

CONTROLLED COPY NO: 19

TO: Document Control Center - NRC File Room

DOCUMENT CHANGE NOTICE NO. 143

DATE: July 12, 2001

FROM: YNPS Site Services Department

DOCUMENT: Implementing Procedures to the Emergency Plan

1. Enter the attached documents in your manuals and/or files, discard all obsolete copies, and return this form to the Site Services Department at Yankee-Rowe, or DE&S Records Center, as applicable within 30 Calendar days.

☒ YNPS Site Services

☐ DE&S Records Center - Marlborough

2. SAFEGUARDS INFORMATION DOCUMENTS

ALL OBSOLETE copies shall be returned to the Security Shift Supervisor for SHREDDING. SAFEGUARDS INFORMATION documents shall be hand-to-hand delivered or enclosed in two properly sealed and addressed envelopes. Return this form to the Site Services Department.

DESCRIPTION OF CHANGE:

ISSUANCE: Implementing Proc. to the E-Plan

List of Effective Pages

Table of Contents

DCN No. 143 7/12/01

PROCEDURE NO.

REV. NO.

AP-3426

15

DOCKET NO. 50-29
LICENSE NO. DPR-3

Please sign and return to:

Renee Prilipp
Yankee Atomic Electric Co.
49 Yankee Rd.
Rowe, MA 01367

Departmental Working Copies have been Reviewed and Working Copy Files Updated.

N/A

Departmental Signature (N/A if not applicable)

The above documents have been entered in the applicable Department Manuals and/or files and all Obsolete copies have been discarded or identified as obsolete. [3, 5.2.15, Paragraph 9, Item 4] SAFEGUARDS INFORMATION documents will be handled per #2 above.

Signature

Date

A045

YANKEE NUCLEAR POWER STATION
IMPLEMENTING PROCEDURES TO THE EMERGENCY PLAN
TABLE OF CONTENTS

TABLE OF CONTENTS

Rev. 143

IMPLEMENTING PROCEDURES

Classification of Emergencies	OP-3300	Rev. 19
Emergency Medical/Confined Space Response Actions	OP-3305	Rev. 24
Control Room Actions During an Emergency	OP-3315	Rev. 18
Technical Support Center (TSC) Activation and Operations	OP-3324	Rev. 15
Release of Public Information Under Emergency Conditions	OP-3343	Rev. 14
Security Force Actions Under Emergency Conditions	OP-3344	Rev. 23
Emergency Preparedness Drills and Exercises	AP-3400	Rev. 9
Emergency Equipment Readiness Check	AP-3425	Rev. 8
Technical Support Center (TSC) Readiness Check	AP-3426	Rev. 15
Emergency Preparedness Training	AP-3450	Rev. 9
Responsibilities for Maintaining and Implementing the Emergency Preparedness Program for YNPS	AP-3451	Rev. 1
Revision Process for the YNPS Defueled Emergency Plan	AP-3452	Rev. 2

Proc. No. AP-3426
Rev. No. 15
Issue Date 07/2001
Review Date 11/2002

TECHNICAL SUPPORT CENTER (TSC) READINESS CHECK

SCOPE

To ensure the Technical Support Center (TSC) is periodically checked to verify that the facility is in an operable condition and to test its communications equipment and systems.

ENCLOSURES

AP-3426 - Pg. 1
Attachment A - Pgs. 1-3
Attachment B - Pgs. 1-2
APF-3426.1 - Pg. 1 - Rev. 15
APF-3426.2 - Pg. 1 - Rev. 15

REFERENCES

1. Yankee Plant Defueled Emergency Plan
2. AP-0711, "Communications Systems"
3. DP-2005, "Operations Department Surveillance Schedule"

DISCUSSION

The Technical Support Center's (TSC) communication equipment shall be tested monthly utilizing the appropriate attachment. An inspection and inventory of the TSC shall be performed quarterly. These activities shall be performed as scheduled by Reference 3.

PRECAUTIONS

None.

PREREQUISITES

See individual attachments.

PROCEDURE

See individual attachments.

FINAL CONDITIONS

See individual attachments.

ATTACHMENT A

MONTHLY COMMUNICATION TESTS AT THE TSC

PREREQUISITE

1. Notify the Operations Shift Supervisor prior to conducting communication tests.
-

PROCEDURE

A. TELEPHONE SYSTEMS

1. Plant (AT&T Definity)

NOTE: Operability of plant extensions routinely used in the TSC may be verified by the office residents.

- a. Ring the following TSC extensions from Ext. 2233:

●	2252	<input type="checkbox"/> OP	<input type="checkbox"/> INOP
---	------	-----------------------------	-------------------------------

●	2232	<input type="checkbox"/> OP	<input type="checkbox"/> INOP
---	------	-----------------------------	-------------------------------

2. Verizon

- a. Check for the presence of the following power fail telephones:

●	(SAS) 424-5261 (Ext. 2923)	_____
---	----------------------------	-------

●	(TSC) 424-5262 (Ext. 2232)	_____
---	----------------------------	-------

●	(CR) 424-5263 (Ext. 2302)	_____
---	---------------------------	-------

- b. Check the operation of the following direct outside lines: (listen for dial tone, dial 424-5261 to talk to the plant phone operator).

