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ONS-2014-135

October 30, 2014 10 CFR 50.54(q)

Attn: Document Control Desk
U.S. Nuclear Regulatory Commission
11555 Rockville Pike
Rockville, Maryland 20852-2746

Subject: Duke Energy Carolinas, LLC
Oconee Nuclear Station, Units 1, 2, and 3
Docket Nos. 50-269, -270, and -287
Emergency Plan Implementing Procedure Revision 2014-023

Please find attached for your use and review copies of the enclosed revisions along with the associated supporting documentation and 10 CFR 50.54(q) evaluation. These procedures are Emergency Plan Implementing Procedures.

This revision is being submitted in accordance with 10 CFR 50.54(q) and does not reduce the effectiveness of the Emergency Plan or the Emergency Plan Implementing Procedures. If there are any questions or concerns pertaining to this revision please call Pat Street, Emergency Preparedness Manager, at 864-873-3124.

By copy of this letter, a copy of this revision is being provided to the NRC, Region II, Atlanta, Georgia.

Sincerely,

Scott L. Batson
Vice President
Oconee Nuclear Station

Attachments:
Emergency Plan Implementing Procedure Revision
10 CFR 50.54(q) Evaluation(s)

AX45
NRR

U. S. Nuclear Regulatory Commission

October 30, 2014

xc: w/2 copies of attachments

Mr. Victor McCree, Regional Administrator
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Mr. Eddy Crowe
NRC Senior Resident Inspector
Oconee Nuclear Station

ELL
EC2ZF

October 2, 2014

OCONEE NUCLEAR STATION

SUBJECT: Emergency Plan Implementing Procedures
Volume C Revision 2014-023

Please make the following changes to the Emergency Plan Implementing Procedures, Volume C:

REMOVE	**INSERT**
Cover Sheet Rev. 2014-022	Cover Sheet Rev. 2014-023
Table of Contents Pages 1, 2, & 3	Table of Contents Pages 1, 2, & 3
SR/0/A/2000/003 Rev 2	SR/0/A/2000/003 Rev 3

Pat Street
ONS Emergency Planning Manager

OCONEE NUCLEAR STATION
EMERGENCY PLAN IMPLEMENTING PROCEDURES
VOLUME C

APPROVED:

Y S Patt

Terry L. Patterson
Director Nuclear Org Effectiveness

10/20/14

Date Approved

VOLUME C
REVISION 2014-023
September 2014

VOLUME C
TABLE OF CONTENTS

SH/0/B/2005/001	Emergency Response Offsite Dose Projections	Rev.	006
SH/0/B/2005/002	Protocol for the Field Monitoring Coordinator During Emergency Conditions	Rev.	005
HP/0/B/1009/018	Off-Site Dose Projections	Rev.	023
HP/0/B/1009/020	Estimating Food Chain Doses Under Post-Accident Conditions	Rev.	005
HP/0/B/1009/022	On-Shift Off-Site Dose Projections	Rev.	013
HP/0/B/1009/023	Radiation Protection Emergency Response	Rev.	000
HP/0/B/1009/026	Environmental Monitoring For Emergency Conditions	Rev.	000
RP/0/A/1000/001	Emergency Classification	Rev.	001
RP/0/A/1000/002	Control Room Emergency Coordinator Procedure	Rev.	005
RP/0/A/1000/003 A	ERDS Operation	Rev.	000
RP/0/A/1000/009	Procedure For Site Assembly	Rev.	002
RP/0/A/1000/010	Procedure For Emergency Evacuation/Relocation Of Site Personnel	Rev.	001
RP/0/A/1000/015 A	Offsite Communications From The Control Room	Rev.	002
RP/0/A/1000/015 B	Offsite Communications From The Technical Support Center	Rev.	001
RP/0/A/1000/016	MERT Activation Procedure For Medical, Confined Space, and High Angle Rescue Emergencies	Rev.	001
RP/0/A/1000/017	Spill Response	Rev.	002
RP/0/A/1000/018	Core Damage Assessment	Rev.	000
RP/0/A/1000/019	Technical Support Center Emergency Coordinator Procedure	Rev.	006

VOLUME C
TABLE OF CONTENTS

RP/0/A/1000/022	Procedure For Major Site Damage Assessment And Repair	Rev. 001
RP/0/A/1000/024	Protective Action Recommendations	Rev. 002
RP/0/A/1000/027	Re-Entry Recovery Procedure	Rev. 000
RP/0/A/1000/028	Nuclear Communications Emergency Response Plan	Rev. 000
RP/0/A/1000/029	Fire Brigade Response	Rev. 001
RP/0/A/1000/031	Joint Information Center Emergency Response Plan	Rev. 001
RP/0/A/1000/035	Severe Weather Preparations	Rev. 001
RP/0/A/1000/036	Equipment Important to Emergency Response	Rev. 001
RP/0/A/1000/037	Incident Command Post (ICP) Operations and Radiation Protection Liaison Guidelines	Rev. 002
SR/0/A/2000/001	Standard Procedure For Corporate Communications Response To The Emergency Operations Facility	Rev. 000
SR/0/B/2000/002	Standard Procedure for EOF Services	Rev. 006
SR/0/A/2000/003	Activation of the Emergency Operations Facility	Rev. 003
SR/0/A/2000/004	Notification to States and Counties from the Emergency Operations Facility for Catawba, McGuire, and Oconee	Rev. 000
Business Management	Business Management Emergency Plan	Rev. 012
SSG Functional Area Directive 102	SSG Emergency Response Plan – ONS Specific	Rev. 008
SCD – 110	Supply Chain Directive 110 – SCO Emergency Response Plan	Rev. 004
Engineering Manual 5.1	Engineering Emergency Response Plan	Rev. 032
Human Resources Procedure	ONS Human Resources Emergency Plan	10/13/2004

VOLUME C
TABLE OF CONTENTS

Radiation Protection Section Manual 11.3	Off-Site Dose Assessment And Data Evaluation	Rev. 001
Safety Assurance Directive 6.1	Emergency Response Organization	Rev. 007
Safety Assurance Directive 6.2	Emergency Contingency Plan	Rev. 006
Training Division DTS-007	Oconee Training Division Training Standard	Rev. 018

Duke Energy
Standard Procedure for CNS, MNS & ONS
Activation of the Emergency Operations Facility

Procedure No.
SR/0/A/2000/003
Revision No.
003
Electronic Reference No.
SHR0005P

Reference Use

PERFORMANCE

This Procedure was printed on 10/02/14 at 12:46:30 from the electronic library as:

(ISSUED) - PDF Format

Compare with Control Copy every 14 calendar days while work is being performed.

Compared with Control Copy* _____ Date _____

Compared with Control Copy* _____ Date _____

Compared with Control Copy* _____ Date _____

Date(s) Performed	Work Order/Task Number (WO#)

COMPLETION

- ☐ Yes ☐ NA Checklists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?
- ☐ Yes ☐ NA Required enclosures attached?
- ☐ Yes ☐ NA Charts, graphs, data sheets, etc. attached, dated, identified, and marked?
- ☐ Yes ☐ NA Calibrated Test Equipment, if used, checked out/in and referenced to this procedure?
- ☐ Yes ☐ NA Procedure requirements met?

Verified By* Date

Procedure Completion Approved* Date

**Printed Name and Signature*

Remarks (*attach additional pages, if necessary*)

IMPORTANT: Do **NOT** mark on barcodes.

Printed Date: *10/02/2014*

Enclosure No.: *FULL*

Revision No.: *003*

Procedure No.: *SR/0/A/2000/003*

Activation of the Emergency Operations Facility

1. PURPOSE

1.1 This procedure describes the emergency responsibilities and duties of the Emergency Operations Facility Emergency Response Organization (ERO) members.

2. DEFINITIONS

NOTE: The EOF must be operational using 75 minutes as a goal for the minimum staff to be in place following declaration of an Alert or higher classification. Turnover should occur with the TSC at a time that will not decrease the effectiveness of communications with the offsite agencies.

2.1 Operational: The Emergency Response Facility (e.g., Technical Support Center, Operations Support Center, Emergency Operations Facility) is staffed, ready to receive turnover and ready to perform assigned emergency response functions.

2.2 Activated: The Emergency Response Facility (e.g., Technical Support Center, Operations Support Center, Emergency Operations Facility) has accepted turnover and has direction and control of assigned emergency response functions.

NOTE: The following definition is applicable to the Emergency Notification Form Line 6.

2.3 Emergency Release: An unplanned, quantifiable radiological release to the environment during an emergency event. The release does not have to be related to the declared emergency. {AD-EP-ALL-0002} Refer to procedure SH/0/B/2005/001 for specific indications of an emergency release.

NOTE: The following definitions are applicable to the Emergency Notification Form, Line 8.

2.4 Degrading: Plant conditions involve at least one of the following:

Plant parameters (e.g., temperature, pressure, level, voltage, frequency) are trending unfavorably away from expected or desired values **AND** plant conditions could result in a higher classification or Protective Action Recommendation (PAR) before the next follow-up notification.

Site conditions (e.g., wind, ice/snow, ground tremors, hazardous/toxic/radioactive material leak, fire, security event) impacting plant operations or personnel safety are worsening **AND** plant conditions could result in a higher classification or Protective Action Recommendation (PAR) before the next follow-up notification.

2.5 Improving: Plant conditions involve at least one of the following:

Plant parameters (e.g., temperature, pressure, level, voltage, frequency) are trending favorably toward expected or desired values **AND** plant conditions could result in a lower classification or emergency termination before the next follow-up notification.

Site conditions (e.g., wind, ice/snow, ground tremors hazardous/toxic/radioactive material leak, fire, security events) have become less of a threat to plant operations or personnel safety **AND** plant conditions could result in a lower classification or emergency termination before the next follow-up notification.

2.6 Stable: Plant conditions are neither degrading nor improving.

3. PROCEDURE

NOTES:
- This procedure and the position specific enclosures are not intended to be followed in a serial step-by-step sequence.
- Instructions and guidance steps are to be implemented as applicable for the specific needs of the event.
- Use hard copy (paper) forms or electronic equivalents to complete all forms.
- References to "Status Boards" may refer to physical displays mounted in the facility or electronic displays either projected, displayed on large monitors or on personal computer monitors.

3.1 General instructions for all ERO members.

3.1.1 Ensure appropriate checklist, logs and forms are completed.

3.1.2 Provide critical information to appropriate personnel upon receipt rather than waiting for a time out or roundtable discussion.

3.1.3 Use "Attention in the EOF" to announce critical information in the facility.

3.1.4 **IF** additional personnel are needed to support the emergency or for 24-hour coverage, refer to the following for telephone numbers:

- ERO Member Contact Information notebook on the EOF Director's Area bookshelf (home, office and cell phone numbers).
- Duke Energy Enterprise Phone Book (office and cell phone numbers).

- Emergency Response Organization (ERO) database by contacting the EOF Emergency Planner.

3.1.5 **IF** equipment problems occur, contact the following:

- Computer – EOF Data Coordinator
- Communications systems and other facility equipment – EOF Services Manager

NOTE:	When using the OAC to trend plant data for decision purposes, please note that reducing the trend screen overall size can cause the plotted data to be suspect upon restoration to full size. It is recommended that trend plots be minimized using the standard windows button (the button in the top right that has the underbar). The software code is designed to refresh the trend screens upon restoration to full size from a minimized state. A second method is to have the OAC redraw the trend after restoring the trend screen to full size.

3.2 **IF** access to SDS data is desired, login to system as follows:

3.2.1 From DAE main screen, select Search DAE tab.
3.2.2 Type SDS in Search box and press Enter.
3.2.3 Select **Catawba OAC SDS**, **McGuire OAC SDS**, or **Oconee OAC SDS** as applicable.
3.2.4 Select Run Application.
3.2.5 Logon with LAN ID and Password as follows:

NAM\UserID
Password

3.2.6 Select the desired OAC to access by checking the box and then clicking the Start button. You can start multiple sessions if desired.

CNS

- **C1 RT PRI**
- **C2 RT PRI**
- **C1 RT BAC**
- **C2 RT BAC**
- **Simulator**
- **Spare Simulator**
- **Drill Simulator**

MNS

- **M1 RTS PRI**
- **M1 RTS BAC**
- **M2 RTS PRI**
- **M2 RTS BAC**
- **Simulator**
- **Sim Backup**

ONS

- **O1 OAC**
- **O2 OAC**
- **O3 OAC**
- **KHU OAC**
- **Simulator A**
- **Simulator B**

3.2.7 Access emergency response displays as follows:

Catawba/McGuire

Enter GD (space)"Group Display Name" in the white box at the upper right portion of the screen.

Catawba Specific

Group Display Name	Group Display Description
ERDS1	ERDS Group 1
ERDS2	ERDS Group 2
EROCONT	Selected values associated with containment.
EROCORE1	Incore temperature values
EROCORE2	Additional incore temperature values
EROCORE3	Additional incore temperature values
EROINJCT	Selected letdown/charging values
EROPLEAK	Selected primary to containment leakage values
EROSLEAK	Selected primary to secondary leakage values
EROPRIM	Selected primary system values
ERORD5	Selected Raddose V Assessment Points
ERORXG	Selected Value for Reactor Engineer
EROSAMG	Selected SAMG Values
EROSECND	Selected secondary system values
MET	Met Tower Points

McGuire Specific	
Group Display Name	Group Display Description
ERO-1	Selected plant parameters
EROCONT	Emergency Response Containment
EROCORE	Emergency Response Incore
EROINJCT	Emergency Response Injection
EROPRIM	Emergency Response Primary
ERORD5	Selected Raddose V Assessment Points
EROSECND	Emergency Response Secondary. {9} {10}
WEATHER	Weather Data

Oconee

Enter applicable Turn On code in the white box at the upper right portion of the screen.

Oconee Specific	
Turn On Code Name	Turn On Code Description
EROMENU	Menu Access for Oconee Data Screens
EROPRI	Selected Primary System values
EROSEC	Selected Secondary System values
EROCONT	Selected Containment Condition values
EROAUX	Selected Radiation Monitor values
EROAREA	Selected Area Radiation Monitor values
EROPROC	Selected Process Radiation Monitor values
EROENV	Selected values for Dose Assessment and Field Monitoring use
EROECCS	Selected ECCS values
ERDSMENU	Menu Access for Oconee ERDS Data

3.3 The Emergency Plant Status application has also been established for Oconee emergency response use. This application is available from DAE.

3.3.1 To launch the Emergency Plant Status application, from DAE select *Search DAE* and type in *Emergency Plant Status.*

3.3.2 Select the *Emergency Plant Status - ONS*

3.3.3 Select Run Application

3.3.4 Enter your password and verify domain as NAM.

3.4 **IF** EOF facility in Energy Center is unavailable, establish Alternate EOF at designated alternate location {IER L1-13-10}:

- Catawba Nuclear Station event - McGuire Administration Building per Enclosure 6.25
- McGuire Nuclear Station event - Catawba Administration Building per Enclosure 6.26
- Oconee Nuclear Station event - Catawba Administration Building per Enclosure 6.26

3.5 Perform the applicable actions for the event using instructions and guidance in the following enclosures:

ERO Position Title	**Enclosure**
EOF Director/Assistant EOF Director	6.1 EOF Director/Assistant EOF Director Checklist
Radiological Assessment Manager	6.6 Radiological Assessment Manager Checklist
EOF Dose Assessor	6.7 EOF Dose Assessor Checklist
Field Monitoring Coordinator	6.8 Field Monitoring Coordinator Checklist
Radio Operator	6.9 Radio Operator Checklist
EOF Offsite Agency Communicator	6.10 EOF Offsite Agency Communicator Checklist
EOF Services Administration/Commissary	6.11 EOF Services Administration/Commissary Checklist {71}
Accident Assessment Manager	6.12 Accident Assessment Manager Checklist
Accident Assessment Interface	6.13 Accident Assessment Interface Checklist
Operations Interface Checklist	6.14 Operations Interface Checklist {44}
Reactor Physics	6.15 Reactor Physics Checklist
EOF Emergency Planner	6.16 EOF Emergency Planner Checklist
EOF Log Recorder	6.17 EOF Log Recorder Checklist
EOF Data Coordinator	6.18 EOF Data Coordinator Checklist
EOF Services Manager	6.19 EOF Services Manager Checklist

4. REFERENCES

4.1 Catawba Nuclear Station (CNS) Emergency Plan

4.2 McGuire Nuclear Station (MNS) Emergency Plan

4.3 Oconee Nuclear Station (ONS) Emergency Plan

5. RECORDS

5.1 All logs, forms and records completed as the result of implementing this procedure during an actual declared event shall be retained as permanent plant records. Nuclear Generation Record Retention Rule Number 421734, "Procedures-Technical Completed."

5.2 All checklists, logs and forms completed as the result of implementing this procedure shall be collected at the end of the event and provided to the site Emergency Preparedness Manager.

6. Enclosures

6.1 EOF Director/Assistant EOF Director Checklist
6.2 Catawba Offsite Protective Actions
6.3 McGuire Offsite Protective Actions
6.4 Oconee Offsite Protective Actions
6.5 Emergency Classification Downgrade/Termination
6.6 Radiological Assessment Manager Checklist
6.7 EOF Dose Assessor Checklist
6.8 Field Monitoring Coordinator Checklist
6.9 Radio Operator Checklist
6.10 EOF Offsite Agency Communicator Checklist
6.11 EOF Services Administration/Commissary Checklist {71}
6.12 Accident Assessment Manager Checklist
6.13 Accident Assessment Interface Checklist
6.14 Operations Interface Checklist {44}
6.15 Reactor Physics Checklist
6.16 EOF Emergency Planner Checklist
6.17 EOF Log Recorder Checklist
6.18 EOF Data Coordinator Checklist
6.19 EOF Services Manager Checklist
6.20 Establishing Communications Links Between McGuire SAMG Evaluators {11}
6.21 Oconee Recovery Guidelines
6.22 Keowee Hydro Dam/Dikes - Condition A/B Descriptions
6.23 EOF Evacuation Checklist
6.24 EOF Briefing Guideline
6.25 Setup of Catawba Alternate EOF in McGuire Admin Bldg. {66, 67, 68}

6.26 Setup of McGuire or Oconee Alternate EOF in Catawba Admin Bldg. {66, 67, 68}
6.27 NRC Response Team Briefing
6.28 Commitments for SR/0/B/2000/003

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

NOTE:	The EOF Log Recorder will maintain the official log for the EOF Director/Assistant EOF Director. The EOF Director/Assistant EOF Director may maintain an additional log if desired.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Establish communications with Emergency Coordinator or Assistant Emergency Coordinator in affected site's TSC:

- Use affected site's EOF Director to Emergency Coordinator Ringdown phone (Catawba and McGuire only)

OR

- Catawba TSC, 9-803-701-5870

OR

- McGuire TSC, 9-980-875-4950

OR

- Oconee TSC, 9-1-864-873-3921

NOTE:	EOF access is controlled through the use of a monitored card reader process.

_____ Verify Energy Center Building Security personnel are monitoring the EOF entrance card reader.

INITIALS _____PRINTED NAME _____(EOF Director)

INITIALS _____PRINTED NAME _____(Asst. EOF Director)

NOTE: 1. **IF** the emergency situation prevents activating the TSC within 75 minutes of declaration, Control Room will:

- turn over responsibility for classification and state and county notification to EOF.
- maintain responsibility for NRC Event Notification until released by NRC Communicator in TSC.
- maintain responsibility for continuous phone communications to the NRC until relieved by the NRC Communicator in TSC.

2. **IF** TSC remains unavailable and EOF cannot take responsibility for classification and state and county notification, Control Room will maintain these responsibilities until one of the facilities is capable of turnover.

_____ **IF** emergency situation prevents activating TSC within 75 minutes of declaration, contact affected Site's Control Room:

Person Notified/Date/Time

- ☐ Catawba Control Room, 9-803-701-5164_____/_____
- ☐ McGuire Control Room, 9-980-875-4138_____/_____
- ☐ Oconee Unit 1 and 2 Control Room, 9-1-864-873-2159_____/_____
- ☐ Oconee Unit 3 Control Room, 9-1-864-873-2160_____/_____

_____ Verify EOF minimum staffing positions are prepared to assume their EOF duties prior to declaring the EOF operational:

_____ EOF Director
_____ Accident Assessment Manager
_____ Radiological Assessment Manager
_____ Off-Site Agency Communicator
_____ Off-Site Agency Communicator.

OR

IF Less than the above listed minimum EOF positions are filled,

AND

The 75-minute EOF operational time requirement is near,

AND

An extra person(s) is available whom the EOF Director believes is capable of filling a missing position(s) based on the training, experience and skills required by the ERO training program - ETQS 7111.0, Emergency Response Training

AND

An appropriate log entry is made. {64}

_____ Request Offsite Agency Communicator monitor EOF Fax 704-382-1825. {13}

NOTE: For all drills, messages should be preceded with "This is a drill. This is a drill."

_____ Announce over EOF public address system:

"Anyone who is reporting to this facility outside of your normal work hours must complete a Fitness for the Duty Form. If you have consumed alcohol within the past five (5) hours or believe your work quality may be compromised due to fatigue {69}, sickness, or other potentially impairing conditions {72}, notify either the EOF Director, Assistant EOF Director, or the appropriate lead in your functional area."

_____ Declare EOF operational. EOF operational time: _____.

NOTE: For all drills, messages should be preceded with "This is a drill. This is a drill."

_____ Announce over EOF public address system:

"Attention all EOF personnel. This is _____ and as of _____ hours,
(EOF Director's Name)

the EOF is operational. Each EOF functional area should perform a Take a Minute in its work area."

_____ Notify Emergency Coordinator or Assistant Emergency Coordinator that the EOF is:

- Operational
- Gathering plant status information
- Ready to receive turnover at the Emergency Coordinator's convenience.

_____ Review definitions in Section 2 of this procedure.

NOTE: The following step may be accomplished by conducting a Time Out or by verifying the level of readiness with the individuals in the positions.

_____ Verify the following positions, at a minimum, are ready to activate and prepared to perform the next offsite agency notification.

_____ Accident Assessment Manager
_____ Radiological Assessment Manager
_____ Lead Off-Site Agency Communicator

NOTE: The Emergency Coordinator or Assistant Emergency Coordinator should fax the Emergency Coordinator Turnover Checklist to the EOF. The "Emergency Coordinator Turnover Checklist" is provided on page 13 of this enclosure.

_____ **IF** a classification change occurs during turnover, suspend turnover until CR OR TSC declares and transmits notification to offsite agencies. {12}

_____ Receive turnover from Emergency Coordinator or Assistant Emergency Coordinator utilizing the "Emergency Coordinator Turnover Checklist" or equivalent.

_____ Prepare or delegate to Assistant EOF Director preparations for briefing NRC by completing job aid in Enclosure 6.27 {8}

NOTE: The EOF Director is responsible for determining Emergency Classifications, approving Protective Action Recommendations, and approving Offsite Agency Emergency Notification Forms after the EOF is activated. These responsibilities remain with the EOF Director and shall not be delegated.

_____ Inform Emergency Coordinator that EOF is ready to activate.

NOTE: For all drills, messages should be preceded with "This is a drill. This is a drill."

_____ Announce over the EOF public address system:

"Attention all EOF personnel. The EOF was activated at _____ hours. This is _____. I am the EOF Director and have taken responsibility for emergency management from the Emergency Coordinator in the Technical Support Center. At this time, the EOF has command and control for emergency classification, offsite notifications, protective action recommendations, field monitoring, and offsite agency interface. The current emergency classification is _____. The following is a summary of the plant status _____ _____.

Additional information will be provided to you as conditions change. The next offsite agency notification shall be transmitted by _____ hours. The EOF staff shall prepare for a time-out and a roundtable discussion at _____ hours."

_____ Review current emergency classification with EOF staff and verify it meets criteria in:

- Catawba RP/0/A/5000/001
  OR
- McGuire RP/0/A/5700/000
  OR
- Oconee RP/0/A/1000/001.

_____ Obtain from RAM expected time frames that dose assessment runs will be available to be included on emergency notification forms. {31}

NOTE:
1. The first message from the EOF should include EOF activation time on Line 13.
2. **IF** data changes during review of the emergency notification form, it is a good practice to require the EOF staff to do a "clean sweep" through the form prior to approval. {52}

_____ Notify Offsite Agency Communicator to make emergency notifications according to the following schedule:

Initial Notifications {39}

1. Initial notifications to the State(s) and counties must be made within 15 minutes of the event declaration time using the Emergency Notification form (ENF).

2. For an upgrade in classification prior to or while transmitting an initial message:
   -The notification for the lesser emergency classification must be made within 15 minutes of the lesser classification declaration time.
   -The agencies must be informed that an upgrade in classification will be coming.
   -The upgraded classification message must be transmitted within 15 minutes of the upgraded classification declaration time.

Follow-up Notifications

1. Follow-up notifications to the State(s) and Counties must be made according to the following schedule:

Catawba	McGuire	Oconee
-For NOUE, ALERT, SAE, or GE, every hour until the emergency is terminated.	-For NOUE, every 4 hours until the emergency is terminated. -For ALERT, SAE, or GE, every hour until the emergency is terminated.	-For NOUE, a follow-up is not required. -For ALERT, SAE, or GE, every 60 minutes until the emergency is terminated.

OR

Catawba	McGuire	Oconee
-If there is any significant change to the situation (make notification as soon as possible).	-If there is any significant change to the situation (make notification as soon as possible).	-If there is any significant change to the situation (make notification as the change occurs). See NOTE* below for examples of changes.

OR

Catawba	McGuire	Oconee
-As agreed upon with an Emergency Management official from each individual agency. Documentation shall be maintained for any agreed upon schedule change. -The interval shall not be greater than 4 hours to any agency.	-As agreed upon with an Emergency Management official from each individual agency. Documentation shall be maintained for any agreed upon schedule change. -The interval for ALERT, SAE, or GE shall not be greater than 2 hours to any agency.	-Required every 60 minutes from the notification time on Line 2 for ALERT, SAE, or GE. -This frequency may be changed at the request of offsite agencies.

