

TENNESSEE VALLEY AUTHORITY

CHATTANOOGA, TENNESSEE 37401

400 Chestnut Street Tower II

February 9, 1984

U.S. Nuclear Regulatory Commission  
Region II  
ATTN: James P. O'Reilly, Regional Administrator  
101 Marietta Street, NW, Suite 2900  
Atlanta, Georgia 30303

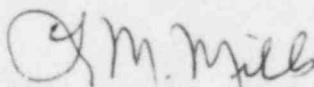
Dear Mr. O'Reilly:

Enclosed is our response to R. C. Lewis' January 10, 1984, letter to H. G. Parris transmitting Inspection Report Nos. 50-259/83-40, -260/83-40, -296/83-40 regarding activities at our Browns Ferry Nuclear Plant which appeared to have been in violation of NRC regulations. We have enclosed our response to Appendix A, Notice of Violation. If you have any questions, please call Jim Damer at FTS 858-2725.

To the best of my knowledge, I declare the statements contained herein are complete and true.

Very truly yours,

TENNESSEE VALLEY AUTHORITY

  
L. M. Mills, Manager  
Nuclear Licensing

Enclosure

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RESPONSE - NRC INSPECTION REPORT NOS.  
50-259/83-40, 50-260/83-40, AND 50-296/83-40  
RICHARD C. LEWIS'S LETTER TO H. G. PARRIS  
DATED JANUARY 10, 1984

Appendix A

Item A (259, 260, 296/83-40-01)

10 CFR 50.54(q) requires that nuclear power reactor licensees follow and maintain in effect emergency plans which meet the requirements of Appendix E to 10 CFR Part 50 and the planning standards of 50.47(b). Technical Specification 6.3(A)(8) requires that detailed written procedures, including applicable checkoff lists covering Radiological Emergency Plan implementing procedures shall be prepared, approved and adhered to. Section (b)(10) of 10 CFR 50.47 requires that the licensee's emergency plans shall include information to demonstrate compliance with the following:

A range of protective actions have been developed for the plume exposure pathway EPZ for emergency workers and the public. Guidelines for the choice of protective actions during an emergency, consistent with Federal guidance, are developed and in place, and protective actions for the ingestion exposure pathway EPZ appropriate to the locale have been developed.

The Federal Guidance on protective actions to be recommended to offsite officials for general emergencies is addressed in Appendix 1 of NUREG-0654/FEMA-REP-1, Rev. 1, entitled "Criteria for Preparation and Evaluation of Radiological Emergency Preparedness in Support of Nuclear Power Plants." This guidance is clarified by IE Information Notice No. 83-28: "Criteria for Protective Action Recommendations for General Emergencies."

Contrary to the above, the licensee has failed to incorporate the above guidance in the Implementing Procedures in that, until the response organization is mobilized (i.e., CECC and MSECC), there is no mechanism or requirement for considering protective action recommendations other than for sheltering in the plume EPZ.

This is a Severity Level IV Violation (Supplement 1) and applicable to all units.

1. Admission or Denial of the Alleged Violation

TVA admits the violation occurred as stated.

2. Reasons for the Violations if Admitted

TVA has contended that a recommended protective action other than sheltering during the initial stage of an incident would be detrimental to the health and safety of the public in that the mechanisms at the State and local government levels will not be in place at that time and capable of handling a more extensive recommendation. Therefore, an initial recommendation to shelter the population was included in our procedures. At approximately 30 minutes into the accident the State and local government emergency centers and the TVA centers will be staffed at which time more extensive recommendations would be developed. TVA has decisional aids available to guide the CECC director in developing a more extensive protective action recommendation. However, as stated above, the decisional aid was not included in a CECC procedure.

3. Corrective Steps Which Have Been Taken and the Results Achieved

TVA has reviewed the Radiological Emergency Planning (REP) program and determined the areas in the REP and implementing procedures (IPs) which must be revised to fully comply with the intent of NUREG 0654. These steps were discussed with NRC Region II staff on January 13, 1984. Development of an appropriate logic diagram for inclusion in the IPs is nearing completion.

4. Corrective Steps Which Will be Taken to Avoid Further Violations

The following steps will be taken to comply with NUREG 0654: (1) draft necessary IP and REP changes, (2) coordinate necessary changes with States of Alabama and Tennessee, and (3) complete training of necessary personnel.

5. Date When Full Compliance Will be Achieved

Full compliance will be achieved March 12, 1984, when the actions in item 4 will be completed.

