

U.S. NUCLEAR REGULATORY COMMISSION  
REGION I

Report No. 50-322/85-06

Docket No. 50-322

License No. CPPR-95

Priority --

Category B

Licensee: Long Island Lighting Company

175 East Old York Road

Hicksville, New York 11801

Facility Name: Shoreham Nuclear Power Station

Inspection At: Shoreham, New York

Inspection Conducted: January 22-25, 1985

Inspectors: R. H. Smith  
R. H. Smith  
Emergency Preparedness Specialist

E. Woltner,  
Emergency Preparedness Specialist

5/17/85  
date

I. Cohen  
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Emergency Preparedness Specialist

5/17/85  
date

Approved by: T. L. Harpster  
T. L. Harpster, Chief  
Emergency Preparedness Section

5/29/85  
date

Inspection Summary: Inspection on January 22-25, 1985 (Report No. 50-322/85-06)

Areas Inspected: Routine announced inspection to review open items identified on previous inspections and to review the status of programs for changes to the emergency preparedness program, knowledge and performance of duties, and licensee audits. The inspection involved 108 inspector hours by three NRC regional-based inspectors.

Results: No violations were identified.

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## DETAILS

### 1. Individuals Contacted

#### 1.1 LILCO

- \*C. Daverio, Manager, Emergency Preparedness
- M. Howley, Watch Engineer
- \*J. Leonard, Vice President, Nuclear Operations
- \*A. Mullen, Manager, QC Division
- W. Nazzaro, Watch Engineer
- J. Powers, Senior QA Engineer
- \*W. Steiger, Plant Manager

#### 1.2 Contractors

- \*J. Brand, Stone & Webster (S&W), Licensing
- \*W. Burnett, Impell, Compliance Engineer
- B. Mandell, S&W, Equipment & Facilities Specialist
- \*G. Rhoads, Impell, Compliance Engineer
- \*R. Rossin, S&W, Emergency Preparedness
- \*F. Strickhart, S&W, Emergency Preparedness

#### 1.3 NRC

P. Eselgroth, Senior Resident Inspector

\*Denotes those individuals attending the exit meeting on January 25, 1985.

The inspectors also contacted other personnel.

### 2. Licensee Action on Previous Inspection Findings

- 2.1 (Closed) 50-322/82-18-14: Complete the installation and assure the operability of facilities and equipment incorporating the guidance of NUREG-0737 for sampling and analysis of post-accident primary coolant.

Based on NRC Inspection Report No. 50-322/83-37, only a valve had to be replaced in the Post Accident Sampling System (PASS) to complete correction of this item. The inspectors examined the licensee's maintenance records, discussed the corrective action with licensee representatives and determined that the valve had been replaced, and tested.

- 2.2 (Open) 50-322/82-18-30: Complete the installation and operational testing of communications and notification systems described in the Emergency Plan Implementing Procedures.

The status of the communications and notification systems are as follows:

- 2.2.1 (Open) The New York State Radiological Emergency Communications System (RECS) hotline had been installed. However, the system has not been formally implemented since a letter of agreement between the licensee and the State organization has yet to be obtained.

The licensee notified New York State and Suffolk County by letters dated December 21, 1984, of their intent to use commercial telephone numbers to make required notification to both parties for declaration of an emergency if the RECS is not operative.

- 2.2.2 (Closed) Communication links for the National Alert Warning System (NAWAS) had not been installed or tested in the TSC or EOF. Installation had been completed and was operational in the Control Room.

The inspector determined that the licensee had communicated with the Federal Emergency Management Agency (FEMA) regarding completion of the NAWAS installation and that only the Control Room would be equipped with a NAWAS link. The licensee will revise the Emergency Plan and Implementing Procedures to reflect this change.

- 2.2.3 (Closed) The Health Physics Network (HPN) hardware had been installed but the telephone was not operational in the EOF. Installation had been completed and was operational in the TSC and Health Physics access control point.