*NOTE (Oconee): Examples of significant plant changes include: evacuation/relocation of site personnel, fires onsite, MERT activation and/or injured personnel transported offsite, chemical spills, explosions, Condition "A" or "B" for Keowee Hydro Project Dams/Dikes, or any event that would cause or require offsite agency response.

2. If a follow-up is due and an upgrade to a higher classification is declared, there is no need to complete the follow-up ENF. In this case, the offsite agencies must be notified that the pending follow-up is being superseded by an upgrade to a higher classification and information will be provided.

3. Follow-up messages in the General Emergency classification that involve an upgrade in PARs must be communicated to the offsite agencies as soon as possible and within 15 minutes.

_____ **IF AT ANY TIME** Site Area Emergency is declared, consult Accident Assessment Manager and Radiological Assessment Manager to determine potential zones for protective action recommendations.

_____ **IF AT ANY TIME** General Emergency is declared, EOF Director shall IMMEDIATELY (within 15 minutes) make Protective Action Recommendations to offsite agencies on Emergency Notification Form (ENF) using: {57}

- ☐ Enclosure 6.2 - Catawba Offsite Protective Actions
- ☐ Enclosure 6.3 - McGuire Offsite Protective Actions
- ☐ Enclosure 6.4 - Oconee Offsite Protective Action

_____ **IF** changes to Protective Action Recommendations are approved by the EOF Director, ensure changes are transmitted to offsite agencies within 15 minutes.

CAUTION: If a zone has been accurately selected for evacuation, it shall remain selected. {27} {30}

_____ Evaluate specific plant conditions, offsite dose projections, field monitoring team data, and determine need to update Protective Action Recommendations.

_____ Review dose projections with Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.

_____ **IF** Protective Action Recommendations are required beyond 10 miles, notify the states and counties to consider sheltering/evacuation of general population beyond 10-mile EPZ.

NOTE: Descriptions of Keowee Hydro Dam/Dike Condition A and B are provided in Enclosure 6.22.

_____ **IF** Condition A, Dam Failure (Keowee or Jocassee) exists, make Protective Action Recommendations to Oconee County and Pickens County for imminent/actual dam failure on Emergency Notification Form Line 5B (Evacuate) and Line 5E (Other):

Line 5B *Move residents living downstream of the Keowee Hydro Project dams to higher ground.*

Line 5E *Prohibit traffic flow across bridges identified on your inundation maps until the danger has passed.*

_____ Communicate, or delegate to the Assistant EOF Director the responsibility to communicate, plant status to County Directors of Emergency Management (CDEM), State Liaisons or State Directors of Emergency Management (SDEM):

- EOF State Liaisons communicate information from EOF Director to County/State representatives using Decision Line.

NOTE: If using the EOF/Assistant EOF Director telephone, individual State and/or County numbers can be obtained from the appropriate site's Emergency Telephone Directory.

- Use Decision Line or EOF/Assistant EOF Director telephone to contact appropriate states/counties. Obtain Decision Line Dial Codes or phone numbers from the appropriate Emergency Telephone Directory. {7}

Catawba Site Specific

_____ York CDEM_____
_____ Mecklenburg CDEM_____
_____ Gaston CDEM_____
_____ NC SDEM_____
_____ SC SDEM _____

McGuire Site Specific

_____ Mecklenburg CDEM _____
_____ Gaston CDEM_____
_____ Lincoln CDEM _____
_____ Iredell CDEM _____
_____ Catawba CDEM_____
_____ Cabarrus CDEM_____
_____ NC SDEM _____

Oconee Site Specific

_____ Oconee County CDEM_____
_____ Pickens County CDEM_____
_____ SC SDEM_____

_____ **IF** Protective Action Recommendations have been provided to the States and Counties, request protective action decision information from the SDEPs **AND** CDEPs:
Zones Evacuated: _____

Zones Sheltered: _____

Information Received from: _____

_____

_____ Inform Emergency Coordinator **OR** Assistant Emergency Coordinator of SDEPs and CDEPs protective action decisions and other offsite conditions.

NOTE:	Wireless mikes are available for use during round tables/timeouts. {38}

_____ Perform the following steps as needed throughout the event:

- Conduct a time-out and hold a roundtable discussion approximately every hour, coordinated with the TSC, with the EOF staff using Enclosure 6.24 to discuss:
  - Emergency Classification
  - Protective Action Recommendations
  - Emergency Notification Form status
  - Offsite dose projections
  - Mitigation strategies
  - Termination criteria as defined in Enclosure 6.5.

- Ensure roundtables/time-outs enable EOF members to know what is going on, what to anticipate, and understand focus and priorities.

- Announce to the EOF the emergency classification, plant status, and priorities via the EOF public address system following EOF time-outs.

- Emergency Coordinator or Assistant Emergency Coordinator updates may be broadcast on EOF public address system.

- Advise Emergency Coordinator or Assistant Emergency Coordinator of:
  - All aspects of the emergency situation, including alternate strategies outside of procedures as plant conditions dictate
  - Emergency Classification changes
  - Protective Action Recommendations changes
  - Mitigation strategies
  - Contingency plans.

NOTE:
1. 10CFR50.54(x) states that a licensee may take reasonable action that departs from a license condition or technical specification in an emergency, when this action is immediately needed to protect the health and safety of the public and no action consistent with license conditions or technical specifications that can provide adequate or equivalent protection is immediately apparent. Ultimate responsibility for plant response in an emergency resides in the highest authority in the chain of command of the facility licensee available to make a decision about the response. The on duty OSM should be consulted and his concurrence obtained before invoking 10CFR50.54(x). {48}

2. Examples of potential 10CFR50.54(x) action items include: {40}

   - Deviation from an Emergency Procedure.
   - Rerouting system piping to temporarily restore system flow.
   - Re-alignment of electrical power systems outside of procedural guidance.
   - Using mitigation strategies not established by the SAMG guidelines.

3. **IF** the TSC is activated, the TSC Emergency Coordinator makes the decision to invoke 10CFR50.54(x). {48}

- **WHEN** restoring power in a LOOP event, have the risk significance of power restoration assessed for risk potential by Accident Assessment personnel. {42}
- Authorize emergency worker extensions if the radiation exposure doses are expected to exceed the blanket dose extension limits authorized by the Radiation Protection Manager using:

  - Catawba RP/0/A/5000/018
  - McGuire RP/0/A/5700/020
  - Oconee RP/0/B/1000/011.

NOTE: The Emergency Action Level descriptions on Line 4 of the Emergency Notification Form have been pre-screened.

- **IF** the event involves a security threat, consult the job aid, "Nuclear Security Approved Messages for Security Related Events/Issues," in the EOF Director's notebook for guidance in developing remarks for Line 13 of the Emergency Notification Form. {47}

NOTE: Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

- Approve personnel with training deficiencies prior to their participation as EOF staff members. This approval shall be documented in the EOF Log.
- Document personnel escorted into the EOF in the EOF log. {73}
- Turn over EOF Director duties to the Assistant EOF Director prior to leaving the EOF Director's Area.

- **IF** necessary to relieve Duke Energy personnel, request environmental surveillance support personnel from DOE Radiological Assessment Plan by contacting DOE - Savannah River Site. {53}

- Periodically review the staffing levels in the EOF to ensure adequate resources are in place to deal with response/recovery, and direct the EOF Services Manager to coordinate with the appropriate department, agency, or companies. {25}

- **IF** events affect more than one nuclear site, refer to the multi-site event staffing chart in the Oconee Emergency Plan, Figure B-11.

NOTE: The job aid, "Questions Corporate Communications may ask (based on initiating event)," is available in the EOF Director's notebook for guidance.

- Provide information to Corporate Communications for news releases.

- **IF** EOF needs to be evacuated, refer to EOF Evacuation Checklist in Enclosure 6.23. {54}

_____ Verify EOF Emergency Planner completes "EOF 24-Hour Staffing Log" in Enclosure 6.17.

_____ **IF** needed, conduct turnover for on-coming shift.

_____ Assist TSC Emergency Coordinator or Assistant TSC Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG). (Catawba and McGuire) {11}

_____ Refer to Enclosure 6.5 (Emergency Classification Downgrade/Termination Criteria) for guidance to downgrade or terminate an emergency event.

NOTE: The offsite Recovery Organization will stay at the EOF and work with the counties and states if radiological conditions exist beyond the site boundary. The On-Site Recovery Organization will be established by the Emergency Coordinator.

_____ **IF** needed, establish Recovery Organization:

- ☐ Catawba RP/0/A/5000/025
- ☐ McGuire RP/0/A/5700/024
- ☐ Oconee RP/0/B/1000/027 and guidance in Enclosure 6.21.

Terminate the emergency event in accordance with applicable procedure:

_____ Notification of Unusual Event
Catawba - RP/0/A/5000/002
McGuire - RP/0/A/5700/001

_____ Alert
Catawba - RP/0/A/5000/003
McGuire - RP/0/A/5700/002

_____ Site Area Emergency
Catawba - RP/0/A/5000/004
McGuire - RP/0/A/5700/003

_____ General Emergency
Catawba - RP/0/A/5000/005
McGuire - RP/0/A/5700/004.

NOTE:	During declared emergencies, Duke Energy does not need to meet Fatigue Rule Work Hour Controls. Once the declared emergency or the unannounced drill has been terminated, **ALL HOURS worked during the declared emergency will be included in future work hour calculations, including the determination of minimum breaks between shifts.** {69}

_____ Announce the following:

"Covered Workers need to ensure that all hours worked during an augmentation drill or a declared emergency are entered into EMPCenter prior to leaving the site. Supervisors should consider the need for to initiate a waiver in EmpCenter per NSD-200 Section 200.8." {69}

_____ Conduct a critique following termination of drill or actual event.

_____ Provide all completed paperwork to Emergency Preparedness following termination of a drill or actual event.

Close out an Oconee emergency event as listed below:

_____ **IF** an event meets termination criteria for General Emergency in Enclosure 6.5, Emergency Classification Downgrade/Termination, inform NRC Site Team Director (STD) and SDEM that termination criteria have been met.

- Secure agreement from the two directors to terminate the event.
- Document names and time decision made below.

	Name	Telephone Number	Time
SDEM	_____	9-1-803-737-8500	_____
NRCSTD	_____	(In person in EOF)	_____

- Request lead Offsite Agency Communicator to complete Termination Message and transmit it in accordance with SR/0/A/2000/004 (Notification to State and Counties from the Emergency Operations Facility) and terminate the emergency.

_____ **IF** terminating from an Unusual Event, Alert, or Site Area Emergency,

- Request lead Offsite Agency Communicator to complete Termination Message and transmit it in accordance with SR/0/A/2000/004 (Notification to State and Counties from the Emergency Operations Facility) and terminate the emergency.
- Notify the following agencies:

	Name	Telephone Number
SDEM	_____	9-1-803-737-8500

OR, **IF** the SEOC has not been activated, the County Emergency Management Directors (CEMD)

	Name	Telephone Number
Oconee CDEM	_____	9-1-864-638-4200
Pickens CDEM	_____	9-1-864-898-5943

_____ **IF** terminating from an emergency involving dam failure (Keowee or Jocassee),

- Discuss termination with Hydro Central (Refer to Section 6 of the Oconee Emergency Telephone Directory, Keowee Hydro Project Dam/Dike Notification).

_____ Request Oconee Emergency Preparedness to provide a copy of the Licensee Event Report (LER) to state and county agencies at the time it is sent to the NRC.

( )CATAWBA ( )MCGUIRE ( )OCONEE

UNIT(S) AFFECTED: {8} ( ) Unit 1 ( ) Unit 2 ( ) Unit 3

GENERAL

	POWER LEVEL	REACTOR COOLANT TEMPERATURE	REACTOR COOLANT PRESSURE
DATE:_____ TIME:_____	U-1_____	_____	_____
	U-2_____	_____	_____
	U-3_____	_____	_____

EMERGENCY CLASSIFICATION

NOUE DECLARED AT: _____ TSC ACTIVATED AT:_____

ALERT DECLARED AT: _____ EOF ACTIVATED AT:_____

SAE DECLARED AT: _____

G.E. DECLARED AT: _____

REASON FOR EMER CLASS: _____

_____

SITE ASSEMBLY SITE EVACUATION

	YES	NO	TIME	LOCATION OR COMMENTS
SITE ASSEMBLY	_____	_____	_____	_____
SITE EVAC. (NON-ESSEN.)	_____	_____	_____	_____
SITE EVAC. (ESSENTIAL)	_____	_____	_____	_____
OTHER OFFSITE AGENCY INVOLVEMENT	_____	_____	_____	_____
MEDICAL	_____	_____	_____	_____
FIRE	_____	_____	_____	_____
POLICE/SHERIFF	_____	_____	_____	_____

RADIOLOGICAL

FIELD MON. TEAMS NUMBER ASSEM. _____ NUMBER DEPLOYED _____

	ZONES EVACUATED	ZONES SHELTERED	KI (General Public)
OFFSITE PARS	_____	_____	Yes ( ) No ( )

RELEASE IN PROGRESS YES ( ) NO ( )

RELEASE PATHWAY _____

CONTAINMENT PRESSURE _____ PSIG

WIND DIRECTION _____ WIND SPEED _____

OFFSITE COMMUNICATIONS

	NUMBER	TIME
LAST MESSAGE SENT:	_____	_____
NEXT MESSAGE DUE:	_____	_____

NOTE: EOF COMMUNICATION CHECKS SHOULD BE COMPLETED PRIOR TO ACTIVATING THE EOF.

OTHER NOTES RELATED TO THE ACCIDENT/EVENT/PLANT EQUIPMENT FAILED OR OUT OF SERVICE

_____

_____

_____

Job Aid {8}

	CATAWBA/McGUIRE	OCONEE	AVAILABLE	NOT AVAILABLE	COMMENTS
SG HEAT REMOVAL	AFW (CA) TRAIN A	EFDW TRAIN A			
	AFW (CA) TRAIN B	EFDW TRAIN B			
	TD AFW TRAIN	TDEFDW			
ECCS	NV TRAIN A	HPI TRAIN A			
	NV TRAIN B	HPI TRAIN B			
	NI TRAIN A				
	NI TRAIN B				
	ND TRAIN A	LPIP TRAIN A			
	ND TRAIN B	LPIP TRAIN B			
	STANDBY MU WATER PMP				
COOLING WATER	KC TRAIN A	UNIT 1 CC			
	KC TRAIN B	UNIT 2 CC			
		UNIT 3 CC			
	RN TRAIN A	UNIT 1 & 2 LPSW			
	RN TRAIN B	UNIT 3 LPSW			
POWER SYSTEMS	BUSLINE A	MAIN FEEDER BUS			
	BUSLINE B	STANDBY BUS			
	DG A	KEOWEE 1			
	DG B	KEOWEE 2			
	SATA	CT4			
	SATB	CT5			
	TRAIN A DC POWER	DC POWER			
	TRAIN B DC POWER				
	SSF DG	SSF DG			
CONTAINMENT	CONT. SPRAY TRAIN A	RBS TRAIN A			
	CONT. SPRAY TRAIN B	RBS TRAIN B			
	H^2 IGNITERS TRAIN A				
	H^2 IGNITERS TRAIN B				
	CONT. AIR RETURN FANS TRAIN A	A RBCU			
	CONT. AIR RETURN FANS TRAIN B	B RBCU			
		C RBCU			
	CONT. ISOL. TRAIN A	ES 1&2			
	CONT. ISOL. TRAIN B	ES 5&6			

Note: This form is not required for TSC/EOF Turnover. It is made available as a job aid only and can be used for other activities (e.g., Briefing the NRC).

{20}

NOTE: 1. Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002. {23}

PROTECTIVE ACTION GUIDES (PAGs)

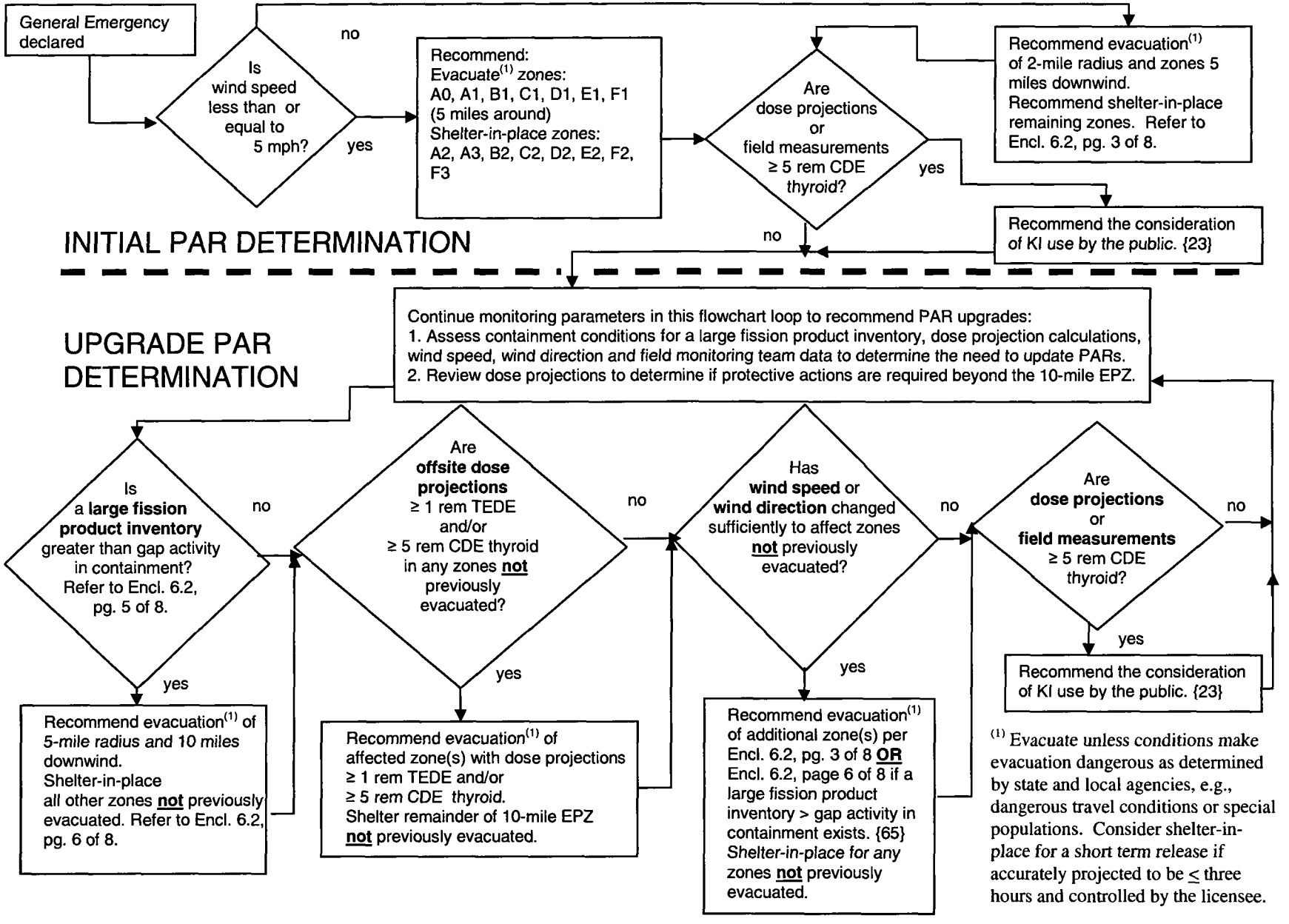
Projected Dose

Total Effective Dose Equivalent (TEDE)	Committed Dose Equivalent (CDE) Thyroid	Recommendation
< 1 rem	< 5 rem	No Protective Action is required based on projected dose.
≥ 1 rem	≥ 5 rem	Evacuate affected zones and shelter the remainder of the 10-mile EPZ not evacuated.
N/A	≥5 rem	Consider the use of KI (potassium iodide) in accordance with State Plans and Policy.

2. **IF** desired, you may refer to the flow chart on page 2 of this enclosure. {43}

INITIALS _____ PRINTED NAME _____

Catawba Offsite Protective Actions Flowchart



(1) Evacuate unless conditions make evacuation dangerous as determined by state and local agencies, e.g., dangerous travel conditions or special populations. Consider shelter-in-place for a short term release if accurately projected to be ≤ three hours and controlled by the licensee.

INITIAL

CAUTION: A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}

NOTE:{5} 1. If necessary, obtain needed data from one of the following sources in order of sequence:
   A. Catawba SDS (Group Display "ERORD5")
   B. Duke Energy Meteorologist (2-0139, 3-7896, **OR** 2-4316)
   C. National Weather Service in Greer, S.C. (9-1-864-879-1085, 9-1-800-268-7785 **OR** Decision Line 15) {55}
2. OAC/SDS wind direction can be displayed as greater than 360 degrees. To arrive at wind direction for table below, subtract 360 from wind direction indications greater than 360 degrees.

—— **IF AT ANY TIME** a General Emergency is declared, make immediate PROTECTIVE ACTION RECOMMENDATIONS (PARs) within 15 minutes to be entered on Line 5 of the Emergency Notification Form (ENF). Determine the PARs based on the 15-minute average lower wind speed (OAC point C1P0253) and the 15-**minute** average upper wind direction (OAC point C1P0250) as below:

WIND SPEED LESS THAN OR EQUAL TO 5 MPH

Evacuate zones: A0, A1, B1, C1, D1, E1, F1 (5-Mile Radius)

AND

Shelter-in-place zones: A2, A3, B2, C2, D2, E2, F2, F3

OR

WIND SPEED GREATER THAN 5 MPH

Wind Direction (Degrees from North)	Evacuate* 2-Mile Radius and 5 Miles Downwind	Shelter Remaining Sectors
348.75 - 11.25	A0, B1, C1, D1	A1, A2, A3, B2, C2, D2, E1, E2, F1, F2, F3
11.26 - 33.75	A0, C1, D1	A1, A2, A3, B1, B2, C2, D2, E1, E2, F1, F2, F3
33.76 - 56.25	A0, C1, D1, E1	A1, A2, A3, B1, B2, C2, D2, E2, F1, F2, F3
56.26 - 78.75	A0, C1, D1, E1, F1	A1, A2, A3, B1, B2, C2, D2, E2, F2, F3
78.76 - 101.25	A0, C1, D1, E1, F1	A1, A2, A3, B1, B2, C2, D2, E2, F2, F3
101.26 - 123.75	A0, D1, E1, F1	A1, A2, A3, B1, B2, C1, C2, D2, E2, F2, F3
123.76 - 146.25	A0, E1, F1	A1, A2, A3, B1, B2, C1, C2, D1, D2, E2, F2, F3
146.26 - 168.75	A0, A1, E1, F1	A2, A3, B1, B2, C1, C2, D1, D2, E2, F2, F3
168.76 - 191.25	A0, A1, E1, F1	A2, A3, B1, B2, C1, C2, D1, D2, E2, F2, F3
191.26 - 213.75	A0, A1, B1, E1, F1	A2, A3, B2, C1, C2, D1, D2, E2, F2, F3
213.76 - 236.25	A0, A1, B1, F1	A2, A3, B2, C1, C2, D1, D2, E1, E2, F2, F3
236.26 - 258.75	A0, A1, B1, F1	A2, A3, B2, C1, C2, D1, D2, E1, E2, F2, F3
258.76 - 281.25	A0, A1, B1, C1	A2, A3, B2, C2, D1, D2, E1, E2, F1, F2, F3
281.26 - 303.75	A0, A1, B1, C1	A2, A3, B2, C2, D1, D2, E1, E2, F1, F2, F3
303.76 - 326.25	A0, B1, C1	A1, A2, A3, B2, C2, D1, D2, E1, E2, F1, F2, F3
326.26 - 348.74	A0, B1, C1, D1	A1, A2, A3, B2, C2, D2, E1, E2, F1, F2, F3

* See Caution above.

_____ **IF** dose projections indicate that CDE Thyroid dose will be ≥ 5 Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}

NOTE: 1. **IF** changes to the initial Protective Action Recommendations are recommended, these changes must be transmitted to the offsite agencies within 15 minutes.

2. **IF** the containment radiation level exceeds the levels in the EMF Containment Monitor Reading Table below, fission product inventory inside containment is greater than gap activity.

CAUTION: **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

_____ Check for large fission product inventory in Containment:

EMF Containment Monitor Reading Table

Time After Shutdown (Hours)	EMF Containment Monitor Reading (R/HR) EMF53A and/or 53B (100% gap activity release)
>0-2	864
>2-4	624
>4-8	450
>8	265

☐ **IF** SDS is available, enter Group Display "ERORD5" to determine EMF53A and/or 53B readings.

☐ **IF** SDS is unavailable, request EOF Data Coordinator to call up computer points.

Unit 1 OAC	Unit 2 OAC
C1A1308 -------- 1EMF53A	C2A1308 -------- 2EMF53A
C1A1314 -------- 1EMF53B	C2A1314 -------- 2EMF53B

☐ **IF** SDS and OAC are unavailable, obtain EMF containment monitor readings from control room.

CAUTION: 1. A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}

2. **IF** a zone has been accurately selected for evacuation, it should remain selected. {27}, {30}

____ **IF** containment radiation levels exceed levels in EMF Containment Monitor Reading Table, make Protective Action Recommendations to be entered on Line 5 of the Emergency Notification Form.

Evacuate the 5-mile radius **AND** 10 miles downwind as shown in the Protective Action Zones Determination Table below, using wind direction.

AND

Shelter remaining zones as shown in the Protective Action Zones Determination Table, using wind direction.

