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August 10, 1989

FEDERAL EXPRESS

J. Paul Bollwerk, Chairman
Alan S. Rosenthal
Howard A. Wilber
Atomic Safety and Licensing
Appeal Board
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555

Re: Applicants' Response to NECNP's Letter of August 2, 1989 on Seabrook Emergency Planning Appeal, 50-443-OL, as it Applies to NECNP Contention HP-1 and SAPL Contention 3

Dear Appeal Board Members:

At the end of oral argument on July 27, 1989, counsel for NECNP responded to a question the Board had posed to Mr. Backus, concerning litigation in the NHRERP proceedings of the FEMA presumption that no more than 20 percent of the EPZ population would report to reception centers for radiological monitoring during the first 12 hours following a radioactive release. Tr. at 193, 204-05. At that time, she stated that "NECNP had a contention . . . that there wasn't enough provision for the great numbers of people that would come to the reception centers," and that "[a]s I recall, the contention was rejected on the basis of the 20 percent limitation." Tr. at 205. Since counsel for NECNP could not remember the precise details, she asked leave to send the Board a letter containing a citation to the contention in question. Id. The Board granted NECNP permission to submit such a letter, and also granted the other parties the right to respond to that letter. Id.

Under date of August 2, 1989, NECNP filed and served a letter purportedly consistent with the permission for further response granted by the Board on July 27. A review of the letter, however, reveals that NECNP has apparently retreated from its earlier assertion that one of its contentions was rejected on the basis of the 20 percent presumption.

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Instead, the NECNP letter attempts to make the entirely new argument that the Licensing Board's "various inconsistent rulings left unclear the question of whether and to what extent it intended to allow the litigation of the size of the EPZ population that should be accommodated [sic] by reception centers." NECNP's letter thus goes far beyond the scope of the leave granted by the Appeal Board.

Moreover, even if NECNP's new argument were now to be entertained by this Board, it should be rejected. NECNP's recitation of the histories of NECNP Contention HP-1 and SAPL Contention 3 is incorrect, and its characterization and conclusions with respect to the Licensing Board's rulings are patently wrong.

In November 1986, NECNP offered NECNP Contention HP-1, which states in part:

The host plans for Manchester, Dover, Salem, and Rochester do not meet the requirements of 10 CFR Sections 50.47(a), 50.47(b)(8), (10), (11), and (13), or NUREG-0695 [sic], Sections J.12 and K.5.b.

a. NUREG-0695 [sic] requires that the personnel and equipment at relocation centers should be capable of monitoring within about a 12 hour period all residents and transients in the plume exposure EPZ arriving at relocation centers. Section J.12. . .

c. The plan does not assure that everyone evacuated from the EPZ will go to a reception area. Vols. 33, 35, 36, 38 at I-11. Without an assurance that every evacuated person and every evacuation vehicle is scanned for radiological contamination and decontaminated if necessary, a public hazard in the form of radiologically contaminated people and vehicles will go unchecked throughout the state, into other states and to Canada. In addition, there is no assurance that people who miss decontamination services at the host community will be able to obtain them anywhere else in a reasonable amount of time, since few hospitals have

extensive decontamination capabilities. Vol. 1 at 2.8-5.¹

In Applicants' Answer to NECNP Contention HP-1, Applicants argued:

"Applicants oppose the admission of NECNP Contention HP-1 for reason that it is without sufficient basis and poses an impermissible challenge to Commission regulations. The contention with little more than lip service to regulations and regulatory guides sets out in great detail what NECNP considers evacuee policy should be. The contention asserts that all evacuees of whatever condition should be required to go to relocation centers to be monitored and decontaminated to prevent the spread of contamination to North America and to be attended there as to every need. Neither the Commission's regulations nor its regulatory guidance call for the funneling to and the holding of all evacuees at relocation centers nor in the manner suggested."²

NRC Staff's response to this same contention was not to oppose the contention "except to the extent that NECNP's basis asserts (a) that all evacuees of the EPZ should be required to proceed to relocation centers to be monitored and decontaminated . . ."³

¹ "NECNP Contentions on Revision of the New Hampshire State and Local Radiological Emergency Response Plans" at 17-23 (November 26, 1986), appended hereto as Attachment 1.

