



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA STREET, N.W.
ATLANTA, GEORGIA 30323

SEP 06 1985

Report Nos.: 50-321/85-25 and 50-366/85-25

Licensee: Georgia Power Company
P. O. Box 4545
Atlanta, GA 30302

Docket Nos.: 50-321 and 50-366

License Nos.: DPR-57 and NPF-5

Facility Name: Hatch 1 and 2

Inspection Conducted: August 6-9, 1985

Inspectors: W. M. Sartor, Jr.
T. R. Decker
R. R. Marston

8/30/85
Date Signed
8/30/85
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Date Signed

Accompanying Personnel: J. Stephan, D. Stockton, G. Weale, and W. Thomas

Approved by: W. E. Cline
W. E. Cline, Section Chief
Emergency Preparedness
Division of Radiation Safety and Safeguards

8/30/85
Date Signed

SUMMARY

Scope: This routine, announced inspection entailed 164 inspector-hours onsite in the area of an emergency preparedness exercise.

Results: No violations or deviations were identified.

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REPORT DETAILS

1. Persons Contacted

Licensee Employees

- *H. C. Nix, General Manager - Plant Hatch
- *J. M. DiLuzio, Corporate Emergency Preparedness Supervisor
- *J. E. Collins, Onsite Emergency Plan Coordinator
- *R. K. Moxley, Associate Quality Assurance Field Representative
- *P. Hayes, Senior Regulatory Specialist
- *F. Tsakeres, Health Physicist
- *G. Cook, Security Representative
- *J. Roberts, Onsite Emergency Preparedness Coordinator, Plant Vogtle
- *W. H. Ollinger, Power Generation Engineer
- *P. Peralta, Consultant, General Physics
- *C. Boatwright, Quality Assurance Representative
- *W. B. Kirkley, Support Group Supervisor
- *J. Badgett, Training Manager
- *L. McDaniel, Administrative Support Manager
- *K. Dyer, Security Manager
- T. Beckham, Vice President and General Manager of Nuclear Operations

Other licensee employees contacted included engineers, technicians, operators, mechanics, and office personnel.

Other Organizations (Consultants to Georgia Power Company)

- *W. Richardson, Radiation Management Corporation
- *A. Anderson, Hydro Nuclear
- *E. Hickey, Hydro Nuclear
- *J. Dobson, Hydro Nuclear
- *D. Rickertsen, Hydro Nuclear
- *J. Ghannadian, VESC

NRC Resident Inspectors

- *P. Holmes-Ray

- *Attended exit interview

2. Exit Interview

The inspection scope and findings were summarized on August 9, 1985, with those persons indicated in paragraph 1 above. The inspector described the areas inspected and discussed the inspection findings listed below. No dissenting comments were received from the licensee.

The licensee did not identify as proprietary any of the materials provided to or reviewed by the inspectors during this inspection.

3. Exercise Scenario (82301)

The scenario for the emergency exercise was reviewed to determine that provisions had been made to test the integrated capability and a major portion of the basic elements existing within the licensee and local emergency plans and organization as required by 10 CFR 50.47(b)(14), 10 CFR 50, Appendix E, paragraph IV.F and specific criteria in NUREG-0654, Section II.N.

The scenario developed for this exercise was adequate to fully exercise the onsite and offsite emergency organizations of the licensee and provided sufficient emergency information to the state and local government agencies for their respective participation in the exercise.

The scenario was reviewed in advance of the scheduled exercise date and was discussed with licensee representatives on several occasions. While no major problems with the scenario were identified during the review, several inconsistencies in licensee response became apparent during the exercise. These inconsistencies failed to detract from the overall performance of the licensee's emergency organization. The impact of these inconsistencies on the conduct of the exercise was discussed with management representatives during the exercise critique on August 9, 1985.

No violations or deviations were identified.

4. Assignment of Responsibility (82301)

This area was observed to determine that primary responsibilities for emergency response by the licensee have been specifically established and that adequate staff is available to respond to an emergency as required by 10 CFR 50.47(b)(1), 10 CFR 50, Appendix E, paragraph IV.A, and specific criteria in NUREG-0654, Section II.A.

The inspectors observed that specific emergency assignments had been made for the licensee's emergency response organization and there were adequate staff available to respond to the simulated emergency. The initial response organization was augmented by designated licensee representatives and the planning for long term or continuous staffing of the emergency response organizations was demonstrated.