Protective Action Zones Determination Table

For Containment Radiation Levels Exceeding GAP Activity
(For Any Wind Speed)

Wind Direction (Degrees from North)	**Evacuate*** 5-Mile Radius and 10 Miles Downwind	**Shelter** Remaining Sectors
348.75 - 11.25	A0, A1, B1, B2, C1, C2, D1, D2, E1, F1	A2, A3, E2, F2, F3
11.26 - 33.75	A0, A1, B1, C1, C2, D1, D2, E1, F1	A2, A3, B2, E2, F2, F3
33.76 - 56.25	A0, A1, B1, C1, C2, D1, D2, E1, E2, F1	A2, A3, B2, F2, F3
56.26 - 78.75	A0, A1, B1, C1, C2, D1, D2, E1, E2, F1, F2	A2, A3, B2, F3
78.76 - 101.25	A0, A1, B1, C1, D1, D2, E1, E2, F1, F2	A2, A3, B2, C2, F3
101.26 - 123.75	A0, A1, B1, C1, D1, D2, E1, E2, F1, F2, F3	A2, A3, B2, C2
123.76 - 146.25	A0, A1, B1, C1, D1, E1, E2, F1, F2, F3	A2, A3, B2, C2, D2
146.26 - 168.75	A0, A1, A2, B1, C1, D1, E1, E2, F1, F2, F3	A3, B2, C2, D2
168.76 - 191.25	A0, A1, A2, B1, C1, D1, E1, F1, F2, F3	A3, B2, C2, D2, E2
191.26 - 213.75	A0, A1, A2, A3, B1, B2, C1, D1, E1, F1, F2, F3	C2, D2, E2
213.76 - 236.25	A0, A1, A2, A3, B1, B2, C1, D1, E1, F1, F2, F3	C2, D2, E2
236.26 - 258.75	A0, A1, A2, A3, B1, B2, C1, D1, E1, F1, F3	C2, D2, E2, F2
258.76 - 281.25	A0, A1, A2, A3, B1, B2, C1, C2, D1, E1, F1	D2, E2, F2, F3
281.26 - 303.75	A0, A1, A2, A3, B1, B2, C1, C2, D1, E1, F1	D2, E2, F2, F3
303.76 - 326.25	A0, A1, A3, B1, B2, C1, C2, D1, E1, F1	A2, D3, E2, F2, F3
326.26 - 348.74	A0, A1, B1, B2, C1, C2, D1, D2, E1, F1	A2, A3, E2 , F2, F3

* See Cautions above.

Subsequent Protective Action Recommendations Steps

_____ **IF** dose projections indicate that CDE Thyroid dose will be ≥ 5 Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}

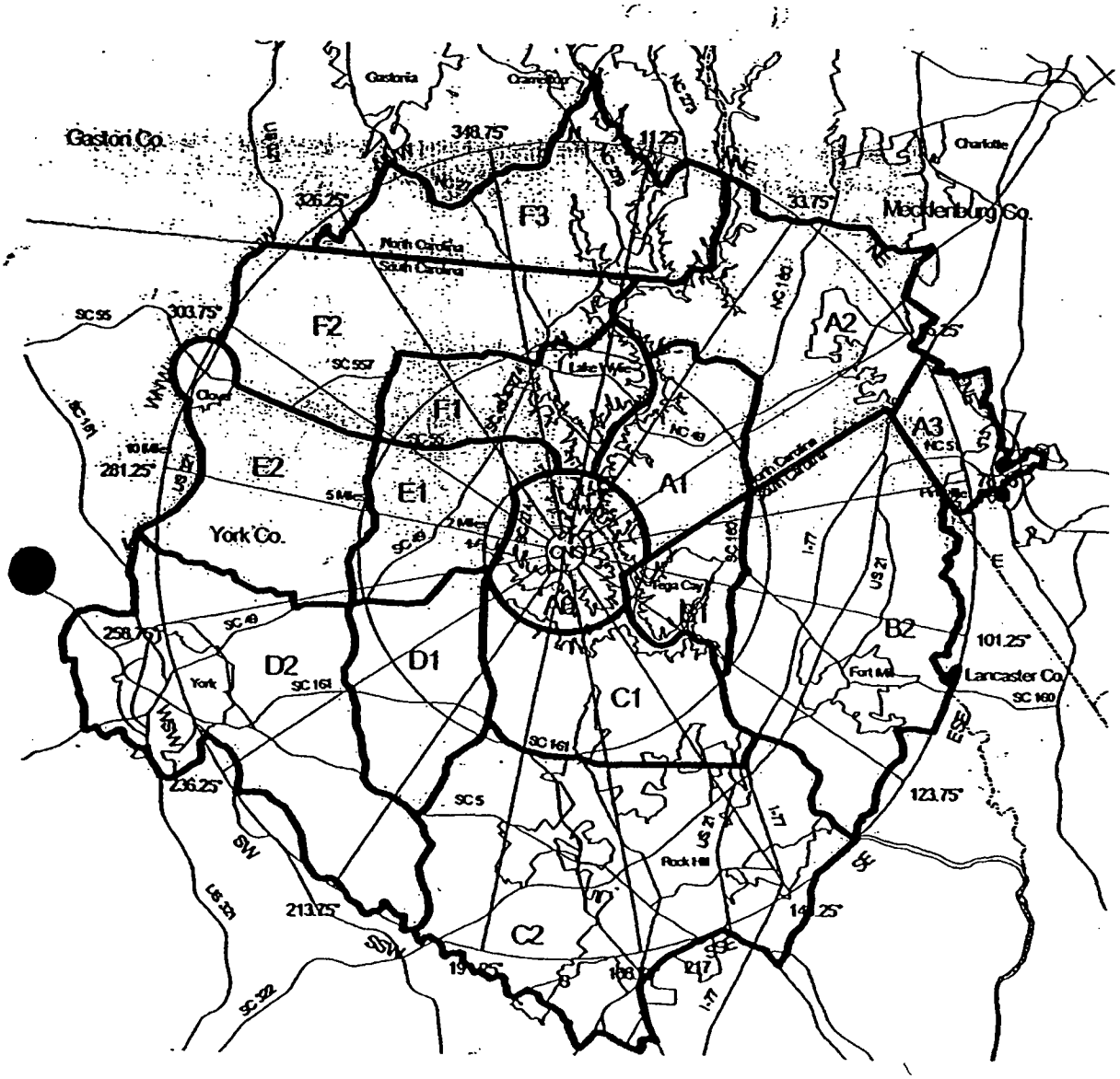
_____ Evaluate specific plant conditions (including large fission product inventory in containment), offsite dose projections, wind speed and wind direction, field monitoring team data, and assess the need to update Protective Action Recommendations made to the states and counties in the previous notification throughout the event.

_____ Review dose projections with the Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.

_____ **IF** Protective Action Recommendations are required beyond 10 miles, notify states and counties to consider sheltering/evacuating general population located beyond the affected 10-mile EPZ.

Catawba Protective Action Zones - 10-mile EPZ

(2 and 5-mile Radius, inner circles)



{20}

NOTE: 1. Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002. {23}

PROTECTIVE ACTION GUIDES (PAGs)

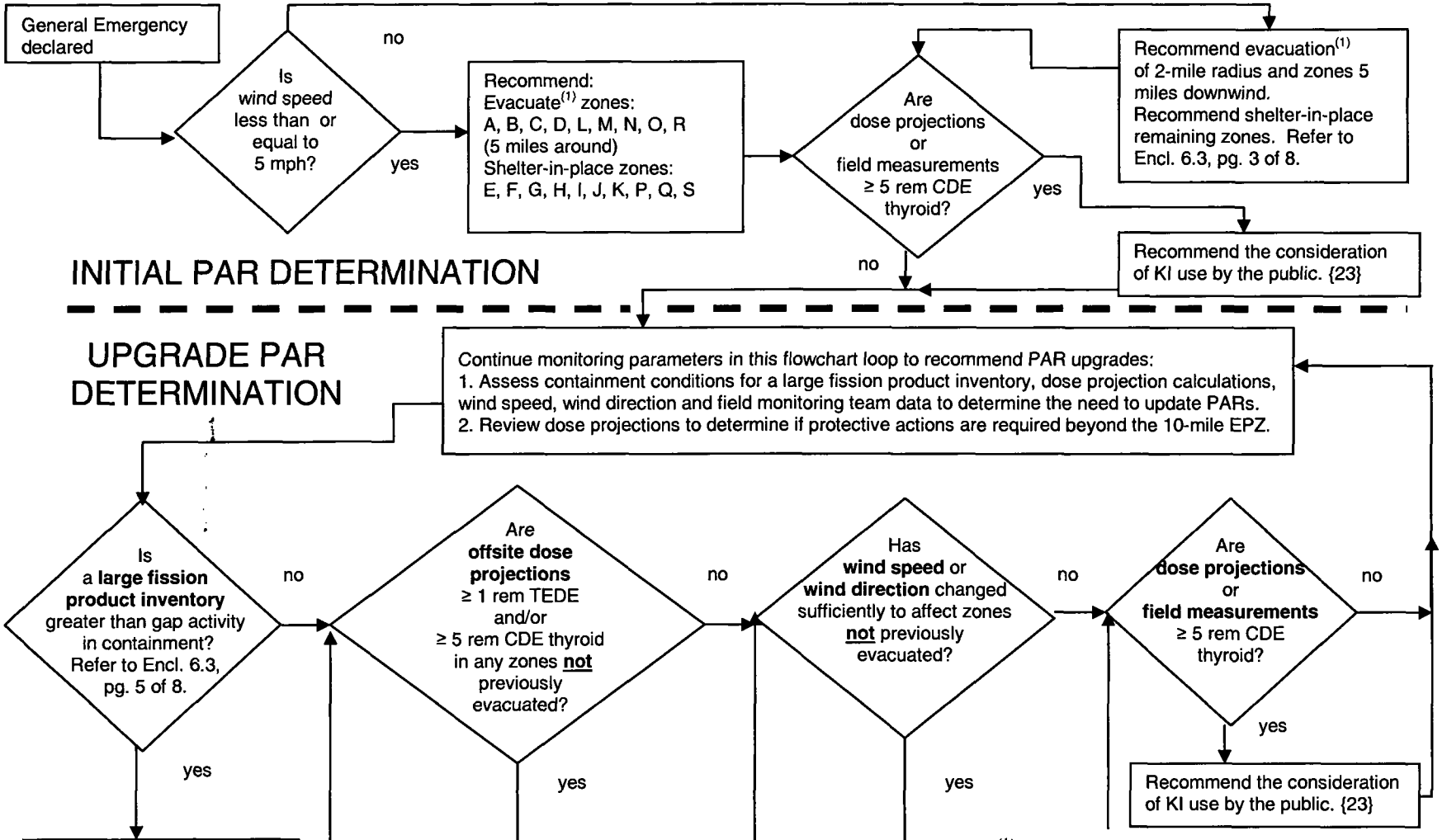
Projected Dose

Total Effective Dose Equivalent (TEDE)	Committed Dose Equivalent (CDE) Thyroid	Recommendation
< 1 rem	< 5 rem	No Protective Action is required based on projected dose.
≥ 1 rem	≥ 5 rem	Evacuate affected zones and shelter the remainder of the 10-mile EPZ not evacuated.
N/A	≥5 rem	Consider the use of KI (potassium iodide) in accordance with State Plans and Policy.

2. **IF** desired, you may refer to the flow chart on page 2 of this enclosure. {43}

INITIALS _____ PRINTED NAME _____

McGuire Offsite Protective Actions Flowchart



(1) Evacuate unless conditions make evacuation dangerous as determined by state and local agencies, e.g., dangerous travel conditions or special populations. Consider shelter-in-place for a short term release if accurately projected to be ≤ three hours and controlled by the licensee.

INITIAL

CAUTION: A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}

NOTE: {5} If necessary, obtain needed data from one of the following sources in order of sequence:

A. McGuire SDS (Group Display "ERORD5")
B. Duke Energy Meteorologist (2-0139, 3-7896, **OR** 2-4316)
C. National Weather Service in Greer, S.C. (9-1-864-879-1085, 9-1-800-268-7785 **OR** Decision Line 15) {55}

—— **IF AT ANY TIME** a General Emergency is declared, make immediate PROTECTIVE ACTION RECOMMENDATIONS (PARs) within 15 minutes to be entered on Line 5 of the Emergency Notification Form (ENF). Determine the PARs based on the 15-minute average lower wind speed (OAC point M1P0848) and the 15-minute average upper wind direction (OAC point M1P0847) as below:

WIND SPEED LESS THAN OR EQUAL TO 5 MPH

Evacuate zones: A, B, C, D, L, M, N, O, R (5-Mile Radius)

AND

Shelter-in-place zones: E, F, G, H, I, J, K, P, Q, S

OR

WIND SPEED GREATER THAN 5 MPH

Wind Direction (Degrees from North)	**Evacuate*** 2-Mile Radius and 5 Miles Downwind	**Shelter** Remaining Sectors
0.1 - 22.5	B,C,D,L,M,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
22.6 – 45.0	B,C,D,L,M,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
45.1 – 67.5	B,C,D,L,M,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
67.6 – 90.0	B,C,D,L,M,N,O,R	A,E,F,G,H,I,J,K,P,Q,S
90.1 – 112.5	B,C,L,M,N,O,R	A,D,E,F,G,H,I,J,K,P,Q,S
112.6 – 135.0	A,B,C,L,M,N,O,R	D,E,F,G,H,I,J,K,P,Q,S
135.1 – 157.5	A,B,C,L,M,N,O	D,E,F,G,H,I,J,K,P,Q,R,S
157.6 – 180.0	A,B,C,L,M,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
180.1 – 202.5	A,B,C,L,M,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
202.6 – 225.0	A,B,C,D,L,M,N	E,F,G,H,I,J,K,O,P,Q,R,S
225.1 – 247.5	A,B,C,D,L,M	E,F,G,H,I,J,K,N,O,P,Q,R,S
247.6 – 270.0	A,B,C,D,L,M	E,F,G,H,I,J,K,N,O,P,Q,R,S
270.1 – 292.5	A,B,C,D,L,M	E,F,G,H,I,J,K,N,O,P,Q,R,S
292.6 – 315.0	A,B,C,D,L,M	E,F,G,H,I,J,K,N,O,P,Q,R,S
315.1 – 337.5	B,C,D,L,M,R	A,E,F,G,H,I,J,K,N,O,P,Q,S
337.6 – 360.0	B,C,D,L,M,R	A,E,F,G,H,I,J,K,N,O,P,Q,S

* See Caution above.

_____ **IF** dose projections indicate that CDE Thyroid dose will be ≥ 5 Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}

NOTE: 1. **IF** changes to the initial Protective Action Recommendations are recommended, these changes must be transmitted to the offsite agencies within 15 minutes.

2. **IF** the containment radiation level exceeds the levels in the EMF Containment Monitor Reading Table below, fission product inventory inside containment is greater than gap activity.

CAUTION: **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

_____ Check for large fission product inventory in Containment.

EMF Containment Monitor Reading Table

Time After Shutdown (Hours)	EMF Containment Monitor Reading (R/HR) EMF51A and/or 51B (100% gap activity release)
>0-2	864
>2-4	624
>4-8	450
>8	265

☐ **IF** SDS is available, enter Group Display "ERORD5" to determine EMF51A and/or 51B readings.

☐ **IF** SDS is unavailable, request EOF Data Coordinator to call up computer points to determine containment radiation levels.

Unit 1 OAC	Unit 2 OAC
M1A0829 -------- 1EMF51A	M2A0829 -------- 2EMF51A
M1A0835 -------- 1EMF51B	M2A0835 -------- 2EMF51B

☐ **IF** SDS and OAC are unavailable, obtain EMF containment monitor readings from control room.

CAUTION:
1. A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}
2. **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

____ **IF** containment radiation levels exceed the levels in the EMF Containment Monitor Reading Table, make Protective Action Recommendations to be entered on Line 5 of the Emergency Notification Form.

Evacuate the 5-mile radius **AND** 10 miles downwind as shown in the Protective Action Zones Determination Table, using wind direction.

AND

Shelter remaining zones as shown in the Protective Action Zones Determination Table, using wind direction.

Protective Action Zones Determination Table

For Containment Radiation Levels Exceeding GAP Activity (For Any Wind Speed)

Wind Direction (Degrees from North)	**Evacuate*** 5-Mile Radius and 10 Miles Downwind	**Shelter** Remaining Sectors
0.1 - 22.5	A,B,C,D,E,F,L,M,N,O,R,S	G,H,I,J,K,P,Q
22.6 – 45.0	A,B,C,D,E,L,M,N,O,Q,R,S	F,G,H,I,J,K,P
45.1 – 67.5	A,B,C,D,E,L,M,N,O,Q,R,S	F,G,H,I,J,K,P
67.6 – 90.0	A,B,C,D,L,M,N,O,P,Q,R,S	E,F,G,H,I,J,K
90.1 – 112.5	A,B,C,D,K,L,M,N,O,P,Q,R,S	E,F,G,H,I,J
112.6 – 135.0	A,B,C,D,I,K,L,M,N,O,P,Q,R,S	E,F,G,H,J
135.1 – 157.5	A,B,C,D,I,K,L,M,N,O,P,Q,R	E,F,G,H,J,S
157.6 – 180.0	A,B,C,D,I,J,K,L,M,N,O,P,R	E,F,G,H,Q,S
180.1 – 202.5	A,B,C,D,G,H,I,J,K,L,M,N,O,P,R	E,F,Q,S
202.6 – 225.0	A,B,C,D,G,H,I,J,K,L,M,N,O,P,R	E,F,Q,S
225.1 – 247.5	A,B,C,D,F,G,H,I,J,L,M,N,O,R	E,K,P,Q,S
247.6 – 270.0	A,B,C,D,F,G,H,I,J,L,M,N,O,R	E,K,P,Q,S
270.1 – 292.5	A,B,C,D,E,F,G,H,J,L,M,N,O,R	I,K,P,Q,S
292.6 – 315.0	A,B,C,D,E,F,G,L,M,N,O,R	H,I,J,K,P,Q,S
315.1 – 337.5	A,B,C,D,E,F,G,L,M,N,O,R	H,I,J,K,P,Q,S
337.6 – 360.0	A,B,C,D,E,F,L,M,N,O,R,S	G,H,I,J,K,P,Q

* See Cautions above.

_____ **IF** dose projections indicate that CDE Thyroid dose will be ≥ 5 Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}

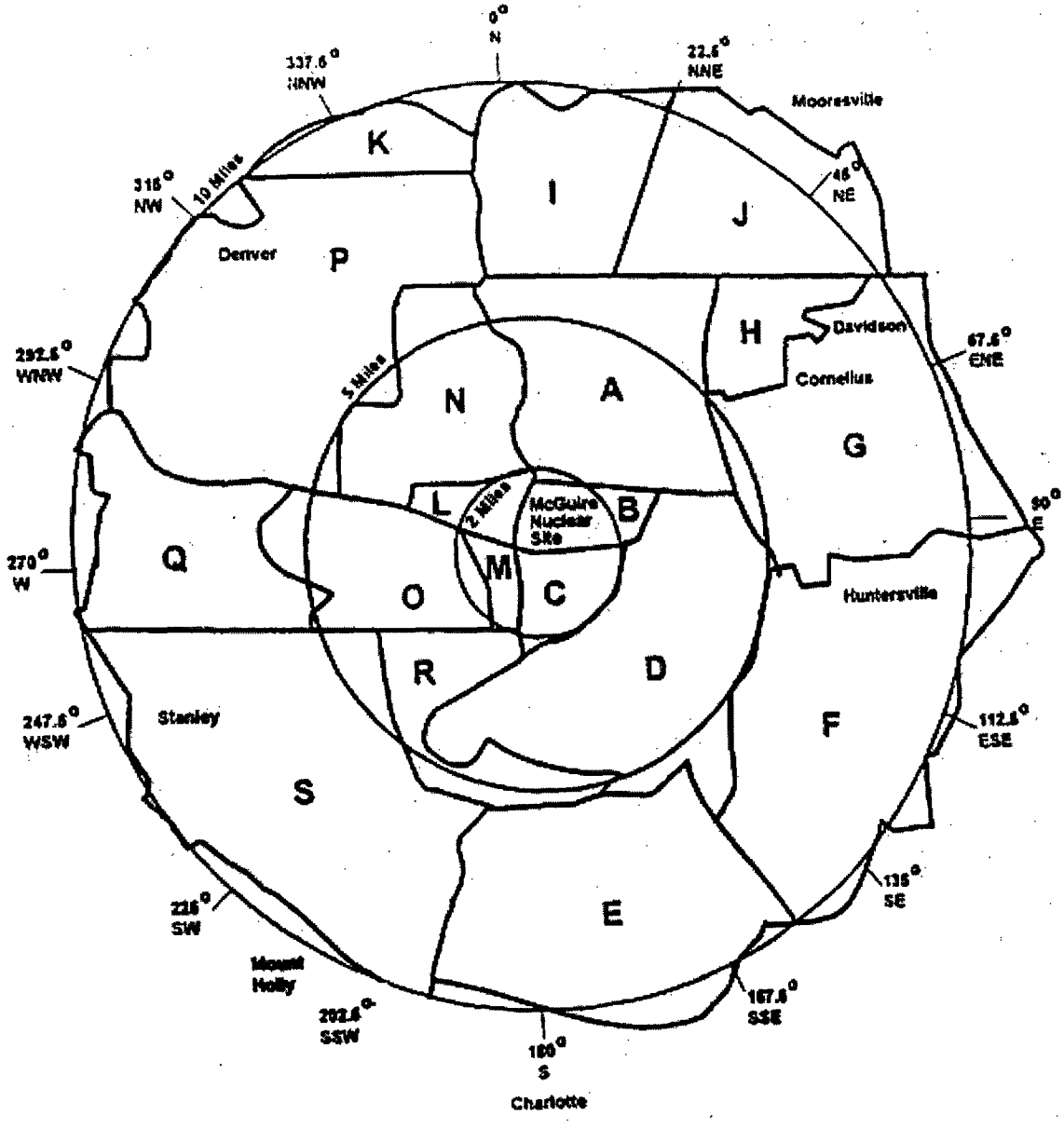
_____ Evaluate specific plant conditions (including large fission product inventory in containment), offsite dose projections, wind speed and wind direction, field monitoring team data, and assess the need to update Protective Action Recommendations made to the states and counties in the previous notification throughout the event.

_____ Review dose projections with the Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.

_____ **IF** Protective Action Recommendations are required beyond 10 miles, notify states and counties to consider sheltering/evacuating the general population located beyond affected 10-mile EPZ.

McGuire Protective Action Zones - 10-mile EPZ

(2 and 5-mile radius, inner circles)



{20}

NOTE: 1. Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002. {23}

PROTECTIVE ACTION GUIDES (PAGs)

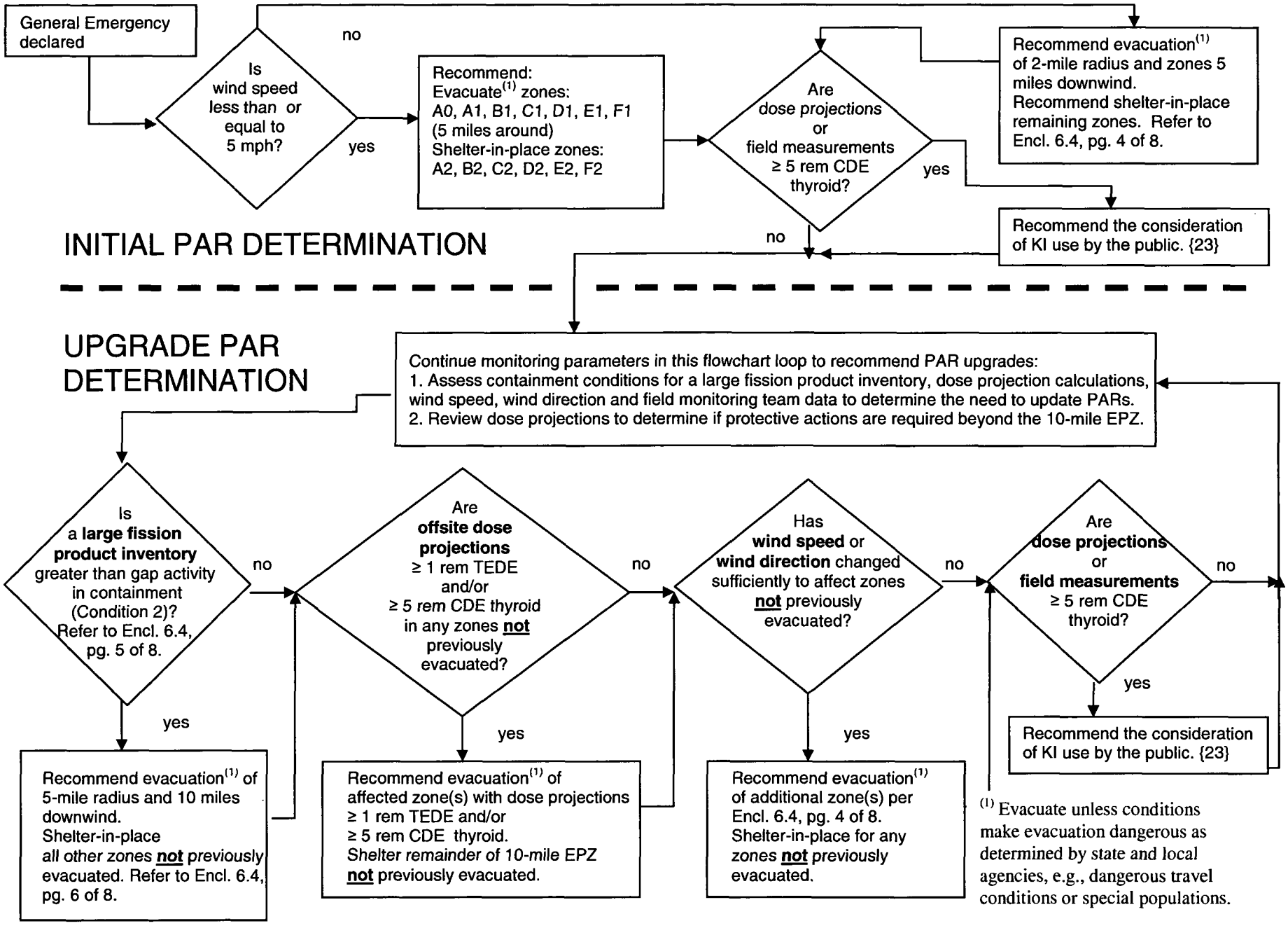
Projected Dose

Total Effective Dose Equivalent (TEDE)	Committed Dose Equivalent (CDE) Thyroid	Recommendation
< 1 rem	< 5 rem	No Protective Action is required based on projected dose.
≥ 1 rem	≥ 5 rem	Evacuate affected zones and shelter the remainder of the 10-mile EPZ not evacuated.
N/A	≥5 rem	Consider the use of KI (potassium iodide) in accordance with State Plans and Policy.

