



South Texas Project Electric Generating Station P.O. Box 289 Wadsworth, Texas 77483


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U. S. Nuclear Regulatory Commission
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Washington, DC 20555

STP NUCLEAR OPERATING COMPANY
Units 1 and 2
Docket Nos. STN 50-498; STN 50-499
Changes to Emergency Plan Implementing Procedure

In accordance with 10CFR50.4(b)(5) and 10CFR50, Appendix E, Section V, the STP Nuclear Operating Company hereby submits the attached revision of fifteen (15) Emergency Plan Implementing Procedures.

If there are any questions regarding this matter, please contact Mr. Fred Puleo at (361) 972-8697 or myself at (361) 972-8053.



P. L. Serra
Manager, Plant Protection

FJP/mk

Enclosure: Letter of Receipt
Summary of Changes
OPGP05-ZV-0001, Emergency Response Exercises and Drills, Rev. 4
OPGP05-ZV-0002, Emergency Response Activities Schedule, Rev. 9
OPGP05-ZV-0003, Emergency Response Organization, Rev. 4
OPGP05-ZV-0006, Emergency Notification and Response System, Rev. 2
OPGP05-ZV-0007, Prompt Notification System, Rev. 3
OPGP05-ZV-0009, Emergency Facilities Inventories and Inspections, Rev. 7
OPGP05-ZV-0010, Emergency Plan Revision, Rev. 3
OPGP05-ZV-0011, Emergency Communications, Rev. 2
OPGP05-ZV-0012, Emergency Facility Inventories, Rev. 1
OERP01-ZV-RE02, Documentation, Rev. 4

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0ERP01-ZV-TP03, Severe Accident Management, Rev. 2
0ERP01-ZV-SH01, Shift Supervisor, Rev. 14
0ERP01-ZV-SH03, Acting Security Manager, Rev. 4
0ERP01-ZV-EF25, Site Public Affairs Coordinator, Rev. 4
0ERP01-ZV-IN02, Notifications to Offsite Agencies, Rev. 10

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SUMMARY OF CHANGES

0PGP05-ZV-0001, Emergency Response Exercises and Drills, Rev. 4

- Clarified position titles to match current organization chart.
- Clarified record retention for Forms 1 & 2.

0PGP05-ZV-0002, Emergency Response Activities Schedule, Rev. 9

- Clarified position titles to match current organization chart.
- Clarified record retention for Forms 1-20.

0PGP05-ZV-0003, Emergency Response Organization, Rev. 4

- Clarify Fitness for Duty requirements (with note box) to match procedure 0PGP09-ZA-0002, Fitness For Duty Program.
- Added reference to procedure 0PGP09-ZA-0002, Fitness For Duty Program.
- Clarified position titles to match current organization chart.

0PGP05-ZV-0006, Emergency Notification and Response System, Rev. 2

- Clarified position titles to match current organization chart.

0PGP05-ZV-0007, Prompt Notification System, Rev. 3

- Clarified position titles to match current organization chart.
- Clarified record retention for Forms 1-5.
- Clarified Siren Test box information on page 5 and Addendum 1

0PGP05-ZV-0009, Emergency Facilities Inventories and Inspections, Rev. 7

- Clarified position titles to match current organization chart.

0PGP05-ZV-0010, Emergency Plan Revision, Rev. 3

- Clarified position titles to match current organization chart.
- Clarified record retention for Forms 1-4.

0PGP05-ZV-0011, Emergency Communications, Rev. 2

- Clarified position titles to match current organization chart.
- Changed Telephone Area Code from 409 to 979.

0PGP05-ZV-0012, Emergency Facility Inventories, Rev. 1

- Clarified position titles to match current organization chart.

0ERP01-ZV-RE02, Documentation, Rev. 4

- Changed Media Information Center to Joint Information Center (name change).
- Clarified position titles to match current organization chart.

0ERP01-ZV-TP03, Severe Accident Management, Rev. 2

- Clarified position titles to match current organization chart.

SUMMARY OF CHANGES

0ERP01-ZV-SH01, Shift Supervisor, Rev. 14

- Changes typo on table of contents (Addendum 3 to 4).

0ERP01-ZV-SH03, Acting Security Manager, Rev. 4

- Deleted reference to deleted procedure 0SPD01-SE-0001, Electronic Security System.

0ERP01-ZV-EF25, Site Public Affairs Coordinator, Rev. 4

- Changed Telephone Area Code from 409 to 979.

0ERP01-ZV-IN02, Notifications to Offsite Agencies, Rev. 10

- Changed Telephone Area Code from 409 to 979.

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Emergency Response Exercises and Drills					
Quality	Non Safety-Related	Usage: Referenced	Effective Date: 03/16/00		
Max Keyes	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Emergency Response Exercises and Drills**1.0 Purpose and Scope**

- 1.1 This procedure delineates requirements and provides guidance for developing, conducting, evaluating and documenting emergency response exercises or drills to comply with regulatory requirements.
- 1.2 This procedure applies to the conduct of exercises or drills necessary to evaluate the proficiency of emergency response personnel, to verify a proper state of emergency preparedness at the South Texas Project Electric Generating Station (STPEGS) and provide criteria for federal, state, and county agency participation, as necessary, in STPEGS exercises or drills.
- 1.3 This procedure describes the duties and responsibilities of personnel who are assigned as a Controller or Evaluator. Additionally, it describes the requirements for qualification to be completed prior to conducting a drill or exercise.
- 1.4 This procedure applies to all station personnel who may participate in the development, control or evaluation of emergency response exercises or drills at the STPEGS.

2.0 Definitions

- 2.1 **COMBINED FUNCTIONAL DRILL:** A simulated casualty that tests the integrated capability and a major portion of the basic elements of the Emergency Plan and Emergency Response Organization (ERO).
- 2.2 **CONTROLLER:** An individual who has the responsibility to provide details, instructions, and data during a drill or exercise.
- 2.3 **DRILL:** A supervised instruction period aimed at testing, developing and maintaining skills in a particular operation. It may be a component of an exercise.
- 2.4 **EXERCISE DEFICIENCY:** An item which indicates the demonstrated level of response would have precluded effective implementation of the Emergency Plan in the event of an actual emergency.
- 2.5 **EVALUATOR:** An individual who has the responsibility to evaluate actions during an emergency drill or exercise.
- 2.6 **EXERCISE/DRILL COORDINATOR:** An individual who is assigned overall responsibility for the conduct and control of a drill or exercise.
- 2.7 **EXERCISE:** An exercise is an event that tests the integrated capability and a major portion of the basic elements existing within the emergency preparedness plans and organizations.

Emergency Response Exercises and Drills

- 2.8 **EXERCISE WEAKNESS:** An item which indicates the demonstrated level of response may have precluded effective implementation of the Emergency Plan in the event of an actual emergency.
- 2.9 **FULL PARTICIPATION:** Offsite local and state authorities and licensee personnel physically and actively take part in demonstrating their integrated capabilities to adequately assess and respond to an emergency at the STPEGS.
- 2.10 **IMPROVEMENT ITEM:** An item which may enhance the current program.
- 2.11 **LEAD CONTROLLER:** A Controller who has been designated by the drill coordinator, as the senior Controller in the particular Emergency Response Facility to which he/she has been assigned.
- 2.12 **OBSERVER:** An individual who only observes exercise/drill activities.
- 2.13 **PARTIAL PARTICIPATION:** Offsite authorities may take part in the exercise sufficient to successfully demonstrate direction and control functions.
- 2.14 **LEVEL**
- 2.14.1 **Level 1:** A Combined Functional Drill other than a Dress Rehearsal or Graded Exercise.
- 2.14.2 **Level 2:** The Dress Rehearsal for a Graded Exercise.
- 2.14.3 **Level 3:** Graded Exercise.
- 2.15 **SCENARIO DEVELOPMENT COMMITTEE (SDC):** A committee established to develop Level 1, Level 2 or Level 3 emergency response exercise or drill scenarios.
- 2.16 **SCENARIO MANAGEMENT REVIEW COMMITTEE (SMRC):** A committee chaired by the Emergency Response Supervisor or designee and usually comprised of three upper level management personnel who provide final review and approval of Dress Rehearsal and Graded Exercise scenarios.
- 2.17 **TABLETOP DRILL:** A walkthrough training session conducted for one or more emergency response facilities or designated functional groups to enhance teamwork and practice individual skills. A tabletop drill is not a Combined Functional Drill.

Emergency Response Exercises and Drills**3.0 Responsibilities****3.1 The Supervisor, Emergency Response or designee**

- 3.1.1 Oversight for the planning, development, conduct and evaluation of exercises or drills.
- 3.1.2 Approves objectives and evaluation criteria for each Combined Functional Drill.
- 3.1.3 Chairs the SMRC for review of the Dress Rehearsal and Exercises.
- 3.1.4 Ensures an identified exercise weakness or deficiency receives corrective action.
- 3.1.5 Designates Lead Controllers.
- 3.1.6 Obtains senior management approval for the Dress Rehearsal or Graded Exercise scenarios.
- 3.1.7 Designates the Exercise/Drill Coordinator.

3.2 Exercise/Drill Coordinator

- 3.2.1 Assumes responsibility for the overall conduct and control of an exercise or drill utilizing Form 1, Drill Coordinator Status Tracking Checklist.
- 3.2.2 Ensures qualified individuals are available to perform Lead Controller, Controller or Evaluator duties.
- 3.2.3 Submits exercise or drill scenarios to the Supervisor, Emergency Response, for approval.
- 3.2.4 Ensures documents generated as a result of this procedure are assembled and disposed of in accordance with Section 6.0 of this procedure.

3.3 Controllers provide players with exercise or drill plant casualty, simulation, system or component parameter information and information earned by the player.

3.4 Evaluators provide evaluation of ERO personnel performance.

3.5 The SMRC reviews and provides approval on Dress Rehearsal and exercise scenarios and objectives. (IR 90-10)

3.6 The SDC develops and reviews Combined Functional Drills, the Dress Rehearsal, and the Graded Exercise.

Emergency Response Exercises and Drills

3.7 STPEGS Department Managers

3.7.1 Provide candidates for Controllers and Evaluators as requested by the Exercise/Drill Coordinator.

3.7.2 Provide candidates for SDCs.

4.0 Procedure

NOTE

CONFIDENTIALITY of scenario contents shall be maintained by all individuals involved in the development process, or who participate as Controllers/Evaluators.

Personnel involved in the development, review and approval of exercise or drill scenarios should be excluded as exercise/drill participants and act as a Controller or Evaluator during the exercise/drill.

4.1 Scenario Development (SDC) and Scenario Management Review Committees (SMRC)

4.1.1 Scenario Development Committees

4.1.1.1 If the scenario is level 1, 2 or 3, then the Emergency Response Supervisor shall ensure an SDC is established.

4.1.1.2 Guidance for selection of a Scenario Development Committee is found in Addendum 1.

4.1.2 Scenario Management Review Committee (IR 90-10)

4.1.2.1 The Supervisor, Emergency Response requests the names of management level individuals to serve on the SMRC.

4.1.2.2 If possible, the committee member should be a member of the ERO.

4.2 Scenario Development and Exercise Preparation

4.2.1 Guidance for scenario development and exercise preparation for Level 1, 2 or 3 drills is found in Addendum 2.

4.2.2 The Drill Coordinator will oversee the development of scenarios using Form 1 as guidance.

Emergency Response Exercises and Drills**4.3 Conduct and Control of Drills and Exercise**

- 4.3.1 Combined Functional Drills shall be conducted utilizing an approved scenario.
- 4.3.2 Every attempt should be made to utilize the plant simulator to its full capability in the dynamic mode.
- 4.3.3 Exercise/drill initial conditions should be made available to players on the day prior to the start of the exercise/drill. The only exception is for unannounced exercises/drills.
- 4.3.4 Personnel serving as Controllers and/or Evaluators shall be qualified in accordance with section 4.6 of this procedure.
- 4.3.5 Deviations from the approved scenario by the Controllers shall be referred to the Exercise/Drill Coordinator for approval prior to implementation.
- 4.3.6 Drills other than a Graded Exercise are considered training periods and can be placed in time suspension by the Exercise/Drill Coordinator at any time to correct a problem that is developing, or to explain any specific questions that may arise during the drill period.
- 4.3.7 Graded Exercises should not be placed on time hold during the exercise period; however, the Exercise/Drill Coordinator can terminate an exercise if it appears the exercise is not continuing in a manner that would allow for satisfactory completion of the approved objectives.
- 4.3.8 If an actual emergency should occur during the course of conducting the drill or exercise then any level drill or exercise may be suspended or terminated by the Shift Supervisor, Drill Coordinator or Drill Emergency Director.
- 4.3.9 The Exercise/Drill Coordinator and controllers/evaluators utilize the guidelines found in Addendum 3, Guidance for Conduct of an Exercise or Drill.