No violations or deviations were identified.

5. Onsite Emergency Organization (82301)

The licensee's onsite emergency organization was observed to determine that the responsibilities for emergency response are unambiguously defined, that adequate staffing is provided to insure initial facility accident response in key functional areas at all times, and that the interfaces are specified as required by 10 CFR 50.47(b)(2), 10 CFR 50, Appendix E, paragraph IV.A, and specific criteria in NUREG-0654, Section II.B.

The inspectors determined that performance of the licensee's onsite emergency organization was satisfactory in dealing with the simulated emergency. Adequate staffing of the emergency response facilities was provided for the initial accident response and the interfaces between the onsite organization and offsite support agencies appeared to be adequate.

No violations or deviations were identified.

6. Emergency Response Support and Resources

This area was observed to determine that arrangements for requesting and effectively using assistance resources have been made, that arrangements to accommodate State and local staff at the licensee's near-site Emergency Operations Facility have been made, and that other organizations capable of augmenting the planned response have been identified as required by 10 CFR 50.47(b)(3), 10 CFR 50, Appendix E, paragraph IV.A, and specific criteria in NUREG-0654, Section II.C.

This small scale exercise was essentially limited to establishment and maintenance of communications with local offsite agencies regarding the simulated event and related notifications and protective action recommendations. The inspection verified the licensee's arrangements to accommodate state and local staff at the near-site Emergency Operations Facility.

No violations or deviations were identified.

7. Emergency Classification System (82301)

This area was observed to determine that a standard emergency classification and action level scheme is in use by the nuclear facility licensee as required by 10 CFR 50.47(b)(4), 10 CFR 50, Appendix E, paragraph IV.C, and specific criteria in NUREG-0654, Section II.D.

An emergency action level scheme was in place and used to promptly identify the emergency. However, the simulated emergency events indicating damage affecting a safety related system were improperly classified as a Notification of Unusual Event vice an Alert. This required a controller contingency message to keep the exercise on schedule. Approximately 90 minutes later a second contingency message was provided to the Unit 2 simulator control room operators to escalate to a Site Area Emergency due to severe natural phenomena being projected with the plant not in cold shutdown as per requirements of Emergency Plan Table D-3 Number 13d, "Sustained winds or tornado in excess of design level (300 mph)." Failures to properly classify the emergency is identified as an exercise weakness and will be reviewed during subsequent exercises. (50-321, 366/85-25-01)

No violations or deviations were identified.

8. Notification Methods and Procedures

This area was observed to determine that procedures had been established for notification by the licensee of State and local response organizations and emergency personnel, and that the content of initial and followup messages to response organizations has been established; and means to provide early notification to the populace within the plume exposure pathway have been established as required by 10 CFR 50.47(b)(5), 10 CFR 50, Appendix E, paragraph IV.D, and specific criteria in NUREG-0654, Section II.E.

An inspector observed that notification methods and procedures had been established and were used to provide information concerning the simulated emergency conditions to Federal, State and local response organizations and to alert the licensee's augmented emergency response organization.

No violations or deviations were identified.

9. Emergency Communications

This area was observed to determine that provisions exist for prompt communications among principal response organization and emergency personnel as required by 10 CFR 50.47(b)(6), 10 CFR 50, Appendix E, paragraph IV.E, and specific criteria in NUREG-0654, Section II.F.

It appeared that administrative and equipment provisions for communications among the licensee's emergency response facilities and emergency organization were adequate. However, the exchange of data among the licensee's emergency response facilities was inadequate in that although the shift supervisor had deduced the location of the simulated steam line rupture approximately twenty minutes after the event, the TSC remained uninformed of this knowledge some seventy minutes later when the exercise clock was advanced 24 hours to allow formulation of the recovery organization. This failure to communicate emergency message traffic among the emergency response facilities is considered an exercise weakness and will be reviewed during subsequent exercises. (50-321, 366/85-25-02)

No violations or deviations were identified.

10. Public Education and Information

This area was observed to determine that information concerning the simulated emergency was made available for the dissemination to the public as required by 10 CFR 50.47(b)(7), 10 CFR 50, Appendix E, paragraph IV.D, and specific criteria in NUREG-0654, Section II.G.