2. **IF** desired, you may refer to the flow chart on page 2 of this enclosure. {43}

INITIALS _____ PRINTED NAME _____

Oconee Offsite Protective Actions Flowchart



(1) Evacuate unless conditions make evacuation dangerous as determined by state and local agencies, e.g., dangerous travel conditions or special populations.

Oconee Offsite Protective Actions
Immediate Protective Action Recommendations Steps

INITIAL

NOTE:{5}If necessary, obtain needed data from one of the following sources in order of sequence:
A. Oconee SDS (Turn On Code "EROENV")
B. Duke Energy Meteorologist (2-0139, 3-7896, **OR** 2-4316)
C. National Weather Service in Greer, S.C. (9-1-864-879-1085 **OR** 9-1-800-268-7785)

___ **IF AT ANY TIME** a General Emergency is declared, make immediate PROTECTIVE ACTION RECOMMENDATIONS (PARs) within 15 minutes to be entered on Line 5 of the Emergency Notification Form (ENF). Determine the meteorological parameters to use based on the 15-minute average wind speed (SDS "EROENV" screen) and the 15-minute average wind direction (SDS "EROENV" screen) as determined from the following chart below:

Time of Day Conditions	Met Parameter	First Priority	Second Priority	Third Priority	Fourth Priority
1000 - 1600	Wind Speed	10M reading	River Tower	60M reading times 0.5	NWS* times 0.5
	Wind Direction	60M reading	10M reading	River Tower	NWS
1600 – 1000 and River Wind between 210° and 360° or 0° and 70°	Wind Speed	10M reading	60M reading times 0.5	River Tower	NWS* times 0.5
	Wind Direction	60M reading	10M reading	River Tower	NWS
1600 – 1000 and River Wind between 70° and 210°	Wind Speed	River Tower	10M reading times 0.5	NWS* times 0.5	
	Wind Direction	River Tower	60M reading	NWS	

* Conversion factors for NWS data:
Mph= 1.15 knots
°C = .555(°F – 32)

_____ Record Meteorological Parameters to be used to determine PARs:

Wind Speed _____

Wind Direction _____

_____ Determine PARs based on the 15-minute average wind speed and 15-minute average wind direction as determined from the previous chart:

WIND SPEED LESS THAN OR EQUAL TO 5 MPH

Evacuate zones: A0, A1, B1, C1, D1, E1, F1 (5-Mile Radius)

AND

Shelter-in-place zones: A2, B2, C2, D2, E2, F2

OR

WIND SPEED GREATER THAN 5 MPH

Wind Direction (Degrees from North)	**Evacuate** 2-Mile Radius and 5 Miles Downwind	**Shelter** Remaining Sectors
14.1° - 27°	A0, C1,D1,E1	A1, A2, B1,B2, C2, D2, E2, F1,F2
27.1° - 42°	A0, C1,D1,E1	A1, A2, B1,B2, C2, D2, E2, F1,F2
42.1° - 66°	A0, D1, E1	A1, A2, B1 B2, C1, C2, D2, E2, F1, F2
66.1° - 85°	A0, D1, E1	A1, A2, B1 B2, C1, C2, D2, E2, F1, F2
85.1° - 104°	A0, D1, E1, F1	A1, A2, B1, B2, C1, C2, D2, E2, F2
104.1° - 129°	A0, E1, F1	A1, A2, B1, B2, C1, C2, D1, D2, E2, F2
129.1° - 156°	A0, A1, E1, F1	A2, B1, B2, C1, C2. D1, D2, E2, F2
156.1° - 175°	A0, A1, E1, F1	A2, B1, B2, C1, C2. D1, D2, E2, F2
175.1° - 181°	A0, A1, F1	A2, B1, B2, C1, C2, D1, D2, E1, E2, F2
181.1° - 219°	A0, A1, B1, F1	A2, B2, C1, C2, D1, D2, E1, E2, F2
219.1° - 255°	A0, A1, B1	A2, B2, C1, C2, D1, D2. E1, E2, F1, F2
255.1° - 271°	A0, A1, B1, C1	A2, B2, C2, D1, D2, E1, E2, F1, F2
271.1° - 297°	A0, B1, C1	A1, A2, B2, C2, D1, D2. E1, E2, F1, F2
297.1° - 312°	A0, B1, C1	A1, A2, B2, C2, D1, D2. E1, E2, F1, F2
312.1° - 345°	A0, B1, C1, D1	A1,A2, B2, C2, D2, E1, E2, F1, F2
345.1° - 14°	A0, C1, D1	A1, A2, B1, B2, C2, D2, E1, E2, F1, F2

_____ **IF** dose projections indicate that CDE Thyroid dose will be ≥ 5 Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}

NOTE: 1. **IF** changes to the initial Protective Action Recommendations are recommended, these changes must be transmitted to the offsite agencies within 15 minutes.

2. **IF** the containment radiation level exceeds the levels in the RIA Containment Monitor Reading Table below, fission product inventory inside containment is greater than gap activity.

CAUTION: **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

____ Check for large fission product inventory (Condition 2 Failed Fuel) in Containment.

RIA Containment Monitor Reading Table

Time After Shutdown (Hours)	RIA-57 Containment Monitor Reading (R/HR) (100% gap activity release)	RIA-58 Containment Monitor Reading (R/HR) (100% gap activity release)
>0-2	2000	969
>2-4	1500	650
>4-8	750	370
>8	275	125

☐ **IF** SDS is available, enter Turn On Code "EROCONT" or "EROAREA" to determine RIA-57 and/or RIA-58 readings.

☐ **IF** SDS is unavailable, request EOF Data Coordinator to call up computer points.

Unit 1 OAC	Unit 2 OAC	Unit 3 OAC
O1E3034 -------- 1RIA57	O2E3054 -------- 2RIA57	O3E3088 -------- 3RIA57
O1E3035 -------- 1RIA58	O2E3055 -------- 2RIA58	O3E3089 -------- 3RIA58

☐ **IF** SDS and OAC are unavailable, obtain RIA containment monitor readings from control room.

____ **IF** containment radiation levels exceed levels in RIA Containment Monitor Reading Table, make Protective Action Recommendations to be entered on Line 5 of the Emergency Notification Form.

Evacuate the 5-mile radius **AND** 10 miles downwind as shown in the Protective Action Zones Determination Table, using wind direction.

AND

Shelter remaining zones as shown in the Protective Action Zones Determination Table, using wind direction.

CAUTION: **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

Protective Action Zones Determination Table

For Containment Radiation Levels Exceeding GAP Activity (Condition 2 Failed Fuel) (For Any Wind Speed)

Wind Direction (Degrees from North)	**Evacuate*** 5-Mile Radius and 10 Miles Downwind	**Shelter** Remaining Sectors
14.1° - 27°	A0, A1, B1, C1, C2, D1, D2, E1, E2, F1	A2, B2, F2
27.1° - 42°	A0, A1, B1, C1, D1, D2, E1, E2, F1	A2, B2, C2, F2
42.1° - 66°	A0, A1, B1, C1, D1, D2, E1, E2, F1	A2, B2, C2, F2
66.1° - 85°	A0, A1, B1, C1, D1, D2, E1, E2, F1, F2	A2, B2, C2
85.1° - 104°	A0, A1, B1, C1, D1, D2, E1, E2, F1, F2	A2, B2, C2
104.1° - 129°	A0, A1, B1, C1, D1, E1, E2, F1, F2	A2, B2, C2, D2
129.1° - 156°	A0, A1, A2, B1, C1, D1, E1, E2, F1, F2	B2, C2, D2
156.1° - 175°	A0, A1, A2, B1, C1, D1, E1, F1, F2	B2, C2, D2, E2
175.1° - 181°	A0, A1, A2, B1, C1, D1, E1, F1, F2	B2, C2, D2, E2
181.1° - 219°	A0, A1, A2, B1, B2, C1, D1, E1, F1, F2	C2, D2, E2
219.1° - 255°	A0, A1, A2, B1, B2, C1, D1, E1, F1	C2, D2, E2, F2
255.1° - 271°	A0, A1, A2, B1, B2, C1, C2, D1, E1, F1	D2, E2, F2
271.1° - 297°	A0, A1, B1, B2, C1, C2, D1, E1, F1	A2, D2, E2, F2
297.1° - 312°	A0, A1, B1, B2, C1, C2, D1, D2, E1, F1	A2, E2, F2
312.1° - 345°	A0, A1, B1, B2, C1, C2, D1, D2, E1, F1	A2, E2, F2
345.1° - 14°	A0, A1, B1, C1, C2, D1, D2, E1, F1	A2, B2, E2, F2

* See Caution above.

____ **IF** dose projections indicate that CDE Thyroid dose will be ≥ 5 Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}

Oconee Offsite Protective Actions
Subsequent Protective Action Recommendation Steps

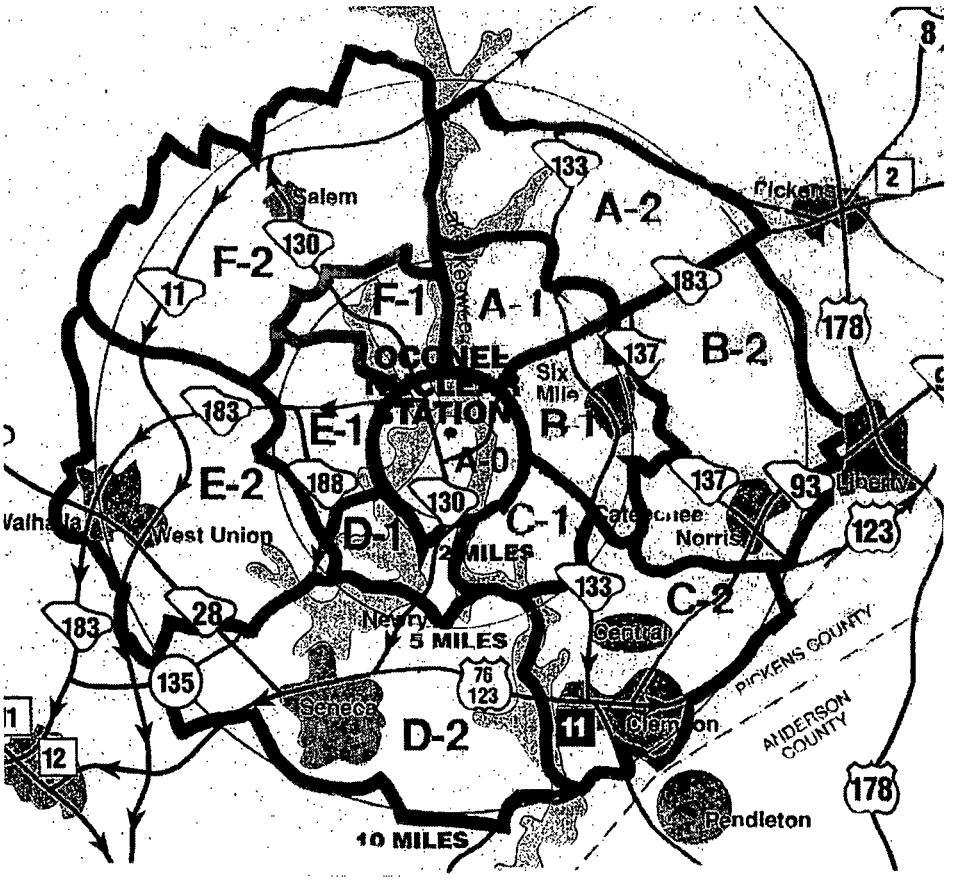
____ Evaluate specific plant conditions (including large fission product inventory in containment), offsite dose projections, wind speed and wind direction, field monitoring team data, and assess the need to update Protective Action Recommendations made to the states and counties in the previous notification throughout the event.

____ Review dose projections with the Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.

____ **IF** Protective Action Recommendations are required beyond 10 miles, notify states and counties to consider sheltering/evacuating general population located beyond the affected 10-mile EPZ.

Oconee Protective Action Zones - 10-Mile EPZ

(2 and 5-mile radius, inner circles)

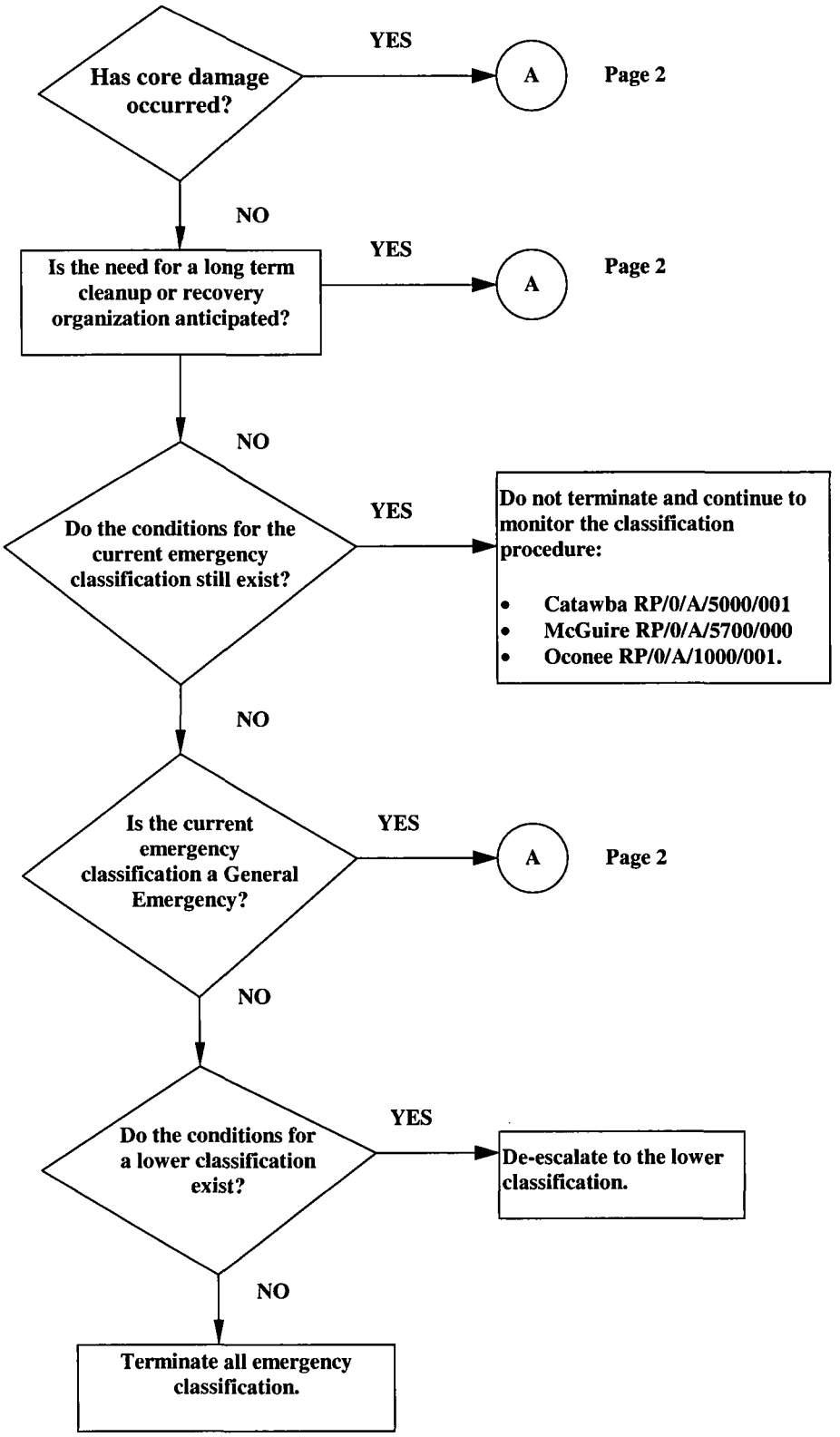


Radius From Site (miles)	Pickens County Sectors	Oconee County Sectors
0-2	A0	A0
2-5	A-1, B-1, C-1	D-1, E-1, F-1
5-10	A-2, B-2, C-2	D-2, E-2, F-2

Enclosure 6.5

Emergency Classification Downgrade/Termination Criteria

INITIAL



INITIALS _____ PRINTED NAME _____

Emergency Classification Downgrade/Termination Criteria

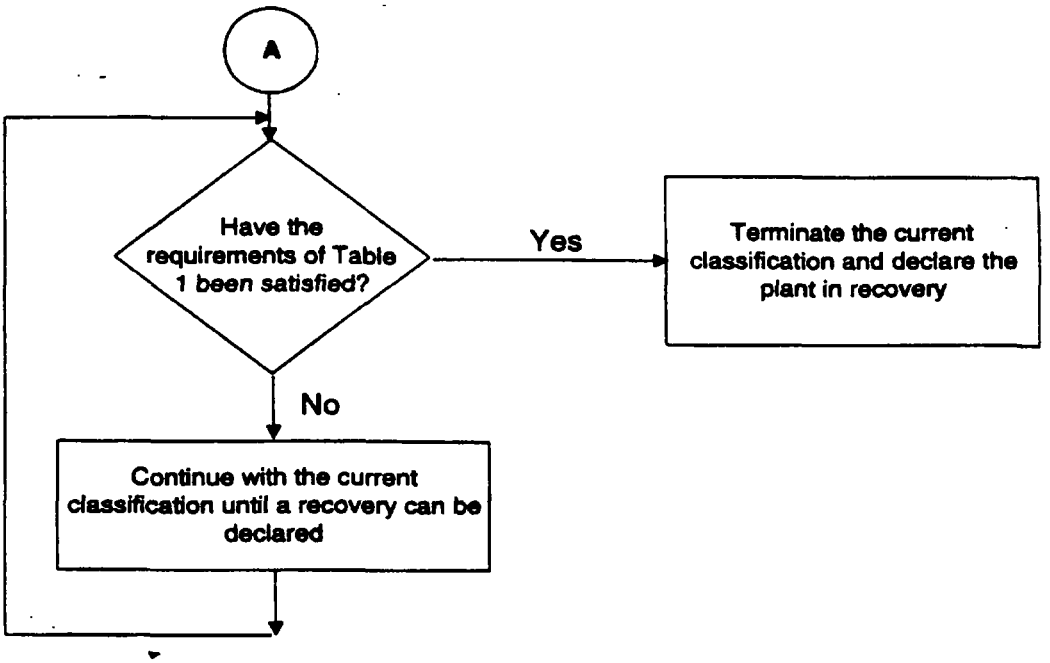


Table 1

_____Security threat has been contained.

_____No new evacuation or sheltering protective actions are anticipated.

_____Containment pressure is being maintained less than design pressure.

_____Containment hydrogen levels are less than 9% and stable or decreasing.

_____Decay heat rejection to the ultimate heat sink has been established and is stable. This is indicated by either of the following (circle one):

- Decay heat removal is considered stable if supported by redundancy or diversity

  - Examples of a satisfactory state include:

    - 2 trains of systems for sump recirculation.
    - 2 trains of Decay Heat Removal (DHR)
    - 1 train of DHR and the ability to cool with the steam generators.
    - steam generator cooling with 2 trains of feed capability.

OR

- Decay heat removal is considered stable if no additional fission product barrier challenges would be expected for at least 2 hours following interruption of core cooling.

(continued on next page)

_____The risks from recriticality are acceptably low.

_____Radiation Protection is monitoring access to radiologically hazardous areas.

_____Offsite conditions do not limit plant access.

_____The Public Information Coordinator, NRC officials, and State representatives have been consulted to determine the effects of termination on their activities.

_____The recovery organization is ready to assume control of recovery operations:

- Catawba - RP/0/B/5000/025
- McGuire - RP/0/A/5700/024
- Oconee - RP/0/B/1000/027

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on the EOF staffing board.

_____ Obtain copy of SH/0/B/2005/001, Emergency Response Offsite Dose Projections. {56}

_____ **IF** Field Monitoring teams have been dispatched, ensure FMC has established communication with Field Monitoring teams. {18}

_____ Notify EOF Director that Radiological Assessment Manager (RAM) position is operational.

_____ Ensure all Radiation Protection personnel reporting to the EOF sign in on staffing board.

_____ Ensure that EOF Dose Assessors are kept informed of pertinent plant information including, but not limited to:

1) Time of TSC activation
2) Time of EOF activation
3) Time of reactor trip
4) Status of safety injection
5) Status of onsite radiological conditions
6) Time next emergency notification message is due. {15}

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Communicate to EOF Director:

1) Any release in progress, including dose rates (especially at the site boundary)
2) Field Team status/data
3) On-site radiological concerns
4) Specific time that periodic dose assessment runs are expected to be available for emergency notification forms. {31}
5) Need to request the site pull a reactor coolant sample for Dose Equivalent Iodine to support emergency classification

INITIALS _____ PRINTED NAME _____

_____ Review Criteria in "Classification of Emergency" procedure for emergency classification changes and discuss with Accident Assessment personnel plant conditions including power failures, valve closures, etc.

Catawba RP/0/A/5000/001
OR
McGuire RP/0/A/5700/000
OR
Oconee RP/0/A/1000/001.

NOTE:

- Microsoft Office Communicator is an acceptable communications method.
- Oconee TSC Dose Assessment Liaison, 9-1-864-873-4902.
- Catawba/McGuire, Dose Assessment Bridge, 9-980-875-4980.

_____ Establish communications with dose assessment personnel at TSC. Compare information, projections and strategies with TSC. {4, 60}

NOTE: Descriptions of Keowee Hydro Dam/Dike Condition A and B are provided in Enclosure 6.22. {58}

_____ **IF** Condition A, Dam Failure (Keowee or Jocassee) exists, make the following Protective Action Recommendations to Oconee County and Pickens County for imminent/actual dam failure and include on the Emergency Notification Form on Line 5B (Evacuate) and Line 5E (Other):

Line 5B *Move residents living downstream of the Keowee Hydro Project dams to higher ground.*

Line 5E *Prohibit traffic flow across bridges identified on your inundation maps until the danger has passed.*

NOTE: Enclosure 6.2 (for CNS), Enclosure 6.3 (for MNS), and Enclosure 6.4 (for ONS) provide guidance for PARs and KI protective action recommendations.

_____ **IF** General Emergency is declared, provide PAR information on Line 5 of the Emergency Notification Form:

CAUTION: **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

- Zones for Evacuation
- Zones for Sheltering
- Use of KI for General Public. {23}
- Other PARs.

_____ Determine, with input from the Accident Assessment Manager (AAM), Protective Actions using

☐ Enclosure 6.2, Catawba Offsite Protective Actions
☐ Enclosure 6.3, McGuire Offsite Protective Actions
☐ Enclosure 6.4, Oconee Offsite Protective Actions

_____ Review dose projections and determine if Protective Action Recommendations are required beyond 10-mile EPZ.

NOTE: **IF** changes to the initial Protective Action Recommendations, including KI, are recommended to and approved by the EOF Director, these changes shall be transmitted to the offsite agencies within 15 minutes and the reason for the Protective Action Recommendation change be reported on Line 13 of the ENF {46}.

_____ Provide EOF Director Protective Action Recommendations.

NOTE: An Emergency Release is an unplanned, quantifiable radiological release to the environment during an emergency event. The release does not have to be related to the declared emergency. {34}

_____ Evaluate Emergency Release Status per SH/0/B/2005/001 **AND** provide input for Line 6 of ENF. {49}

_____ Evaluate **AND** provide Emergency Release Significance for ENF Line 7:

- **IF** no release in progress, Not Applicable.

- **IF** release significance is known, Within Normal Operating Limits **OR** Above Normal Operating Limits.

- **IF** release significance is unknown, Under Evaluation.

_____ Provide on ENF Line 9:

- Wind Direction
- Wind Speed
- Precipitation Type
- Stability Class.

NOTE: Emergency Release data are not required for initial Emergency Notification Forms **OR** follow up notifications of changes in Protective Action Recommendations.

_____ Provide on ENF Line 14:

- Release Characterization (Type, C (Ground) and Units, B (Ci/sec))
- Magnitude (Ci/Sec Release rates from RADDOSE Report)
- Form **AND** start and/or stop time, as appropriate.

_____ Provide Projection Parameters on ENF Line 15:

- Projection period (forecast period in hours) from Raddose Report.
- Estimated Release Duration by adding forecast period and time elapsed since release began.
- Date and time projection was performed.

_____ Provide Projected Dose information on ENF Line 16, by entering "Forecast Data" from RADDOSE Report.

_____ Assist Public Affairs and/or Public Spokesperson with dose comparisons based on computer model or field data.

NOTE: **IF** necessary to relieve Duke Energy personnel, environmental surveillance support personnel from the DOE Radiological Assistance Plan may be requested by the Radiological Assessment Manager through the EOF Director. {53}

_____ **IF** needed, conduct turnover for on-coming shift.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

EOF Dose Assessor Checklist

Initial EOF Activation Checklist

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

NOTE:	RADDOSE V information must be saved to the "ini" file.

_____ Obtain copy of SH/0/B/2005/001, Emergency Response Offsite Dose Projections.

_____ Initiate log of activities sufficient to conduct a turnover for on-coming shift.

_____ Acquire necessary dose assessment and plant status information.

_____ **IF** data acquisition programs are unavailable, request SDS data from TSC or instrument readings from Control Room (EMF and Met data).

NOTE:	Be aware of the effects of loss of power on critical EMFs (Catawba and McGuire) or RIAs (Oconee).

