

"TEMPORARY CHANGE"

Three Mile Island Nuclear Station Temporary Change Notice (TCN)

NOTE: Instructions and guidelines in AP1001A must be followed when completing this form

12. TCN No. 1-83-0236 (From TCN Log Index)

13. Implementation Date 11-15-83

SS/SF Signature [Signature]

1. Procedure 1004.29 3 ACTIVATION OF O.S.C.
No. Present Rev No Title

2. Change (include page numbers, paragraph numbers, and exact wording of change. (Attach additional sheets if necessary and provide the generic nature of the change on this sheet.)
 Update entire procedure to reflect new layout and method of operation.
 (NOTE: This TCN cancels TCN 1-83-0225)

3. Reason for Change:
 NRC recommendations and periodic review.

4. Duration of TCN - No longer than ninety days from implementation date of TCN or as in (a) or (b) below whichever occurs first.

(a) TCN will be canceled by a procedure revision issued as a result of a Procedure Change ☒
 Request to be submitted by J. L. Whitehead (Submit PCR as soon as possible)
Individual Submitting TCN

(b) TCN is not valid after _____ ☐
(Fill in circumstances which will result in TCN being cancelled)

5. Is procedure "Important to Safety"? yes ☒ no ☐
 If "Yes" a safety evaluation is required (side 2)

6. Is procedure "Environmental Impact Related"? yes ☐ no ☒
 If "Yes" an environmental impact evaluation is required (side 2)

7. Does the change effect the intent of the original procedure? yes ☐ no ☒

NOTE: If answers to #5, 6 and 7 are "no" the change may be approved by the Shift Supervisor.

NOTE: If answer to #7 is "yes" the change must be reviewed and approved in accordance with Table 2 prior to implementation.

NOTE: If answer to #7 is "no" and answers to #5 or 6 are "yes" change may be either (a) two member reviewed or (b) reviewed and approved in accordance with table 2.

Review Signatures:

8. Change Recommended By: [Signature] Date 11/15/83

9. * Procedure Owner Concurrence: [Signature] Date 11/15/83

* Responsible Technical Reviewer, Responsible Office Department Head, or his Designee may concur if Procedure Owner is unavailable
 * May be by Telecon

10. Tech. Functions Rep. Notified (if reqd.) Not Required [Signature] Date 11/15/83

11. Approval(s):

(a) Two Members of the GPUN Mng. Staff Route

1. _____
Signature Date

2. _____
Signature Date

Within fourteen (14) days: (Approval per AP 1001A must occur)

Signature Date

Signature Date

(b) Normal Route (Per AP1001A):

(use) [Signature] 11/15/83
Signature Date

[Signature] 11/15/83
Signature Date

(ops) [Signature] 11/15/83
Signature Date

(c) SS Approval Only: (This approval only used if answers to questions #5, 6 and 7 are all "No")

SS Signature Date

14. TCN is Cancelled _____
Shift Supervisor & Shift Foreman Date

B401050096 B31228 PDR ADOCK 05000289 PDR

1005
11

"EVALUATION"

Side 2

Three Mile Island Nuclear Station Safety/Environmental Impact Evaluation

TCN No. ☐ - ☐ - ☐ - ☐ - ☐ - ☐

1. Procedure 1004.29 ACTIVATION OF THE O.S.C.

No.

Title

2. Safety Evaluation

Does the attached procedure change:

* (a) increase the probability of occurrence or the consequences of an accident or malfunction of equipment important to safety? yes ☐ no ☒

* (b) create the possibility for an accident or malfunction of a different type than any evaluated previously in the safety analysis report? yes ☐ no ☒

* (c) reduce the margin of safety as defined in the basis for any technical specification? yes ☐ no ☒

Details of Evaluation (Explain why answers to above questions are "no". Attach additional pages if required.)

This change provides additional guidance and clarification and does not have any detrimental impact on safety.

Evaluation By [Signature] Date 11/15/83

* If any of these questions are answered "YES" the change must be reviewed and approved by the NRC prior to implementation.

3. Environmental Impact Evaluation

Does the attached procedure change:

(a) possibly involve a significant environmental impact? yes ☐ no ☒

(If 3(a) is "yes", answer questions (b) and (c) and fill in "Details of Evaluation" below. If no, state why by filling in the "Details of Evaluation" below.)

* (b) have a significant adverse effect on the environment? yes ☐ no ☒

* (c) involve a significant environmental matter or question not previously reviewed and evaluated by the N.R.C. yes ☐ no ☒

Details of Evaluation (Attach additional pages if required)

Evaluation By _____ Date _____

* If any of these questions are answered "YES" the change must be reviewed and approved by the NRC prior to implementation.