4.4 Evaluation of Drills and Exercises

- 4.4.1 Drills and Exercises shall have specific evaluation criteria which describe how to measure the degree of success or failure attained for each objective. Exercise/drill objective evaluations shall be documented.

Emergency Response Exercises and Drills

- 4.4.2 Each Emergency Response Facility shall conduct a facility debrief and self-critique monitored by the Lead Controller of that facility following the termination of a drill or exercise.
 - 4.4.2.1 Participants should include all players, Controllers, and Evaluators.
 - 4.4.2.2 Players will present team comments.
 - 4.4.2.3 Controllers and Evaluators will critique players.
- 4.4.3 Following the facility critique, a Controller/Evaluator meeting should be conducted addressing the following, as applicable.
 - 4.4.3.1 Completing any unchecked objective items with Controller/Evaluator input.
 - 4.4.3.2 Reviewing the completed objective items.
 - 4.4.3.3 Reviewing player comment input.
 - 4.4.3.4 Assembling critique items to be presented at the Station critique.
- 4.4.4 Station Critiques for Combined Functional Drills are conducted using guidance provided in Addendum 4.
- 4.5 Lead Controllers
 - 4.5.1 The Emergency Response Division personnel function as Emergency Response Lead Controllers. Other station personnel may be selected by the Supervisor, Emergency Response, to function as Lead Controllers if required.
 - 4.5.2 A Lead Controller provides instructional training in the conduct and evaluation of exercises and drills to personnel qualifying as Controllers or Evaluators. Lead Controllers provide on-the-spot correction of erroneous player performance, with the exception of during the Graded Exercise.
- 4.6 Controller and Evaluator Qualification
 - 4.6.1 Controller/Evaluator qualification is the responsibility of the Exercise/Drill Coordinator. The period of qualification is indefinite and may be revoked at the discretion of the Supervisor, Emergency Response.

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- 4.6.2 Controller/Evaluator candidates complete Controller/Evaluator training course EPT-312. The course consists of detailed presentation of material for controlling and evaluating an exercise or drill. Controller/Evaluators are briefed by Lead Controllers regarding responsibilities prior to the conduct of Combined Functional Drills.
- 4.6.3 Guidance for Controllers is found in Addendum 5.

5.0 References

- 5.1 STPEGS Emergency Plan
- 5.2 NUREG-0654/FEMA-REP-1, Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Response in Support of Nuclear Power Plants
- 5.3 10 CFR 50, Appendix E
- 5.4 OPGP03-ZT-0139, Emergency Response Training Program
- 5.5 OPGP03-ZX-0002, Condition Reporting Process
- 5.6 NUREG/CR-3365, Report to the NRC on Guidance for Preparing Scenarios for Emergency Preparedness Exercises at Nuclear Generating Stations
- 5.7 STPEGS ST-HL-AE-3497, July 11, 1990, Response to Inspection Report 90-10

6.0 Documentation

- 6.1 For Level 1, 2 or 3 drills, the following documentation is assembled and forwarded to Records Management.
 - 6.1.1 Approved Scenario Manual
 - 6.1.2 A Station Critique package or Drill/Exercise Report which contains the material necessary to demonstrate evaluation of all applicable objectives and a proper self- critique process was conducted.
 - 6.1.3 Controller/Evaluator briefing and Player briefing attendance sheets.
- 6.2 For mini-drills (e.g., medical, assembly and accountability, PASS, Radiological Monitoring Drill), the following documentation is assembled and forwarded to Records Management.
 - 6.2.1 Scenario timeline
 - 6.2.2 Scenario objective(s)

Emergency Response Exercises and Drills

6.2.3 A Critique Package which contains the materials necessary to demonstrate evaluation of all applicable objectives and a proper self-critique process was conducted.

6.3 For table top drills, the following documentation is assembled and forwarded to Records Management.

6.3.1 Scenario timeline

6.3.2 Scenario objective(s)

7.0 Support Documents

Addendum 1, Guidance for Selection of a Scenario Development Committee

Addendum 2, Guidance for Scenario Development and Exercise Preparation

Addendum 3, Guidance for Conduct of an Exercise or Drill

Addendum 4, Guidance for Conduct of Station Critique

Addendum 5, Guidance for Controllers

Form 1, Drill Coordinator Status Tracking Checklist

Form 2, Drill Scenario Development Status Tracking Checklist

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Addendum 1	Guidance for Selection of a Scenario Development Committee		Page 1 of 1

- 1.0 For a Dress Rehearsal and/or Graded Exercise, the Supervisor, Emergency Response, should request the following Departments to supply the names of two candidates with expertise in the below listed disciplines to the Emergency Response Division for consideration as members of the SDC.
 - 1.1 Two candidates for each of the following: Chemistry, Rad/Met data
 - 1.2 Plant Operations
 - 1.3 Two candidates for each of the following: fire response, injured personnel, security events
 - 1.4 Simulator support
 - 1.5 Two from each craft: Mechanical, Electrical, I&C
- 2.0 Selection as a SDC member should be based on the following:
 - 2.1 Each candidate should have at least two years line experience at STPEGS or have completed Licensed Operator Training or Certification at STPEGS or have previous experience in Emergency Response.
 - 2.2 Plant Operations candidates should have a Senior Reactor Operator (SRO) license and previous Unit or Shift Supervisor experience.
 - 2.3 Training Department candidates should be qualified simulator instructors and have an SRO certification.
- 3.0 The candidates' qualifications are reviewed by the Supervisor, Emergency Response and, if acceptable, one of the two candidates' names from each Department is approved by the Supervisor, Emergency Response. (IR 90-10)
- 4.0 Final make-up of the SDC is at the discretion of the Exercise/Drill Coordinator.

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NOTE

Overall exercise preparation and conduct is tracked with Form 1, Drill Coordinator Status Tracking Checklist. Scenario development is tracked with Form 2, Drill Scenario Development Status Tracking Checklist.

- 1.0 Prior to a Dress Rehearsal or Graded Exercise, the SMRC shall review and approve the scenario.
- 2.0 Scenario developmental responsibility guidance is as follows:
 - 2.1 Emergency Response
 - 2.1.1 Scenario development coordination
 - 2.1.2 Introduction
 - 2.1.3 Objectives
 - 2.1.4 Guidelines
 - 2.1.5 Controller/Evaluators
 - 2.1.6 Initial conditions (plant and met)
 - 2.1.7 Narrative summary
 - 2.1.8 Time-line
 - 2.1.9 Messages
 - 2.1.10 Controller instructions and forms
 - 2.1.11 Supplementary material
 - 2.1.12 Word processing
 - 2.1.13 Scenario manual assembly
 - 2.1.14 Conceptual scenario events
 - 2.1.15 Scenario validation on simulator

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2.2 Generation Support

- 2.2.1 Chemistry data for Reactor Coolant System (RCS), Post Accident Sampling System (PASS), etc.
- 2.2.2 Onsite rad data (contamination, survey, Radiological Monitoring System (RMS), etc.)
- 2.2.3 Offsite rad data
- 2.2.4 Meteorological data
- 2.2.5 Conceptual scenario events
- 2.2.6 Messages
- 2.2.7 Final technical review

2.3 Plant Operations

- 2.3.1 Plant parameter data
- 2.3.2 Initial conditions
- 2.3.3 Scenario validation on simulator
- 2.3.4 Conceptual scenario events
- 2.3.5 Messages
- 2.3.6 Clearance Orders, Operability Tracking Logs
- 2.3.7 Final technical review

2.4 Plant Protection

- 2.4.1 Medical emergency data
- 2.4.2 Fire emergency events
- 2.4.3 Security events data
- 2.4.4 Conceptual scenario events
- 2.4.5 Final technical review

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2.5 Training

2.5.1 Scenario validation on simulator

2.5.2 Conceptual scenario events

2.5.3 Final technical review

2.6 Maintenance

2.6.1 Repair team data

2.6.2 Conceptual scenario events

2.6.3 Mockup work packages

2.6.4 Final technical review

3.0 Select objectives for the scenario

3.1 Exercise scenarios shall have specific objective requirements.

3.2 The objectives should allow for demonstration of items found deficient in previous exercises.

3.3 The objectives may include incident specific items judged worthy of evaluation during the exercise.

3.4 If a full participation Level 3 exercise, then the Exercise/Drill Coordinator shall obtain review and concurrence of Federal Emergency Management Agency (FEMA).

4.0 Determine main scenario events

4.1 If a Level 2 or 3 exercise, then present to SMRC for preliminary review and concurrence.

4.2 Run main scenario sequence on simulator

4.3 Task SDC members to:

4.3.1 Evaluate data for accuracy

4.3.2 Establish peripheral scenario sequence

4.3.3 Determine any other necessary data

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- 5.0 Run scenario on simulator
 - 5.1 Verify all indications
 - 5.2 Retrieve applicable Section 6 data and supply to SDC members
 - 5.3 Determine all necessary references
 - 5.4 Determine initial conditions and develop simulated exercise work packages, Equipment Clearance Orders (ECOs) and Operability Tracking Logs (OTLs)

- 6.0 Develop the following data:
 - 6.1 Detailed plant data - verify simulator data and generate any other appropriate data
 - 6.2 Inplant radiological and radiochemistry data
 - 6.3 Inplant chemistry and radiological sample results, portable instrument readings and detailed equipment status
 - 6.4 Onsite and offsite radiological data
 - 6.5 Peripheral event data
 - 6.6 Reentry and recovery data
 - 6.7 Messages to support all scenario activities

- 7.0 If exercise is a Graded Exercise then run the exercise on a simulator with a crew unfamiliar with the scenario.
 - 7.1 Verify all indications
 - 7.2 Compare to previous run
 - 7.3 Review data for emulation disparities from anticipated real plant conditions
 - 7.4 Document and ensure crew comments are addressed by the SDC
 - 7.5 Emphasize to simulator crew the need to maintain confidentiality of simulator run from Graded Exercise participants

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- 8.0 If Level 2 or 3 exercise then present the scenario for SMRC review and concurrence prior to final technical review.
- 9.0 Perform final technical review
 - 9.1 Overview
 - 9.2 Inplant data and systems status
 - 9.3 Onsite radiological data
 - 9.4 Release pathways
 - 9.5 Offsite radiological data
 - 9.6 Peripheral events
 - 9.7 Conflict of scenario with established procedures
 - 9.8 Event initiation and technical message
- 10.0 If Level 2 or 3 exercise then present to SMRC for final review and approval. Submit the scenario package to Supervisor, Emergency Response, for final review and signature approval.
- 11.0 If scenario is a Graded Exercise then submit to NRC.
 - 11.1 Meet with the NRC to present scenario.
 - 11.2 Document NRC concerns and present to SDC and SMRC.
- 12.0 Continue review prior to exercise date
 - 12.1 Implement appropriate corrections.
 - 12.2 Ensure guidelines of final technical review are followed for any changes.
 - 12.3 If Level 2 or 3 exercise then ensure SMRC is informed of any major changes made and approves of the changes.

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- 13.0 Scenario messages, to the extent possible, should not contain information which is identical to or clearly and specifically related to Emergency Action Level values.
- 14.0 The scenario messages and their time-line should be consistent with the information which would be available at that time in the event. For example, it would take several hours from the time a PASS sample is requested to the time the results would be available.
- 15.0 To the extent possible, contingency actions should be identified in the scenario and its messages. For example, if Control Room personnel could solve a problem or provide an exercise solution that would interfere with the overall scenario, contingencies should be available to the Lead Controller of the facility.