_____ Verify operability and validity of EMFs (Catawba and McGuire) or RIAs (Oconee) through the TSC.

_____ **IF** Catawba or McGuire event is in progress, verify effluent discharge alignment with Shift Lab, Radiation Protection Manager (TSC), or Dose Assessors (TSC) as necessary.

_____ **IF** Oconee event is in progress, verify effluent discharge alignment with TSC Dose Assessment Liaison (gas tank), RP Manager (gas tank or liquid releases), or Chemistry Manager in the OSC (liquid releases).

INITIALS _____ PRINTED NAME _____

NOTE:

- Microsoft Office Communicator is an acceptable communications method.
- Oconee, TSC Dose Assessment Liaison, 9-1-864-873-3705.
- Catawba/McGuire, Dose Assessment Bridge, 9-980-875-4980.

_____ Establish communications with dose assessment personnel at TSC. Compare information, projections and strategies with TSC.

_____ Obtain Dose Assessor turnover from TSC:

1. Release in progress: No:_____ Yes:_____

   Is occurring____ Has occurred____ Time____

   Normal Operating Limits: Below_____Above_____

2. Recommended Protective Actions:

   [A] No Recommended Protective Actions

   [B] Evacuate_____

   [C] Shelter-In-Place_____

   [D] Other_____

3. Additional pertinent information necessary to continue monitoring of release and dose assessment calculations.

Turnover complete date/time:_____

_____ Verify operability of Health Physics Network (HPN) phone by placing a call to the NRC using the number listed on HPN phone.

NOTE: 1. The NRC Regional Office will request activation of the HPN phone through Emergency Notification System (ENS) telephone if desired.

2. Information that may be requested over the HPN line could include, but is not limited to the following:

- Is there any change to the classification of the event? If so, what is the reason?
- Have toxic or radiological releases occurred or been projected (including changes in the release rate)?
- If so, what are the actual or currently projected onsite and offsite releases, and what is the basis for this assessment?
- What are the health effects or consequences to onsite and offsite people?
- How many onsite or offsite people are being or will be affected and to what extent?
- Is the event under control? When was control established, or what is the planned action to bring the event under control?
- What mitigative actions are currently underway or planned?
- What onsite protective measures have been taken or are planned?
- What offsite protective actions are being considered or have been recommended to state and local officials?
- What are the current meteorological conditions?
- What are the dose and dose rate readings onsite and offsite? {16}

_____ **IF** requested during a drill or actual event, activate HPN phone by calling NRC using number listed on HPN phone.

_____ Analyze source-term data, formulate source-term mitigation strategies, and provide information to Radiological Assessment Manager, EOF Staff, and TSC Dose Assessors as required.

NOTE: Dose projections are required at least every 15 minutes **OR** as directed by RAM.

_____ Perform dose projections as appropriate to plant conditions.

_____ Interact with Field Monitoring Coordinator to compare off-site dose projections to actual field readings.

_____ Inform RAM of the specific timing and frequency of planned dose assessment runs. {31}

NOTE: Emergency Release data are not required for initial Emergency Notification Forms **OR** follow up notifications of changes in Protective Action Recommendations.

_____ Evaluate dose projections and provide protective action recommendations to Radiological Assessment Manager and EOF Director.

_____ **IF** SAMGs are implemented **AND** offsite releases approach or exceed 100mRem TEDE or 500mRem Thyroid CDE, notify EOF SAMG Evaluator (in Accident Assessment Area). (Applicable to Catawba and McGuire). {22}

_____ **IF** SAMGs are implemented **AND** offsite releases approach or exceed 1Rem TEDE or 5 Rem Thyroid CDE, notify EOF SAMG Evaluator (in Accident Assessment Area). (Applicable to Catawba and McGuire). {14}

_____ **IF** needed, conduct turnover for on-coming shift.

_____ Restore equipment to "Ready Status" and notify appropriate personnel of conditions that would cause a less than operational status.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

NOTE:	Field Teams may be directed by the EOF Field Monitoring Coordinator (FMC) prior to activation of the EOF.

_____ Obtain copy of SH/0/B/2005/002, Protocol for the Field Monitoring Coordinator During Emergency Conditions.

_____ Establish log of activities sufficient enough to conduct a turnover for on-coming shift.

NOTE:	1. For drill or exercise met data, choose appropriate site simulator SDS resource. 2. For real time met data, choose the SDS resource for a specific site and unit.

_____ Refer to Procedure Step 3.2 to access SDS.

INITIALS _____ PRINTED NAME _____

_____ **WHEN** EOF Radio Operator has established communications with field monitoring teams, notify TSC Dose Assessors and provide direction to field monitoring teams. {19}

Catawba Specific

Perform duties as described in the following:

- HP/0/B/1009/004, "Environmental Monitoring for Emergency Conditions Within the Ten Mile Radius of CNS"
- HP/0/B/1009/019, "Emergency Radio System Operation, Maintenance, & Communication".

_____ **IF** needed, conduct turnover for on-coming shift.

_____ Restore equipment to "Ready Status" and notify appropriate personnel of conditions that would cause a less than operational status.

_____ Provide all completed procedures and copies of logs to EOF Emergency Planner upon deactivation of EOF.

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Obtain copy of SH/0/B/2005/002 (Protocol for the Field Monitoring Coordinator During Emergency Conditions), Enclosure 5.3 (Field Monitoring Survey data Sheet) and Enclosure 5.4 (Meteorological Update for Field Monitoring Teams). {6}

_____ Establish contact with Field Teams.

_____ Communicate instructions from Field Monitoring Coordinator to Field Teams.

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS _____ PRINTED NAME _____

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Notify the INPO duty manager at 9-1-800-321-0614 or 9-1-770-644-8091 for an Alert, Site Area Emergency, General Emergency, or any event expected to require significant industry support, including the name of the affected site(s) and a name and phone number to call for additional information. {70}{IER L1-13-10}

_____ **IF** requested:

- Provide INPO's emergency director with a brief description of the nature of the event.
- Identify any equipment or support needed from INPO.
- Respond when contacted for periodic updates.

_____ Perform duties as described in procedure SR/0/A/2000/004 (Notification to States and Counties from the Emergency Operations Facility).

_____ Ensure emergency notification times are satisfied.

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS _____ PRINTED NAME _____

EOF Services Administration/Commissary Checklist {71}

NOTE: Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

INITIAL

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on White Marker Board in EOF Services Area.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Ensure that the EOF Services Area is set up.

_____ Provide administrative office support and supplies, such as:

- Office supplies and equipment
- Secretarial/clerical services
- Copy center/fax services

NOTE: Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

_____ Provide for personal needs of ERO, such as:

- Food and beverage
- Air travel, hotel, and car rental arrangements
- Tables and chairs
- Tents
- Portable toilets
- Trash receptacles

_____ **IF** requested, provide in-house craft resources.

_____ **IF** needed, contact additional personnel for support.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS _____PRINTED NAME _____

EOF FACILITY POST-EVENT CHECKLIST

_____ Secure the EOF Services Area.

_____ Restock office supplies.

_____ **IF** needed,

- Ensure return of relocated office equipment.
- Notify hotels/motels of release of rooms.
- Assist personnel needing transportation home.
- Notify vendors to pick up furniture and equipment not needed for recovery.

_____Notify vendors to discontinue food services to EOF.

ACTION LIST FOR CHANGING FROM EMERGENCY TO RECOVERY MODE

_____ Replenish supplies.

_____ Determine additional space requirements.

_____ Prepare weekly work schedules.

_____ Determine hotel/motel accommodations and travel requirements and contact Travel Services for securing these requirements.

_____ Notify food vendors to arrange shift operations to support recovery efforts for meals and breaks (snacks) with times and locations for serving.

_____ Notify chairs and table suppliers for appropriate needs and quantities.

_____ Notify tent suppliers for appropriate needs and quantities.

_____ Notify portable toilet suppliers for appropriate needs and quantities.

_____ Notify trash receptacle suppliers for appropriate needs and quantities.

_____ Establish shift coverage of commissary personnel to support total recovery efforts.

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ **IF** needed to support emergency, request staffing by Reactor Physics.

_____ Obtain copy of applicable "Classification of Emergency" procedure.

- Catawba: RP/0/A/5000/001
- McGuire: RP/0/A/5700/000
- Oconee: RP/0/A/1000/001

_____ **IF** Oconee is affected, obtain copy of "Oconee Nuclear Site Emergency Action Level Description Guidelines" Manual.

_____ Ensure PC is on and displaying plant status.

_____ Post changes in Fission Product Barrier status on the Fission Product Barrier Status Board in the EOF Director's Area.

_____ Provide I/C number and description for ENF Line 4 to Offsite Agency Communicators.

NOTE:	Definitions for ENF Line 8 are in Steps 2.4, 2.5, and 2.6 in the body of this procedure.

_____ Provide Event Prognosis for ENF Line 8 to Offsite Agency Communicators. {1} {7}

_____ Provide appropriate information for ENF Line 10 to Offsite Agency Communicator.

INITIALS _____ PRINTED NAME _____

NOTE: The Affected Unit on Line 11 is tied to the I/C on Line 4. Examples may not be all inclusive of events that may affect all units.

____ Provide Affected Unit(s) for ENF Line 11 to Offsite Agency Communicators:

- Evaluate the following for classification for both units (CNS and MNS) or all three units (ONS). {28} {29}
    - Security event
    - Seismic event
    - Tornado on site
    - Hurricane force winds on site
    - Loss of both switch yards
    - Fire in SSF
    - Fire affecting shared safety related equipment
    - Condition A for Keowee Hydro Project Dam/Dike (ONS).
- **IF** event at Catawba or McGuire affects both units equally, check All. {28} {29}
- **IF** event at Oconee affects more than one unit equally, check All.
- **IF** event only affects one (1) unit **OR** one unit has a higher classification, check appropriate unit. {28} {29}

____ Provide Unit Status for ENF Line 12 to Offsite Agency Communicators.

____ **IF** an upgrade in classification occurs, notify Offsite Agency Communicator.

____ Coordinate the following functions:

- Accident Assessment Interface
- Operations Interface
- Reactor Physics (as needed)

_____ Prepare for EOF Briefings using Enclosure 6.24 (EOF Briefing Guideline).

_____ Assist TSC Emergency Coordinator as requested upon entry into Severe Accident Management Guidelines (SAMGs) (Catawba and McGuire).

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIAL

NOTE: Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Make Accident Assessment Manager aware this position is staffed.

_____ Establish log of activities sufficient enough to conduct turnover for on-coming shift.

_____ Ensure PCs are on and displaying affected station and unit plant status.

NOTE: Communications are established after the beep.

_____ Establish bridge line for Operations Loop for affected station:

- ☐ Catawba: 9-803-701-3994
- ☐ McGuire: 9-980-875-4500
- ☐ Oconee: 9-1-864-873-4908

_____ **IF** needed for McGuire, establish communications link with Engineering Manager, 9-980-875-4954.

_____ **IF** Oconee event, establish communications with Operations Interface, 9-1-864-873-3696.

_____ Obtain copy of Classification of Emergency procedure for affected station.

- ☐ Catawba: RP/0/A/5000/001
- ☐ McGuire: RP/0/A/5700/000
- ☐ Oconee: RP/0/A/1000/001

INITIALS _____ PRINTED NAME _____

_____ Obtain copy of Core Damage Assessment procedure for affected station.

- ☐ Catawba: RP/0/A/5000/015
- ☐ McGuire: RP/0/A/5700/019
- ☐ Oconee: RP/0/B/1000/018.

_____ Gather plant status information using Accident Assessment Initial Information Request Form on page 4 or 5 of this enclosure.

_____ **IF AT ANY TIME** General Emergency is declared, **RECOMMEND IMMEDIATELY** to Accident Assessment Manager **AND** RAM protective actions using:

- ☐ Enclosure 6.2 - Catawba Offsite Protective Actions
- ☐ Enclosure 6.3 - McGuire Offsite Protective Actions
- ☐ Enclosure 6.4 - Oconee Offsite Protective Actions

_____ Perform the following steps as needed throughout event:

_____ **IF** condition warrants, determine analysis of reactor core and containment conditions in regard to:

- Core sub-cooling
- Decay heat generation
- Heat removal capabilities (core and containment)
- Fission product release potential (core and containment).

_____ **IF** condition warrants, provide:

- Estimates of core uncovery times
- Interpretations of reactor water level data.

_____ Monitor status of Emergency Operations Procedures (EOPs) and discuss with Accident Assessment Manager.

_____ Confer with Radiological Assessment group in EOF.

_____ Consult with Operations Interface on anticipated course of events.

_____ Update status board in Accident Assessment room.

_____ Confer with Accident Assessment Manager on the following:

- Anticipated course of events
- Diagnosis of the accident and mitigation strategies
- Analysis of core and containment
- Core damage and fission product release potential
- Background information of system design
- Emergency classifications.

_____ Support Engineering Manager in TSC in accident and mitigation strategies.

_____ Assist TSC as an evaluator upon entry into Severe Accident Management Guidelines (SAMG) (as requested).

_____ **IF** McGuire has entered SAMG, **REFER TO** Enclosure 6.20 (Establishing Communications Links between McGuire SAMG Evaluators).

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

Catawba or McGuire Initial Information Request

Initial Information Request	Results
Emergency Classification Status	
EAL Declaration Chronology	
Protective Actions Status	
Reactor/Turbine Status	
Power Level	
Time of Trip & On What Signal	
Any Abnormal Response	
NC Pump Status	
Core Cooling Status (subcooled margin/ RVLIS/natural circulation)	
Orange or Red CSFs Alarms Received	
Safety Injection	
When Actuated & on What Signal	
NV, NI, ND, Ice Condenser Status	
Feedwater	
CF and CA Status	
Main Steam	
Isolation Status	
SMSV, SM PORV, SB Status	
Electric Power	
600V, 4160V, D/G Status	
Containment	
Isolation Status	
NS and VX Status	
Security/Fire/Flooding/HAZMAT/Other Hazards	
Plant Conditions Status	
Off-site Releases	
Status	

Oconee Initial Information Request

Initial Information Request	Results
Emergency Classification Status	
EAL Declaration Chronology	
Protective Actions Status	
Reactor/Turbine Status	
Power Level	
Time of Trip & On What Signal	
Any Abnormal Response	
Reactor Coolant Pump Status	
Core Cooling Status (subcooled margin/ RVLIS/natural circulation)	
Safety Injection	
When Actuated & on What Signal	
HPI, LPI Status	
Feedwater	
Feedwater and Emergency Feedwater Status	
Main Steam	
Isolation Status	
MSSV Status	
Electric Power	
600V, 4160V, Keowee, Lee Status	
Containment	
Isolation Status	
RBS, RBCU Status	
Security/Fire/Flooding/HAZMAT/Other Hazards	
Plant Conditions Status (Keowee Hydro Dam status)	
Off-site Releases	
Status	

INITIAL

NOTE:	This enclosure does not apply to Oconee.

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Perform following steps as needed throughout event:

_____ Provide communications interface between Accident Assessment Group and TSC Operations Group.

_____ Advise Accident Assessment Group on the following:

- Emergency Operations Procedures (EOPs)
- Diagnosis of accident and mitigation strategies
- Emergency classification.

_____ Advise TSC of anticipated course of events.

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS _____ PRINTED NAME _____

INITIAL

NOTE: Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Obtain any applicable nuclear design calculations from Nuclear Engineering office area.

_____ Establish communications with TSC Reactor Engineer.

_____ **IF** conditions warrant, determine analysis of reactor core and fuel with respect to:

- Reactor Physics parameters
- Core subcriticality.

_____ Provide Accident Assessment Manager with information concerning any abnormal core conditions.

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS _____ PRINTED NAME _____

INITIAL

NOTE:	Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Log in to Emergency Planner computer.

_____ (MNS and CNS only) Obtain Emergency Planner wireless phone and headset from Emergency Planner Desk area and access EP bridge line, 9-803-701-4010.

NOTE:	Have on hand all emergency notification forms (ENFs) transmitted to state and local agencies up to this time. Be prepared to answer questions concerning information on the ENFs as well as any other information requested by ECOC Director when called back. {21}

_____ Contact the Enterprise Crisis Operations Center (ECOC) Director by email at ECOCDirectors@duke-energy.com **OR** by phoning the Enterprise Security Console at 2-8851 or 9-1-800-943-7584, ask them to contact the ECOC Director about the EOF activation, and provide your call back number.

NOTE:	Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

_____ Support EOF Director with the following:

- _____ Provide escorted access to EOF for personnel without badge access. {61}
- _____ Document names of personnel escorted in log. {73}
- _____ Complete EOF Director Checklist items as requested.
- _____ Clarify Emergency Plan and Emergency Plan Implementing Procedure information.
- _____ Interface with federal, state and local agencies.

_____ Assist Off-Site Agency Communicators in preparation of emergency notifications.

INITIALS _____ PRINTED NAME _____

_____ **IF** a security event at MNS requires assembling MNS TSC/OSC ERO at EOF, complete "MNS Security Event, TSC/OSC Assembled at EOF Checklist," page 10 of 12 of this enclosure.

_____ **IF** a Beyond Design Basis External Event (BDBEE) or Extended Loss of Offsite AC Power (ELAP) event at MNS requires assembling TSC/OSC ERO at the EOF, complete "MNS BDBEE/ELAP, TSC/OSC Assembled at EOF Checklist," page 10 of 12 of this enclosure. {76}

_____ **IF** a security event at CNS requires assembling the duty CNS TSC ERO at the EOF, complete "CNS Security Event, TSC ERO Assembled at EOF Checklist," page 11 of 12 of this enclosure. {41}

NOTE: 1. EOF Duty Roster is available on DAE using Nuclear Generation Duty Roster application. EOF information is under General Office location. {51}

2. Consider hours previously worked prior to ERO activation in determining shift turnover schedules for 24-hour staffing. {69}

_____ Complete 24-Hour Staffing Log for each EOF position, pages 3 through 8 of this enclosure.

_____ **IF** EPZ roadblocks have been established, prepare for emergency worker re-entry using page 12 of this enclosure.

_____ Verify Public Affairs personnel have considered 24-hour staffing by calling the JIC Admin. Manager at 2-0548.

_____ Record EOF Exercise/Drill/Event Duke Energy employee participation as follows:

☐ **IF** scheduled drill, activate eRoster program and scan **OR** enter Duke Energy employee ID number.

☐ **IF** not a scheduled drill **OR** scanner-inoperable, request participants sign Exercise/Drill/Event/Training Attendance Sheet. {61}

_____ Request Duke Energy participants sign EOF Drill/Event Participation form (EP FAM 3.19 Attachment 29). {61}

_____ Conduct turnover for on-coming shift, if needed.

_____ Upon deactivation of the EOF, forward a copy of the EOF Drill/Event Participation form (EP FAM 3.19 Attachment 29) to each DEC site's Emergency Preparedness Manager.

_____ Upon deactivation of EOF, collect all completed paperwork and forward to appropriate Emergency Preparedness Manager.

_____ Upon deactivation of EOF, complete "EOF Post Event Checklist," page 9 of this enclosure.

EOF DIRECTOR AREA

24-HOUR POSITION EOF STAFFING LOG {33}

	Primary		Relief	
Position	**Name**	***Shift Schedule**	**Name**	***Shift Schedule**
EOF Director				
Assistant EOF Director				
EOF Log Recorder				
EOF Emergency Planner				
Radiological Assessment Manager				
Accident Assessment Manager				

* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

DOSE ASSESSMENT AREA

24-HOUR POSITION EOF STAFFING LOG

	Primary		Relief	
Position	**Name**	***Shift Schedule**	**Name**	***Shift Schedule**
EOF Dose Assessor				
EOF Dose Assessor				
EOF Dose Assessor				
EOF Dose Assessor (HPN)				
Field Monitoring Coordinator				
Radio Operator				

* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

ACCIDENT ASSESSMENT AREA

24-HOUR POSITION EOF STAFFING LOG

	Primary		Relief	
Position	**Name**	***Shift Schedule**	**Name**	***Shift Schedule**
Accident Assessment Interface				
Reactor Physics (As Needed)				
Operations Interface (MNS and CNS only)				

* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

OFFSITE AGENCY COMMUNICATOR

24-HOUR POSITION EOF STAFFING LOG

	Primary		Relief	
Position	**Name**	***Shift Schedule**	**Name**	***Shift Schedule**
Lead EOF Off-Site Agency Communicator				
EOF Off-Site Agency Communicator				
EOF Off-Site Agency Communicator				

* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

EOF SERVICES AREA

24-HOUR POSITION EOF STAFFING LOG

	Primary		Relief	
Position	**Name**	***Shift Schedule**	**Name**	***Shift Schedule**
EOF Services Manager				
EOF Services Admin/Commissary				
EOF Data Coordinator				

* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

Enclosure 6.16

Emergency Planner
Non-Duke Energy Participants
24-Hour Position EOF Staffing Log

Name (Please Print)	Representing Agency

EOF FACILITY POST EVENT CHECKLIST

_____ Obtain copy of TSC/EOF Log Printout.

_____ Retrieve:
- Completed Procedures
- Notes
- Log Sheets

_____ Turn off:

- Video monitors
- Projectors

NOTE:	EOF Services completes Enclosures 13.4 and 13.5 from procedure ST/0/A/4600/086.

_____ Complete applicable enclosures of ST/0/A/4600/086 to replenish procedure inventories
_____ Clean tables off
_____ Put all trash in containers
_____ Erase status boards
_____ Verify all Fax machines have paper supply replenished
_____ Verify all printers have paper supply replenished.
_____ Verify cordless phones are left in cradles to be charged.

Replenish Position Specific Notebooks (1 copy of procedure body and minimum 3 copies of applicable enclosures, checklists and log sheets):

_____ EOF Director (also include minimum 3 copies each of Enclosure 6.2, 6.3 and 6.4)
_____ Radiological Assessment Manager (also include minimum 3 copies each of Enclosures 6.2, 6.3, and 6.4). {24}
_____ EOF Dose Assessor
_____ Field Monitoring Coordinator
_____ Radio Operator
_____ EOF Offsite Agency Communicator (also include 1 copy of EP FAM 3.15 Attachment 3.15.3.3)

_____ Accident Assessment Manager (also include minimum 3 copies each of Enclosures 6.2, 6.3, and 6.4). {24}
_____ Accident Assessment Interface
_____ EOF Operations Interface
_____ Reactor Physics
_____ EOF Emergency Planner
_____ EOF Log Recorder (also include 1 copy of EP FAM 3.15 Attachment 3.15.3.2)
_____ EOF Data Coordinator
_____ EOF Services Manager

MNS SECURITY EVENT, TSC/OSC ASSEMBLED AT EOF CHECKLIST

_____ Notify Energy Center Building Security, 2-1234, that TSC/OSC offsite responders are assembling at EOF. {61}

_____ Request that TSC/OSC responders assemble in EOF break area.

_____ Coordinate selection of first response team that will activate TSC/OSC when Security Event is terminated.

_____ Move first response team into EOF work area to obtain plant status and recovery strategies.

_____ **IF** needed, obtain copies of RP/0/A/5700/012, Activation of the Technical Support Center, (TSC) and RP/0/A/5700/020, Activation of the Operations Support Center (OSC), from the McGuire procedure cabinet.

_____ Determine 24-hour staffing for each TSC/OSC position.

_____ **IF** EOF break area is too crowded, determine whether to send TSC/OSC relief members to Energy Center Cafeteria.

_____ **WHEN** Security Event is terminated and onsite TSC/OSC is to be activated, ensure that first response team to TSC/OSC is briefed prior to dispatch to site.

_____ Send relief TSC/OSC members home, if possible, with their assigned relief time.

MNS BDBEE/ELAP EVENT, TSC/OSC ASSEMBLED AT EOF CHECKLIST {76}

_____ Notify Energy Center Building Security at 2-1234 that TSC/OSC offsite responders are assembling at EOF.

_____ Request that TSC/OSC responders assemble in EOF break area.

_____ Assist TSC Emergency Planner in establishing priorities for transport of MNS ERO personnel to the site.

_____ Assist TSC Emergency Planner in determining 24-hour staffing for each TSC/OSC and alternate TSC/OSC position.

_____ **IF** needed, obtain copies of RP/0/A/5700/012, Activation of the Technical Support Center, (TSC) and RP/0/A/5700/020, Activation of the Operations Support Center (OSC), from the McGuire procedure cabinet.

_____ **IF** EOF break area is too crowded, determine whether to send TSC/OSC relief members to Energy Center Cafeteria.

CNS SECURITY EVENT, TSC ERO ASSEMBLED AT EOF CHECKLIST

_____ Notify Energy Center Building Security, 2-1234, that CNS TSC duty responders are assembling at EOF. {61}

_____ Have CNS TSC responders assemble in EOF break area.

_____ Obtain RP/0/A/5000/020 Enclosure 4.20 from CNS procedure cabinet and distribute to assembled TSC ERO.

_____ **IF** CNS TSC Emergency Planner does not respond within 75 minutes of declaration, assist Assistant TSC Emergency Coordinator with assigned tasks.

_____ **WHEN** decision is made to access Catawba and staff the TSC and OSC, ensure choice of facility (normal or alternate) TSC and OSC is known prior to TSC staff departure. {41}

EMERGENCY WORKER/SPECIAL EQUIPMENT RE-ENTRY AFTER ROAD BLOCKS ARE ESTABLISHED IN THE EPZ

NOTE: TSC Emergency Planner is to work with RP to determine if off going shift will need to leave their personnel vehicles onsite and leave in the relief bus.

1.0 **IF** roadblocks are in place in 10 mile EPZ **AND** affected site's Emergency Planner has asked the EOF to prepare for emergency worker re-entry for on site relief, perform the following:

1.1 Request EOF Services Manager obtain a bus to be used for re-entry of relief workers.

1.2 Coordinate with TSC Emergency Planner to verify re-entry path to be used, working with Field Monitoring Coordinator and Radiological Assessment Manager to ensure the path selected avoids the plume foot print.