² "Applicants' Answer to NECNP's Contention on Revision 2 of the New Hampshire State and Local Radiological Emergency Response Plans" at 5 (December 10, 1986).

³ NRC Staff further observed that:

"The first of these assertions, as to the need to require all evacuees to go to the relocation centers, constitutes nothing more than NECNP's personal views as to what applicable policy ought to be, and is not supported by applicable regulatory requirements or guidance."

NECNP responded to the Applicants' and Staff's arguments by re-asserting, and highlighting, its legal theory that NUREG-0654 requires that 100 percent of the EPZ population report to reception centers:

"Applicants' claim that this contention goes beyond the scope of the NRC's regulations is also without merit. NECNP's claim in basis paragraph (a) that the relocation centers cannot monitor evacuees within a 12-hour period is tied directly to NUREG-0654, §§ [sic] J. 12. . . ." Basis paragraph (c) asserts that the host plans do not assure that everyone evacuated from the EPZ will go to a reception area. Because of the contamination hazard posed by the exposure of thousands of people from the EPZ, NECNP contends that this constitutes a failure to provide adequate protection to the public health and safety. We are aware, as Applicants point out, that a contention similar to this one was previously rejected by the Board. Because the Board had also earlier declared that it was postponing litigation of the host plans until further changes were made, NECNP reasserted this contention in order to preserve its right to appeal the issue." ⁴

Likewise, NECNP stated:

"First, the NRC Staff objects to basis paragraph (c), which faults the plan for failing to assure that everyone evacuated from the EPZ will go to a reception center. The Staff asserts that this contention [sic] represents only NECNP's 'personal views as to what applicable policy ought to be.' To the contrary, this contention is grounded in the NRC's requirement that there be a reasonable assurance that 'adequate protective measures can and will be taken in the event of a radiological

"NRC Staff's Response to Contentions on NHRERP Revision 2" at 20-21 (December 19, 1986) (emphasis added).

⁴ "The New England Coalition on Nuclear Pollution's Reply to Applicants' Answer to NECNP's Contentions on Revision 2 of the New Hampshire State and Local Radiological Emergency Response Plans" at 5 (December 19, 1986).

emergency.' It is eminently reasonable to expect the State of New Hampshire to protect its population and the population of other states and Canada against radiological contamination by evacuees during a radiological emergency."⁵

NECNP Contention HP-1 was rejected in the Licensing Board's Memorandum and Order of February 18, 1987.⁶ The rationale applied by the Licensing Board is found in its Memorandum and Order of May 18, 1987.⁷ The significant language Applicants would draw the Board's attention to (and which NECNP fails to cite in its letter) is:

"The Board finds that proffered bases (a) and (c) for this contention are predicated upon NECNP's belief that monitoring and decontamination facilities at host reception centers must be capable of handling the entire evacuating population within about twelve hours, rather than those arriving at the relocation centers, a lesser number. NECNP is unequivocal in its interpretation in this regard. As we previously ruled in rejecting SAPL Contention 3, and NECNP Contention NHLP-13 (Board Order of April 29, 1986, at 81-82 and 77), we find no regulatory requirement that relocation centers be able to provide for all evacuees who leave the EPZ or that there is any requirement that an evacuee must go to a relocation center. (See also the Staff's First Objection (*supra*) to this contention.)"⁸

Thus, contrary to NECNP's assertion, the Licensing Board's rulings on the "litigability of the size of the EPZ

⁵ "NECNP Reply to NRC Staff's Response to NECNP's Contentions on the New Hampshire State and Local Radiological Emergency Response Plans" at 2-3 (December 31, 1986).

⁶ Memorandum and Order (Ruling on Contentions - Revision 2 New Hampshire Radiological Emergency Response Plan), at 3 (February 18, 1987).

⁷ Memorandum and Order (Providing Basis for and Revision to Board's Rulings on Contentions on Revision 2 of NHRERP), at 57-62 (May 18, 1987), Attachment 2 hereto.

⁸ Id. at 61.