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Addendum 3	Guidance for Conduct of an Exercise or Drill		Page 1 of 1

- 1.0 Free play (allowing the players to go as far as possible in their response actions to a simulated initiating event) is encouraged and managed by the controller team. All actions should be performed unless the actions could result in.
 - 1.1 Radiation exposure
 - 1.2 Unsafe conditions or unsafe work activities
 - 1.3 Expenditures which have not been approved for the drill
 - 1.4 Impact on unit operations or availability
 - 1.5 Removing a weapon from its holster or firing a weapon
 - 1.6 Jeopardizing the scenario
- 2.0 Controllers and Evaluators should attend a Controller/Evaluator pre-drill briefing for any exercise or drill in which they act as Controllers or Evaluators. Controllers shall know in advance:
 - 2.1 Exercise objectives
 - 2.2 Limits of play
 - 2.3 Simulation allowed
 - 2.4 Applicable portions of the scenario
- 3.0 Scenario messages used to control the progress of the scenario shall be issued by a Controller at a time consistent with the scenario time-line sequence of events.
- 4.0 Contingency messages used to elicit a response for further action are utilized only when specifically authorized by the Lead Controller. This type of contingency message may result in an exercise weakness or deficiency.
- 5.0 Controllers shall not question or provide instruction other than to clarify scenario parameters or information to any player in a Graded Exercise. In any other Tabletop Drill, Combined Functional Drill or Exercise, interfacing by the Controller or Evaluator or Instructor to correct on-the-spot deficiencies in order to maximize training effort is allowed.
- 6.0 Controllers should be careful to avoid making scenario events obvious by pre-positioning themselves or materials at event locations. Controllers should promptly arrive at event locations.
- 7.0 Observers shall not question, instruct, provide details or interact in any manner with any player in a Graded Exercise.
- 8.0 Controllers and Evaluators shall maintain a chronological record of key events and observations.

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Addendum 4	Guidance for Conduct of Station Critique		Page 1 of 1

- 1.0 Appropriate exercise Controllers/Evaluators, and key personnel from each facility should assemble for a post-exercise critique that is facilitated by the Exercise/Drill Coordinator.
- 2.0 Controllers and Evaluators should ensure follow-up questions on specific performance actions/observations are asked to appropriate players to ensure an accurate event sequence.
- 3.0 At the post-exercise critique, items are sorted into strengths, improvement, weakness, and deficiency items.
- 4.0 The results of the post-exercise critique are presented at a Station critique to appropriate personnel and as a pre-brief to the NRC Graded Exercise inspectors prior to their exit.
- 5.0 If an exercise weakness is identified by the NRC following a Graded Exercise then ensure proposed corrective actions are sent to the NRC within 30 days of notification by the NRC.
- 6.0 If an exercise deficiency is identified by the NRC following a Graded Exercise then ensure corrective action for the exercise deficiency is initiated within 120 days of notification by the NRC.
- 7.0 Combined Functional Drill weakness and deficiency items are tracked to completion by the Emergency Response Division and documentation is provided. Appropriate items, as determined by the Supervisor, Emergency Response, are tracked by using OPGP03-ZX-0002, Condition Reporting Process.

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Addendum 5	Guidance for Controllers		Page 1 of 1

- 1.0 Controllers read the following sections of the scenario, as applicable: introduction, objectives, guidelines, narrative summary, initial plant conditions, initial meteorological conditions, onsite scenario time-line, and messages. Also, they familiarize themselves with any other scenario data that is relevant to the area they are assigned or may be assigned to.

- 2.0 Controllers attend one or more pre-exercise/drill briefs. These sessions are conducted by the Emergency Response Division and consist of a detailed discussion of the scenario.

- 3.0 Controllers physically walk-down the area, if applicable. They are responsible for familiarizing themselves with all aspects of the area as it is affected by the scenario.

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Form 1	Drill Coordinator Status Tracking Checklist		Page 1 of 5

NOTE

The checklist is provided as an aid for the Exercise/Drill Coordinator.

1.0 Classification and Scheduling

1.1 Exercise/Drill Coordinator assigned _____
Name

1.2 Assigned date of exercise _____
Date

1.3 Exercise Level: (Check one or more as required)

1.3.1 Level 1:

_____ 1.3.1.1 Complete activation of on site and duty ERO other than for a Dress Rehearsal or Graded Exercise.

1.3.2. Level 2:

_____ 1.3.2.1 Complete activation of on site and duty ERO other than for a Dress Rehearsal or Graded Exercise.

1.3.3 Level 3:

_____ 1.3.3.1 Partial Participation Graded Exercise.

_____ 1.3.3.2 Partial Participation Graded Exercise.

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2.0 Scenario Development and Routing

- Date
- _____ Determine Controllers, Evaluators, and participants for exercise.
- _____ For any exercise, coordinate the date and time of the event with the Plant General Manager, or designee, and appropriate offsite agencies, if involved.
- _____ For Level 2 and Level 3 exercises, a SMRC shall review and concur with the scenario objectives and the scenario, prior to final approval. (IR 90-10)
- _____ Submit to SMRC objectives, scenario narrative and time-line for Dress Rehearsal or Graded Exercise for review. (IR 90-10)
- _____ Submit exercise scenario package to the Supervisor, Emergency Response, for final review and approval.
- _____ If Level 3 full participation exercise, submit objectives to FEMA/NRC 90 days before the exercise.
- _____ If Level 3 full participation exercise, submit scenario to FEMA/NRC 60 days before the exercise.
- _____ If Level 3 exercise, receive FEMA/NRC acceptance of the scenario.
- _____ If the State Division of Emergency Management (DEM) or Bureau of Radiation Control (BRC) is involved in an exercise scenario, then provide each agency a copy.

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3.0 Notification of Exercise

3.1 For a Dress Rehearsal or Graded Exercise, the Exercise/Drill Coordinator notifies, as applicable, the following and determines whether they wish to participate or observe at the beginning of the scenario development process.

3.1.1 Offsite Agencies

<u>Date</u>	<u>Participate</u>	
_____	_____	Matagorda County, County Judge's Office
_____	_____	Matagorda County Sheriff's Office
_____	_____	Bay City Fire Department
_____	_____	Palacios Fire Department
_____	_____	Matagorda County Hospital District
_____	_____	Ambulance Services
_____	_____	Texas Department of Public Safety, Division of Emergency Management
_____	_____	Texas Department of Public Safety, Pierce, Disaster District Sub 2A
_____	_____	Texas Department of Public Safety, License and Weight Division, Rosenberg Office
_____	_____	Texas Department of Health, Bureau of Radiation Control
_____	_____	NRC Resident Inspector
_____	_____	Other (specify) - _____ _____

3.2 Prior to a Graded Exercise, contact participating agencies and remind them of exercise date (or week for unannounced).

<u>Date</u>	<u>Participate</u>	
_____	_____	Matagorda County, County Judge's Office
_____	_____	Matagorda County Sheriff's Office
_____	_____	Bay City Fire Department
_____	_____	Palacios Fire Department
_____	_____	Matagorda County Hospital District
_____	_____	Ambulance Services
_____	_____	Texas Department of Public Safety, Division of Emergency Management
_____	_____	Texas Department of Public Safety, Pierce, Disaster District Sub 2A
_____	_____	Texas Department of Public Safety, License and Weight Division, Rosenberg Office
_____	_____	Texas Department of Health, Bureau of Radiation Control
_____	_____	NRC Resident Inspector
_____	_____	Other (specify) -

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Emergency Response Exercises and Drills			
Form 1	Drill Coordinator Status Tracking Checklist		Page 5 of 5

4.0 Exercise Evaluators/Controllers

 Date

_____ Meet with Evaluator/Controllers and other personnel involved with the exercise to brief them on scope, sequence of events, and proper documentation

_____ Pass out the scenario to Evaluators/Controllers

_____ Discuss drillmanship techniques (i.e., actual vs. simulated events, prompting, preventing actual injuries, etc.)

5.0 Initial Condition Distribution

 Date

_____ Distribute initial conditions prior to exercise start. Exception: unannounced exercises

6.0 Post Exercise

6.1 Critique

 Date

_____ Meet Evaluator/Controllers with their comments prior to the station critique

_____ Conduct a critique of the exercise to review comments and performance observations

NOTE

Prior to adjourning the critique, allow participants to comment on exercise performance, which may include comments on the scenario.

7.0 Action Plan

During the critique process, items will be noted that do not meet expectations or standards. Those items, requiring further review, evaluation and/or action for resolution, will be entered into OPGP03-ZX-0002, Condition Reporting Process.

 Date

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NOTE

This checklist is provided as an aid for the Exercise/Drill Coordinator.

1.0 Scenario Coordinator assigned _____
NAME

2.0 Scope of Scenario Scenario Identification Number: _____

	COMP DATE
3.0 Objectives Determined	
3.1 Reviewed by SMRC (IR 90-10)	_____
3.2 Reviewed by select senior management (IR 90-10)	_____
3.3 Approved by Supervisor, Emergency Response	_____
3.4 Presented to SDC	_____
4.0 Main Scenario Events determined	
4.1 SMRC concurrence (IR 90-10)	_____
4.2 Preliminary simulator run complete	_____
4.3 Data distributed to SDC members	_____
4.4 Peripheral scenario events determined	_____
4.5 Additional data needs determined	_____

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Form 2	Drill Scenario Development Status Tracking Checklist		Page 2 of 2

COMP
DATE

- 5.0 Scenario simulator run complete _____
- 6.0 Data development complete _____
- 7.0 Graded Exercise simulator verification complete _____
- 8.0 SMRC review and concurrence _____
- 9.0 Final technical review complete _____

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SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

O:\PROCEDURES\APPROVED\PGP05\ZV0002.09x Effective Date: 03/16/00 Print Time / Date: 5:19 PM 03/09/00		OPGP05-ZV-0002		Rev. 9	Page 1 of 60
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Quality	Non Safety-Related	Usage: Available	Effective Date: 03/16/00		
V. Wagnon	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Emergency Response Activities Schedule**1.0 Purpose and Scope**

- 1.1 This procedure provides guidance and instructions in scheduling and performing the recurring activities of the Emergency Response Program.
- 1.2 The scope of this procedure covers the recurring activities of the Emergency Response Program and is limited to those activities only.

2.0 Limitations

- 2.1 As a minimum, the following shall be part of any Emergency Response activities schedule:
 - 2.1.1 Quarterly inventories of emergency equipment and supplies;
 - 2.1.2 Public Information support;
 - 2.1.3 Annual STPEGS Emergency Plan review/revision;
 - 2.1.4 Issuance of the Annual Training Schedule;
 - 2.1.5 Quarterly review of the Emergency Response Organization (ERO) Roster, Call-Out List, Unusual Event Notification List, and Dialogics Call-Out List;
 - 2.1.6 Annual Emergency Response procedures review/revision;
 - 2.1.7 Annual review/revision of the Letters of Agreement;
 - 2.1.8 Monthly/Quarterly/Semi-Annual/Annual communications tests;
 - 2.1.9 Annual review/revision of the Six-Year Exercise Master Plan;
 - 2.1.10 Quarterly Emergency Communications Directory/Emergency Response Procedures telephone number verification;
 - 2.1.11 Annual Emergency Response Offsite Training review;
 - 2.1.12 Annual Emergency Response Training review;
 - 2.1.13 Prompt Notification System (Siren Subsystem) Testing/ Documentation;
 - 2.1.14 Annual Letter of Certification to the Division of Emergency Management (DEM), Texas Department of Public Safety;

Emergency Response Activities Schedule

- 2.1.15 State of Texas and Matagorda County review of Emergency Action Levels (EALs);
- 2.1.16 Emergency Response Training for Local News Media Agencies;
- 2.1.17 Computer Equipment Baseline; and
- 2.1.18 Auto Dialer Tests

3.0 Responsibilities**3.1 The Supervisor, Emergency Response or designee, shall:**

- 3.1.1 Ensure all recurring Emergency Response activities are scheduled.
- 3.1.2 Periodically, review the schedule to ensure all activities are being performed in accordance with the instructions contained in this procedure.
- 3.1.3 Ensure visible postings and public emergency information brochure verifications are performed in accordance with Section 4.2.
- 3.1.4 Ensure the annual Emergency Information Calendar mailing is performed in accordance with Section 4.2.
- 3.1.5 Ensure Alert Radio distribution is verified in accordance with Section 4.2.