- 424-5395 (Ops Station) ☐ OP ☐ INOP _____
- 424-5473 (SS Desk) ☐ OP ☐ INOP _____
- 424-5387 (TSC) ☐ OP ☐ INOP _____
- 424-5455 (Gatehouse location) ☐ OP ☐ INOP _____

3. Federal Telecommunication System (FTS)

- a. Notify the Control Room that the FTS telephone will be tested from the TSC. _____

- b. From a FTS telephone call the NRC by dialing 1-301-816-5100. State the following:

- (1) Name
- (2) Location
- (3) Fact that telephone is being tested
- (4) Request a call back to the telephone being tested (answer from the FTS phone)

Control Room

- FTS (700-661-5251) ☐ OP ☐ INOP _____

TSC

- FTS (700-661-5251) ☐ OP ☐ INOP _____

B. FACSIMILE MACHINE

NOTE: Fax machine may be set up in Control Room at extension 2358 or in the Technical Support Center at extension 2252.

1. Send a test sheet from one machine to another (Refer to transmitting instructions at the machine) _____

2. Check the reproduction quality of the receiving machine:

☐ OP ☐ INOP

C. Document results of this attachment on APF-3426.1, "TSC
Discrepancies and Corrective Actions."

D. If a communications discrepancy is found, then complete
APF-0711.1, "Communications Problem Report," and forward it to the
Plant Communications Coordinator.

E. Forward the completed procedure to Operations Management.

FINAL CONDITIONS

1. The completed procedure has been returned to Operations
Management.

2. If applicable, the discrepancies found in the completion of this
attachment have been corrected or forwarded to the Plant
Communications Coordinator for corrective action.

3. The TSC is adequately equipped and functional to meet emergency
contingencies.

Remarks:

Completed by: _____

Date/Time

Reviewed by: _____

Shift Supervisor

Date/Time

Reviewed by: _____

Operations Management

Date

Reviewed by: _____

E-Plan Coordinator

Date

ATTACHMENT B

QUARTERLY INVENTORY AND INSPECTION OF THE TSC

PREREQUISITE

1. Notify the Operations Shift Supervisor prior to conducting communication tests.

PROCEDURE

A. EQUIPMENT INVENTORY

1. Clock
 - Conventional (1) _____
2. Map
 - Site Plot Plan (Drawing No. 9699-FY-6A) _____
3. Blank White Status Board _____

B. DOCUMENTS INVENTORY

NOTE: The Site Services Department should be able to assist in determining the latest versions of necessary documents.

1. Complete APF-3426.2, "TSC Documents Reference List." Use this form to verify that the latest versions of required procedures, forms, and lists are available in the TSC. Also verify that the working copy files are of the latest versions.
2. Books
 - Defueled Emergency Plan _____
 - Defueled Implementing Procedures _____
 - DE&S Emergency Support Plan (CC No. 42) _____
 - Off-Site Dose Calculation Manual (ODCM) (CC No. 15) _____
 - TSC Log Book _____
 - Procedures for Admission and Management of Radioactively Contaminated Patients at North Adams Regional Hospital _____
 - Op-Memos _____
 - Plant Procedures (CC No. 4) _____
 - Defueled Technical Specifications _____
 - FSAR (CC No. 11) _____
 - Defueled Systems Training Manual (CC No. 3) _____
 - State of Vermont Notification Manual _____

- C. Document results of this attachment on APF-3426.1, "TSC Discrepancies and Corrective Actions." _____
- D. Forward the completed procedure to Operations Management. _____

FINAL CONDITIONS

1. The latest versions of procedures, forms, and lists are in place. _____
2. The completed procedure has been returned to Operations Management. _____
3. If applicable, the discrepancies found in the completion of this attachment have been corrected. _____
4. The TSC is adequately equipped and functional to meet emergency contingencies. _____

Remarks:

Completed by: _____ Date/Time _____

Reviewed by: _____ Date _____
Shift Supervisor

Reviewed by: _____ Date _____
Operations Management

Reviewed by: _____ Date _____
E-Plan Coordinator

TSC DISCREPANCIES AND CORRECTIVE ACTIONS

Date: _____

Check One: ☐ Monthly Communications Tests Only (Att A)

☐ Quarterly TSC Checks Only (Att B)

Communications Problem(s)? ☐ Yes ☐ No If Yes, then document
below, complete APF-0711.1 and forward to Plant Communications
Coordinator.

[illegible]

Completed by: _____

Date _____

TSC DOCUMENTS REFERENCE LIST

DOCUMENT	WORKING FILES	REVISION OR DATE
OP-3300*		
OP-3305*		
OP-3315*		
OP-3324*		
OP-3343*		
OP-3344*		
AP-0711*		
AP-0806*		
AP-0809*		
OP-4952*		
OP-8041*		
OP-8415*		
OP-8421*		
OP-Memo 2E-4*		
OP-Memo 2E-5*		
OP-Memo 2E-6*		
YNPS In-Plant Telephone Listing*		
DE&S (Marlboro) Telephone Listing*		
Off-Site Dose Calculation Manual		
DE&S Emergency Support Plan		
Defueled Emergency Plan		
Defueled E-Plan Implementing Procedures		
Procedures for Admission and Management of Radioactively Contaminated Patients at North Adams Regional Hospital		
Plant Procedures Manual		
Defueled Technical Specification		
FSAR		
Defueled Training Manual		
State of Vermont Notification Manual		