1.3 Coordinate with State representative at EOF to contact re-entry county EOC to obtain Highway Patrol escorts for bus.

1.4 Ensure State representative requests county EOC to notify roadblock selected for re-entry with ETA for the bus with Highway Patrol escort.

2.0 **IF** roadblocks are NOT established, inform TSC Emergency Planner access will be normal.

3.0 **IF** roadblocks are in place when special equipment is to be brought to plant, use process in step 1.0 for equipment to pass through roadblock.

NOTE: Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

INITIAL

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

NOTE: On the Log Recorder's PC, the PC Screen is Screen 2. The left projector is Screen 1 and the right projector is Screen 3.

_____ Ensure PC is on.

_____ Ensure Projectors are powered up.

_____ Refer to EP FAM Section 3.15, Attachment 3.15.3.2, for WebEOC Logging instructions.

NOTE: Applications viewed on the three main display screens in the EOF can be controlled by the Log Recorder's PC. The Log Recorder's PC normally controls the left and right projectors only; the Communicator's PC normally controls the center projector. The Log Recorder's PC is designated as Computer 1 and the Communicator's PC is designated as Computer 2.

_____ Setup EOF Director's Area displays as follows:

- **Left Projector** - Facility Log (Remains on Comp 1, PC Screen 1)
- **Center Projector** - Swap projector to Comp 2 (Communicator's Notification Form)
- **Right Projector** - SDS (Remains on Comp 1, PC Screen 3)
  - Launch application from DAE. Application will launch on Log Recorder's monitor.
  - If application opens full screen, click Restore Down button, located to the right of the minimize button.
  - Click top of application screen and hold left mouse button down.
  - Drag application to desired screen.
  - Maximize application.

INITIALS _____ PRINTED NAME _____

NOTE:
1. Incorrect log entries may be corrected by making the needed correction for the specific entry and flagging it as a "corrected item".
2. The EOF Log Recorder should enter EOF specific information and other information as directed by the EOF Director or Assistant EOF Director.
3. Log activities must be detailed enough to "tell the story" if necessary to reconstruct events for the NRC and to have an effective turnover to EOF staff.

_____ Establish official log of all significant EOF activities and EOF Director decisions using WebEOC computer program sufficient to conduct turnover for the on-coming shift.

_____ Log entries should include, but are not limited to, the following examples:

- EOF Director and any change in EOF Director (staffing)
- Time of EOF activation
- Emergency classification, changes in classification, time of declaration
- Protective Action Recommendations
- Approval/transmittal of Emergency Notification Forms
- Approval/distribution of News Releases
- Plant Conditions (Unit 1, 2, and 3):
  - Core Cooling information (i.e., Time To Boiling, etc.)
  - Safety Systems Degraded
  - Power Supply Status
  - Fission Product Barrier Degradation
  - Radiation Releases.
- Procedures in effect and any transition to another procedure
- Actions taken that are not part of an approved procedure
- Any abnormal or unexpected plant response
- Major equipment manipulations
- Major mitigation actions taken
- Site assembly, relocation, or evacuation of all or any part of the plant
- Personnel Injuries
- Facility priorities
- Recovery Action(s) in Progress
- Summary of facilities briefings
- Expected time of next Time-Out
- Any parameter that shows how drill/event is managed (ex. releases, time, communication)

_____ **IF** WebEOC computer program is not available, establish manual log of all significant EOF activities and EOF Director decisions.

_____ **IF** requested by EOF Director, prepare sequence of events list and revise it as necessary.

_____ Maintain EOF Director's Area displays and status boards as directed or needed.

_____ Record established priorities on EOF status board as requested by EOF Director.

_____ Conduct turnover for on-coming shift, if needed.

_____ Print copy of TSC/EOF Log Printout.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

EOF Data Coordinator Checklist

NOTE: Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

INITIAL

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Verify EOF computer hardware, software, and data display equipment is operational per EP FAM 3.8, EOF Data Coordinator's Reference Manual.

_____ Provide computer support as required:

- Software and hardware applications support
- Data acquisition support
- Communication with TSC Data Coordinator

_____ **IF** another site declares an emergency requiring activation of the EOF for support, obtain three additional computers (laptop or PC) within one hour for use by Accident Assessment Manager, Radiological Assessment Manager, and Offsite Agency Communicators. {62}.

_____ Conduct turnover for on-coming shift, if needed.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS _____ PRINTED NAME _____

NOTE: Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

INITIAL

_____ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

_____ Don position badge.

_____ Sign in on EOF staffing board.

_____ Activate the EOF Services Function by establishing duty function contacts for EOF service areas and post in EOF Service area:

- Administration/Commissary
- Communications (24-hour number is 2-1961)
- Transportation Services
- Risk Management and Insurance
- Procurement

_____ Establish log of activities sufficient to conduct turnover for on-coming shift.

_____ Provide general administrative support and office supplies.

_____ Ensure office equipment is functioning properly.

NOTE: Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

_____ **IF** needed, provide escorted access to EOF for personnel without badge access, and document names of personnel escorted in log. {62, 73}

_____ Provide food and beverages to meet nutritional needs.

_____ Provide facilities to meet personal needs (dining facilities, toilets, trash receptacles and disposal) as required.

INITIALS _____ PRINTED NAME _____

NOTE:
1. The INPO phone number may be obtained from the Consolidated Emergency Phone Directory for the Emergency Operations Facility (EOF).
2. The INPO Emergency Resources Manual provides a list of contacts at each US commercial nuclear power site, and an emergency equipment list. The INPO Emergency Resources Manual can be found on the INPO Website or the bookcase in the EOF Director's Area.

_____ **IF** needed, perform the following:
- Request Communications to troubleshoot and repair telephone systems, mobile radios and cell phones.
- Request Transportation Services or others arrange for necessary equipment for movement of materials and personnel.
- Request Transportation Services or others to arrange necessary equipment and personnel for debris removal in order to access the DEC nuclear sites. {IER L1-11-14}
- Obtain accommodations for personnel.
- Request Risk Management and Insurance serve as liaison between Duke Energy and insurance companies in gathering data and establishing claims offices to disburse emergency assistance funds to evacuees.
- Request Procurement coordinate all activities related to the purchase of materials, equipment and services from outside supplies including arranging for transportation and receiving as required.
- Contact INPO for additional resources (human resources, emergency equipment, technical expertise). {75}{IER L1-13-10}
- **IF** a Beyond Design Basis External Event (BDBEE)/Extended Loss of Offsite AC Power (ELAP) event at MNS, request Transportation Services implement the MNS BDBEE/ELAP ERO Transportation Plan insert to the Fleet Storm EOF Manual. {76}

_____ **IF** 24-hour staffing is required,
- Notify additional personnel and arrange schedule for continuous support.
- Conduct turnover for on-coming shift.

_____ Ensure that all trash and left over food products are properly contained and arrange for disposal.

_____ Notify Facility Services to clean the EOF following deactivation.

_____ Obtain Procedure ST/0/A/4600/086, Standard Procedure for Periodic Verification of Communication Equipment Operation and Equipment/Supply Inventory, Enclosures 13.4 and 13.5 and complete checklists.

_____ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

_____ Notify duty functions contacts advising that the drill/event has been terminated.

_____ **IF** needed, perform the following:

- Request Communications secure radio base stations.
- Request Communications return portable communications equipment to storage locations.
- Request Procurement transfer information on outstanding requisitions to normal procurement contacts.
- Request Transportation Services return relocated equipment to original location.
- Request Transportation Services provide transportation home for ERO personnel.
- Request Risk Management and Insurance notify insurance companies of change in drill/event status.

ESTABLISHING COMMUNICATIONS LINKS BETWEEN MCGUIRE SAMG EVALUATORS

INITIAL

NOTE:	Operations Procedure Support in the TSC will serve as the lead SAMG evaluator and will be assisted by Reactor Engineer and Systems Engineer in the TSC, as well as Accident Assessment Interface in the EOF. OPS Procedure Support is expected to **direct** the other evaluators in what they should be looking at strategically, plus ensure that SAEG-1 is completed appropriately as directed by the guidelines.

_____ **ESTABLISH** communications links between the SAMG evaluators (TSC OPS Procedure Support, TSC Reactor Engineer, TSC System Engineering Manager, and EOF Accident Assessment Interface) by dialing RP spare bridge 9-980-875-4833 (6-party bridge line).

_____ **EVALUATE** using an alternate bridge line listed below if for some reason the RP spare bridge is unavailable or if other communications links are desired or needed. Dial the number listed as desired to determine if that bridge is currently being used. If the desired bridge line is not being used, then the appropriate parties may dial in to use it.

EP Controller bridge (12 - party) 9-980-875-4575

McGuire site bridge (6 - party) 9-980-875-3030
McGuire site bridge (6 - party) 9-980-875-3200

INITIALS _____ PRINTED NAME _____

1. Recovery Guidelines

The Recovery Manager shall be responsible for the following:

☐ 1.1 Initiate RP/0/B/1000/027, Reentry Recovery Procedure.

☐ 1.2 Announce as follows:

"Agreement has been reached between Duke Energy, the State of South Carolina and the NRC that the General Emergency classification is terminated. Recovery Operations are being initiated at the site. Actions are underway to determine when people who have been evacuated from their homes can return. As this information is made available, it will be released to the public."

NOTE: The offsite recovery organization will stay at the EOF and work with the counties and state if radiological Conditions exist beyond the ONS site boundary. The onsite recovery organization will be established by the Emergency Coordinator.

☐ 1.3 Establish Recovery Organization to handle offsite consequences.

☐ 1.4 Make the following assignments:

Recovery Manager _____

Radiological Assessment Manager _____

Field Monitoring Coordinator _____

Emergency Preparedness Manager _____

EOF Services Manager _____

☐ 1.5 Ensure staffing for long-term operation.

NOTE: Once recovery has been determined, the emergency notification message forms are no longer used.

☐ 1.6 Confer with SEMD (State Emergency Management Director) regarding work in progress at EOF and determine communication channels and notifications expected.

INITIALS _____ PRINTED NAME _____

☐ 1.7 Consult with each manager regarding activities in progress.

☐ 1.7.1 Radiological Assessment Responsibilities

- Provide ingestion pathway dose assessments
- Provide ongoing communications with DHEC Nuclear Emergency Preparedness
- Evaluate environmental concentrations within the radiological footprint
- Provide technical assistance to Joint Information Center
- Help plan for reactor building purge as needed

☐ 1.7.2 Emergency Preparedness Responsibilities

- Communications to the State and County Management Directors

☐ 1.7.3. EOF Services Manager Responsibilities

- Ensure ANI (insurance) is set up for public inquiry
- Provide services as required

☐ 1.7.4. Joint Information Center Responsibilities

- Providing news releases
- Work with media/public to reduce rumors
- Monitoring information being released by news media

☐ 1.8 Maintain Emergency Operations Facility activated and staffed until consensus is reached by Duke Energy and State of South Carolina there is no basis for continuous staffing.

☐ 1.8.1 Record time and date that Emergency Operations Facility/Joint Information Center were closed.

A. EOF/JIC Closed _____
Time/Date

Keowee Hydro Project Dams/Dikes
Condition A/B Descriptions

NOTE:	• Duke Energy Hydro Group personnel are responsible for evaluation/inspection of Keowee Hydro Project Dams/Dikes **AND** determining if a Condition A or B exists. • Duke Energy Hydro Group personnel will communicate the results of evaluations/inspections to the Keowee Hydro Operator. The Keowee Hydro Operator will notify the OSM.

1. Condition A - Failure is Imminent or has occurred

A failure at the dam has occurred or is about to occur and minutes to days may be allowed to respond dependent upon the proximity to the dam. Response includes the immediate movement of downstream residents to higher ground. State and local governments will be notified. (Duke Energy Hydro-Electric Plant EAP)

INITIALS _____ PRINTED NAME _____

2. Condition B - Potentially Hazardous Situation is Developing

A situation where failure may develop, but preplanned actions taken during certain events (such as major floods, earthquakes, evidence of piping) may prevent or mitigate failure. The potentially hazardous situation may allow days or weeks for response and time to take remedial action. (Duke Energy Hydro-Electric Plant EAP)

The following situations will result in a Condition B determination/declaration:

- Reservoir elevation at Keowee Hydro Station is $\geq$805.0 ft msl with all spillway gates open and lake elevation continuing to rise.
- Situations involving earth dam or abutments as follows:
  a) Large increase or decrease in seepage readings OR seepage water is carrying a significant amount of soil particles;
  b) New area of seepage or wetness, with large amounts of seepage water observed on dam, dam toe, or the abutments;
  c) A slide or other movement of the dam or abutments which could develop into a failure.
- Developing failure involving the powerhouse or appurtenance structures is highly irregular to the point where the operator feels safety of the structures is questionable.
- Developing failure involving the concrete spillway or bulkhead is unusual and the safety of the structure is questionable.
- Any other situation involving plant structures which shows the potential for a developing failure.

_____ **IF** conditions **DO NOT** allow for a controlled relocation of the facility, perform immediate actions to protect personnel.

A. Notify personnel to re-assemble at Mint Street Parking Deck
B. Notify the TSC Emergency Coordinator of actions taken

_____ **IF** conditions allow for a controlled relocation of the facility, determine alternate EOF location:

☐ Catawba Event - McGuire Alternate TSC

☐ McGuire Event - Catawba Alternate TSC

☐ Oconee Event - Catawba Alternate TSC

_____ Request EOF Emergency Planner to obtain the following:

- 24-Hour Position EOF Staffing Log
- EOF Business Continuity Plan
- Catawba, McGuire, and Oconee Emergency Telephone Directories
- ERO Member Contact Information notebook {74}

_____ Announce to EOF personnel to exit EOF and move to assembly area at Mint Street Parking Deck with all their procedures and paperwork.

_____ Consider the need to escort NRC and offsite agency personnel from EOF to alternate EOF. {74}

_____ Turn over command and control of event to TSC Emergency Coordinator.

- Notify TSC Emergency Coordinator that EOF is evacuating due to (state reason)
- Provide TSC Emergency Coordinator current emergency classification and EAL number, current Protective Action Recommendations, and status of Emergency Notifications: Message number _____ due at _____

_____ Request the EOF Emergency Planner call the TSC Emergency Planner to request he call the unaffected site's control room and make them aware of the EOF relocation. {74}

NOTE: The following actions are taken after exiting the EOF.

_____ Request EOF Emergency Planner perform accountability of EOF personnel using 24 hour EOF Position Staffing Log.

_____ Consult with Enterprise Security console personnel at 704-382-1234 to determine expected duration of EOF evacuation.

_____ **IF** expected duration of evacuation is greater than 2 hours or unknown, perform the following:

- Direct EOF Personnel to report to the Alternate EOF Location
- Inform the TSC Emergency Coordinator that EOF is relocating to Alternate EOF Location
- Request TSC notify NRC of EOF relocation

_____ Direct EOF Emergency Planner to conduct actions required by EOF Business Continuity Plan.

_____ Return to Enclosure 6.1 of this procedure after reporting to Alternate EOF.

NOTE: Items listed here are suggested topics for routine update briefings (not all topics need be addressed at each briefing). Items actually selected should be based on existing or projected plant conditions and current priorities.

Attributes of Excellent Briefings	
• 5-10 minutes duration • Brief for status, not to solve problems • Crisp, focused and well controlled	• Speak to be heard (use PA if needed) • Repeat back required actions • **ALL** personnel are attentive

1. EOF Director (open and lead briefing)

- Pre-announce -- 5 minute warning brief is about to occur
- Start Briefing by stating "Attention in the EOF," observe participants to confirm they are ready
- Overview of emergency conditions
- Station priorities
- Offsite actions being taken
- NRC activities related to emergency

Notes:_____

2. Assistant EOF Director

- Facility staffing issues and status of additional support requested
- Facility operations expectations (noise levels, procedure use, log keeping, etc.)
- Status of offsite agency communications
- Status of relief shift

Notes:_____

3. Accident Assessment Manager

- Current Emergency Classification and EAL number/description
- Key parameters/potential paths for Emergency Classification Upgrade
- Reactor condition, core damage assessment.
- Review of key plant conditions (power level, shutdown, trends)
- Fission Product Barrier Status, trends, prognosis
- Core Cooling System Status
- Emergency/abnormal procedures entered or exited
- Severe accident guideline status
- Status of NRC Communications

Notes:_____

4. Radiological Assessment Manager

- Status of radiological release compared to EAL thresholds, dose projections, offsite radiological conditions, PARs.
- Meteorological conditions
- Field Monitoring Team reports
- Radiation Protection problem areas being worked and/or needing resolution
- Chemistry activities and results. (e.g. dose equivalent iodine, sample status)

Notes:_____

5. Emergency Planner

- **IF** a security event is in progress, plant access restrictions, status of site security, offsite Local Law Enforcement Agencies assistance requested and/or provided
- **IF** a medical emergency response (MERT) is in progress, number of victims, whether radiologically or chemically contaminated, offsite EMS response
- **IF** a fire response is in progress, status of fire, offsite FD response
- Status of site assembly and site evacuation

Notes:_____

6. Offsite Agency Communicator

- Status of offsite agency communications and time next message due

Notes:_____

7. EOF Log Recorder

- Items of interest from TSC Log
- TSC Priorities

Notes:_____

8. Corporate Communications

- Status of news releases and press conferences
- Rumors being addressed
- Internal/External notifications made (Duke Energy leadership team, ECOC, JIC, state government, INPO, ANI)

Notes:_____

9. EOF Director (close briefing)

- **IF** offsite agencies representatives are present, provide them with opportunity to contribute to brief
- **IF** the NRC is present, provide them with opportunity to contribute to brief
- Ask if any others need to report "Important information"
- Summarize priorities
- Ask if there are any questions
- State "END OF BRIEF"

Setup of Catawba Alternate EOF in McGuire Admin Bldg.

INITIAL

_____ **IF** cell phones with headsets can be obtained from McGuire TSC, take them to alternate EOF location (Administration Building layout on Page 3 of 3 of this enclosure).

_____ Locate assigned Administration Building area shown on the layout drawing on Page 3 of 3 of this enclosure

NOTE:
1. Alternate TSC phone sets are stored in the CRX Equipment Room, Room 112.
2. The EOF Emergency Planner and EOF Data Coordinator can assist with phone and computer connections.
3. **IF** a computer is needed, a computer that is not being used for another ERO function (e.g., Regulatory Compliance section, Business Management group, Human Resources group) may be used.
4. **IF** access to the CBX equipment Room, Room 112, is needed prior to the arrival of the EOF Emergency Planner, a key to the door can be obtained from Security at the SAS.
5. Printer paths for McGuire Nuclear Station Administration Building Mail Room Printers are MNADM106 and MNADMDP1.

_____ Set up assigned location as follows:

_____ • Obtain phone equipment necessary to conduct ERO function at assigned location and connect to wall and ceiling outlets.

_____ • **IF** a computer is needed, request help from EOF Data Coordinator.

_____ • **IF** necessary, obtain copies of position procedure enclosure from procedure SR/0/B/2000/003, Activation of the EOF, located in Emergency Preparedness Procedures cabinet.

_____ • **IF** printing capability is needed, setup printers using DAE Printer Selector Program.

INITIALS _____ PRINTED NAME _____

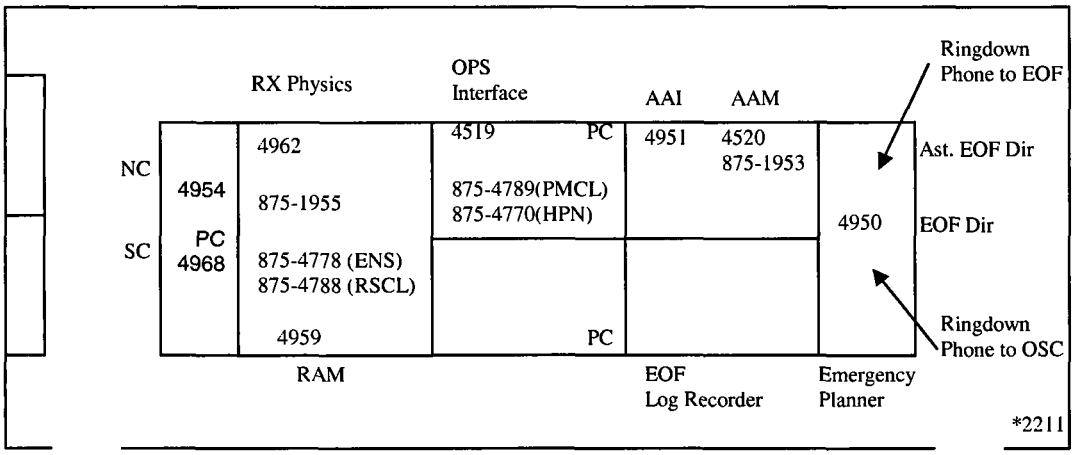
_____ • **IF** copies of plant procedures are required, perform one of the following:

- For Emergency Plan Implementing Procedures (RPs, SHs, and SRs), make copy from Control Copy located in Emergency Preparedness Procedures cabinet.

- For all other procedures, print a copy from NEDL Portal on DAE using McGuire Admin Building Mail Room printer MNADM106 or MNADMDP1.

_____ • Assume or continue ERO role according to procedure SR/0/B/2000/003, Activation of the EOF.

(Executive Board Room 111, Admin. Building)



Other EOF Position Locations

- Others (EP Room 114) - *4458, *4977, *875-1951.
- Offsite Communicator (EP Room 115B -- *4970, *SSN 315, *Radio, *875-1951.
- Data Coordinator (CBX Equipment Room 112) -- *4999.
- Dose Assessor (SCR Room 100D) -- *4405.
- Offsite Monitoring (McGuire TSC) *4969, *4976
- Public Affairs (Rooms 118 and 141) -- *4400, *4402, *4233.
- NRC (NRC Office, Room 126) -- *875-1681.
- Other, use Jaguar Room as needed (Room 144, EOF Services Mgr.) -- *4826.

Office Equipment

- FAX (Mail Room, Room 116) -- *875-4506.
- FAX (EP Room 114) -- *875-4382.
- Copier (Mail Room, Room 116).
- Copier (SA Room 170).
- CBX (CBX Office in Admin. Building Lobby).

* Indicates existing phones. All others are to be plugged in when the Alternate TSC is activated.

Setup of McGuire or Oconee Alternate EOF in Catawba Admin Bldg.

INITIAL

_____ **IF** cell phones with headsets can be obtained from Catawba TSC, take them to alternate EOF location (Administration Building layout on Page 2 of 3 of this enclosure).

_____ Locate assigned Administration Building area shown on the layout drawing on Page 2 of 3 of this enclosure

NOTE:
1. The EOF Emergency Planner and EOF Data Coordinator can assist with computer connections.
2. **IF** a computer is needed, a computer that is not being used for another ERO function (e.g., Regulatory Compliance section, Performance Improvement Team, Human Resources group) may be used.
3. Printer paths for Catawba Nuclear Station Administration Building Printers are CNSADM2 for Copier Room (Room 143) and CNADM127 for Room 127.

_____ Set up assigned location as follows:

_____ • **IF** a computer is needed, request help from EOF Data Coordinator.

_____ • **IF** necessary, obtain copies of position procedure enclosure from procedure SR/0/B/2000/003, Activation of the EOF, located in Emergency Preparedness procedures cabinet.