3.2 The Manager, Operations or designee, shall ensure inventories of Control Room emergency equipment/supplies are performed in accordance with OPGP05-ZV-0009, "Emergency Facility Inventories and Inspections."**3.3 The Manager, Information Systems or designee shall:**

- 3.3.1 Ensure Prompt Notification System siren testing and documentation is performed in accordance with OPGP05-ZV-0008, "Siren System Activation, Testing, and Documentation."
- 3.3.2 Ensure Emergency Communications Directory and Emergency Response Procedure telephone numbers are verified in accordance with Section 4.11.
- 3.3.3 Ensure communication tests are conducted in accordance with Section 4.9.
- 3.3.4 Ensure computer equipment is at current baselined version in all Emergency Response Facilities in accordance with Section 4.20.2.

Emergency Response Activities Schedule

3.4 The Manager, Health Physics or designee and Manager, Metrology Laboratory or designee, shall ensure inventories of radiological control equipment and supplies are performed in accordance with OPGP05-ZV-0009, "Emergency Facility Inventories and Inspections."

3.5 The Managers or designee having responsibility to ensure completion of Forms 1 – 20, are required to forward the completed ORIGINAL form to the Supervisor, Emergency Response or designee for review and signature. The approved form will be forwarded to Records Management System as a quality record by the Supervisor, Emergency Response or Designee.

4.0 Procedure

4.1 Quarterly Emergency Facility Inventories and Inspections

4.1.1 Inventories and inspections of the emergency facilities shall be performed in accordance with OPGP05-ZV-0009, "Emergency Facility Inventories and Inspections," and the schedule contained therein.

4.2 Public Information

4.2.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall provide written confirmation that the annual Emergency Information Calendar mailout has been completed. Written confirmation shall be documented on Form 8, "Annual Emergency Information Calendar Mailing Verification."

NOTE

The Supervisor, Emergency Response or designee, may increase the distribution frequency as necessary at selected locations.

4.2.2 Quarterly, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall distribute the Public Emergency Information Brochure and verify all visible postings within the ten mile Emergency Planning Zone (EPZ) are intact. Written confirmation shall be provided to the Supervisor, Emergency Response or designee utilizing Form 9, "Quarterly Visible Postings and Public Emergency Information Brochure Verification."

Emergency Response Activities Schedule

- 4.2.3 Verification of alert radio distribution within the ten mile EPZ by the Supervisor, Emergency Response or designee, shall be conducted as follows:
- 4.2.3.1 Quarterly, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the updated businesses, recreational areas, schools, and residents/new residents list as supplied by Central Power and Light (CP&L) and Jackson Electric Cooperative, Inc., and verify all new residents outside of siren range have been issued an alert radio. If issuance cannot be verified, attempts will be made to personally contact residents to confirm whether or not they have received a radio. A “best effort” attempt must be made to place an alert radio with those persons outside siren range. Confirmation of this quarterly review shall be completed and documented within 30 days following the calendar quarter on Form 10, “Quarterly Review of Alert Radio Distribution.”
- 4.3 Annual STPEGS Emergency Plan Review/Revision
- 4.3.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the STPEGS Emergency Plan.
- 4.3.2 The review of the STPEGS Emergency Plan shall be documented on Form 13, “STPEGS Emergency Plan Annual Review Checklist.”
- 4.3.3 Any revision of the STPEGS Emergency Plan shall be completed and documented in accordance with OPGP05-ZV-0010, “Emergency Plan Revision.”
- 4.4 Annual Review of the STPEGS Emergency Action Levels
- 4.4.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall submit the STPEGS Emergency Action Levels (EALs) to State and County agencies for review, following the guidance in Form 17, “State of Texas/Matagorda County Annual Review of the STPEGS Emergency Action Levels.”

Emergency Response Activities Schedule**4.5 Annual Training Schedule**

4.5.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall issue an Emergency Response Training Schedule, documented on Form 1, "Annual Training Schedule." The Annual Drill/Exercise Schedule will be included in the Annual Training Schedule.

4.6 Quarterly on-shift ERO, ERO Roster, Call-Out List, Unusual Event Notification List, and Dialogics Roster Review

4.6.1 Quarterly, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the ERO Roster for accuracy of personnel and validity of each member's name, position, telephone number, pager number and qualifications. This review shall be completed and documented within 30 days following the calendar quarter on Form 12, "Quarterly ERO Roster Review."

4.6.2 Supporting documentation for a review of on-shift ERO (e.g. verification documentation returned by site departments/divisions) shall be attached to Form 12.

4.6.3 Revision of the ERO Roster shall be accomplished in accordance with OPGP05-ZV-0003, "Emergency Response Organization."

4.6.4 In conjunction with the quarterly ERO Roster review, the Unusual Event Notification List and Manual Call-Out List shall be verified and revised as necessary, and documented on Form 12, "Quarterly ERO Roster Review."

4.6.5 In conjunction with the quarterly ERO Roster review, obtain a printout of the latest Auto Dialer Roster and compare to the ERO Roster to verify names, positions, telephone numbers, pager numbers, and update as necessary. The Call-Out List shall be verified and revised as necessary and documented on Form 12, "Quarterly ERO Roster Review."

4.7 Annual Emergency Response Procedures Review

4.7.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the Emergency Response procedures, and document the review on Form 5, "Annual Emergency Response Procedures Review."

Emergency Response Activities Schedule

- 4.7.2 This review shall include, at a minimum, any changes that may have occurred to the Emergency Plan, Emergency Response Facilities, support procedures, or organizational changes.
- 4.8 Annual Letters of Agreement Review
- 4.8.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the Letters of Agreement between the STPEGS and the various offsite support organizations.
- 4.8.2 This review shall ensure all letters are current or are renewed as necessary.
- 4.8.3 The review shall be documented on Form 4, "Annual Letters of Agreement Review."
- 4.9 Monthly/Quarterly/Semi-Annual/Annual Communications Test Schedule
- 4.9.1 The Manager, Information Systems or designee shall perform Communications Tests in accordance with Addendum 1. Performance of communications equipment shall be documented on Form 3, "Communications Tests." These tests may be conducted in conjunction with scheduled drills or exercises.
- 4.10 Annual Review/Revision of the Six-Year Exercise Master Plan
- 4.10.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall review/revise the Six-Year Exercise Master Plan.
- 4.10.2 This review/revision shall be documented on Form 2, "Six-Year Exercise Master Plan."
- 4.11 Quarterly Emergency Communications Directory/Emergency Response Procedures Telephone Number Verification
- 4.11.1 Quarterly, in accordance with the schedule in Addendum 1, the Manager, Information Systems or designee, shall initiate a review of the telephone numbers contained in the Emergency Communications Directory and the emergency telephone numbers contained in Emergency Response procedures, OERP01-ZV-IN04, "Assembly and Accountability."
- 4.11.2 Telephone numbers found to be incorrect in the Emergency Communications Directory and Emergency Response procedures shall be identified to the Supervisor, Emergency Response or designee for correction.

Emergency Response Activities Schedule

- 4.11.3 The verification shall be documented on Form 11, "Quarterly Emergency Communications Directory/Emergency Response Procedures Telephone Number Verification."
- 4.12 Annual Emergency Response Training Review
- 4.12.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the Emergency Response Training Program. This review shall ensure changes to the Emergency Plan and implementing procedures have been completely and appropriately incorporated into the Emergency Response Training Program.
- 4.12.2 The review shall be documented on Form 6, "Annual Emergency Response Training Review."
- 4.13 Annual Offsite Training
- 4.13.1 The Supervisor, Emergency Response or designee, shall annually review offsite training offered versus completed and document the results of this review on Form 7, "Annual Emergency Response Offsite Training Review."
- 4.14 Prompt Notification System Siren Testing/Documentation
- 4.14.1 The Supervisor, Emergency Response or designee, shall review the siren test results as documented in OPGP05-ZV-0008, "Siren System Activation, Testing and Documentation."
- 4.14.2 Quarterly, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall initiate a review of the operability of the Prompt Notification System sirens for the preceding quarter.
- 4.14.2.1 Results shall be transmitted with a cover letter to the Division of Emergency Management of the Texas Department of Public Safety with a copy to FEMA Region VI headquarters.

Emergency Response Activities Schedule

4.15 Self-Assessments

4.15.1 The Supervisor, Emergency Response or designee, shall initiate self-assessments of various aspects of the Emergency Response program as shown in Addendum 2, "Self-Assessment Schedule."

4.15.2 Results of self-assessments shall be documented on Form 14, "Self-Assessment Completion Form."

4.16 Annual Letter of Certification to DEM

4.16.1 Annually, the Supervisor, Emergency Response or designee, shall issue the Letter of Certification to the Division of Emergency Management, Texas Department of Public Safety. This shall be documented on Form 15, "Annual Letter of Certification Verification to DEM."

4.17 ERD Staff Training

4.17.1 Annually, the Supervisor, Emergency Response or designee, shall review the training received by individuals responsible for the planning effort. This shall be documented on Form 16, "ERD Staff Training."

4.17.2 The following guidance should be used to assist in the evaluation of training received:

4.17.2.1 All Emergency Response Division personnel responsible for the planning effort should obtain and maintain necessary training and qualifications for unescorted entry into the Protected Area and the Radiologically Controlled Area.

4.17.2.2 Emergency Response Division personnel who provide formal emergency preparedness training shall be certified as an Instructor.

4.17.2.3 Entry level personnel in the Emergency Response Division who have limited or no experience in the emergency planning effort shall, in a timely manner, attend a training course for emergency planners similar in scope to the Institute of Nuclear Power Operations' emergency planner training course.

Emergency Response Activities Schedule

4.17.2.4 Experienced planners in the Emergency Response Division should annually accomplish tasks which broaden their understanding of emergency planning and emergency planning emergent issues. Such tasks, assigned by the Supervisor, Emergency Response Division may include:

- a. Participating in utility assist visits as a member of an audit team, member of a mock NRC team during a utility exercise, observation of a utility exercise, etc.
- b. Attending regional or national emergency response conferences or workshops.
- c. Visiting a utility to obtain emergency response benchmark information which may better the methods employed at STPEGS.
- d. Attending emergency response courses provided by INPO, FEMA, etc., which present topics outside of the planners normal discipline.

4.17.2.5 Annual Emergency Response Division Staff Training as described in 4.17.2.1, shall be documented as "EPT070".

4.18 Annual News Media Training

4.18.1 Annually, in accordance with the schedule in Addendum 1, the Supervisor, Emergency Response or designee, shall invite local news media agencies to a session to acquaint them with the emergency plan, information concerning radiation, and points of contact for release of public information during an emergency. Document completion on Form 18, "Annual News Media Training."

4.19 Extension of Emergency Response Activities

4.19.1 The Supervisor, Emergency Response, may reschedule or extend the due date of items as scheduled on Addendum 1 and 2, at his discretion.

4.20 Monthly/Quarterly Computer Equipment Baseline

4.20.1 The Manager Information Systems or designee, shall initiate a review of computer equipment in accordance with the schedule in Addendum 1.

Emergency Response Activities Schedule

4.20.2 All onsite Emergency Response Facility computer equipment shall be verified for baselined version monthly. All offsite Emergency Response Facility computer equipment shall be verified for baselined version quarterly. Written confirmation shall be provided to the Supervisor, Emergency Response or designee utilizing Form 19, "Computer Equipment Baseline."

4.21 Weekly/Monthly/Quarterly/Semi-Annual/(5)Five Year Auto Dialer/Post Maintenance Tests

4.21.1 The Manager, Plant Protection or designee, shall normally initiate the Emergency Notification and Response System (ENRS) on Tuesday to signal a new duty team to Emergency Response Organization (ERO) personnel, unless otherwise directed by the Emergency Response Manager or his designee.

4.21.2 The Supervisor, Emergency Response or designee shall conduct tests in accordance with the requirements of Form 20. Performance of the ENRS test will be documented on Form 20, "Auto Dialer Tests." These tests may be conducted in conjunction with scheduled drills or exercises.