Information was provided to the media and the public in advance of the exercise. The information included details on how the public would be notified and what initial actions they should take in an emergency. A rumor control program was also in place. An Emergency News Center (ENC) was established at the Visitors Center.

One press conference at the Visitors Center was attended by an inspector and it was noted that the introduction was a recantation of the previous news release which indicated personnel in certain zones were evacuating. The release was corrected to indicate that a protective action recommendation of sheltering had been made, not evacuation. The need for accuracy and reliability of emergency news information was pointed out to the licensee.

It was pointed out to NRC during a FEMA/NRC meeting on August 20, 1985, that problems were observed in coordination of press releases and emergency news information between the licensee and offsite public information officials. The licensee also noted similar problems in the emergency news program area and discussed this matter in the NRC-licensee critique. The licensee and offsite authorities held a meeting on August 29, 1985, with NRC and FEMA present, to define problems in detail and provide a course of corrective action. As a result of the meeting, the licensee committed to working with offsite authorities to improve the public information program and will fully exercise the public information program in the 1986 Hatch Emergency Preparedness Exercise. Licensee management attention is directed toward ensuring resolution of NRC, FEMA, and licensee identified exercise weaknesses. Licensee action on this matter will be reviewed in a subsequent inspection. (50-321, 366/85-25-03)

No violations or deviations were identified.

11. Emergency Facilities and Equipment (82301)

This area was observed to determine that adequate emergency facilities and equipment to support an emergency response are provided and maintained as required by 10 CFR 50.47(b)(8), 10 CFR 50, Appendix E, paragraph IV.E, and specific criteria in NUREG-0654, Section II.H.

The inspectors observed the actuation, staffing and operation of the emergency response facilities and evaluated equipment provided for emergency use during the exercise.

- a. Control Room - An inspector observed that control room personnel acted promptly to initiate emergency response to the simulated emergency. However, the emergency procedures consulted were marked: "Note: These procedures are for information only. Verify procedures are correct revisions prior to use." This use of uncontrolled procedures was identified as an exercise weakness and will be reviewed during subsequent inspections. (50-321, 366/85-25-04) It should also be noted that Emergency Procedures marked for reference only were also observed in the TSC and EOF at later times during the exercise. Additionally, a controlled copy of an emergency implementing procedure was found lying unattended in the Training/Administration Building.
- b. Technical Support Center (TSC) - The TSC was activated and staffed after the simulated emergency conditions led to an Alert emergency classification. The TSC staff appeared to be knowledgeable concerning their emergency responsibilities. The TSC operations generally

proceeded smoothly with the exception of update briefings which required TSC "department heads" to assemble in the back conference room. In one case this resulted in no TSC supervisor being available to take note of rapidly rising radiation levels in the unit 2 reactor building. The inspector also noted that periodic emergency status updates were made from the TSC from 0925 to 1015 EDT with no obvious supervision and used terminology that confused the offsite authorities. It appeared the confusion centered around plant parameters addressing the initiating conditions and associated Emergency Action Levels (EAL). This transfer of information from the TSC without apparent release approval and the difficulty in communicating initiating conditions and EALs is identified as an exercise weakness and will be reviewed during a subsequent exercise. (50-321, 366/85-25-05)

- c. Operations Support Center (OSC) - The OSC was activated and fully functional within twenty minutes of the declaration of the Alert. An inspector observed that operations at the OSC were supervised by licensee personnel predesignated in the emergency plan and implementing procedures. Teams were formed promptly, briefed and dispatched quickly. The inspector noted that the PA system in the OSC was not always audible.
- d. Emergency Operations Facility - The EOF is located onsite in the Training/Administration Building. The facility appears to be adequately arranged, equipped and staffed to support an emergency response. The EOF was promptly activated and radiological habitability of the area was periodically assessed. Status boards were strategically located and promptly posted, however a status board depicting the protective action recommendations was not observed. The inspector also noted that there was excessive noise in the EOF throughout most of the exercise and particularly noted that the public information staff appeared to be heavily involved in information collection and processing. It was further noted that the public information staff representatives appeared to be encountering difficulty obtaining clarification of information and data presented to them. See paragraph 10 for additional details on this matter.
- e. Corporate Emergency Center (CEC) - The CEC is located at the Georgia Power Corporate office in Atlanta, Georgia and was not evaluated during this exercise.

No violations or deviations were identified.