_____ • **IF** printing capability is needed, setup printers using DAE Printer Selector Program.

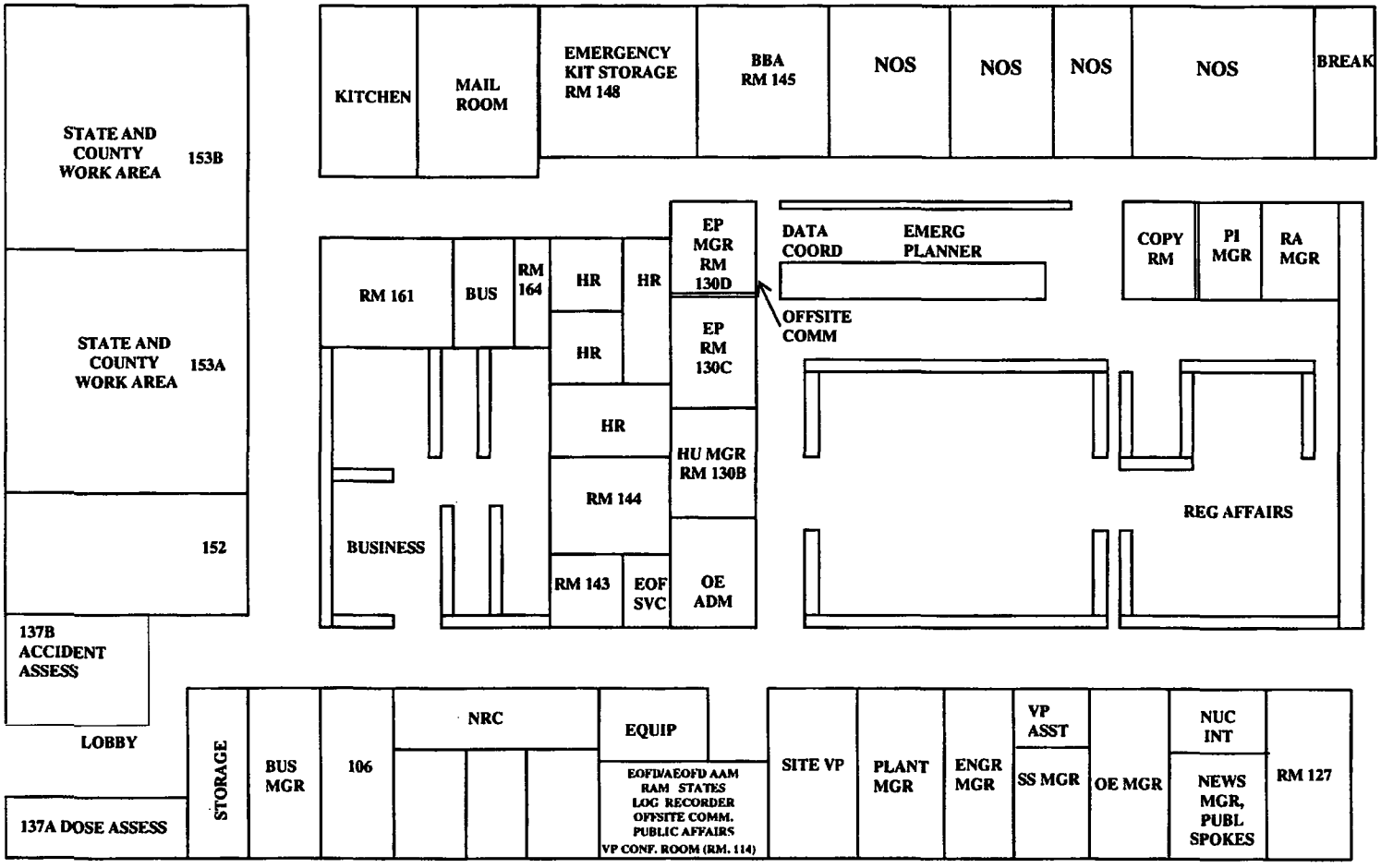
_____ • **IF** copies of plant procedures are required, perform one of the following:

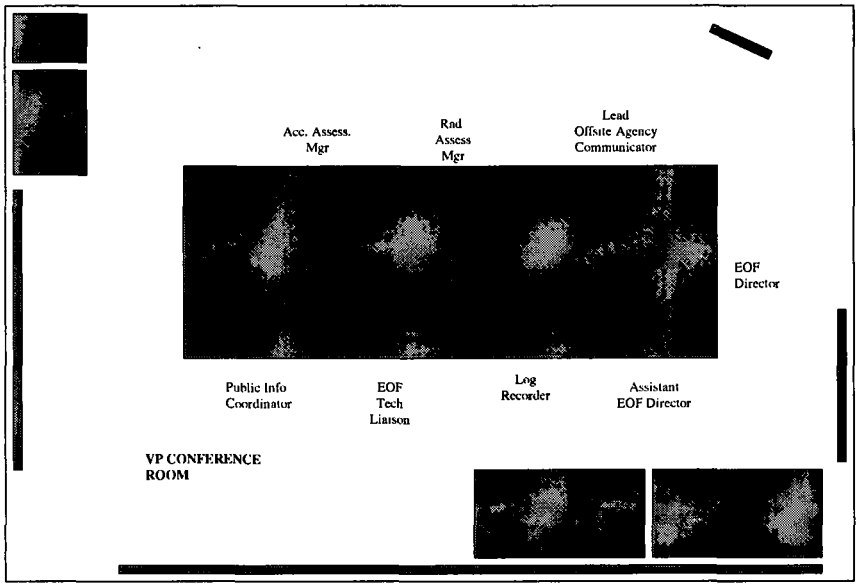
- For Emergency Plan Implementing Procedures (RPs, SHs, and SRs), make copy from Control Copy located in Emergency Preparedness Procedures cabinet.
- For all other procedures, print a copy from NEDL Portal on DAE using Catawba Admin Building Mail Room printer CNSADM2.

_____ • Assume or continue ERO role according to procedure SR/0/B/2000/003, Activation of the EOF.

INITIALS _____ PRINTED NAME _____

ALTERNATE EOF IN THE CNS ADMIN BLDG





EOF Functional Areas:

VP Conference Room – Command & Control Center (EOF Director, Accident Assessment Manager, Rad Assessment Manager, Lead Offsite Agency Communicator, EOF Log Recorder, EOF Tech Liaison, Public Information Coordinator, State EM Representatives)
EP Manager's Office – Offsite Communicators
EP Cubes – Data Coordinator, EOF Emergency Planner
Touchdown Room 142 - EOF Services
PA Manager Office - News Manager, Public Spokesperson
Room 153 A/B - State and County Work Area
NRC Resident Inspector Offices - NRC Site Team
Room 137A - Dose Assessment
Room 137B - Accident Assessment
Catawba TSC (Not Shown) - Offsite Monitoring

A) Emergency Classification

Time Declared: _____am/pm (Current Class)

Unusual Event Alert

Site Area Emergency General Emergency

EAL Descriptor Text: _____

_____

_____

Provide a brief summary of the event and mitigating actions in progress: _____

_____

_____

_____

_____

_____

_____

_____

B) Fission Product Barrier Status

	Fuel	RCS	CTMT
Intact:			
Potential Loss:			
Lost:			

C) Plant Conditions

Mode 1 - Power Operations _____ %

Mode 2 - Startup

Mode 3 - Hot Standby

Mode 4 - Hot Shutdown

Mode 5 - Cold Shutdown

Mode 6 - Refueling

Time of shutdown: _____ am/pm

Stable Improving

Unstable Deteriorating

Briefly describe equipment, instrument or other problems: _____

_____

_____

_____

_____

_____

_____

_____

_____

D) Radiological Release

None **or**

Imminent Controlled

In Progress Uncontrolled

Terminated Start Time:___am/pm

Estimated Duration: _____

E) Onsite Protective Actions

None **or**

Site Assembly / Accountability

Local Area Evacuation

Protected Area Evacuated

Site Evacuated

Offsite Assembly

Emergency Exposures Authorized

Potassium Iodide Issued

F) Response Facilities Activated

None **or**

Technical Support Center

Operations Support Center

Emergency Operations Facility

Joint Information Center

G) Offsite Assistance Requested

None **or**

Medical _____ am/pm

Fire Department _____ am/pm

Law Enforcement _____ am/pm

H) Offsite Notifications

County INPO

State ANI

News Release

I) Protective Action Recommendations

None **or**

Evacuate: _____

Shelter: _____

J) Offsite Actions/Response

None issued, **or**:

Schools Recreation Areas

Other: _____

_____

_____

Evacuate: _____

Shelter: _____

Underway -- OR -- Completed

K) Additional Notes

_____
_____
_____
_____
_____
_____

NOTE: This briefing is intended to provide general information related to the event. More detailed information will be available from individual licensee counterparts.

Additional Discussion Items:

1. Personnel safety (as applicable)
   a. Personnel accountability requirements
   b. Radiation protection requirements
   c. Industrial safety requirements
   d. Protective equipment requirements
   e. Reporting emergency situation (e.g., fire/medical
2. Emergency evacuation
   a. Location of exits
   b. Location of emergency assembly areas
3. Personal comfort
   a. Location of restrooms
   b. Location of water, beverages, and food
   c. Location of quiet area
4. Facility specific information
   a. Prohibited activities (e.g., use of cell phones, cameras, cordless phones, etc.)
   b. Facility telephones (how to call outside the facility, reserve phones, etc.)
   c. Telephone numbers (e.g., response facility phone directory/phone listing)
   d. Reference locations and access
   e. Making photo copies
   f. Sending/receiving facsimiles
   g. Logistical assistance/support

{1} PIP 0-M97-4210 NRC-1

{2} PIP 0-M96-1645

{3} PIP 2-C96-0273

{4} PIP 0-C98-3123

{5} PIP 0-M98-3522

{6} PIP 0-M98-2065

{7} PIP 0-C00-3830

{8} PIP 0-M99-3800, DocTracks NGO-2012-000119

{9} PIP M-99-2593

{10} PIP M-00-1107

{11} PIP G-02-00399(deleted Meteorologist Checklist, replaced with new enclosure)

{12} PIP M-01-3565

{13} PIP M-01-3711

{14} PIP M-99-5381

{15} PIP C-02-5851

{16} PIP G-02-00360

{17} N/A

{18} PIP M-02-2412, C.A.17

{19} PIP M-03-2174

{20} PIP M-02-3086, C.A. 32

{21} PIP M-03-2808, C.A. 1

{22} PIP M-03-3294, C.A. 10

{23} PIP G-03-606

{24} PIP M-04-2742, C.A. 10

{25} PIP C-04-1367, C.A. 9

{26} PIP-M-03-2538, C.A. 3

{27} PIP-M-03-3483, C.A. 1

{28} PIP-M-03-3294, C.A. 21

{29} PIP-C-04-2486, C.A. 2

{30} PIP-C-03-4471, C.A.1

{31} PIP-M-04-2742, C.A.11

{32} PIP-M-04-0735, C.A. 10

{33} PIP-M-04-0238, C.A.2

{34} FAM Sect. 3.7 rev. 7

{35} PIP-M-05-3631

{36} PIP-C-05-4854

{37} PIP-C-05-2064, C.A. 11

{38} PIP-C-06-3808, CA. 9

{39} PIP-G-07-0127

{40} PIP-C-04-2631, C.A.2

{41} PIP-C-06-6053, C.A.11

{42} PIP-C-06-8633, C.A.6

{43} PIP-M-06-5137, C.A.3

{44} PIP-G-07-0944, C.A. 4

{45} PIP-G-07-0959, C.A. 12

{46} PIP-C-05-2064, C.A. 12

{47} PIP M-07-3471, C.A. 6

{48} PIP G-08-1053, C.A. 4

{49} PIP C-09-3308, C.A. 3

{50) PIP M-09-2521, C.A. 15

{51} PIP M-09-4514, C.A. 19

{52} PIP G-09-1159, C.A. 11

{53} PIP G-08-1195

{54} PIP G-09-0697, C.A. 2

{55} PIP M-10-3598, C.A. 25

{56} PIP O-10-2906

{57} PIP M-10-3598, C.A. 21

{58} PIP O-10-6861, C.A. 4

{59} PIP G-10-1128, C.A. 1

{60} PIP O-10-11050, C.A. 21

{61} PIP G-11-1177, DocuTracks NGO-2012-000122

{62} PIP M-11-6252, C.A. 2

{63} PIP O-10-11050, C.A. 23

{64} PIP G-11-1389, C.A. 11

{65} PIP C-11-4972, C.A. 1

{66} PIP G-11-1352, C.A. 6

{67} PIP G-12-0276, C.A. 2

{68} PIP G-12-1158, C.A. 2, 4, and 7

{69} PIP C-12-3794, C.A. 4

{70} PIP G-12-1057, C.A. 3

{71} PIP G-10-0955

{72} PIP G-13-0488

{73} PIP M-13-7757

{74} PIP G-13-1838

{75} PIP G-13-1461, C.A. 19

{76} PIP M-12-2339, C.A. 34

{77} IER L1-13-10

{78} IER L1-11-14

Form 703-5. Procedure Process Record For Standard Procedures

(R08-10)

Duke Energy
PROCEDURE PROCESS RECORD
FOR STANDARD PROCEDURES

(1) ID No. SR/**0**/A/2000/003
Revision No. 3

PREPARATION

(2) Procedure Title **Activation of the Emergency Operations Facility**

(3) Prepared By* Ernestine M. Kuhr Date August 26, 2014

(4)	Applicable To:	☒ ONS	☒ MNS	☒ CNS
(5)	Requires NSD 228 Applicability Determination	☒ Yes ☐ No YES = New procedure or reissue with major changes - Attach NSD 228 documentation NO = Reissue with minor changes	☒ Yes ☐ No	☒ Yes ☐ No
(6)	Site Contact	Donald A. Crowl	Randy Gibson	Gary Mitchell
	Reviewed	By* Donald A. Crowl (QR) (KI) ***Signature pages attached*** Date Sept 18, 2014	By* Randy Gibson (QR) (KI) ***Signature pages attached*** Date 9/9/14	By* G L Mitchell (QR) (KI) ***Signature pages attached*** Date 9/18/14
	Cross-Disciplinary Review	By*_____(QR) (KI) _____ Date _____	By* NA RG (QR) (KI) _____ Date 9/9/14	By*_____(QR) (KI) _____ Date _____
	Reactivity Mgmt. Review (QR)	By*_____ _____ Date _____	By* NA RG _____ Date 9/9/14	By*_____ _____ Date _____
	Mgmt. Involvement Review (Ops.Supt.)	By*_____ _____ Date _____	By* NA RG _____ Date 9/9/14	By*_____ _____ Date _____
(7)	Additional Reviews	By*_____ (QA) _____ Date _____ By*_____ _____ Date _____	By*_____ (QA) _____ Date _____ By*_____ _____ Date _____	By*_____ (QA) _____ Date _____ By*_____ _____ Date _____
(8)	Approved	By* Patrick M. Street ***Signature pages attached*** Date 09/30/14	By* Kevin L. Murray ***Signature pages attached*** Date 10-2-14	By* Tom Arlow ***Signature pages attached*** Date 10/2/14
(9)	Level of Use	**Reference Use**		

PERFORMANCE (***Compare with Control Copy every 14 calendar days while work is being performed.***)

(10) Compared with Control Copy* _____ Date _____
Compared with Control Copy* _____ Date _____
Compared with Control Copy* _____ Date _____

(11) Date(s) Performed _____
Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification:

☐ Yes ☐ NA Checklists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?
☐ Yes ☐ NA Required enclosures attached?
☐ Yes ☐ NA Charts, graphs, data sheets, etc., attached, dated, identified, and marked?
☐ Yes ☐ NA Calibrated Test Equipment, if used, checked out/in and referenced to this procedure?
☐ Yes ☐ NA Procedure requirements met?

Verified By* _____ Date _____

(13) Procedure Completion Approved* _____ Date _____

(14) Remarks (*Attach additional pages, if necessary*)

* *Printed Name and Signature*

Form 703-5. Procedure Process Record For Standard Procedures

(R08-10)

Duke Energy
PROCEDURE PROCESS RECORD
FOR STANDARD PROCEDURES

(1) ID No. SR/0/A/2000/003
Revision No. 3

PREPARATION

(2) Procedure Title **Activation of the Emergency Operations Facility**

(3) Prepared By* Emestine M. Kuhr Date August 26, 2014

(4)	Applicable To:	☒ ONS	☒ MNS	☒ CNS
(5)	Requires NSD 228 Applicability Determination	☒ Yes ☐ No YES = New procedure or reissue with major changes - Attach NSD 228 documentation NO = Reissue with minor changes	☒ Yes ☐ No	☒ Yes ☐ No
(6)	Site Contact	Donald A. Crowl		Gary Mitchell
	Reviewed	By* (QR) (KI) Sept 18, 2014 Date	By* (QR) (KI) Date	By* (QR) (KI) Date
	Cross-Disciplinary Review	By* (QR) (KI) Date	By* (QR) (KI) Date	By* (QR) (KI) Date
	Reactivity Mgmt. Review (QR)	By* Date	By* Date	By* Date
	Mgmt. Involvement Review (Ops.Supt.)	By* Date	By* Date	By* Date
(7)	Additional Reviews	By* (QA) Date By* Date	By* (QA) Date By* Date	By* (QA) Date By* Date
(8)	Approved	By* Date 9/30/14	By* Date	By* Date
(9)	Level of Use	**Reference Use**		

PERFORMANCE (***Compare with Control Copy every 14 calendar days while work is being performed.***)

(10) Compared with Control Copy* Date
Compared with Control Copy* Date
Compared with Control Copy* Date

(11) Date(s) Performed
Work Order Number (WO#)

COMPLETION

(12) Procedure Completion Verification:

☐ Yes ☐ NA Checklists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?
☐ Yes ☐ NA Required enclosures attached?
☐ Yes ☐ NA Charts, graphs, data sheets, etc., attached, dated, identified, and marked?
☐ Yes ☐ NA Calibrated Test Equipment, if used, checked out/in and referenced to this procedure?
☐ Yes ☐ NA Procedure requirements met?

Verified By* Date

(13) Procedure Completion Approved* Date

(14) Remarks (*Attach additional pages, if necessary*)

* *Printed Name and Signature*

APPENDIX C. APPLICABILITY DETERMINATION

PART I – ACTIVITY DESCRIPTION

DUKE ENERGY CAROLINAS, LLC SITE			UNIT(S)		
☒ Oconee	☐ McGuire	☐ Catawba	☐ Unit 1	☐ Unit 2	☐ Unit 3

ACTIVITY TITLE/DOCUMENT/REVISION: SR/O/A/2000/003 Rev 003

Activation of the Emergency Operations Facility

PART II – PROCESS REVIEW

For each activity, address all of the questions below. If the answer is "YES" for any portion of the activity, apply the identified process(es) to that portion of the activity. Note: It is not unusual to have more than one process apply to a given activity.

Will implementation of the above activity require a change to the:

1.	Technical Specifications (TS) or Operating License?	☒ NO	☐ YES	If YES, process as a license amendment per NSD 227.
2.	Quality Assurance Topical?	☒ NO	☐ YES	If YES, seek assistance from Independent Nuclear Oversight.
3.	Security Plans? (See Appendix H)	☒ NO	☐ YES	If YES, process per the Nuclear Security Manual.
4.	Emergency Plan?	☐ NO	☒ YES	If YES, process per the Emergency Planning Functional Area Manual.
5.	Inservice Testing Program Plan?	☒ NO	☐ YES	If YES, process per site IST Program for ASME code compliance and related facility changes.
6.	Inservice Inspection Program Plan?	☒ NO	☐ YES	If YES, process per Materials, Metallurgy and Piping Inservice Inspection FAM for ASME code compliance and related facility or procedure changes.
7.	Fire Protection Program Plan?	☒ NO	☐ YES	If YES, evaluate activity in accordance with NSD 320.
	7a -Utilize Appendix E to address Fire Protection Program Plan Impact.		☐	Check to confirm use of Appendix E Screening Questions.
8.	Regulatory Commitments?	☒ NO	☐ YES	If YES, process per NSD 214.
9.	Code of Federal Regulations?	☒ NO	☐ YES	If YES, contact the Regulatory Affairs group.
10.	Programs and manuals listed in the Administrative Section of the TS?	☒ NO	☐ YES	If YES, contact the Regulatory Affairs group.

PART IIIa - 10 CFR 72.48 APPLICABILITY

For each activity, address the question below. If the answer to question 11 is "YES," and questions 14 and 17 are answered "NO", then process the activity per NSD 211 - 10 CFR 72.48 does apply.

11.	Does the activity involve SSCs, procedures or conduct tests or experiments that support/impact the loading or transport of the canister/cask to the ISFSI, the ISFSI facility, spent fuel cask design?	☒ NO	☐ YES

PART IIIb – 10 CFR 50.59 APPLICABILITY

For each activity, address all of the questions below. If the answer to question 18 is "YES," then 10 CFR 50.59 does not apply. If the answer to questions 18 is "NO," then process the activity per NSD 209 – 10 CFR 50.59 applies.

12.	Does the activity involve a procedure, governed by NSD 703 that has been excluded from the 10 CFR 50.59 process per NSD 703 and the exclusion status remains valid?	☒ NO	☐ YES
13.	Does the activity involve an administrative procedure governed by NSD 100 or AD-DC-ALL-0201 that does not contain information regarding the operation and control of Structures, Systems and Components?	☒ NO	☐ YES
14.	Does the activity involve a type of Engineering Change that NSD 301 excludes from the 10 CFR 50.59 and/or 10 CFR 72.48 Processes? Consult NSD 301 for assistance.	☒ NO	☐ YES
15.	Does the activity involve (a) maintenance activities that restore SSCs to their as-designed condition (including activities that implement approved design changes) or (b) temporary alterations supporting maintenance that will be in effect during at-power operations for 90 days or less?	☒ NO	☐ YES
16.	Does the activity involve a UFSAR modification that NSD 220 excludes from the 10 CFR 50.59 Process? Consult NSD 220 for assistance.	☒ NO	☐ YES
17.	Does the activity involve NRC and/or Duke Energy Carolinas, LLC approved changes to the licensing basis?	☒ NO	☐ YES
18.	Are ALL aspects of the activity bounded by one or more "YES" answers to questions 1 through 17, above?	☐ NO	☒ YES

PART IV - UFSAR REVIEW

19.	Does the activity require a modification, deletion, or addition to the UFSAR to satisfy the UFSAR content requirements of 10 CFR 50.34 (b), 10 CFR 50.71 (e), or Regulatory Guide (RG) 1.70? Consult NSD 220 for Assistance. IF YES, process per NSD 220.	☒ NO	☐ YES

PART V – SIGNOFF

(Print Name) Donald A. Crowl (Sign) [signature] DATE Sept 18, 2014

Applicability Determination Preparer

§50.54(q) Screening Evaluation Form

Activity Description and References: SR/0/A/2000/003, Activation of the Emergency Operations Facility, Revision 3 - Part 1	**BLOCK 1**

The following changes are editorial changes that do not change the intent, purpose, or order of the procedures steps:

Global change

1. Changed "Duke" to Duke Energy." {ERONS project markup} This impacts the following steps:
   - Enclosure 6.1, EOF Director/Assistant EOF Director, Page 10 of 14, first bullet
   - Enclosures 6.2, 6.3, and 6.4, Catawba, McGuire, and Oconee Offsite Protective Actions, Note before **IF AT ANY TIME** step.
   - Enclosure 6.6 Radiological Assessment Manager Checklist, Page 4 of 4, Note before sixth sign-off step.
   - Enclosure 6.16, Emergency Planner Checklist, Page 2 of 12, seventh sign-off step
   - Enclosure 6.16, Emergency Planner Checklist, Page 8 of 12, table title
   - Enclosure 6.21, Oconee Recovery Guidelines, Page 1 of 2, Steps 1.2 and 1.8
   - Enclosure 6.22, Keowee Hydro Dam/Dikes - Condition A/B Descriptions, Pages 1 and 2 of 2
   - Enclosure 6.24, EOF Briefing Guide, Page 2 of 2, Item 8, third bullet

Procedure Body

2. Step 3.4 - Added {IER L1-13-10} to flag this step as an INPO commitment. {DocuTracks NGO-2014-000087 from PIP C-14-0621}

Enclosure 6.1, EOF Director/Assistant EOF Director

3. Page 7 of 14 - Updated offsite agency titles from Emergency Preparedness (EP) to Emergency Management (EM). {Feedback from Oconee July 15, 2014, drill and McGuire July 29, 2014 drill}
4. Page 11 of 14 last bullet - Corrected procedure number from SR/0/B/2000/004 to SR/0/A/2000/004 {ERONS project markup}

Enclosure 6.10, EOF Offsite Agency Communicator Checklist

5. Page 1 of 1 fifth sign-off step - Added {IER L1-13-10} to flag this step as an INPO commitment. {DocuTracks NGO-2014-000087 from PIP C-14-0621}
6. Page 1 of 1 seventh sign-off step - Corrected procedure number from SR/0/B/2000/004 to SR/0/A/2000/004 {ERONS project markup}

Enclosure 6.16, Emergency Planner Checklist

7. Pages 5 of 12 and 7 of 12 - Moved 24-hour staffing data for EOF Data Coordinator from Page 5 to Page 7 as EOF Data Coordinator is not located in Accident Assessment Room. {DocuTracks NGO-2014-000108 from 7/29/14 McGuire Drill Critique}

Enclosure 6.19, EOF Services Manager Checklist

8. Page 2 of 3 first sign-off step sixth bullet - Added {IER L1-13-10} to flag this step as an INPO commitment. {DocuTracks NGO-2014-000087 from PIP C-14-0621}

Enclosure 6.28, Commitments for SR/0/A/2000/003
9. Added IER L1-13-10 to the list of commitments.
10. Added IER L1-11-14 to the list of commitments.

Activity Scope: BLOCK 2

☐ The activity is a *change* to the *emergency plan*

☒ The activity is not a *change* to the *emergency plan*

Change Type: BLOCK 3

☐ The change is editorial or typographical
☐ The change is not editorial or typographical

Not Applicable

Change Type: BLOCK 4

☐ The change does conform to an activity that has prior approval
☐ The change does not conform to an activity that has prior approval

Not Applicable

Planning Standard Impact Determination: BLOCK 5

☐ §50.47(b)(1) – Assignment of Responsibility (Organization Control)
☐ §50.47(b)(2) – Onsite Emergency Organization
☐ §50.47(b)(3) – Emergency Response Support and Resources
☐ **§50.47(b)(4) – Emergency Classification System***
☐ **§50.47(b)(5) – Notification Methods and Procedures***
☐ §50.47(b)(6) – Emergency Communications
☐ §50.47(b)(7) – Public Education and Information
☐ §50.47(b)(8) – Emergency Facility and Equipment
☐ **§50.47(b)(9) – Accident Assessment***
☐ **§50.47(b)(10) – Protective Response***
☐ §50.47(b)(11) – Radiological Exposure Control
☐ §50.47(b)(12) – Medical and Public Health Support
☐ §50.47(b)(13) – Recovery Planning and Post-accident Operations
☐ §50.47(b)(14) – Drills and Exercises
☐ §50.47(b)(15) – Emergency Responder Training
☐ §50.47(b)(16) – Emergency Plan Maintenance

***Risk Significant Planning Standards**

☒ The proposed activity does not impact a Planning Standard

These are minor changes. They are editorial changes that do not change the intent, purpose, or order of the procedures steps and thus do not impact the Planning Standards.

Commitment Impact Determination: BLOCK 6

☐ The activity does involve a site specific EP commitment
Record the commitment or commitment reference: _____

☒ The activity does not involve a site specific EP commitment

Emergency Plan sections reviewed:
- Catawba Emergency Plan Revision 14-3 Sections A.1, A.4. B.3, B.4, B.5, B.6, B.7, and H.2
- McGuire Emergency Plan Revision 14-1 Sections A.1, A.4, B.3, B.4, B.5, B.6, B.7, and H.2
- Oconee Emergency Plan Revision 2014-01 Sections A.1, A.4. B.4, B.5, B.6, B.7, and H.2

Screening Evaluation Results: BLOCK 7		
☒ The activity can be implemented without performing a §50.54(q) effectiveness evaluation ☐ The activity cannot be implemented without performing a §50.54(q) effectiveness evaluation		
Preparer Name: Ernestine M. Kuhr	Preparer Signature Ernestine M Kuhr	Date: August 25, 2014
Reviewer Name: Donald A. Crowl	Reviewer Signature Donald A Crowl	Date: Sept 18, 2014

§50.54(q) Screening Evaluation Form

Activity Description and References: SR/0/A/2000/003, Activation of the Emergency Operations Facility, Revision 2 Part 2 — BLOCK 1

The following changes are more than editorial but do not impact an Emergency Planning Standard.