5.0 References

- 5.1 South Texas Project Electric Generating Station Emergency Plan
- 5.2 0ERP01-ZV-IN04, Assembly and Accountability
- 5.3 OPGP05-ZV-0003, Emergency Response Organization
- 5.4 OPGP05-ZV-0008, Siren System Activation, Testing and Documentation
- 5.5 OPGP05-ZV-0009, Emergency Facility Inventories and Inspections
- 5.6 OPGP05-ZV-0010, Emergency Plan Revision

6.0 Support Documents

- 6.1 Addendum 1 - Emergency Response Activities Schedule
- 6.2 Addendum 2 - Self-Assessment Schedule
- 6.3 Form 1 - Annual Training Schedule (Typical)
- 6.4 Form 2 - Six-Year Exercise Master Plan (Typical)
- 6.5 Form 3 - Communications Tests (Typical)
- 6.6 Form 4 - Annual Letters of Agreement Review (Typical)

Emergency Response Activities Schedule

- 6.7 Form 5 - Annual Emergency Response Procedures Review (Typical)
- 6.8 Form 6 - Annual Emergency Response Training Review (Typical)
- 6.9 Form 7 - Annual Emergency Response Offsite Training Review (Typical)
- 6.10 Form 8 - Annual Emergency Information Calendar Mailing Verification (Typical)
- 6.11 Form 9 - Quarterly Visible Postings and Public Emergency Information Brochure Verification (Typical)
- 6.12 Form 10 - Quarterly Review of Alert Radio Distribution (Typical)
- 6.13 Form 11 - Quarterly Emergency Communications Directory/Emergency Response Procedures Telephone Number Verification (Typical)
- 6.14 Form 12 - Quarterly ERO Roster Review (Typical)
- 6.15 Form 13 - STPEGS Emergency Plan Annual Review Checklist (Typical)
- 6.16 Form 14 - Self-Assessment Completion Form (Typical)
- 6.17 Form 15 - Annual Letter of Certification Verification to DEM (Typical)
- 6.18 Form 16 - ERD Staff Training (Typical)
- 6.19 Form 17 - State of Texas/Matagorda County Annual Review of the STPEGS Emergency Action Levels (Typical)
- 6.20 Form 18 - Annual News Media Training (Typical)
- 6.21 Form 19 - Computer Equipment Baseline (Typical)
- 6.22 Form 20 - Auto Dialer Tests (Typical)

Emergency Response Activities Schedule

Addendum 1

Emergency Response Activities Schedule

Page 1 of 1

TYPICAL EMERGENCY RESPONSE ACTIVITIES SCHEDULE

ACTIVITY	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
EMERGENCY EQUIPMENT & SUPPLIES	AS DESCRIBED IN OPGP05-ZV-0009											
EMERGENCY INFORMATION CALENDAR MAILING VERIFICATION (Form 8)	X											
TRAINING SCHEDULE (Form 1)										X		
ERO ROSTER REVIEW (Form 12)			X			X			X			X
STPEGS EMERGENCY PLAN ANNUAL REVIEW (Form 13)						X						
EMERGENCY RESPONSE PROCEDURES REVIEW (Form 5)						X						
LETTERS OF AGREEMENT REVIEW (Form 4)											X	
COMMUNICATIONS TESTS (Form 3)	X	X	X	X	X	X	X	X	X	X	X	X
SIX-YEAR EXERCISE MASTER PLAN (Form 2)												X
VISIBLE POSTINGS AND PUBLIC EMERGENCY INFORMATION BROCHURE VERIFICATION (Form 9)		X			X			X			X	
EMERGENCY COMMUNICATIONS DIRECTORY/EMERGENCY RESPONSE PROCEDURES TELEPHONE NUMBER VERIFICATION (Form 11)			X			X			X			X
EMERGENCY RESPONSE OFFSITE TRAINING REVIEW (Form 7)	X											
EMERGENCY RESPONSE TRAINING REVIEW (Form 6)	X											
DEM/FEMA PNS REPORT	X			X			X			X		
REVIEW OF ALERT RADIO DISTRIBUTION (Form 10)	X			X			X			X		
LETTER OF CERTIFICATION VERIFICATION TO DEM (Form 15)	X											
ERD STAFF TRAINING (Form 16)									X			
STATE OF TEXAS/MATAGORDA COUNTY ANNUAL REVIEW OF THE STPEGS EMERGENCY ACTION LEVELS (Form 17)	*	*	*	*	*	*	*	*	*	*	*	*
ANNUAL NEWS MEDIA TRAINING (Form 18)	*	*	*	*	*	*	*	*	*	*	*	*
COMPUTER EQUIPMENT BASELINE - ONSITE (Form 19)	X	X	X	X	X	X	X	X	X	X	X	X
COMPUTER EQUIPMENT BASELINE - OFFSITE (Form 19)			X			X			X			X
AUTO DIALER TESTS (Form 20)	X	X	X	X	X	X	X	X	X	X	X	X

* Not scheduled for a specific month; however must occur during calendar year.

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Emergency Response Activities Schedule			
Addendum 2	Self-Assessment Schedule		Page 1 of 1

TYPICAL ANNUAL SELF ASSESSMENT SCHEDULE												
ASSESSMENT AREA	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
EMERGENCY RESPONSE TRAINING		X										
RADIOLOGICAL ASSESSMENT PROCESS					X							
PERSONNEL PROTECTION								X				
STATION SUPPORT OF EMERGENCY RESPONSE											X	

TYPICAL SELF-ASSESSMENT TOPICS (OTHER)

1. Organization and Administration
2. Plan and Procedures
3. Facilities, Equipment, Resources
4. Notification
5. Public Information
6. Coordination with Offsite Agencies

All of the above listed "Self-Assessment Topics" (Other) should be completed once every 5 years.

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Emergency Response Activities Schedule			
Form 1	Annual Training Schedule (Typical)		Page 1 of 1

This is to certify that the Emergency Response Training Schedule for _____ has been completed, and is attached. (year)

Completed: _____ Date _____

Approved: _____ Date _____
 Supervisor, Emergency Response
 or designee

<u>EXERCISE INITIATION REQUIREMENTS</u>	REQ'D FREQ (YRS)	<u>YEAR</u>
Involve the County and State government within the plume exposure pathway:		
a. Partial Participation	1	_ _ _ _ _
b. Full Participation	2	_ _ _ _ _
Involve the State within the ingestion exposure pathway EPZ.	5	_ _ _ _ _
Involve Federal emergency response agencies in an exercise.	5	_ _ _ _ _
Commence the exercise between 1800-0400.	6	_ _ _ _ _
Conduct the exercise in various weather conditions.	1	_ _ _ _ _
Conduct the exercise unannounced.	6	_ _ _ _ _
Conduct a Combined Functional Drill, Tabletop, or functional group workshop addressing SAMG implementation.	1	_ _ _ _ _
<u>INCIDENT ASSESSMENT AND CLASSIFICATION</u>		
Emergency organization's ability to do the following:		
Detect and assess the incident conditions	1	_ _ _ _ _
Determine which emergency action levels have been reached	1	_ _ _ _ _

<u>EXERCISE NOTIFICATION REQUIREMENTS</u>	<u>REQ'D FREQ (YRS)</u>	<u>YEAR</u>
Demonstrate the ability to notify the station emergency organizations, via the Emergency Notification and Response System (ENRS) and/or alarm/PA System.	1	_ _ _ _ _
Notify onsite personnel using the station alarm/PA system.	1	_ _ _ _ _
Demonstrate the ability to notify State and Local governmental agencies within 15 minutes after declaring an emergency.	1	_ _ _ _ _
Demonstrate the ability to send follow-up notifications to offsite organizations after initial notification.	1	_ _ _ _ _
Demonstrate the ability of emergency organizations to communicate using the following equipment:		
Communication lines between station Emergency Response Facilities (ERFs)	1	_ _ _ _ _
Communication lines between ERFs and Reliant Energy - HL&P corporate offices	1	_ _ _ _ _
Communication lines between ERFs and State and County emergency centers	1	_ _ _ _ _
Communication lines between ERFs and Federal emergency centers	1	_ _ _ _ _
Communication lines with Medical Support facilities	1	_ _ _ _ _
Radio communications between station ERFs and the Emergency Teams.	1	_ _ _ _ _
Backup communications systems	5	_ _ _ _ _

<u>EXERCISE INITIATION REQUIREMENTS (Cont'd)</u>	<u>REQ'D FREQ (YRS)</u>	<u>YEAR</u>
Classify the incident in accordance with nuclear incident classification scheme and notify the NRC within one hour of concurrence.	1	_ _ _ _ _
Demonstrate the ability of station organizations to provide accurate and timely information to the Joint Information Center.	5	_ _ _ _ _
Demonstrate the ability to facilitate public rumor control.	5	_ _ _ _ _
<u>RADIOLOGICAL CONSEQUENCE ASSESSMENT</u>		
Demonstrate the ability of station emergency organization to perform initial assessment of the radiological consequences (including computer calculations and/or dose tables).	1	_ _ _ _ _
Demonstrate the ability of Radiological Manager to direct onsite Emergency Teams.	1	_ _ _ _ _
Demonstrate the ability of Radiological Director to direct offsite Emergency Teams.	1	_ _ _ _ _
Evaluate exposure control for emergency workers.	1	_ _ _ _ _
Demonstrate the ability of Emergency Teams to perform radiological surveys including soil, vegetation, water sampling and report results.	1	_ _ _ _ _
Evaluate implementation of exposure guidelines emergency workers.	1	_ _ _ _ _

<u>RADIOLOGICAL CONSEQUENCE ASSESSMENT (Cont'd)</u>	<u>REQ'D FREQ (YRS)</u>	<u>YEAR</u>
Demonstrate the ability of station to assess Emergency Teams survey information and make appropriate recommendations concerning protective actions.	1	_ _ _ _ _
Demonstrate the ability to conduct onsite and offsite direct and airborne radiation field monitoring.	1	_ _ _ _ _
Evaluate on-site contamination control measures.	1	_ _ _ _ _
Demonstrate the ability to conduct post-accident coolant sampling and analysis.	1	_ _ _ _ _
Evaluate radiological monitoring of site evacuees.	1	_ _ _ _ _
Demonstrate the ability to determine the magnitude and impact of the particular source term components of a release.	1	_ _ _ _ _
Evaluate provisions for individual respiratory protection, use of protective clothing, and use of KI.	1	_ _ _ _ _
<u>EMERGENCY FACILITIES</u>		
Demonstrate the ability to activate the emergency response organization.	1	_ _ _ _ _
Demonstrate the ability to staff and activate the following station emergency response facilities:		
Control Room	1	_ _ _ _ _
Operations Support Center	1	_ _ _ _ _
Technical Support Center	1	_ _ _ _ _
Emergency Operations Facility	1	_ _ _ _ _
Joint Information Center	5	_ _ _ _ _

<u>EMERGENCY FACILITIES (Cont'd)</u>	<u>REQ'D FREQ (YRS)</u>	<u>YEAR</u>
Use of emergency power in ERFs	5	_ _ _ _ _
Relocation to backup ERFs	5	_ _ _ _ _
<u>EMERGENCY DIRECTION AND CONTROL</u>		
Direction of emergency organization and implementation of the Emergency Plan and Emergency Response Procedures.	1	_ _ _ _ _
Demonstrate the ability to assess plant and radiological conditions and subsequently provide PARs to Local Authorities.	1	_ _ _ _ _
Ability to perform:		
Station evacuation (to onsite locations)	1	_ _ _ _ _
Station evacuation (to offsite locations)	5	_ _ _ _ _
Personnel assembly and accountability	5	_ _ _ _ _
Search and rescue	5	_ _ _ _ _
Onsite personnel administer emergency first aid to an injured, contaminated individual	5	_ _ _ _ _
Emergency personnel decontamination	1	_ _ _ _ _
Personnel monitoring	1	_ _ _ _ _
Use of protective clothing	1	_ _ _ _ _
High radiation area reentry and repair	1	_ _ _ _ _
Fire brigade	5	_ _ _ _ _
Onsite security and access control	5	_ _ _ _ _
Use of SCBAs for vital workers	1	_ _ _ _ _
Arrange for transportation of contaminated injured personnel from onsite to a specifically identified treatment facility offsite for treatment.	1	_ _ _ _ _
Use of Potassium Iodide	5	_ _ _ _ _
Use of Licensee's Headquarters support personnel	5	_ _ _ _ _

<u>EMERGENCY DIRECTION AND CONTROL (Cont'd)</u>	<u>REQ'D FREQ (YRS)</u>	<u>YEAR</u>
Evaluate support by offsite organizations as delineated by letters of agreement.	1	_ _ _ _ _
<u>RECOVERY OPERATIONS</u>		
Describe criteria to be used to determine when following an accident reentry of the facility would be appropriate or when operation could be resumed.	1	_ _ _ _ _
Conduct a post accident recovery and re-entry seminar with Federal, State and local officials	5	_ _ _ _ _
Prepared By: _____	Date _____	
Approved: _____	Date _____	
Supervisor, Emergency Response or Designee		

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Emergency Response Activities Schedule			
Form 3	Communications Tests (Typical)		Page 1 of 13

1.0 INTRODUCTION

This Communication Test List was developed to provide a means of verifying communication links between the South Texas Project Electric Generating Station (STPEGS) Emergency Response Facilities and various County, State and Federal agencies. It also provides a means of documenting this verification or, in the case of unsuccessful verification, a means of deficiency detection.