4. (1) Normal Approval(s)
(Per AP 1001A)

[Signature] 11/15/83
Signature Date
[Signature] 11/15/83
Signature Date

4. (2) If "Two (2) members of the
GPUN management staff route:

Signature Date
Signature Date

Within fourteen (14) Days
Approval per AP 1001A

Signature Date
Signature Date

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.29
ACTIVATION OF THE OPERATIONS SUPPORT CENTER

1.0 PURPOSE

The purpose of this procedure is to provide guidelines for the Operations Support Center Coordinator to activate the Operations Support Center. The Operations Support Center Coordinator is responsible for implementing this procedure.

2.0 ATTACHMENTS

2.1 Attachment I, Operations Support Center Floor Plan

3.0 EMERGENCY ACTION LEVELS

3.1 This procedure is to be initiated upon declaration of any of the following:

- 3.1.1 Alert as determined by the Alert Procedure, 1004.2.
- 3.1.2 Site Emergency as determined by the Site Emergency procedure 1004.3.
- 3.1.3 General Emergency as determined by the General Emergency procedure, 1004.4.
- 3.1.4 As directed by the Emergency Director.

4.0 EMERGENCY ACTIONS

Initials

4.1 The Operations Support Center Coordinator will activate the OSC by ensuring completion of the following:

- 4.1.1 Announce to the personnel in the OSC area that you are the Operations Support Center Coordinator and fill in your name on the OSC Manning Status Board. Have other coordinators (Rad. Con Coordinator, Chemistry Coordinator, and Emergency Maintenance Coordinator) enter their names on the Status Board and announce themselves as they arrive.
- 4.1.2 Assign a phonetalker to activate Operations Line (M&I Phone Line may be used) and to log all appropriate messages sent and received on the Telephone Communications Logsheet (Attachment III of the Communications and Recordkeeping procedure, 1004.5.
- 4.1.3 Initiate and maintain the OSC log in accordance with Communications and Recordkeeping, procedure 1004.5.

- 4.1.4 Establish access control at the OSC so that all personnel must frisk prior to entering the OSC if radiological problems exist or are expected to exist. Refer to Attachment I for suggested frisking locations.
- 4.1.5 Establish a roster of personnel at the OSC and track teams as they are dispatched and return using the Team Tracking Status Board.
- 4.1.6 As directed by the Operations Coordinator/Radiological Assessment Coordinator implement the following procedures:
- a. Onsite and Offsite Radiological Monitoring.
1004.10
 - b. Search and Rescue
1004.18
 - c. Radiological Controls during Emergencies
1004.9
 - d. Emergency Repair/Operations
1004.21
 - e. Any other procedure as directed by the Radiological Assessment Coordinator/Operations Coordinator.
- 4.1.7 If directed to dispatch monitoring teams, ensure vehicles are available at the processing center. Assign a driver, as needed, to accompany the Rad. Con Technician.
- a. Rad Con, for the Rad Con Van.
 - b. Maintenance, for the I&C Vehicle.
 - c. Other vehicles as needed.
- 4.1.8 If accountability is being conducted, collect all security badges and turn them over to the Site Security Officer who will be dispatched to pick them up.