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population attending reception centers" were neither "inconsistent" nor "unclear". The Board clearly and consistently rejected contentions -- NECNP's HP-1 and NHLP-13, and SAPL's Contention 3 -- which argued, as a matter of law, that the entire EPZ population must go to the reception centers for monitoring and relocation. The Board, on the other hand, clearly and consistently admitted contentions -- SAPL-7 and SAPL-33 -- which could be read as offering a factual challenge to FEMA's 20% monitoring presumption.

The issue before this Appeal Board remains what it has always been: did the Intervenors take sufficient advantage of their clear opportunity to offer a factual rebuttal to the FEMA presumption. For the reasons which have already been briefed and argued to the Board, Applicants believe that they did not, and that the presumption stands unrebutted in these proceedings. Clearly Intervenors had an opportunity to litigate the planning basis; that they did not do so directly nor sufficiently to warrant a finding of plan inadequacy was a reasonable conclusion of the Licensing Board.

Very truly yours,



Thomas G. Dignan, Jr.

Counsel for Applicants

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UNITED STATES OF AMERICA
NUCLEAR REGULATORY COMMISSION
ATOMIC SAFETY AND LICENSING BOARD

Before Administrative Judges:
Helen F. Hoyt, Chairperson
Gustave A. Linenberger, Jr.
Dr. Jerry Harbour

In the Matter of)	Docket Nos. 50-443-OL
)	50-444-OL
PUBLIC SERVICE COMPANY)	(ASLBP No. 82-471-02-OL)
OF NEW HAMPSHIRE, <u>et al.</u>)	(Offsite Emergency Planning)
(Seabrook Station, Units 1 and 2))	May 18, 1987

MEMORANDUM AND ORDER
(Providing Basis for and Revision to Board's Rulings
on Contentions on Revision 2 of NHRERP)

In our Memorandum and Order of February 18, 1987 this Board announced its rulings on each of the contentions filed by five parties to this proceeding, addressing Revision 2 of the New Hampshire Radiological Emergency Response Plan. The following Memorandum provides the basis for the Board's rulings. The legal standards for admissibility of contentions are described in our Memorandum and Order of November 17, 1982, LBP-82-16, 16 NRC 1649, 1654-56 (1982). On reconsideration, we revise parts of our February 18, 1987 Order (at 2-3) in respect to admissibility of certain bases of Town of Hampton's (TOH's) Contentions III, IV, and VI alleged in TOH's Memoranda dated October 31, and November 19, 1986, and bases of NECNP Contention NHLP-6.

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NECNP Contention HP-1. In this new contention NECNP raises, for the first time, the assertion that host community plans do not meet certain regulatory requirements. The contention reads:

The host plans for Manchester, Dover, Salem, and Rochester, do not meet the requirements of 10 CFR Sections 50.47(a), 50.47(b)(8), (10), (11), and (13), or NUREG-0695 [sic], Sections J.12 and K.5.b.

The Board assumes that NECNP intended to rely on NUREG-0654, §§ II.J.12 and II.K.5.b, which provide certain guidance on the standards and evaluation criteria for meeting requirements of 10 C.F.R. §§ 50.47(b)(10) and 50.47(b)(11), respectively. (NUREG-0695 pertains to Materials License SNM-1265 and is unrelated to this proceeding.)

NECNP proffers nine basis statements in support of the contention wherein it asserts:

(a) That the four relocation centers do not meet the requirements of NUREG-0654 Section J.12 that requires that the personnel and equipment at relocation centers should be capable of monitoring within about a 12-hour period all residents and transients in the plume exposure EPZ arriving at relocation centers;

(b) That the human resources according to the host plans are inadequate because all provide for 94 staff members regardless of the size of the populations each center is planned to serve;

(c) That the plans do not assume that everyone evacuated from the EPZ will go to a reception area for monitoring and decontamination, with

the result that contaminated people and vehicles will go to other areas unchecked, thus causing a public radiation hazard;

(d) That the plan does not adequately accommodate decontamination needs of evacuated hospital patients and nursing home residents;

(e) That it is not clear that injured contaminated evacuees or internally contaminated evacuees will be accommodated by the plans;

