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June 20, 1985

James G Keppler, Administrator  
Region III  
US Nuclear Regulatory Commission  
799 Roosevelt Road  
Glen Ellyn, IL 60137

DOCKET 50-255 - LICENSE DPR-20 - PALISADES PLANT -  
RESPONSE TO INSPECTION REPORT 85-10

Two items of noncompliance were identified in Inspection Report 50-255/85-10 dated May 21, 1985. An evaluation of these items of noncompliance has indicated a generic problem with procedural compliance that extends further than the examples cited. While we have responded to each of the examples, we have concluded that the radiation protection group and the plant management need to take a more aggressive role in requiring adherence to radiation protection procedures. In this regard, the security computer will be utilized to monitor procedure compliance and appropriate management action will be taken for those individuals that are not following proper procedures.

It is our belief that the radioactive material found outside of the radiation controlled area was removed by way of exits other than access control and that proper control of radioactive material will be achieved by further limiting access to the radiation controlled area. We are also using the security computer to monitor the use of the dose control cards for personnel entering access control and, again, appropriate plant management action will be taken to address procedure violations.

We feel that these activities will increase personnel awareness of the need to following radiation protection procedures and correct the broader problem of procedural compliance identified in your inspection. The following are our responses to the identified items of noncompliance.

Noncompliance 50-255/85-10-01

Technical Specification 6.11 states that procedures for personnel radiation protection shall be prepared consistent with the requirements of 10 CFR 20 and shall be approved, maintained, and adhered to for all operations involving personal radiation exposure.

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The following examples of failure to follow radiological access control procedures were identified:

- a. Procedure 7.04 allows only emergency use of Door 168 for auxiliary building ingress and egress unless prior arrangements with the radiation safety office have been made.

Contrary to this, Door 168 has been used routinely for normal auxiliary building ingress and egress without radiation safety approval. This practice has continued for an extended period of time.

- b. Procedure 7.04 allows workers to log into the controlled area prior to the first entry of a work shift and log out after the last entry of the shift only if authorized on the RWP they are working under. Also, the Staff Health Physicist must authorize in writing, specific persons or groups of persons to log themselves in and out of the controlled area.

Contrary to this, although none of the RWPs in effect at the time of this inspection authorized the beginning of shift/end of shift log in/out option, such practice was common. Also, although the operators keep their dose control cards near their work area and log themselves in and out of the controlled area, no written authorization for this practice could be located.

- c. Procedure 7.04 requires that persons entering posted areas be listed on an RWP and wear a self-reading dosimeter.

Contrary to this, on April 29, 1985, two workers entered a posted radiation area near the SIRW tank to perform instrument surveillance without being listed on an RWP and without wearing the required self-reading dosimeters.

Response (a):

Corrective Actions Taken And Results Achieved

A periodic surveillance of the Door 168 access card reader has been implemented. The card reader records the identity of personnel utilizing this door. The purpose for each entry is evaluated and any nonemergency entries are reported to a responsible department head for corrective action. In addition, the Door 168 card reader has been programmed to limit access to Operations and Security personnel. These are the only departments with a need for emergency access capabilities.

Corrective Action To Be Taken To Avoid Further Noncompliance

A local and remote alarm will be added to Door 168 to alert the appropriate personnel of door usage.

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Date When Full Compliance Will Be Achieved

Full compliance will be achieved by September 30, 1985.

Response (b):

Corrective Actions Taken And Results Achieved

An authorization has been added to the appropriate RWPs as required by Administrative Procedure 7.04, "Radiation Dosimetry". The Staff Health Physicist has provided the written authorization required by Administrative Procedure 7.04 to allow certain individuals to log themselves in and out of controlled areas.

Corrective Action To Be Taken To Avoid Further Noncompliance

Administrative Procedure 7.04, "Radiation Dosimetry", will be revised to eliminate the authorization requirements noted. These controls were evaluated and determined unnecessary.

Date When Full Compliance Will Be Achieved

Full compliance will be achieved by September 30, 1985.

Response (c):

Corrective Actions Taken And Results Achieved

A Radiological Incident Report was initiated to address this procedure violation. The personnel involved in the occurrence were counseled on the dosimetry and RWP requirements for the SIRW tank area. The responsible supervisor discussed this deviation with department personnel and emphasized the need to adhere to procedures. A sign has been posted at the entrance to the SIRW tank area to emphasize the need for an RWP prior to entry.

Corrective Action To Be Taken To Avoid Further Noncompliance

All corrective actions are complete.

Date When Full Compliance Will Be Achieved

Full compliance has been achieved.

Noncompliance 50-255/85-10-02

Technical Specification 6.11 states that procedures for personnel radiation protection shall be prepared consistent with the requirements of 10 CFR 20 and shall be approved, maintained, and adhered to for all operations involving personal radiation exposure.

The following examples of failure to follow radioactive material control procedures were identified:

- a. Procedure HP 6.33 requires that contaminated materials be labeled "Caution - Radioactive Material"

Contrary to this, the inspector and the radiation safety technicians found several pieces of unlabeled contaminated tools and material outside the radiologically controlled area.

- b. Procedure HP 2.14 requires that tools and equipment leaving the controlled area be surveyed for radioactive contamination.

Contrary to this, on May 1, 1985, the inspector observed a contractor employee exiting the controlled area through access control with a canvas bag of hand tools that had not been surveyed.

Response (a):

Corrective Actions Taken And Results Achieved

An immediate survey was performed for other uncontrolled tools and equipment. Additional items were identified and placed under appropriate radiological controls.

Corrective Action To Be Taken To Avoid Further Noncompliance

The violations of access requirements identified by this inspection are believed to be the source of the uncontrolled tools and equipment. The actions provided to limit access to the radiologically controlled area will prevent recurrence of this deficiency. These actions are noted in Part 1 (a) of this response. In addition, the monthly survey of uncontrolled areas will be expanded to include tools cribs, ladders, and scaffolding.

Date When Full Compliance Will Be Achieved

Full compliance will be achieved by September 30, 1985.

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Response (b):

Corrective Actions Taken And Results Achieved

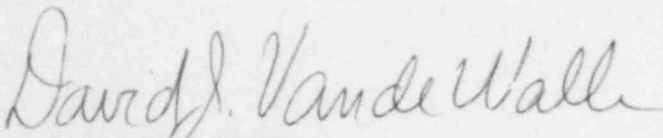
A survey was performed of the hand tools to provide compliance with procedural requirements. A notice was provided to all site personnel emphasizing the requirement to obey posted instructions.

Corrective Action To Be Taken To Avoid Further Noncompliance

The occurrence was considered an infrequent event. No additional actions are required for this specific item.

Date When Full Compliance Will Be Achieved

Full compliance has been achieved.



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Director, Nuclear Licensing .

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Director, Office of Inspection & Enforcement  
NRC Resident Inspector - Palisades