2.0 OBJECTIVES

Communication tests at the STPEGS will be conducted to ensure the continuity of emergency communication capabilities.

The objectives of these tests are:

2.1 Annually

2.1.1 Verify communication links between EOF, State and County EOCs, and the JIC.

2.2 Monthly

2.2.1 Verify communication links between EOF and offsite field team vehicles.

2.2.2 Verify telecopy communication links with County, State, and Federal Emergency Response Organizations from each Emergency Response Facility.

2.2.3 Verify communication links in the TSC, OSC, EOF, and Control Room.

2.2.4 Verify communication links with Federal Emergency Response Organizations. (ENS, HPN)

2.2.5 Verify communication links with State and County governments in the plume exposure pathway.

2.3 Quarterly

2.3.1 Offsite Emergency Response Facilities telephone communications verification.

2.4 Semi-Annually (Per CR 94-1572)

2.4.1 Verify communication links from the Auxiliary Shutdown Panel through the Maintenance Jack System.

2.4.2 Verify operability of the plant paging systems page override feature from the Control Room.

2.4.3 Refurbish hand-held radio batteries in all Emergency Response Facilities.

3.0 TELEPHONE MESSAGE

Telephone communication tests will be conducted utilizing the following message:

"This is a test. This is (name of test controller) at the South Texas Project Electric Generating Station conducting a communications verification test from (name of originating facility). Please acknowledge by stating your last name. (Enter this information on Form 3.) This test is terminated."

4.0 TELECOPY MESSAGE

Monthly telecopy tests will be conducted using the following telecopy message:

"This is a test. This is a test of the emergency telecopy communication link at the South Texas Project Electric Generating Station from the (name of organization facility.) No response is required. This is a test."

5.0 EVALUATION

The individual performing the test shall complete the appropriate section of the evaluation checklist. The completed checklist will be utilized to document the test objectives set forth in Section 2.0 were addressed and any subsequent corrective action items are identified. These tests shall be conducted in conjunction with monthly communication surveillance's conducted by telecommunication personnel.

6.0 EVALUATION CHECKLIST

	Person Contacted	Date/Time	Initials
I. Annual Drills			
1. In conjunction with FEMA, verify the Prompt Notification System is effective in notifying people within the 10-mile Emergency Planning Zone.	N/A	/	_____
2. Communications established between EOF, State and local EOCs and the JIC.	N/A	/	_____

Emergency Response Activities Schedule

6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly

	Message Confirmation	Date/Time	Initials
1. Communications established between EOF and Offsite Field Team vehicles			
a. Conduct test between Communication Console in Dose Assessment Room and vehicles.	Vehicle 1	Radio <u> / </u>	<u> </u>
		Phone <u> / </u>	<u> </u>
b. Portable cellular phones are stored in Health Physics equipment room in the EOF.	Vehicle 2	Radio <u> / </u>	<u> </u>
		Phone <u> / </u>	<u> </u>
	Rad Van	Radio <u> / </u>	<u> </u>
		Phone <u> / </u>	<u> </u>
2. Telecopies successfully transmitted to all emergency broadcast facilities from Unit 1 Control Room.	<u> </u>	<u> / </u>	<u> </u>
	MCSO	<u> / </u>	<u> </u>
	MCSO Dispatcher	<u> / </u>	<u> </u>
a. Transmit telecopy test message from the facility transmit telecopy machine via the broadcast mode. If message confirmation was not received from all broadcast stations, call the missing station to determine if the message was received. Verification telephone numbers can be found in the Emergency Communication Directory.	<u> </u>	<u> / </u>	<u> </u>
	DPS-Pierce	<u> / </u>	<u> </u>
	BRC	<u> / </u>	<u> </u>
	DEM	<u> / </u>	<u> </u>
	DPS-Houston	<u> / </u>	<u> </u>
	EOF	<u> / </u>	<u> </u>
	U1 TSC	<u> / </u>	<u> </u>
	U2 TSC	<u> / </u>	<u> </u>
	U2 CR	<u> / </u>	<u> </u>
	Site PA	<u> / </u>	<u> </u>
	ECDC	<u> / </u>	<u> </u>

6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly (Cont'd)

3. Telecopies successfully transmitted to all emergency broadcast facilities from Unit 2 Control Room.

a. Transmit telecopy test message from the facility transmit telecopy machine via the broadcast mode. If message confirmation was not received from all broadcast stations, call the missing station to determine if the message was received. Verification telephone numbers can be found in the Emergency Communication Directory.

	Message Confirmation	Date/Time	Initials
MCSO	_____	/	_____
MCSO Dispatcher	_____	/	_____
DPS-Pierce	_____	/	_____
BRC	_____	/	_____
DEM	_____	/	_____
DPS-Houston	_____	/	_____
EOF	_____	/	_____
U1 TSC	_____	/	_____
U2 TSC	_____	/	_____
U1 CR	_____	/	_____
Site PA	_____	/	_____
ECDC	_____	/	_____

Emergency Response Activities Schedule

6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly (Cont'd)

4. Telecopies successfully transmitted to all emergency broadcast facilities from Unit 1 TSC.

a. Transmit telecopy test message from the facility transmit telecopy machine via the broadcast mode. If message confirmation was not received from all broadcast stations, call the missing station to determine if the message was received. Verification telephone numbers can be found in the Emergency Communication Directory.

5. Telecopies successfully transmitted to all emergency broadcast facilities from Unit 2 TSC.

a. Transmit telecopy test message from the facility transmit telecopy machine via the broadcast mode. If message confirmation was not received from all broadcast stations, call the missing station to determine if the message was received. Verification telephone numbers can be found in the Emergency Communication Directory.

Message Confirmation	Date/Time	Initials
MCSO	/	
MCSO Dispatcher	/	
DPS-Pierce	/	
BRC	/	
DEM	/	
DPS-Houston	/	
EOF	/	
U1 CR	/	
U2 CR	/	
Site PA	/	
ECDC	/	
MCSO	/	
MCSO Dispatcher	/	
DPS-Pierce	/	
BRC	/	
DEM	/	
DPS-Houston	/	
EOF	/	
U1 CR	/	
U2 CR	/	
Site PA	/	
ECDC	/	

6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly (Cont'd)

6. Telecopies successfully transmitted to all emergency broadcast facilities from EOF.

a. Transmit telecopy test message from the facility transmit telecopy machine via the broadcast mode. If message confirmation was not received from all broadcast stations, call the missing station to determine if the message was received. Verification telephone numbers can be found in the Emergency Communication Directory.

	Person Contacted	Date/Time	Initials
	MCSO	/	
	MCSO Dispatcher	/	
	DPS-Pierce	/	
	BRC	/	
	DEM	/	
	DPS-Houston	/	
	U1 TSC	/	
	U2 TSC	/	
	U1 CR	/	
	U2 CR	/	
	ECDC	/	

Emergency Response Activities Schedule

Form 3

Communications Tests (Typical)

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6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly (Cont'd)

7. Telephone communications established with Federal, State, and County governments.

U1 CR

Person Contacted

Date/Time

Initials

(State)

(County)

/

/

a. Use dedicated telephones to contact Federal, State and County governments. If a circuit is inoperable, log this information, and verify that a back-up circuit is available. Notify the U1 Shift Supervisor or Supervisor, Emergency Response, or designee, if any of the dedicated telephones are inoperable.

U2 CR

Documented
(ENS)

in / CR

logs

(State)

(County)

/

/

Documented
(ENS)

in / CR

logs

U1 AUX
Shutdown
Panel

(State)

(County)

/

/

U2 AUX
Shutdown
Panel

(State)

(County)

/

/

b. IF an ENS or HPN telephone line is determined to be out of service and upon subsequent return to service, THEN notify the NRC Operations Center. (IEN 89-19)

U1 TSC

(State)

(County)

/

/

(ENS)

/

(HPN)

/

U2 TSC

(State)

(County)

/

(ENS)

/

(HPN)

/

EOF

(State)

(County)

/

/

(ENS)

/

(HPN)

/

Emergency Response Activities Schedule

6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly (Cont'd)

	Person Contacted	Date/Time	Initials	
8. Telephone communications verified at each Emergency Response Facility.	U1 CR	/		
	U1 TSC	/		
	U1 OSC	/		
	U2 CR	/		
	U2 TSC	/		
	U2 OSC	/		
	EOF	/		
	9. Radio communications established between Emergency Response Facilities	U1 OSC Hand held Radio 1	/	
		Hand held Radio 2	/	
		Hand held Radio 3	/	
Hand held Radio 4		/		
Hand held Radio 5		/		
U2 OSC Hand held Radio 6		/		
Hand held Radio 7		/		
Hand held Radio 8		/		
Hand held Radio 9		/		
Hand held Radio 10		/		

Emergency Response Activities Schedule

Form 3

Communications Tests (Typical)

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6.0 EVALUATION CHECKLIST (Cont'd)

II. Monthly (Cont'd)

		Person Contacted	Date/Time	Initials	
b.	Test Radio communications between the West Gatehouse and the Matagorda County Sheriff's Office.	WEST GATEHOUSE <u>Documented</u> MCSO	<u>in SFS/Log</u>	_____	
c.	Test all 800 MHz radios with the ECDC.	U1 CR-800 MHz	<u>Documented</u> ECDC	<u>in CR/Log</u>	_____
		U2 CR-800 MHz	<u>Documented</u> ECDC	<u>in CR/Log</u>	_____
		U1 TSC-800 MHz	_____	/	_____
		U2 TSC-800 MHz	_____	/	_____
		EOF-800 MHz	_____	/	_____
		DPS-800 MHz	_____	/	_____
		MCSO-800 MHz	_____	/	_____

6.0 EVALUATION CHECKLIST (Cont'd)

III. Quarterly

1. Telephone communication verified at each Emergency Response Facility.

a. Check each extension number listed in the Emergency Communication Directory for each facility.

Person Contacted	Date/Time	Initials
AEOF	/	
Matagorda Co. EOC	/	
BRC Staging Area	/	
McAllister Reception Center	/	
Palacios Reception Center	/	
Matagorda Co. Dispatcher	/	
Joint Info. Center	/	
Emergency Mgmt. Office	/	
Palacios City Hall	/	
DPS Pierce	/	
KMKS	/	

Emergency Response Activities Schedule

6.0 EVALUATION CHECKLIST (Cont'd)

IV. Semi-Annual

Date/Time Initials

1. Unit 1

a. Test maintenance jacks from the Auxiliary Shutdown Panel, to:

1) Transfer Switch Panels	Train A	ESF1	_____ / _____	_____
	Train A	ESF2	_____ / _____	_____
	Train B	ESF8	_____ / _____	_____
	Train B	ESF9	_____ / _____	_____
	Train C	ESF10	_____ / _____	_____
	Train C	ESF11	_____ / _____	_____
2) Standby Diesel Generator Control Panel	Train A	1SDG3	_____ / _____	_____
	Train B	1SDG2	_____ / _____	_____
	Train C	1SDG1	_____ / _____	_____
3) Chiller Control Panels	Column 18V	TG1-17	_____ / _____	_____
4) Boric Acid Tank Room Ele. 29' MAB	Room 076	RW-16	_____ / _____	_____
5) CCW Surge Tank Room Ele. 60' MAB	Room 324B	MA-18	_____ / _____	_____
6) ECW Pump Room	ECW	1YD5	_____ / _____	_____
	ECW	1YD6	_____ / _____	_____
	ECW	1YD7	_____ / _____	_____
7) Aux Feedwater Storage Tank Area	Column 19Q	TG1-12	_____ / _____	_____

b. Test plant paging system page override from the command consoles in the Control Room.