(f) That there is no explanation in the plan of how the host facilities coordinator will identify personnel who may provide emergency medical treatment on site, or where such personnel will be found;

(g) That despite the letter of agreement with the American Red Cross, there is no demonstration of a Red Cross capability to provide for feeding, clothing, and sheltering all evacuees who have those needs;

(h) That it is not clear if adequate food and clothing is stockpiled, or that the Red Cross will be able to gather its resources to provide for further food and clothing; and

(i) That the plans do not contain a system for interchange of registration rosters between host facilities to facilitate reuniting of families that are split up during an evacuation; NECNP maintains that such a system will be necessary to maintain order.

The Applicants oppose admission on the grounds that this contention is without sufficient basis and poses an impermissible challenge to Commission regulations. They state that the contention sets out in detail what NECNP considers evacuee policy should be, but with little more than lip service to regulations and regulatory guides. In

particular, Applicants state that neither regulations nor regulatory guidance provide for funneling all evacuees to host facility monitoring and decontamination centers to prevent the spread of contamination to North America and to provide for their every need in the manner suggested by NECNP. Applicants cite this Board's previous rejection of similar, but less comprehensive contentions in our Memorandum and Order of April 29, 1986; i.e., NECNP Contention NHLP-13, at 77; SAPL Contention 3, at 81-82; and SAPL Contention 4, at 82-83.

The Staff does not oppose admission of this contention except to the extent that NECNP's basis asserts (a) that all evacuees of the EPZ should be required to proceed to relocation centers to be monitored and decontaminated (NECNP Contentions at 21, § c);¹¹ (b) that evacuees at the relocation centers are likely to abandon the centers prior to being monitored and decontaminated (id. at 18-19); and (c) that relocation

¹¹ Staff's n.20 (at 17) cited also in reference to the instant contention, states:

A recent decision by the Appeal Board provides a significant interpretation of NUREG-0654, § II.J.12, in which it held that provisions must be made for monitoring and decontaminating all evacuees from the EPZ who may seek such assistance, not just for those evacuees who may seek assistance in finding shelter. Long Island Lighting Co. (Shoreham Nuclear Power Station, Unit 1), ALAB-855, 24 NRC ____ (December 12, 1986) (slip op. at 17-18). The Appeal Board left open the question of what percentage of the EPZ population should be expected to seek radiological monitoring and decontamination assistance, as a matter appropriate for evidentiary proof in the proceeding (id. at 18); FEMA testimony submitted in that proceeding supported a reception center utilization factor of 20%.

centers should be required to communicate lists of registered evacuees with other host facilities (id. at 23, § 1). As to the first and last of the objections recited above, Staff states that they represent nothing more than NECNP's personal views as to what applicable policy ought to be and are not supported by applicable regulatory requirements or guidance. The Staff views the second NECNP assertion to which it objects as consisting of nothing more than unsupported speculation.

NECNP answers the Applicants' objections that (1) the contention has no basis and (2) goes beyond NRC regulations, essentially by stating that the regulatory basis is provided in the contention itself which assertedly details the factual support for NECNP's concerns and cites to the host plans by page. NECNP further states that it has reasserted the contention to preserve its right of appeal in view of the fact that this Board had previously rejected a similar contention. According to NECNP this path was chosen "[b]ecause the Board had also earlier declared that it was postponing litigation of the host plans until further changes were made"12

Applicants' Staff response?

12 NECNP Contention NHLP-13 asserting an argument similar to that in bases (a) and (c) of the instant contention, but with fewer particulars, was rejected for lack of basis in our Memorandum and Order of April 27, 1986, at 77. The more general contention on lack of host community plans, NHLP-12 was rejected as premature (id. at 76).

NECNP disagrees with the Staff's three objections to certain bases for this contention (supra) and states that at least two of them represent reasonable assertions under the general requirement that there be reasonable assurance that adequate measures can and will be taken in the event of a radiological emergency (i.e., under Section 50.47(a)).