The licensee provided the circuit number for the EOF installation to the Nuclear Regulatory Commission in a letter dated April 23, 1984. The licensee had not been informed of the installation date by the NRC at the time of the inspection.

- 2.2.4 (Closed) The plant public address and party line system (Gai-Tronics) had been installed and was operational. However, additional adjustments will have to be made in high noise areas when the plant is given an operating license (NRC I&E bulletin 79-18 regarding volume level in high noise areas).

The inspector determined that modifications to the system for noise level had been made in the Diesel Generator Rooms, the fire Pump House, and some Reactor Building locations. The licensee has a tracking system for completion of this item and reports results to the NRC Resident Inspector.

- 2.3 (Open) 50-322/82-18-34: Prepare and distribute public information material regarding the actions to be taken by individuals within the Emergency Planning Zone.

The licensee representative stated that the public information material was complete and ready for printing. The distribution of the material to the public is required before operating above five percent of rated power.

### 3. Changes to the Emergency Preparedness Program

#### 3.1 References

10 CFR 50, Appendix E.V  
 10 CFR 50, 47(b)(16)  
 Shoreham Emergency Plan, Section 8.0  
 Shoreham Emergency Preparedness Implementing Procedures (EIPs),  
 5-1, Rev. 1 and 5-2, Rev. 1

#### 3.2 Scope of Review

The inspectors reviewed Section 8.0 of the Shoreham Emergency Plan and EIPs 5-1 and 5-2 and discussed changes to the emergency program, organization, and distribution of the emergency plan and procedures with licensee representatives. The inspector also reviewed 16 EIPs in the 1 and 5 series dated July 15, 1984. EIP 5-2 describes a detailed program for making changes to either the emergency plan or procedures. The Emergency Preparedness organization also has a program for implementing any required training as a result of program changes.

#### 3.3 Findings

The inspectors determined that all changes to the plan and procedures to date had received the proper management review and that distribution was adequate. The licensee is evaluating the distribution of the plan and procedures to reduce the distribution where feasible.

No violations were identified.

### 4. Knowledge and Performance of Duties (Training)

#### 4.1 References

Shoreham Nuclear Power Station, Emergency Preparedness Plan, Section 8.0  
 EIP 5-4 Emergency Preparedness Program Training  
 EIP 5-5 Emergency Preparedness Drills and Exercises  
 Emergency Plan Training Manual, Lesson Plans, Volume III  
 Training Administrative Manual dated December, 1981.

#### 4.2 Scope of Review

A description of the licensee's emergency preparedness training program appears within Section 8.0 of the Shoreham Nuclear Power Station Emergency Preparedness Plan (Rev. 5). The plan provides for initial training and retraining of offsite and onsite licensee personnel and local support services personnel (i.e., fire, ambulance and police) by means of in-class

instruction, walk-throughs and participation during drills and exercises. Training is provided by members of the emergency preparedness staff and by contractor personnel.

References 1-4 serve as a means for implementation of the training program.

The inspectors reviewed the referenced documents, held discussions with emergency preparedness training instructors and attended four training sessions as follows:

EP-1 Overview of Emergency Planning  
 EP-3 Emergency Organization and Responsibilities  
 EP-20 TSC Activation and Support  
 EP-21 OSC Activation, Support, and Staff Functions.

In addition, the inspectors completed the examinations given for each of the training sessions and noted that the examinations were thorough and well proctored.

#### 4.3 Findings

The inspectors reviewed copies of drill/exercise coordination reports and noted that all individuals identified as watch engineers (initial Emergency Directors) and Response Managers had participated in a drill/exercise during calendar year 1984.

The inspectors conducted walk-throughs with two watch engineers which consisted of presenting initiating conditions relating to emergency action levels and noting responses. The watch engineers were able to classify the emergency and take appropriate actions. However, the watch engineers could not readily identify all responsibilities that could not be delegated by Emergency Directors, although the watch engineers were aware of these responsibilities when they were identified by the inspectors.

