G
P.4	I-H
P.5	I-G
P.6	I-E
P.7	III
P.8	Table of Contents, App. C
P.9	N/A
P.10	I-H

N/A - Not Applicable

APPENDIX D

COMMUNICATIONS EQUIPMENT

APPENDIX D
COMMUNICATIONS EQUIPMENT

CITY OF DOVER

A. Base Stations

1. Command and Control (1)
2. Civil Defense (1)
3. Fire Department (3)
4. Police Department (1) console
5. Other (1)

B. Civil Defense

1. Number of multichannel portables (10)
2. Number of multichannel mobiles (2)
3. Number of pagers (12)
4. Number of encoders (1)

C. Police Department

1. Number of multichannel portables (22)
2. Number of multichannel mobiles (14)
3. Number of pagers (5)
4. Number of encoders (1)

D. Fire Department

1. Number of multichannel portables (10)
2. Number of multichannel mobiles (13)
3. Number of pagers (22)

E. Municipal Departments

1. Number of multichannel portables (5)
2. Number of multichannel mobiles (40)

F. ARES Equipment

1. 2 meter base station (1)