The Board finds that proffered bases (a) and (c) for this contention are predicated upon NECNP's belief that monitoring and decontamination facilities at the host reception centers must be capable of handling the entire evacuating population within about twelve hours, rather than those arriving at the relocation centers, a lesser number. NECNP is unequivocal in its interpretation in this regard. As we previously ruled in rejecting SAPL Contention 3, and NECNP Contention NHLP-13 (Board Order of April 29, 1986, at 81-82 and 77), we find no regulatory requirement that relocation centers be able to provide for all evacuees who leave the EPZ or that there is any requirement that an evacuee must go to a relocation center. (See also the Staff's first objection (supra) to this contention.)

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Proffered basis (b) to this contention fails in that it asserts no violation of regulatory requirements or any inadequacy leading to a safety concern. Instead it merely points out that staffing levels are the same for the four relocation centers; hence it lacks any regulatory basis.

Proffered bases (d) through (i) relate to the ability of the host centers to provide certain services to persons who will, or may, evacuate the EPZ in the event of a radiological emergency. In its answer to Applicants' objections (at 6) NECNP, without any specificity, attempts to relate these criticisms of the host plans to the adequacy of the State's plan for "recovery" from an accident under 10 C.F.R. § 50.47(b)(13). However, these bases reflect NECNP's view of what ought to be contained in the host community plans, not what the plans are required to contain. While NECNP cites regulatory requirements in the body of the contention and cites to pages (but not in all instances) in the host plan where NECNP takes issue with what it finds there, NECNP provides no clear nexus between its assertions of inadequacy and applicable regulations or regulatory guidance.

NECNP Contention HP-1 is rejected for lack of basis and specificity.

Adoption of Hampton Contentions. NECNP seeks to incorporate and adopt the contentions on Revision 2 of the NHRERP raised by the Town of Hampton in its filing dated October 31, 1986. NECNP further states that Hampton's contentions raise issues that affect the entire EPZ and that NECNP has a broad interest in litigating the contentions as they relate to the entire emergency planning zone. NECNP Contentions at 23-24.

UNITED STATES NUCLEAR REGULATORY COMMISSION
BEFORE THE ATOMIC SAFETY AND LICENSING BOARD

_____)	
In the Matter of)	
Public Service Company of)	
New Hampshire, et al.)	Docket Nos. 50-443 OL
_____)	50-444 OL
(Seabrook Station, Units 1 & 2))	OFFSITE EMERGENCY
_____)	PLANNING
_____)	

NECNP CONTENTIONS ON REVISION 2
OF THE THE NEW HAMPSHIRE STATE AND LOCAL
RADIOLOGICAL EMERGENCY RESPONSE PLANS

Introduction

The New England Coalition on Nuclear Pollution ("NECNP") submits the following contentions on Revision 2 to the New Hampshire Radiological Emergency Response Plan ("RERP"), Revision 2. These contentions include amendments to previously admitted contentions¹, as well as new contentions.

The Board has ordered the parties to limit the scope of contentions on Revision 2 to matters that are newly raised in Revision 2. In its Motion for Reconsideration and Response to Licensing Board's Memorandum and Order of November 4, 1986, NECNP asked the Board to reconsider that order and take contentions on matters that were raised for the first time in Revision 1 and are

¹ See Licensing Board Memorandum and Order of April 29, 1986 at 47, et seq.

Thus, there may be a large number of the normal school buses and drivers who will not be available during a radiological emergency.

B. Contention HP-1: The host plans for Manchester, Dover, Salem, and Rochester, do not meet the requirements of 10 CFR Sections 50.47(a), 50.47(b)(8), (10), (11), and (13), or NUREG-0695, Sections J.12 and K.5.b.

Basis:

a. NUREG-0695 requires that the personnel and equipment at relocation centers should be capable of monitoring within about a 12 hour period all residents and transients in the plume exposure EPZ arriving at relocation centers. Section J.12.