The inspectors noted that although procedure EPIP 5-4, Paragraph 5.5 - Training Records, indicated that the training records for each individual on the On Site Emergency Response Organization shall be maintained on computer, that this record system had not been implemented. This item is open (50-322/85-06-01) and will be reviewed during a subsequent NRC:RI inspection.

A review was conducted of the training modules covering eleven emergency positions and included the training records, attendance and pass/fail grades of fifty-three individuals assigned specific positions. It was determined that the emergency plan training program had been administered as outlined in the Emergency Plan and Procedures. It was noted, however, that not all emergency response personnel had completed retraining by the end of calendar year 1984 including two Radiation Monitoring Technicians and two of the six Watch supervisors. This item is open (50-322/85-06-02) and will be reviewed during a subsequent NRC:RI inspection.

The training department did take initial corrective action in that formal notification was issued listing personnel who are presently unqualified for their emergency response organization position.

The inspectors also noted that Watch Supervisors did not receive the same Emergency Director training as the Watch Engineers, although they may be required to perform the function. During the inspection, the licensee stated that the training matrix would be revised and that Watch Supervisors would also receive Emergency Director training. This item is open (50-332/65-06-03) and will be reviewed during a subsequent NRC:RI inspection.

No violations were identified.

## 5. Licensee Audits

### 5.1 References

10 CFR 50.54(t)  
10 CFR 50, Appendix E, IV, F.  
Shoreham Emergency Plan, Section 8

### 5.2 Scope of Review

The inspectors reviewed the results of Quality Assurance (QA) Audit 83-01 conducted June 6-10, 1983, and discussed the audit with the QA Audit Team Leader. The following elements of emergency preparedness were included in the audit:

Organization, Administration  
Qualifications, Training, Drills  
Instructions, Procedures, Drawings, Document Controls  
Emergency Center/Facility Readiness  
Communications  
Notification  
Public Education/Information

### 5.3 Findings

The audit report included details of 38 items which required corrective action. The inspectors noted that a tracking system was implemented, and that the system provides for verification of corrective actions. The inspectors verified corrective action completion on nine of the items, and all had been corrected according to documentation.

The licensee representative stated that an audit of the annual emergency exercise had been planned for 1984; however, the exercise was not conducted. A general audit of the emergency preparedness program is planned for 1985.

No violations were identified.



## 6. Status of the EOF, TSC, and OSC Emergency Response Facilities (ERF)

The inspectors obtained the following status information from the licensee and also inspected the TSC and OSC.

### 6.1 Physical Facilities

The structures are complete and operational. Ventilation systems are installed and operational. All furniture and hardware are available in the facilities for activation as an ERF. All instrumentation and communications equipment as described in the Emergency Preparedness Plan is installed and operational with the exception of the N/WAS in the EOF and TSC, the HPN in the EOF, and the RECS system for New York State and Suffolk County. The present SPDS is an interim system as described in the FSAR and is installed only in the TSC. The permanent SPDS is to be installed and operational following the first refueling outage and will include the EOF. All radiation and meteorological monitoring equipment and other equipment is installed and operational in the TSC and EOF.

### 6.2 Data Acquisition Systems

All hardware, firmware, and software is designed, installed and operational. All detectors and indicators are installed, connected to interrogation systems and operational. All information displays and calculational models are designed, installed, and operational. The verification of all data system displays and models are complete and documented. The SPDS status is described in 6.1 above.

- 6.3 All procedures have been completed in final form for activation and operation of all facilities, instrumentation, equipment, and functions with the exception of the permanent SPDS.
- 6.4 About 85 percent of the Emergency Response Organization has been trained to carry out ERF functions and operation of all data systems, communications, instrumentation, and equipment.
- 6.5 All plant records, drawings and other information essential for determining plant accident status is available to the ERFs.

## 7. Exit Meeting

On January 25, 1985, the inspectors met with the individuals listed in Paragraph 1 and the Team Leader summarized the scope and findings of the inspection.

Licensee management acknowledged the findings and stated that the retraining would be completed and that the Watch Supervisors would be scheduled for Emergency Director Training.

At no time during this inspection was written material provided to the licensee by the inspectors.