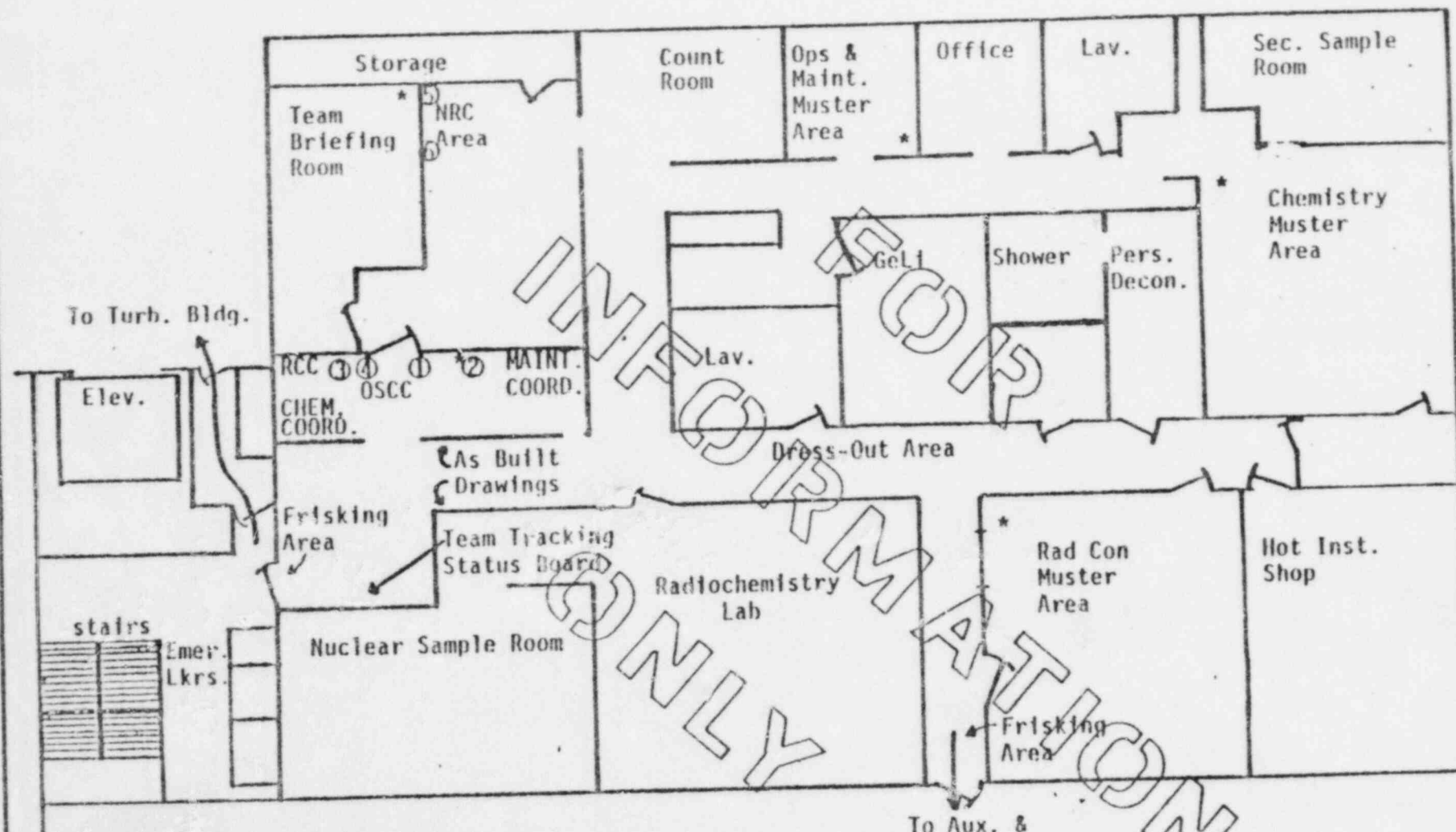
NOTE: All personnel must retain their keycards.

- ____ 4.1.9 If Onsite Duty Roster personnel arrive, turn over duties to them as time permits. Ensure that their name is filled in on the OSC Manning Status Board and that an announcement is made in the OSC area when they assume your duties.
- ____ 4.1.10 When all coordinator positions are filled with Onsite Duty Roster personnel, establish operations of the OSC per the floor plan in Attachment I and direct excess personnel to the established areas on Attachment I.
- ____ 4.1.11 Periodically brief personnel in the OSC regarding current plant status and projected course of events.
- ____ 4.1.12 Inform the Emergency Director, via the communicator, that the Operations Support Center is Operational.

5.0 FINAL CONDITIONS

Initials

- ____ 5.1 The Operations Support Center will be operational with muster areas established for duty section personnel and communications established on the Operational Line.
- ____ 5.2 Duty section personnel are available for assignment as necessary.



KEY: ① Page Phone/ M & I Line
 ② Ops. Line
 ③ Rad. Line
 ④ Emer. Management Line
 ⑤ NRC Health Physics Net
 ⑥ NRC Intra-Communications Line
 * - Intercom System

ATTACHMENT II

OPERATIONS SUPPORT CENTER OFFICE LAYOUT-HP

Key to OSC Equipment

1. RM-14 with HP-210 Probe
2. Table
3. Desk
4. File Cabinets
5. Storage Cabinet for Instrumentation
6. Status Boards
7. REMP Map
8. Cabinets
9. Plant Page Phone
10. First Aid Cabinet
11. Emergency Locker (Flow diagrams, prints, etc.)
12. High Rad area Key Locker
13. Xerox Copier

Equipment in Radio Counting Room:

Ludlum-2000 beta-gamma Counter-Scaler

Wide-Beta

Ortec beta-gamma Counter-Scaler

Tri-Carb Liquid Scintillation

Nuclear Measurements Corp. beta-gamma, alpha Counter-Scalers

Stabilized Assay Meters