MANCHESTER:

1. The Manchester relocation center does not contain enough equipment to assure that all individuals can be administered the quick one minute check for contamination before entering the reception facility for registration (the check would take over 40 hours if all of the available monitoring equipment were used only for this checkpoint), nor enough to do a more thorough check on those evacuees who are contaminated to find out where the contamination is. Only 3,060 of the 20,000 expected evacuees could be scanned in 12 hours in the decontamination facility if all of the available monitoring equipment were used only at this checkpoint. This is only for the first scan in each

case. However the plans call for several scans in the decontamination facility per person. ⁶

Moreover, it is absurd to assume that evacuees would stand in line for this long before being able to register and begin the rendezvous process. It is very likely that the host facility will be abandoned by most evacuees when the inefficiency becomes

⁶ There will be 17 survey instruments (CDV-700) stored at the Fire Department for use in the Manchester relocation center. Volume 36 at II-11. Monitoring will apparently occur in 5 places:

1. Vehicles will be monitored before entering the parking lots. No time estimate per vehicle is provided, but since the shortest scan possible for a person is one minute, it seems unlikely that a whole car could be scanned in less time. Volume 36 at B-3.

2. The plan calls for a quick (one minute) scanning of each individual evacuee before one can enter the reception area. Vol. 36 at B-3, B4-3. This is both for the safety of the evacuee, whose decontamination needs should be made first priority, and for the "clean" people in the reception area who need to be protected from contamination by evacuees who would be contaminated and wandering around the reception area. All 20,000 people who come to Manchester will require this one minute scan. That will require 333 CDV-700 hours, with the monitor running constantly and no space between evacuees. In Manchester, all seventeen monitors in use at once could do this in 41 hours.

3. Contaminated individuals will then go to the Control Point manager just outside the decontamination center. Vol. 36 at B3-4. There they will get a thorough scan that will take between 3 and 5 minutes each. Vol. 36 at B4-5. At 4 minutes a survey, each CDV-700 can read 180 people in 12 hours.

4. Contaminated people will then remove potentially contaminated clothing, and be rescanned. Vol. 36 at B4-6. The same time factors will apply.

5. If they are still contaminated, the evacuees will go inside the decontamination center and be remonitored. Vol. 36 at B4-7. They will then be scrubbed or bathed. Then they will be monitored another time for a final reading. People who come up clean will be released and people who are still contaminated will undergo scrubbing and remonitoring again. Those who are still contaminated after two scrubblings will be referred to the DPMS Supervisor. Vol. 36 at B4-7.

apparent, leaving people without access to the organized method of finding one another within the reception area. Those discouraged individuals may seek shelter in other parts of the State or outside the State, thus spreading radioactive contamination as they travel.

2. After twelve hours, the Manchester facility is scheduled to become the only facility that will handle the decontamination of emergency workers. Vol. 36 at B-2. Obviously, monitoring and decontamination of the general public will still be underway at that time. Thus, there is no reasonable assurance that the Manchester relocation center can meet the needs of emergency workers.

ROCHESTER:

3. There will not be enough equipment in the Rochester relocation center to assure that everyone can be administered even the quick one minute check for contamination before entering the reception facility for registration. The plans do not clearly state how many CDV-700 surveying instruments will be available for use in Rochester. However, there will be four radiological monitoring kits, and therefore no more than four CDV-700's can be counted on. Vol. 35 at II-11.

It is possible that 35,000 evacuees will go to the Rochester host facility for decontamination. Vol. 35 at I-10. If there are four CDV-700's for the initial scanning, it will take the last evacuee 143 hours to get inside the reception facility. This clearly will not provide adequate protection to the evacuees.

DOVER:

4. There will not be enough equipment at the Dover host facility to assure that everyone can be administered even the quick one minute check for contamination before entering the reception facility for registration. There will be 43 CDV-700's available for use in Dover during a radiological emergency. Vol. 33 at II-11. There could be 57,000 evacuees coming to Dover for decontamination. Vol. 33 at I-10. Just to get everyone into the reception facility after one scan will take 22 hours.