Enclosure 6.1, EOF Director/Assistant EOF Director

1. Page 3 of 14 third sign-off step - Added, "Each EOF functional area should perform a Take a Minute in its work area." {DocuTracks NGO-2014-000109 from 7/29/14 McGuire Drill Critique}

Enclosure 6.16, Emergency Planner Checklist

2. Page 2 of 12 - Added new sign-off step to require Emergency Planner forward a copy of the EOF Drill/Event Participation Form to each DEC site's Emergency Preparedness Manager. {PIP C-13-7354 CA#2}

Activity Scope: — BLOCK 2

☐ The activity is a *change* to the *emergency plan*

☒ The activity is not a *change* to the *emergency plan*

Change Type: — BLOCK 3

☐ The change is editorial or typographical

☐ The change is not editorial or typographical

Not Applicable

Change Type: — BLOCK 4

☐ The change does conform to an activity that has prior approval

☐ The change does not conform to an activity that has prior approval

Not Applicable

Planning Standard Impact Determination: — BLOCK 5

☐ §50.47(b)(1) – Assignment of Responsibility (Organization Control)
☐ §50.47(b)(2) – Onsite Emergency Organization
☐ §50.47(b)(3) – Emergency Response Support and Resources
☐ **§50.47(b)(4) – Emergency Classification System***
☐ **§50.47(b)(5) – Notification Methods and Procedures***
☐ §50.47(b)(6) – Emergency Communications
☐ §50.47(b)(7) – Public Education and Information
☐ §50.47(b)(8) – Emergency Facility and Equipment
☐ **§50.47(b)(9) – Accident Assessment***
☐ **§50.47(b)(10) – Protective Response***
☐ §50.47(b)(11) – Radiological Exposure Control
☐ §50.47(b)(12) – Medical and Public Health Support
☐ §50.47(b)(13) – Recovery Planning and Post-accident Operations
☐ §50.47(b)(14) – Drills and Exercises
☐ §50.47(b)(15) – Emergency Responder Training
☐ §50.47(b)(16) – Emergency Plan Maintenance

***Risk Significant Planning Standards**

☒ The proposed activity does not impact a Planning Standard

- Change 1 is related to facility briefings which are not related to a specific Planning Standard. This change added a reminder to the EOF staff about using the Core 4 "Take A Minute" tool.
- Change 2 ensures that the EOF Drill/Event Participation Form is provided to all sites that count EOF DEP

opportunities and common EOF drill participation in their NRC performance indicators (PI). This form is only used for NRC PI documentation and is separate from the form used to document drill participation for training records to support PS 15. NRC PIs are not addressed in the 16 Planning Standards.

Commitment Impact Determination: BLOCK 6

☐ The activity does involve a site specific EP commitment
Record the commitment or commitment reference: _____

☒ The activity does not involve a site specific EP commitment

Emergency Plan sections reviewed:

- Catawba Emergency Plan Revision 14-3 Sections A.1, A.4, B.3, B.4, B.5, B.6, B.7, and H.2
- McGuire Emergency Plan Revision 14-1 Sections A.1, A.4, B.3, B.4, B.5, B.6, B.7, and H.2
- Oconee Emergency Plan Revision 2014-01 Sections A.1, A.4, B.5, B.6, B.7, and H.2

Screening Evaluation Results: BLOCK 7

☒ The activity can be implemented without performing a §50.54(q) effectiveness evaluation
☐ The activity cannot be implemented without performing a §50.54(q) effectiveness evaluation

Preparer Name:	Preparer Signature	Date:
Ernestine M. Kuhr	Ernestine M. Kuhr	August 28, 2014
Reviewer Name:	**Reviewer Signature**	**Date:**
Donald A. Crowl		Sept 18, 2014

§50.54(q) Screening Evaluation Form

Activity Description and References: SR/0/A/2000/003, Activation of the Emergency Operations Facility, Revision 3 - Part 3 BLOCK 1

The following changes are more than editorial, impact planning standards and need to be screened and evaluated.

Procedure Body
1. Step 3.1.4 - Replaced "pager" with "cell phone." {ERONS project}

Enclosure 6.1, EOF Director/Assistant EOF Director
2. Page 2 of 14 last sign-off step - Deleted step about calling an ERO member from Fleet Security to act as a security liaison. {PIP G-14-1555 CA#2 and DocuTracks NGO-2014-000096}

Enclosure 6.2, Catawba Offsite Protective Actions
3. Page 3 of 8 - Added new Note 2 before **IF AT ANY TIME** step to provide guidance on how to handle wind directions displayed as greater than 360 degrees. {DocuTracks NGO-2014-000048}

Enclosure 6.12, Accident Assessment Manager Checklist
4. Page 1 of 3 - Added new sign-off step to assign responsibility for maintaining the Fission Product Barrier Status Board to the Accident Assessment Manager. {DocuTracks NGO-2014-000109 from 7/29/14 McGuire Drill Critique}

Enclosure 6.13, Accident Assessment Interface Checklist
5. Page 1 of 5 - Deleted second sign-off step that required them to obtain copy of EOF Accident Assessment Reference Guide and Emergency Operating Procedures from Nuclear Engineering Office Area. {PIPs M-14-6828 and M-14-6835}

Enclosure 6.16, Emergency Planner Checklist
6. Page 1 of 12 seventh sign-off step - Clarified process for contacting the ECOC directors by phoning the Enterprise Security Console. {Enhancement from Oconee July 15, 2014, drill critique}
7. Page 2 of 12 sixth sign-off step - Revised to have Emergency Planner contact the JIC Admin. Manager to verify Public Affairs personnel have considered 24 hour staffing. {DocuTracks NGO-2014-000066}

Enclosure 6.19 EOF Services Manager Checklist
8. Page 2 of 3 first sign-off step first bullet - Replaced "pager" with "cell phone." {ERONS project}
9. Page 2 of 3 first sign-off step - Added new third bullet to have EOF Services Manager request Transportation Services or others to arrange necessary equipment and personnel for debris removal in order to access the DEC nuclear sites. {PIP C-11-0687 CA# 98 and IER L1-11-14}

Activity Scope: BLOCK 2

☐ The activity is a *change* to the *emergency plan*

☒ The activity is not a *change* to the *emergency plan*

Change Type: BLOCK 3	**Change Type:** BLOCK 4
☐ The change is editorial or typographical ☐ The change is not editorial or typographical **Not Applicable**	☐ The change does conform to an activity that has prior approval ☐ The change does not conform to an activity that has prior approval **Not Applicable**

Planning Standard Impact Determination: BLOCK 5

- ☒ §50.47(b)(1) – Assignment of Responsibility (Organization Control)) - Change 2 (Coordination with Offsite Response Organizations (ICP)) and Changes 1, 6 and 7 (Continuous Staffing and Shift Relief)
- ☐ §50.47(b)(2) – Onsite Emergency Organization
- ☒ §50.47(b)(3) – Emergency Response Support and Resources - Change 9 (Contact and Use of External Support Services)
- ☐ **§50.47(b)(4) – Emergency Classification System***
- ☒ **§50.47(b)(5) – Notification Methods and Procedures*** - Changes 1 and 8 (ERO Notification)
- ☐ §50.47(b)(6) – Emergency Communications
- ☐ §50.47(b)(7) – Public Education and Information
- ☒ §50.47(b)(8) – Emergency Facility and Equipment- Change 4 (Facility Information Display Systems) and Change 5 (Facility/Work Area Setup)
- ☐ **§50.47(b)(9) – Accident Assessment***
- ☒ **§50.47(b)(10) – Protective Response*** Change 3 (Offsite Protective Action Recommendations)
- ☐ §50.47(b)(11) – Radiological Exposure Control
- ☐ §50.47(b)(12) – Medical and Public Health Support
- ☐ §50.47(b)(13) – Recovery Planning and Post-accident Operations
- ☐ §50.47(b)(14) – Drills and Exercises
- ☐ §50.47(b)(15) – Emergency Responder Training
- ☐ §50.47(b)(16) – Emergency Plan Maintenance

***Risk Significant Planning Standards**

☐ The proposed activity does not impact a Planning Standard

Commitment Impact Determination: BLOCK 6

☐ The activity does involve a site specific EP commitment
Record the commitment or commitment reference: _____

☐ The activity does not involve a site specific EP commitment

Not Required if the change impacts a planning standard

Screening Evaluation Results: BLOCK 7

☐ The activity can be implemented without performing a §50.54(q) effectiveness evaluation
☒ The activity cannot be implemented without performing a §50.54(q) effectiveness evaluation

Preparer Name:	Preparer Signature	Date:
Ernestine M. Kuhr	Ernestine M. Kuhr	August 26, 2014
Reviewer Name:	**Reviewer Signature**	**Date:**
Donald A. Crowl		Sept 18, 2014

§50.54(q) Effectiveness Evaluation Form

Activity Description and References: SR/0/A/2000/003, Activation of the Emergency Operations Facility, Revision 3 BLOCK 1

Procedure Body
1. Step 3.1.4 - Replaced "pager" with "cell phone." {ERONS project}

Enclosure 6.1, EOF Director/Assistant EOF Director
2. Page 2 of 14 last sign-off step - Deleted step about calling an ERO member from Fleet Security to act as a security liaison. {PIP G-14-1555 CA#2 and DocuTracks NGO-2014-000096}

Enclosure 6.2, Catawba Offsite Protective Actions
3. Page 3 of 8 - Added new Note 2 before **IF AT ANY TIME** step to provide guidance on how to handle wind directions displayed as greater than 360 degrees. {DocuTracks NGO-2014-000048}

Enclosure 6.12, Accident Assessment Manager Checklist
4. Page 1 of 3 - Added new sign-off step to assign responsibility for maintaining the Fission Product Barrier Status Board to the Accident Assessment Manager. {DocuTracks NGO-2014-000109 from 7/29/14 McGuire Drill Critique}

Enclosure 6.13, Accident Assessment Interface Checklist
5. Page 1 of 5 - Deleted second sign-off step that required Accident Assessment Interface to obtain copy of EOF Accident Assessment Reference Guide and Emergency Operating Procedures from Nuclear Engineering Office Area. {PIPs M-14-6828 and M-14-6835}

Enclosure 6.16, Emergency Planner Checklist
6. Page 1 of 12 seventh sign-off step - Clarified process for contacting the ECOC directors by phoning the Enterprise Security Console. {Enhancement from Oconee July 15, 2014, drill critique}
7. Page 2 of 12 sixth sign-off step - Revised to have Emergency Planner contact the JIC Admin. Manager to verify Public Affairs personnel have considered 24 hour staffing. {DocuTracks NGO-2014-000066}

Enclosure 6.19 EOF Services Manager Checklist
8. Page 2 of 3 first sign-off step first bullet - Replaced "pager" with "cell phone." {ERONS project}
9. Page 2 of 3 first sign-off step - Added new third bullet to have EOF Services Manager request Transportation Services or others to arrange necessary equipment and personnel for debris removal in order to access the DEC nuclear sites. {PIP C-11-0687 CA# 98 and IER L1-11-14}

Activity Type: BLOCK 2

☐ The activity is a *change* to the *emergency plan*
☒ The activity affects implementation of the *emergency plan*, but is not a *change* to the *emergency plan*
The ERONS project changes to the site Emergency Plans are being evaluated separately. This procedure revision supports those changes.

Impact and Licensing Basis Determination: BLOCK 3

1. *[list of functions, elements and/or commitments impacted by the activity (organized by planning standard as applicable)]*

   Change 1: Impacts PS §50.47(b)(1) - "Assignment of Responsibility (Organization Control)," EP Function - Continuous Staffing and Shift Relief, and §50.47(b)(5) – Notification Methods and Procedures, EP Function - ERO Notification

   Change 2: Impacts PS §50.47(b)(1) –Assignment of Responsibility (Organization Control), "Responsibility

for Emergency Response is assigned," EP Function - Coordination with Offsite Response Agencies (ICP)

Change 3: [CNS Only] Impacts RSPS §50.47(b)(10) – Protective Response, EP Function - Offsite Protective Action Recommendations

Change 4 - Impacts PS §50.47(b)(8) Emergency Facility and Equipment, "Adequate equipment is maintained to support emergency response," EP Function - Facility Information Display Systems.

Change 5 - Impacts PS §50.47(b)(8) Emergency Facility and Equipment, "Adequate equipment is maintained to support emergency response," EP Function - Facility/Work Area Setup

Change 6: Impacts PS §50.47(b)(1) - "Assignment of Responsibility (Organization Control)," EP Function - Continuous Staffing and Shift Relief

Change 7: Impacts PS §50.47(b)(1) - "Assignment of Responsibility (Organization Control)," EP Function - Continuous Staffing and Shift Relief

Change 8 Impacts PS §50.47(b)(5) – Notification Methods and Procedures, EP Function - ERO Notification

Change 9: Impacts PS §50.47(b)(3) – Emergency Response Support and Resources, EP Function - Contact and Use of External Support Services

Licensing Basis:

Change 1: Licensing Basis - Catawba Emergency Plan Revision 14-3 Sections A.1.b and E.2, McGuire Emergency Plan Revision 14-1 Sections A.1.b and E.2, Oconee Emergency Plan Revision 2014-01 Sections A.1.e and E.1&E.2 ***NOTE: The Emergency Plans currently refer to pagers. The ERONS project changes to the site Emergency Plans are being evaluated separately. This procedure revision is a directly impacted procedure being revised to support those changes.***

Change 2: Licensing Basis - Catawba Emergency Plan Revision 14-3 Sections A.1 and A.4, McGuire Emergency Plan Revision 14-1, Sections A.1 and A.4, and Oconee Emergency Plan Revision 2014-01 Sections A.1 and A.4

Change 3: [CNS Only] Licensing Basis - Catawba Emergency Plan Revision 14-3 Section J.7 and Figure J-2.

Change 4: Licensing Basis Catawba Emergency Plan Revision 14-3 Section H.2, McGuire Emergency Plan Revision 14-1 Section H.2, Oconee Emergency Plan Revision 2014-01 Section H-2.

Change 5: Licensing Basis Catawba Emergency Plan Revision 14-3 Section H.2, McGuire Emergency Plan Revision 14-1 Section H.2, Oconee Emergency Plan Revision 2014-01 Section H-2.

Change 6: Licensing Basis - Catawba Emergency Plan Revision 14-3 Section A.4, McGuire Emergency Plan Revision 14-1, Section A.4, and Oconee Emergency Plan Revision 2014-01 Section A.4

Change 7: Licensing Basis - Catawba Emergency Plan Revision 14-3 Section A.4, McGuire Emergency Plan Revision 14-1, Section A.4, and Oconee Emergency Plan Revision 2014-01 Section A.4

Change 8 Licensing Basis - Catawba Emergency Plan Revision 14-3 Section E.2, McGuire Emergency Plan Revision 14-1 Section E.2, Oconee Emergency Plan Revision 2014-01 Section E.1&E.2 ***NOTE: The Emergency Plans currently refer to pagers. The ERONS project changes to the site Emergency Plans are being evaluated separately. This procedure revision supports those changes.***

Change 9: Catawba Emergency Plan Revision 14-3 Sections A.1 and C.4, McGuire Emergency Plan Revision 14-1, Sections A.1 and C.4, Oconee Emergency Plan Revision 2014-01 Sections A.1, A.4, and C.4

Compliance Evaluation and Conclusion: BLOCK 4

1. Evaluation:
Changes 1 and 8 replaced "pager" with "cell phone." {ERONS project} The applicable PS are §50.47(b)(1) - "Assignment of Responsibility (Organization Control)," EP Function - Continuous Staffing and Shift Relief, and §50.47(b)(5) – Notification Methods and Procedures, EP Function - ERO Notification

Changes 1 and 8 Evaluation - These changes update the method used to contact additional ERO members to support the emergency or for 24-hour staffing coverage. SR/0/A/2000/003 does **NOT** provide instructions for initial ERO activation. The regulations and associated guidance require the capability to notify ERO members but do not specify a specific method to used. The capability to notify ERO members to obtain additional resources and establish 24 hour staffing is being maintained, although with a different technology (cell phone instead of pager). Telecommunications will be the contact for correcting cell phone issues going forward, similar to their prior support for pagers.

Conclusion:
The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Change 2 deleted the step to call an ERO member from Fleet Security to act as a security liaison. The applicable PS is §50.47(b)(1) –Assignment of Responsibility (Organization Control), " Responsibility for Emergency Response is assigned," EP Function - Coordination with Offsite Response Agencies (ICP).

Change 2 Evaluation - The function of EOF Incident Command Post (ICP) liaison is not required by regulations or guidance. Deletion of this position does not affect the capability of the site to interact with local law enforcement personnel at the ICP. This step, added in Revision 2 to provide a Security liaison to serve as a communication link between the EOF and the Incident Command Post (ICP) during a HAB event, is being removed. That change in Revision 2 was implemented without the knowledge or concurrence of the affected organization, Fleet Security. This step is being deleted as an interim corrective action for PIP G-14-1555 CA#2, until both Fleet Security and Fleet EP agree on the roles and responsibilities of the EOF Security Liaison, its interface with security positions currently staffed in the site TSCs and ICPs is determined, and the changes to the EOF and site ICP procedures are coordinated.

Conclusion:

The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

[CNS] Change 3: Added a new note to the Catawba Offsite Protective Actions enclosure to provide guidance on how to handle wind directions displayed as greater than 360 degrees. The associated RSPS is §50.47(b)(10) – Protective Response, EP Function - Offsite Protective Action Recommendations

Change 3 Evaluation - This step ensures the correct wind direction is used in determining public protective actions at Catawba. This is required to comply with the regulation.

Conclusion:

The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Change 4 - Assigned responsibility for maintaining the Fission Product Barrier Status Board to the Accident Assessment Manager. The PS is §50.47(b)(8) Emergency Facility and Equipment, "Adequate equipment is maintained to support emergency response," - EP Function Facility Information Display

Systems.

Change 4 Evaluation - The Fission Product Barrier Status Board is currently in the EOF, but the responsibility for maintaining it was not clearly assigned. NUREG-0696 states, "Facilities shall be provided in the EOF for the ...display...of data pertinent to determine offsite protective measures." Having the capability to display Fission Product Barrier Status supports that determination. Clearly assigning responsibility for maintaining the status board ensures compliance with the regulation and guidance.

Conclusion:
The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Change 5 - Deleted the required to obtain the EOF Accident Assessment Reference Guide and Emergency Operating Procedures from Nuclear Engineering Office Area. The associated PS is §50.47(b)(8) Emergency Facility and Equipment, "Adequate equipment is maintained to support emergency response, " Facility Work Area Setup. NUREG-0696 states that the EOF shall have ready access to up-to-date plant procedures, including Emergency Operating Procedures.

Change 5 Evaluation - EOF Accident Assessment personnel have stated that the EOF Accident Assessment Reference Guide is no longer needed. The Emergency Operating Procedures kept in the Nuclear Engineering Office Area are not Control Copies, but Information Only copies. Control Copies of Emergency Operating Procedures are available electronically and no longer have to be brought to the EOF. This change ensures that the most current revision of the Emergency Operating Procedures will be used.

Conclusion:
The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Change 6 - Clarified the process for contacting the ECOC Directors by phoning the Enterprise Security Console. The associated PS §50.47(b)(1) - "Assignment of Responsibility (Organization Control)," EP Function - Continuous Staffing and Shift Relief.

Change 6 Evaluation - The ECOC Directors are a pathway to obtaining additional resources from non-nuclear portions of Duke Energy. This change is being made to ensure the EOF Emergency Planner can contact them in an emergency.

Conclusion:
The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Change 7 - Revised to have Emergency Planner contact the JIC Admin. Manager to verify Public Affairs personnel have considered 24 hour staffing. The associated PS §50.47(b)(1) - "Assignment of Responsibility (Organization Control)," EP Function - Continuous Staffing and Shift Relief.

Change 7 Evaluation - This change provides a specific person to contact in the Public Affairs emergency response organization to verify their consideration of 24 hour staffing. This change ensures that the EOF Director, who is responsible for assuring continuity of resources for continuous operations, gets accurate information to ensure this requirement is met.

Conclusion:
The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Change 9 - Added action to have EOF Services Manager request Transportation Services or others to arrange necessary equipment and personnel for debris removal in order to access the DEC nuclear sites. The applicable PS is §50.47(b)(3) – Emergency Response Support and Resources, EP Function - Contact and Use of External Support Services

Change 9 Evaluation - The EOF Services Manager checklist already had a step to request Transportation Services arrange for necessary equipment for needs for movement of materials and personnel. This adds an additional responsibility to contact this group for assistance for debris removal to address a Beyond Design Basis External Event. The EOF will continue to have the ability to contact and use external support services for these functions.

Conclusion:

The proposed activity ☒ does / ☐ does not continue to comply with the requirements.

Reduction in Effectiveness (RIE) Evaluation and Conclusion: BLOCK 5

1. Evaluation:

Changes 1 and 8 - Replaced "pager" with "cell phone." {ERONS project}

Changes 1 and 8 Evaluation - This updates the method used to contact additional ERO members to support the emergency or for 24-hour staffing coverage. SR/0/A/2000/003 does **NOT** provide instructions for initial ERO activation. Pagers were one method to contact ERO members, along with home and office telephone numbers. The ability to communicate with ERO members is being maintained with a different technology (cell phone instead of pager). Cell phones provide two means of two way communications (text message and voice). This is considered an enhancement. Telecommunications will be the contact for correcting cell phone issues going forward, similar to their prior support for pagers.

The proposed activity ☐ does / ☒ does not constitute a RIE.

Change 2 deleted the step to call an ERO member from Fleet Security to act as a security liaison.

Change 2 evaluation- This step, added in Revision 2 to provide an EOF/ICP security liaison is being removed. The change in Revision 2 was implemented without the knowledge or concurrence of the affected organization, Fleet Security. This step is being deleted as an interim corrective action for PIP G-14-1555 CA#2, until both Fleet Security and Fleet EP agree on the roles and responsibilities of the EOF Security Liaison, its interface with security positions currently staffed in the site TSCs and ICPs is determined, and the changes to the EOF and site ICP procedures are coordinated. The EOF Incident Command Post (ICP) liaison position is not described in the sites' emergency plans. Deletion of this position does not affect the capability of the site to interact with local law enforcement personnel at the ICP.

The proposed activity ☐ does / ☒ does not constitute a RIE.

[CNS] Change 3: Added new note to the Catawba Offsite Protective Actions enclosure to provide guidance on using wind directions displayed as greater than 360 degrees.

Change 3 Evaluation - This step ensures the correct wind direction is used in determining public protective actions at Catawba Nuclear Station in compliance with the emergency plan.

The proposed activity ☐ does / ☒ does not constitute a RIE.

Change 4 - Assigned responsibility for maintaining the Fission Product Barrier Status Board to the Accident Assessment Manager.

Change 4 Evaluation - The CNS, MNS, and ONS Site Emergency Plans do not specify the method used display information in the EOF. Clearly assigning responsibility for maintaining the status board

is considered an enhancement.

The proposed activity ☐ does / ☒ does not constitute a RIE.

Change 5 - Deleted the required to obtain the EOF Accident Assessment Reference Guide and Emergency Operating Procedures from Nuclear Engineering Office Area. EOF Accident Assessment personnel have stated that the EOF Accident Assessment Reference Guide is no longer needed. Control Copies of Emergency Operating Procedures are available electronically and no longer have to be brought to the EOF.

Change 5 Evaluation - The CNS, MNS, and ONS Site Emergency Plans do not specify how these documents are made available for use in the EOF. This change ensures that the most current revision of the Emergency Operating Procedures will be used and is considered an enhancement.

The proposed activity ☐ does / ☒ does not constitute a RIE.

Change 6 - Clarified the process for contacting the ECOC Directors by phoning the Enterprise Security Console.

Change 6 Evaluation - The ECOC Directors are a pathway to obtaining additional resources from non-nuclear portions of Duke Energy. This change is being made to ensure the EOF Emergency Planner can make contact with them in an emergency and is considered an enhancement.

The proposed activity ☐ does / ☒ does not constitute a RIE.

Change 7 - Revised to have Emergency Planner contact the JIC Admin. Manager to verify Public Affairs personnel have considered 24 hour staffing.

Change 7 Evaluation - This change provides a specific person to contact in the Public Affairs emergency response organization to verify they have considered 24 hour staffing. This change was made so that the EOF Director, who is responsible for assuring continuity of resources for continuous operations, gets accurate information. This is considered an enhancement.

The proposed activity ☐ does / ☒ does not constitute a RIE.

Change 9 - Added action to have EOF Services Manager request Transportation Services or others to arrange necessary equipment and personnel for debris removal in order to access the DEC nuclear sites.

Change 9 Evaluation - The EOF Services Manager checklist already had a step to request Transportation Services arrange for necessary equipment for needs for movement of materials and personnel. This adds an additional responsibility for contacting this group for assistance for debris removal to address a Beyond Design Basis External Event. The EOF will continue to have the ability to contact and use external support services for these functions. This supports the EOF Director in his responsibility to lead the offsite response effort.

Conclusion:

The proposed activity ☐ does / ☒ does not constitute a RIE.

Effectiveness Evaluation Results **BLOCK 6**

☒ The activity does continue to comply with the requirements of §50.47(b) and §50 Appendix E **and** the activity does not constitute a reduction in effectiveness. Therefore, the activity can be implemented without prior approval.

☐ The activity does not continue to comply with the requirements of §50.47(b) and §50 Appendix E **or** the activity does constitute a reduction in effectiveness. Therefore, the activity cannot be implemented without prior approval.

Preparer Name: Ernestine M. Kuhr	Preparer Signature	Date: September 3, 2014
Reviewer Name: Donald M. Crowl	Reviewer Signature	Date: Sept 18 2014
Approver Name: Patrick M Sutton	Approver Signature	Date: 9/30/14