12. Accident Assessment (82301)

This area was observed to determine that adequate methods, systems and equipment for assessing and monitoring actual or potential offsite consequences of a radiological emergency condition are in use as required by 10 CFR 50.47(b)(9), 10 CFR 50, Appendix E, paragraph IV.B, and specific criteria in NUREG-0654, Section II.I.

The accident assessment program includes both an engineering assessment of plant status and an assessment of radiological hazards to both onsite and offsite personnel resulting from the accident. The dose assessment methods incorporated both detailed meteorological parameters and inplant data to predict the consequences of a radiological release and to evaluate the actual (simulated) release.

No violations or deviations were identified.

13. Protective Responses (82301)

This area was observed to determine that guidelines for protective actions during the emergency, consistent with Federal guidance, are developed and in place, and protective actions for emergency workers, including evacuation of nonessential personnel, are implemented promptly as required by 10 CFR 50.47(b)(10), and specific criteria in NUREG-0654, Section II.J.

An inspector verified that the licensee had and used emergency procedures for formulating protective action recommendations for offsite populations within the 10 mile EPZ. The licensee's protective action recommendations were consistent with the EPA and other criteria and notifications were made to the appropriate State and local authorities within the 15 minute criteria.

An inspector observed that protective actions were instituted for onsite emergency workers which included periodic radiation surveys in the facility and continued accountability of emergency response personnel.

No violations or deviations were identified.

14. Radiological Exposure Control (82301)

This area was observed to determine that means for controlling radiological exposures, in an emergency, are established and implemented for emergency workers and that they included exposure guidelines consistent with EPA recommendations as required by 10 CFR 50.47(b)(11), and specific criteria in NUREG-0654, Section II.K.

An inspector noted that radiological exposures were controlled throughout the exercise by issuing emergency workers supplemental dosimeters and by periodic surveys in the emergency response facilities. Exposure guidelines were in place for various categories of emergency actions and adequate protective clothing and respiratory protection were available and used as appropriate.

No violations or deviations were identified.

15. Medical and Public Health Support (82301)

This area was observed to determine that arrangements are made for medical services for contaminated injured individuals as required by

10 CFR 50.47(b)(12), 10 CFR 50, Appendix E, paragraph IV.E, and specific criteria in NUREG-0654, Section II.L.

An inspector observed the emergency medical rescue activities at the accident scene, transport of the victim from the scene to Vidalia, Georgia, and treatment by the staff at Meadows Memorial Hospital. Appropriate judgement was displayed with regard to medical practices, however, additional decontamination of the patient prior to transport and better contamination control to minimize equipment contamination prior to transport would have improved radiological exposure control.

No violations or deviations were identified.

16. Recovery and Reentry Planning (82301)

This area was observed to determine that general plans are made for recovery and re-entry as required by 10 CFR 50.47(b)(13), 10 CFR 50, Appendix E, paragraph IV.H. and specific criteria in NUREG-0654, Section II.M.

The licensee demonstrated the initiation of the re-entry and recovery operations with the establishment of a recovery organization.

No violations or deviations were identified.

17. Exercise Critique (82301)

The licensee's critique of the emergency exercise was observed to determine that deficiencies identified as a result of the exercise and weaknesses noted in the licensee's emergency response organization were formally presented to licensee management for corrective actions as required by 10 CFR 50.47(b)(14), 10 CFR 50, Appendix E, paragraph IV.E, and specific criteria in NUREG-0654, Section II.N.

A formal licensee critique of the emergency exercise was held on August 9, 1985, with exercise controllers, key exercise participants, licensee management and NRC personnel attending. Many but not all of the weaknesses in the emergency preparedness program, identified as a result of this exercise were presented by the licensee. NRC also presented a summary of exercise findings. Followup of corrective actions will be accomplished through subsequent NRC inspections.

A public critique of the exercise was also held on August 9, 1985.

No violations or deviations were identified.

18. Inspector Followup Item (92701)

(Closed) Unresolved Item 50-321/85-23-05, 50-366/85-23-05: Verification of annual retraining of offsite medical support organization. The inspector reviewed the licensee's training program and verified that annual retraining of Appling General Hospital personnel had occurred as of August 6, 1985.

19. Regional Assistance Committee Report

The Regional Assistance Committee Report dealing with offsite agency performance during the exercise will be forwarded by a separate transmittal.