Item B (259, 260, 296/83-40-02)

10 CFR 50.54(g) requires that nuclear power reactor licensees follow and maintain in effect emergency plans which meet the requirements of Appendix E to 10 CFR Part 50 and the planning standards of 50.47(b). Section IV.E of Appendix E requires that a licensee's emergency plans shall include information to demonstrate compliance with the following:

The means to be used for determining the magnitude of and for continually assessing the impact of the release of radioactive material shall be described, including emergency action levels that are to be used as criteria for notification and participation of local and State agencies, the Commission, and other Federal agencies, and the emergency action levels that are to be used for determining when and what type of protective measures should be considered within and outside the site boundary to protect health and safety.

10 CFR 50.47(b)(15) requires that those who may be called on to assist in an emergency be provided radiological emergency response training.

Section 4.1.1 of the Browns Ferry Nuclear Plant Emergency Plan states in part that the Site Emergency Director has the authority to recommend protective actions to offsite authorities. Section 4.1 states in part that in the event of an incident, the Shift Engineer is initially the Site Emergency Director.

Contrary to the above, Shift Engineers, initially the Site Emergency Directors, were incapable of determining when and what type of protective measures should be considered outside the site boundary to protect health and safety.

This is a Severity Level IV Violation (Supplement I) and applicable to all units.

1. Admission or Denial of the Alleged Violation

TVA admits the violation occurred as stated in that the shift engineers involved misunderstood the intent of the step in the procedure (IP-5) which provides the protective action recommendation.

2. Reasons for the Violation Admitted

As related above, the individuals involved were confused as to their authority as Site Emergency Director to recommend protective actions to offsite authorities as delineated in procedure IP-5, section 2.1.1.

3. Corrective Steps Which Have Been Taken and the Results Achieved

As related in our letter to you dated October 25, 1984, (sic) from D. S. Kammer to J. P. O'Reilly, we committed to retrain all shift engineers in their protective action responsibilities as specified in Browns Ferry IP-5, section 2.1.1. This training was provided in terms of a memorandum from the Operations Section Supervisor to all shift engineers clearly delineating their responsibilities and actions required. This training was completed on October 26, 1983.

4. Corrective Steps Which Will be Taken To Avoid Further Violations

The lesson plan for annual requalification training for license personnel regarding the REP was revised in pen and ink to provide emphasis on the points described above. This was done on or about October 31, 1983, and was included in the annual training for all classes conducted thereafter. This pen and ink change will be made part of the permanent lesson plan before the next annual retraining cycle anticipated to begin about September 1, 1984.

5. Date When Full Compliance Will Be Achieved

Full compliance was achieved when the training for shift engineers was completed on October 26, 1983.

Item C (259, 260, 296/83-40-03)

10 CFR 50, Appendix B, Criterion VI (as implemented by TVA's QA Topical Report TVA TR 75-1 paragraph 17.2.6 and Operational Quality Assurance Manual Part III Section 1.1) requires that measures shall be established to control the issuance of documents, including changes thereto, which prescribe all activities affecting quality. These measures shall assure that documents, including changes, are distributed to and used at the location where the prescribed activity is performed.

Contrary to the above, several examples were noted where this requirement was not met in that the Muscle Shoals Emergency Control Center Implementing Procedures Document (MSECC IPD) revisions were not adequately implemented. Examples are listed:

1. IP-4 (Notification Procedure) was deleted October, 1982; however, IP-4 has not been removed from the MSECC IPD at the following locations:
  - a. Browns Ferry TSC (Technical Support Center)
  - b. Browns Ferry File Room
2. IP5 (Training/Drill Requirements) was deleted June 1983; however, IP-5 has not been removed from controlled copies of the MSECC IPD at the following locations:
  - a. Muscle Shoals Emergency Control Center
  - b. Browns Ferry File Room

This is a Severity Level V Violation (Supplement I) and applicable to all units.



1. Admission or Denial of the Alleged Violation

TVA admits the violation occurred as stated.

2. Reasons for the Violations if Admitted

A filing error was made by individuals responsible for filing the revisions in the MSEC-IPD manuals.

3. Corrective Steps Which Have Been Taken and the Results Achieved

Errors noted above have been corrected. A review of the MSEC-IPs was conducted to determine whether similar filing errors had been made. None were found. Filing instructions which accompany each IP were reviewed and determined to be clear and concise.

4. Corrective Steps Which Will be Taken To Avoid Further Violations

An effective page listing has been developed for the MSEC-IPD to facilitate the annual audit of the documents.

A verification of all controlled copies of the MSEC-IPD will be conducted against the effective page listing by each recipient location by March 30, 1984. An acknowledgement of the verification will be returned to the Records Management Control Unit.

5. Date When Full Compliance Will be Achieved

Full compliance will be achieved with receipt of all acknowledgements on or before March 30, 1984.