



GPU Nuclear Corporation  
Route 441 South  
P.O. Box 480  
Middletown, Pennsylvania 17057-0480  
(717) 944-7621  
Writer's Direct Dial Number:

January 26, 1996  
6730-96-2021

Nuclear Regulatory Commission  
Attention: Document Control Desk  
Washington, DC 20555

Dear Sir:

SUBJECT: Oyster Creek Nuclear Generating Station  
Docket No. 50-219  
Inspection Report 50-219/95-020  
Reply to Notice of Violation

NRC Inspection Report 50-219/95-020 documents a violation of NRC requirements. Attachment I to this letter contains the reply to the cited Violation as required by 10 CFR 2.201.

Additionally, the NRC letter to John Barton, dated November 14, 1995, requested we provide assistance to offsite officials to address and resolve the identified deficiency (from the FEMA graded exercise of November 1, 1995) in a timely manner. We have provided support in the following activities:

A training session for the Barnegat Office of Emergency Management was held on January 4, 1996;

A Dress Rehearsal drill was successfully conducted on January 18, 1996.

We will continue to provide support as necessary to fully remediate the deficiency. Demonstration of corrective measures will be accomplished during a limited focus drill to be conducted on February 29, 1996, pending FEMA approval of that date. In addition, the Area Requiring Corrective Action (ARCA) at the Ocean County Office of Emergency Management will be remediated during or before the next FEMA graded

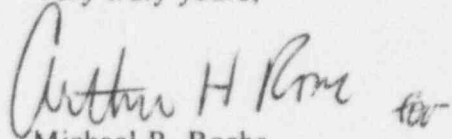
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exercise. We will provide support to the New Jersey Office of Emergency Management to ensure this area is fully successful.

If you should have any questions or require further information, please contact Brenda DeMerchant, Oyster Creek Regulatory Affairs Engineer at 609-971-4642.

Very truly yours,

A handwritten signature in dark ink, appearing to read "Michael B. Roche". To the right of the signature is a small, stylized mark that looks like "for".

Michael B. Roche  
Vice President & Director  
Oyster Creek

cc: Administrator, Region I  
NRC Project Manager  
NRC Resident Inspector

## NOTICE OF VIOLATION

10 CFR 50.54(q) requires, in part, that "A licensee authorized to possess and operate a nuclear power reactor shall follow and maintain in effect emergency plans that meet the standards in 50.47(b) and the requirements in Appendix E of this part."

10 CFR 50.47(b)(8) requires that "Adequate emergency facilities and equipment to support the emergency response are provided and maintained."

The licensee's NRC-approved Emergency Plan (E-Plan), Section 7.0, "Emergency Response Facilities and Equipment," Part 7.10, "Emergency Equipment Readiness," requires, in part, "to insure that the necessary emergency equipment is maintained and available for use during emergency situations, readiness checklists have been developed and incorporated in Administrative Procedures. These checklists facilitate detailed inventory and calibration/functional checks of equipment contained in the emergency kits/lockers. The inventory checklists will be performed on a quarterly basis and to insure interim readiness, all kits/lockers are sealed or locked as appropriate."

The E-Plan, Section 8.0, "Maintaining Emergency Preparedness," Part 8.1.1.3, requires, in part, that actions must be taken to "Ensure that assigned responsibilities for maintaining emergency preparedness are accomplished in a timely manner in accordance with relevant procedures and that required documentation is prepared and maintained to reflect accomplishment of such activities, i.e., surveillance, audit, inventory, calibration and corrective actions as appropriate."

The licensee's Administrative Procedure 6430-ADM-1319.02, "Emergency Response Facilities and Equipment Maintenance," Revision 11, dated May 9, 1995, provides direction for the surveillance and maintenance of the emergency response facilities. Procedure Step 5.3.2.3 requires that "All boxes on inventory forms which require the number present to be verified shall be filled in with the appropriate number." Procedure Step 5.4.1 requires that "The Department Supervisor shall sign completed inventory, indicating any deficiencies found and corrected and submit to the EP Surveillance Coordinator." Procedure Step 5.4.3 requires that "Individual inventories will be reviewed by the EP Manager, OC or his designee."

Contrary to the above, on November 1, 1995, NRC reviewed emergency response facility surveillances conducted by the licensee during May, 1995, and September, 1995, and noted several discrepancies in implementing Procedure 6430-ADM-1319.02. In particular, NRC found a surveillance checklist, which had been completed without denoting the number of items present, as required by Procedure Step 5.3.2.3; a surveillance checklist that had not been reviewed by departmental supervision, as required by Procedure Step 5.4.1, and surveillance checklists that had not been reviewed by the EP Manager, OC, or his designee, as required by Procedure Step 5.4.3.

This is a Severity Level IV violation (Supplement VIII).

## ATTACHMENT I

### **RESPONSE TO NOTICE OF VIOLATION Inspection Report 50-219/95-20**

GPU Nuclear Corporation concurs with the violation as stated.

#### **I. Reason for Violation**

This violation occurred because procedural requirements were not followed. The individuals performing the various steps were not aware of the procedural requirement or did not fully understand the level of latitude that was allowed by the procedure. This was due to a lack of review of the procedure prior to implementation. Critical requirements denoted by "shall" were not reviewed to ensure adherence and/or full comprehension. This resulted in assumptions being made which were not consistent with the requirements of the procedure.

#### **II. Corrective Steps and Results Achieved**

Management expectations have been reiterated to the EP staff concerning procedural compliance. This has been followed by EP staff discussions with the facility coordinators concerning EP expectations for facility readiness practices. Also, a procedure review has been conducted with inventory coordinators from a number of user groups that actually perform the inventories. As a result of this review, recommendations were made to assure the procedure provided flexibility in the performance of the inventories, while maintaining sufficient controls to ensure proper documentation. The review also resulted in a higher awareness of the critical nature of the procedure.

A thorough review by the EP Manager was completed for the fourth quarter surveillance. This review was used as a learning opportunity for the new EP Manager and the surveillance coordinator to better understand the existing process. Based on this review, the process will include improved guidance. EP Expectations have been developed by the coordinator to share with other personnel performing this surveillance and reviewing the documentation.

**ATTACHMENT I**  
**RESPONSE TO NOTICE OF VIOLATION**  
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**III. Corrective Steps that will be taken to Avoid Further Violations:**

Further dissemination of the inventory checklist will include the appropriate procedural guidance. This occurrence will be reviewed with those personnel that are in the process chain which includes implementation, performance of surveillances and review of the documentation.

**IV. Date When Full Compliance Will Be Achieved**

Full compliance was achieved on 11/02/95. While all corrective actions have not been put into place, the facility is in compliance by virtue of management oversight. Specifically, the higher level of attention this issue has received ensures compliance and will be enhanced with the remainder of the corrective actions described above which involve procedure changes and are expected to be in place by July 1, 1996.