_____ / _____

Emergency Response Activities Schedule

Form 3

Communications Tests (Typical)

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6.0 EVALUATION CHECKLIST (Cont'd)

IV. Semi-Annual (Cont'd)

Date/Time

Initials

2. Unit 2

a. Test maintenance jacks from the Auxiliary Shutdown Panel, to:

1) Transfer Switch Panels	Train A	ESF1	_____ / _____	_____
	Train A	ESF2	_____ / _____	_____
	Train B	ESF8	_____ / _____	_____
	Train B	ESF9	_____ / _____	_____
	Train C	ESF10	_____ / _____	_____
	Train C	ESF11	_____ / _____	_____
2) Standby Diesel Generator Control Panel	Train A	2SDG3	_____ / _____	_____
	Train B	2SDG2	_____ / _____	_____
	Train C	2SDG1	_____ / _____	_____
3) Chiller Control Panels	Column 18V	TG2-17	_____ / _____	_____
4) Boric Acid Tank Room Ele. 29' MAB	Room 076	RW-16	_____ / _____	_____
5) CCW Surge Tank Room Ele. 60' MAB	Room 324B	MA-18	_____ / _____	_____
6) ECW Traveling Screen Room	ECW	2YD8	_____ / _____	_____
	ECW	2YD9	_____ / _____	_____
	ECW	2YD10	_____ / _____	_____
7) Aux Feedwater Storage Tank Area	Column 19Q	TG2-12	_____ / _____	_____

b. Test plant paging system page override from the command consoles in the Control Room.

_____ / _____

3. Refurbish all Emergency Response Facilities hand-held radio batteries.

_____ / _____

7.0 COMMENTS

Performed By:			
		Date	
Performed By:			
		Date	
Performed By:			
		Date	
Performed By:			
		Date	
Approved:			
	Supervisor, Emergency Response or designee		Date

The annual review of the STPEGS Emergency Plan Letters of Agreement for _____ has been completed. The following letter(s) require renewal: _____ (year)

Note: Prior to deleting any Letters of Agreement, a 50.54(q) evaluation is required.

(List Letters of Agreement)

Performed By: _____ Date _____

Approved: _____ Date _____
 Supervisor, Emergency Response
 or designee

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Emergency Response Activities Schedule			
Form 5	Annual Emergency Response Procedures Review (Typical)		Page 1 of 2

1. Do the Emergency Response procedures address:

- | | | | | |
|----|---|--------|---------|---------|
| a. | Written critiques and evaluations of drills and exercises? | ___ NO | ___ YES | ___ N/A |
| b. | Changes in key station and corporate personnel involved in the Emergency Response Organization? | ___ NO | ___ YES | ___ N/A |
| c. | Changes in the organizational structure? | ___ NO | ___ YES | ___ N/A |
| d. | Changes in applicable Federal and State regulations? | ___ NO | ___ YES | ___ N/A |
| e. | Changes in the function and capability of support organizations? | ___ NO | ___ YES | ___ N/A |
| f. | Modifications to the station facilities, site or operating status that could affect emergency planning and preparedness? | ___ NO | ___ YES | ___ N/A |
| g. | Recommendations received from other organizations, such as Federal, State, or County authorities or private support groups? | ___ NO | ___ YES | ___ N/A |
| h. | Annual independent findings? | ___ NO | ___ YES | ___ N/A |
| i. | The requirement that the Station Emergency Plan including EALs used for classification of emergencies shall be submitted to the State and County for review? Comments from this review shall be discussed between the various organizations and incorporated in the STPEGS Emergency Plan and procedures as applicable? | ___ NO | ___ YES | ___ N/A |

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Emergency Response Activities Schedule			
Form 5	Annual Emergency Response Procedures Review (Typical)		Page 2 of 2

2. The annual review of the Emergency Response Procedures for _____ has been completed. The following procedures were reviewed: _____ (year)

(List Procedure Numbers)

3. The following procedures require revisions:

Performed By: _____ Date _____

Approved: _____ Date _____
Supervisor, Emergency Response
or designee

The annual review of the Emergency Response Training Program for _____ has been completed.
(year)

Scheduled training was completed with the following exceptions:

(List course numbers and dates scheduled.)

Training designated for revised procedures was completed with the following exceptions:

A review of all Emergency Response Organization Training Course Lesson Plans as listed in OPGP03-ZT-0139 has been completed. A list of discrepancies and/or required revisions is provided per attached summary.

Performed By: _____ Date _____

Approved: _____ Date _____
Supervisor, Emergency Response
or designee

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Emergency Response Activities Schedule			
Form 7	Annual Emergency Response Offsite Training Review (Typical)		Page 1 of 1

The annual review of the completed offsite Emergency Response Training Program has been accomplished for _____. Findings are attached.
(year)

Performed By: _____ Date _____

Approved: _____ Date _____
Supervisor, Emergency Response
or designee

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Emergency Response Activities Schedule			
Form 8	Annual Emergency Information Calendar Mailing Verification (Typical)		Page 1 of 1

This is to certify that an updated Annual Emergency Information Calendar mailing has been accomplished for _____.
(year)

Performed By: _____ Date _____

Approved: _____ Date _____
Supervisor, Emergency Response
or designee

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Emergency Response Activities Schedule			
Form 9	Quarterly Visible Postings and Public Emergency Information Brochure Verification (Typical)		Page 1 of 4

This is to certify that the quarterly distribution of the Public Emergency Information Brochure has been completed for the _____ quarter, _____.
 (1st, 2nd, 3rd, 4th) (Year)

Additionally, Visible Postings within the ten-mile EPZ are intact.

Locations checked shown on next page.

Comments: _____

Performed By: _____ Date _____

Approved: _____ Date _____
 Supervisor, Emergency Response
 or designee

Emergency Response Activities Schedule

Form 9

Quarterly Visible Postings and Public Emergency Information Brochure
Verification (Typical)

Page 2 of 4

Instructions: Place a "Y" (Yes) or a "N" (No) in the appropriate box for the "Display Present", "Brochures Stocked", "Signs Intact (if applicable)" and "Alert Radio (if applicable)." Complete the "Comments" box with any additional information (i.e., needs brochure display, Alert Radio broke, etc.). Under "Initial", the individual performing the verification should place their initials.

LOCATION	DISPLAY PRESENT	BROCHURES STOCKED	SIGNS INTACT (If Applicable)	ALERT RADIO (If Applicable)	COMMENTS	INITIAL
1. BAY CITY INN			N/A	N/A		
2. MATAGORDA HOTEL & CONF. CENTER			N/A	N/A		
3. CATTLEMAN'S MOTEL, BAY CITY			N/A	N/A		
4. SOUTH TEXAS INN, BAY CITY			N/A	N/A		
5. BAY CITY CHAMBER OF COMMERCE			N/A	N/A		
6. ECONO LODGE, BAY CITY			N/A	N/A		
7. JACKSON ELECTRIC COOP, INC., BAY CITY			N/A	N/A		
8. GUFFY'S STORE, WADSWORTH			N/A			
9. J & J's, WADSWORTH			N/A			
10. SELKIRK ISLAND OFFICE			N/A			
11. PORT OF BAY CITY MARINA	N/A	N/A		N/A		
12. FISHERMAN'S MOTEL, MATAGORDA			N/A			
13. PARSUTTS, MATAGORDA			N/A			
14. STANLEY'S GROCERY, MATAGORDA			N/A			
15. SEABREEZE RESTAURANT, MATAGORDA			N/A			

Emergency Response Activities Schedule

Form 9

Quarterly Visible Postings and Public Emergency Information Brochure
Verification (Typical)

Page 3 of 4

LOCATION	DISPLAY PRESENT	BROCHURES STOCKED	SIGNS INTACT (If Applicable)	ALERT RADIO (If Applicable)	COMMENTS	INITIAL
16. MATAGORDA COURTS			N/A			
17. C & R DRIVE-IN, MATAGORDA						
18. CARLA COURTS MOTEL, MATAGORDA			N/A			
19. MATAGORDA POST OFFICE			N/A			
20. MATAGORDA SHOPPE			N/A			
21. HARBOR BAIT AND TACKLE						
22. RIVER BEND MARINA, RIVER ROAD						
23. ALLENS LANDING, RIVER ROAD			N/A			
24. COLORADO RIVER SEAFOOD, RIVER ROAD			N/A			
25. RAWLINGS BAIT CAMP, RIVER ROAD						
26. MATAGORDA BEACH PARK	N/A	N/A		N/A		
27. COLLEGEPORT POST OFFICE			N/A			
28. TRES PALACIOS BOAT RAMP	N/A	N/A		N/A		
29. JAIME'S			N/A			
30. MAYOR'S OFFICE, PALACIOS			N/A	N/A		

Emergency Response Activities Schedule

Form 9

Quarterly Visible Postings and Public Emergency Information Brochure Verification (Typical)

Page 4 of 4

LOCATION	DISPLAY PRESENT	BROCHURES STOCKED	SIGNS INTACT (If Applicable)	ALERT RADIO (If Applicable)	COMMENTS	INITIAL
31. LUTHER HOTEL, PALACIOS			N/A	N/A		
32. TIGER QUICK STOP (35 & TIDEHAVEN)			N/A	N/A		
33. STP VISITORS CENTER			N/A			
34. RIVERSIDE PARK	N/A	N/A		N/A		
35. RIO COLORADO GOLF SHOP			N/A	N/A		
36. FM 521 RIVER PARK	N/A	N/A		N/A		
37. BAY CITY LIBRARY, MATAGORDA COUNTY BRANCH			N/A			
38. WADSWORTH CAFE			N/A			
39. LIGHTHOUSE PIZZA			N/A			

This is to certify that verification of alert radio distribution has been completed for the
 _____ quarter, _____.
 (1st, 2nd, 3rd, 4th) (Year)

Attached is a list of individuals/businesses who require an Alert Radio.

Performed By: _____ Date _____
 Approved: _____ Date _____
 Supervisor, Emergency Response
 or designee

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Emergency Response Activities Schedule			
Form 11	Quarterly Emergency Communications Directory/Emergency Response Procedures Telephone Number Verification (Typical)		Page 1 of 1

This is to certify that the telephone numbers in the Emergency Communications Directory and in OERP01-ZV-IN04, "Assembly and Accountability" have been verified as accurate for

_____ quarter, ____.

(1st, 2nd, 3rd, 4th)

(Year)

Performed By: _____

_____ Date

Approved: _____
Supervisor, Emergency Response
or designee

_____ Date

This is to certify that the Emergency Response Organization Roster, Unusual Event Notification List, Call-Out List, and the Dialogics Call-out list have been verified as correct for _____ quarter, _____ (Year). (1st, 2nd, 3rd, 4th)

ERO Roster verification (name, position, telephone, pager)	_____ Performed by	_____ Date
* ERO Roster Qualification verification	_____ Performed by	_____ Date
* Onshift ERO Qualification verification	(* See attached documentation)	
Dialogics verification	_____ Performed by	_____ Date
UE List verification	_____ Performed by	_____ Date
Call-Out List verification	_____ Performed by	_____ Date

* List Condition Report numbers for any personnel who expired during the quarter.