SALEM:

5. There will not be enough equipment in the Dover host facility to assure that everyone can be administered even the quick one minute check for contamination before entering the reception facility for registration. There will be 3 CDV-700's available for use in Salem during a radiological emergency. Vol 38 at II-11 . There could be as many as 29,000 evacuees coming to Salem for decontamination. Vol 38 at I-8 . Just to get everyone into the reception area after one scan will take 161 hours.

b. The human resources available according to the plans are inadequate to protect the public health and safety. All of the host plans - regardless of the size of the populations they are expected to serve - provide for 94 staff members to perform the many diverse tasks associated with the facility. Vols. 33, 35, 36, 38 at B3-1, -2. Not only are these numbers inadequate on their face, but the State clearly has applied a general-

ized formula without making any attempt to determine what are the staffing needs of each separate facility.

c. The plan does not assure that everyone evacuated from the EPZ will go to a reception area. Vols. 33, 35, 36, 38 at Y-11. Without an assurance that every evacuated person and every evacuation vehicle is scanned for radiological contamination and decontaminated if necessary, a public hazard in the form of radiologically contaminated people and vehicles will go unchecked throughout the state, into other states and to Canada. In addition, there is no assurance that people who miss decontamination services at the host community will be able to obtain them anywhere else in a reasonable amount of time, since few hospitals have extensive decontamination capabilities. Vol. 1 at 2.8-5.

d. The plan does not adequately accommodate the decontamination needs of evacuated hospital patients and nursing home residents. Since the decontamination of these individuals will occur at their host health care facilities, they will need to wait for the arrival of a CDV-700 which will already be in great demand at the reception center. Likewise, the monitoring team trained to perform decontaminations to be dispatched to these facilities will have more than enough to do at the reception center. In addition, there are no procedures for how to decontaminate these individuals in the plans. Further, the host medical facilities may risk exposing regular residents to radiologically contaminated materials. Vols. 33, 35, 36, 38 at E-3.

e. It is not clear that injured contaminated evacuees or internally contaminated evacuees will be accommodated by the plans. Both sets of people are to be referred to the DPHS Supervisor. Vol 33, 35, 36, 38 at B-4. However, there is no indication of what s/he will do with them beyond the vague activity of referring them to medical authorities, how s/he will base decisions, and what facilities will be available for these people. For example, the two Manchester hospitals that are listed in Volume 1 of the RERP are Catholic Medical Center, which has no decontamination capability, and Elliot Hospital, which can handle one contaminated patient per hour. There is no reasonable assurance from this that medical care will be available for injured and contaminated or internally contaminated individuals.

f. The host facilities coordinator is charged with the task of identifying personnel who may provide emergency medical treatment on-site. No explanation of how this will be done or where the host coordinator will find these people is demonstrated in the plans. Vols. 35, 36 at III-7, Vols. 33, 38 at III-8.

g. Although there is a letter of understanding with the Red Cross that it will take responsibility for feeding, clothing, and sheltering all evacuees who have those needs, there is no demonstration of a Red Cross capability to provide these services to the huge number of people who may need them. Vol. 5, Statement of Understanding between the State of New Hampshire and the American Red Cross.

h. Although the plans report that there is a day's food regularly on hand at local schools, it is not clear whether

that is a day's food for the 1,000 regular students at the school, or a day's food to serve 20,000. In addition, the State claims that within that one day period, Red Cross will be able to gather its resources to provide for further food needs. However, no evidence is given to support that projection. Vols. 33, 35, 36, 38 at II-10. The Red Cross will also be responsible for providing any clothing that is needed. Vols. 33, 35, 36, 38 at II-10. Since fresh clothing is an integral part of the decontamination facility, it is not adequate to rely on receiving clothes on an ad hoc basis.

i. The host plans contain no system to communicate lists of registered evacuees with other host facilities. Vols. 33, 35, 36, 38 at II-12. If the host facility does not keep track of the location of evacuees, order among evacuees will not be kept. For families who are split up because children go to school in a different area than their parents live or work, or spouses who work in different areas, a more comprehensive system of logging the whereabouts of evacuees will be necessary to maintain order.

IV. Adoption of Hampton Contentions

NECNP incorporates by reference and adopts the contentions on Revision 2 of the New Hampshire Radiological Emergency Response Plan filed by the Town of Hampton on October 31, 1986. NECNP shares the concerns voiced in Hampton's contentions. Moreover, those contentions raise issues that affect not only the Town of Hampton, but the entire EPZ. NECNP believes that it will