Approved by: _____
Supervisor, Emergency Response
or designee

Date

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Emergency Response Activities Schedule			
Form 13	STPEGS Emergency Plan Annual Review Checklist (Typical)		Page 1 of 2

STPEGS Emergency Plan, Revision _____

1. Does the STPEGS Emergency Plan satisfy the applicable requirements of 10CFR50.47?
 NO YES If NO, describe the deviation: _____

2. Does the STPEGS Emergency Plan satisfy the applicable requirements of 10CFR50, Appendix E?
 NO YES (Consider if overall effectiveness of the Emergency Response Program will be reduced. Previously approved deviations do not require review and documentation.)
If NO, describe the deviation: _____

3. Does the STPEGS Emergency Plan satisfy the applicable recommendations of NUREG 0654/FEMA-REP-1?
 NO YES If NO, describe the deviation: _____

4. Does the STPEGS Emergency Plan satisfy the applicable facility requirements as described in NUREG-0696?
 NO YES If NO, describe the deviation: _____

5. Does the STPEGS Emergency Plan satisfy the applicable facility requirements as described in NUREG-0737, Supplement 1?
 NO YES If NO, describe the deviation: _____

6. If NO was answered to any of the previous questions, has the overall effectiveness of the Emergency Response Program been reduced?
 NO YES If YES, justify the reduction: _____
If NO, explain why there is no reduction in effectiveness: _____

7. Does the STPEGS Emergency Plan address:

- | | | | |
|--|--------|---------|---------|
| a. Written critiques and evaluations of drills and exercises? | ___ NO | ___ YES | ___ N/A |
| b. Changes in key station and corporate personnel involved in the Emergency Response Organization? | ___ NO | ___ YES | ___ N/A |
| c. Changes in the organizational structure? | ___ NO | ___ YES | ___ N/A |
| d. Changes in applicable Federal and State regulations? | ___ NO | ___ YES | ___ N/A |
| e. Changes in the function and capability of support organizations? | ___ NO | ___ YES | ___ N/A |
| f. Modifications to the station facilities, site or operating status that could affect emergency planning and preparedness? | ___ NO | ___ YES | ___ N/A |
| g. Recommendations received from other organizations, such as Federal, State, or County authorities or private support groups? | ___ NO | ___ YES | ___ N/A |
| h. Annual independent findings? | ___ NO | ___ YES | ___ N/A |
| i. The requirement that the Station Emergency Plan including EALs used for classification of emergencies shall be submitted to the State and County for review? Comments from this review shall be discussed between the various organizations and incorporated in the STPEGS Emergency Plan and procedures as applicable? | ___ NO | ___ YES | ___ N/A |

Prepared by: _____

Date: _____

- [] Approved
- [] Emergency Plan Revision Required
- [] Changes to Emergency Response Procedures Required
- [] Disapproved/Reason: _____

Supervisor, Emergency Response
or designee

Date

A Self-Assessment was completed on _____.
 (Title of Assessment from Assessment Schedule)

The following references were used to conduct the assessment:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Findings and recommended corrective action (if appropriate) are attached.

Performed By: _____ Date _____

Approved: _____ Date _____
 Supervisor, Emergency Response
 or designee

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Emergency Response Activities Schedule			
Form 15	Annual Letter of Certification Verification to DEM (Typical)		Page 1 of 1

This is to certify that the Annual Letter of Certification has been submitted to the Division of Emergency Management, Texas Department of Public Safety for _____.
(Year)

Correspondence Number: _____

Date of Correspondence: _____

Performed By: _____ Date _____

Approved: _____ Date _____
Supervisor, Emergency Response
or designee

Emergency Response Activities Schedule

Form 16

ERD Staff Training (Typical)

Page 1 of 1

Name	P.A. Access	RCA Access	Instr. Cert	Entry Level	Utility Assist	Conference	Benchmark	Cross-Discipline	Other

Notes:

Performed By: _____

Date: _____

Approved: _____

Date: _____

Supervisor, Emergency Response Division or designee

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Emergency Response Activities Schedule			
Form 17	State Of Texas/Matagorda County Annual Review Of the STPEGS Emergency Action Levels (Typical)		Page 1 of 1

Annually the STPEGS Emergency Action Levels (EALs) shall be submitted to the State of Texas, Department of Health and to the Matagorda County Emergency Management Agency for review.

This review shall be documented by the following method:

1. The STPEGS Emergency Action Levels shall be submitted via letter from the Supervisor, Emergency Response to the State of Texas, Department of Health and the Matagorda County Emergency Management Agency.
2. This letter should state its purpose and request a response following the review of the EALs.

Performed by: _____ Date _____

Approved by: _____ Date _____
Supervisor, Emergency Response or designee

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Emergency Response Activities Schedule			
Form 18	Annual News Media Training (Typical)		Page 1 of 1

This is to certify annual emergency response media training has been offered to local news media agencies for _____.
 (Year)

Completed By: _____

Date _____

Approved: _____
 Supervisor, Emergency Response
 or designee

Date _____

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Emergency Response Activities Schedule			
Form 19	Computer Equipment Baseline (Typical)		Page 1 of 1

This is to certify the monthly baseline of all **Onsite** (U1 TSC, U2 TSC, U1 OSC, U2 OSC, EOF, and MOF - 3 laptops) Emergency Response Facility Computer Equipment has been completed for the month of __, _____.
 (month) (year)

This is to certify the quarterly baseline of all **Offsite** (AEOF and JIC) Emergency Response Facility Computer Equipment has been completed for the _____ quarter, _____.
 (1st, 2nd, 3rd, 4th) (year)

Comments: _____

Performed By: _____ Date _____

Approved By: _____ Date _____
 Supervisor, Emergency Response
 or designee

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Emergency Response Activities Schedule			
Form 20	Auto Dialer Tests (Typical)		Page 1 of 4

1.0 Introduction

This Emergency Notification and Response System (ENRS) test was developed to provide a means of verifying the Dialogics software, global paging capability and message delivery system is performing as required. This test also provides a means of documenting the results, identifying, and correcting any deficiency with the system.

2.0 Objectives

The objectives of the tests are:

2.1 Once every Five years

- 2.1.1 Conduct and document an After-Hours Call-Out of required ERO personnel. This test will verify the correct operation of the autodialer system and that the required Emergency Response Facility positions are filled in the required times.

2.2 Semi-Annual

- 2.2.1 Conduct an after-hours call-in only drill to verify the correct operation of the autodialer system and the validity of the roster including activation of the global page, message delivery, and report generation of the results.

2.3 Quarterly

- 2.3.1 Verify the Autodialer call out roster matches the Emergency Response Organization Roster as required by Section 4.6.

2.4 Monthly

- 2.4.1 Verify the Emergency Notification and Response System (ENRS) is capable of performing its function, including activation of global page, message delivery system, and report generation of results.

2.5 Weekly

- 2.5.1 A weekly activation of the ENRS will be performed to signal the new duty team rotation to ERO personnel.

2.6 Post Maintenance

2.6.1 Verify correct operation of the system after changes to an installed scenario or development of a new scenario. Correct operation would include activation of the correct pager response and code, delivery of correct verbal message, notification of the correct ERO positions, and report generation of the results.

3.0 Test Message

An appropriate test message will be used depending upon the test, which clearly begins and ends with the statement "This is only a Test." Drill messages will be similar but will depend upon the extent of play for the particular drill.

4.0 Evaluation

The individual performing the test shall complete the appropriate section of the evaluation checklist. The completed checklist along with the Dialogics Communicator "Execution List Exception Report" shall be used as objective evidence of completion. The completed checklist utilized to document the test objectives set forth in Section 2.0 were addressed, and any subsequent corrective actions are identified.

5.0 Evaluation Checklist

5.1 Reason for Test:

- Monthly
- Semi-Annual
- Five Year
- Other _____

Test Date: _____
 Call-Out Start Time: _____

5.2 Test Coordinator completes this section:

- | | | |
|--|---------------|------------------------|
| 1. Successful Activation of Autodialer
(OERP01-ZV-IN03, Addendum 1) | _____ / _____ | _____ |
| | Time | Verified by (Initials) |
| 2. Correct message initiated: | _____ / _____ | _____ |
| | Time | Verified by (Initials) |
| 3. Dialogics Exception Report generated: | _____ / _____ | _____ |
| | Time | Verified by (Initials) |

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Emergency Response Activities Schedule			
Form 20	Auto Dialer Tests (Typical)		Page 4 of 4

9. Test Results Review:

- Acceptable – Met acceptance criteria (Items 1, 2, 3, 5 completed SAT)
- Unacceptable – Any data NOT within acceptance criteria (explain in Comments Section).
Corrective Action Taken (List Condition Report numbers in Comments Section and explain as needed).

6.0 COMMENTS

Performed By: _____ / _____
Test Coordinator Date

Approved By: _____ / _____
Supervisor, Emergency Response Date
or Designee

STI# 31058894

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

O:\PROCEDURES\APPROVED\OPGP05\OZV\0003.04X Effective Date: 03/16/00 Print Time / Date: 5:23 PM 03/09/00		OPGP05-ZV-0003	Rev. 4	Page 1 of 9
Emergency Response Organization				
Quality	Non Safety-Related	Usage: Available	Effective Date: 03/16/00	
Max Keys	N/A	N/A	Emergency Response Division	
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION	

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Emergency Response Organization**1.0 Purpose and Scope**

- 1.1 This procedure outlines the necessary components required to maintain a qualified Emergency Response Organization which is capable of responding to an emergency situation at the South Texas Project Electric Generating Station (STPEGS).
- 1.2 This procedure outlines the response required by the Emergency Response Organization to support an emergency situation at the South Texas Project Electric Generating Station (STPEGS).
- 1.3 This procedure implements the actions required to satisfy the commitments of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan.

2.0 Definitions

- 2.1 **Activated** - The state of an Emergency Response Facility where the minimum Staffing Levels are attained, (as outlined in Table C-1 of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan) and the responders are capable of performing their required functions.
- 2.2 **Call-Out List**: A sequenced version of the Emergency Response Organization Roster which is utilized by personnel performing manual call-out of the Emergency Response Organization in accordance with OERP01-ZV-IN03, Emergency Response Organization Notification.
- 2.3 **Command & Control** - Assumption of responsibility for the emergency response effort by the Emergency Director.
- 2.4 **Emergency Response Organization**: Designated station personnel who respond to declared emergencies at the STPEGS.
- 2.5 **Emergency Response Organization Roster**: A list of Emergency Response Organization positions that identifies Emergency Response Organization team designation, qualified individuals for each position, telephone and pager numbers.
- 2.6 **Facility Managers**: Operations Manager, Operations Support Center Coordinator, Technical Support Center Manager, Joint Information Center Company Spokesperson, and Emergency Operations Facility Director.
- 2.7 **Notification** - The initiation of the callout process to supplement the Onshift Emergency Response Organization.

Emergency Response Organization

2.8 Staff Augmentation - The process of providing additional staff, as outlined by Table C-1 of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan, to the onshift Emergency Response Organization.

3.0 Limitations and Precautions

3.1 Any qualified STPEGS employee may be required to fill an Emergency Response Organization position.

3.2 Vacant Emergency Response Organization Roster positions should be filled as soon as possible after the vacancy is identified.

3.3 An Emergency Response Organization member who transfers from one job to another onsite shall continue to serve in that position until a replacement is trained and qualified.

4.0 Responsibilities

4.1 The Supervisor, Emergency Response, or designee, is responsible for:

4.1.1 Overall coordination of the Emergency Response Organization.

4.1.2 Reviewing and updating the Emergency Response Organization Roster in accordance with OPGP05-ZV-0002, Emergency Response Activities Schedule.

4.1.3 Maintaining current Emergency Response Organization Rosters on a quarterly basis.

4.1.4 Providing training to Emergency Response Organization personnel in accordance with OPGP03-ZT-0139, Emergency Response Training Program.

4.2 The Manager, Information Systems, or designee, is responsible for:

4.2.1 Issuing pagers to Emergency Response Organization personnel as requested and maintaining pager system.

4.2.2 Assist with Autodialer maintenance.

Emergency Response Organization

- 4.3 The Manager, Plant Protection, or designee, is responsible for:
 - 4.3.1 Verifying access levels for newly assigned Emergency Response Organization members.
 - 4.3.2 Verifying training and qualifications of on-shift Emergency Response Organization personnel within the Plant Protection Department.
 - 4.3.3 Providing emergency response training to Plant Protection Security Officers in accordance with OPGP03-ZT-0139, Emergency Response Training Program.
- 4.4 The Managers, Operations, Health Physics, Chemistry, Maintenance, and Purchasing and Materials Management, or designees, are responsible for:
 - 4.4.1 Verifying training and qualifications of on-shift Emergency Response Organization personnel within their respective Departments.
- 4.5 Emergency Response Organization members are responsible for:
 - 4.5.1 Maintaining qualifications for Emergency Response Organization duty.
 - 4.5.2 Responding to their assigned Emergency Response Facility within the appropriate time constraints as denoted in Addendum 1.
 - 4.5.3 Notifying the Emergency Response Division of home or office telephone number or pager number changes.
 - 4.5.4 Arranging for a qualified standby if assigned the duty and unavailable to fulfill Emergency Response Organization responsibilities.
 - 4.5.5 Notifying the Emergency Response Division of job position transfers at STPEGS or termination of employment.
- 4.6 The Emergency Response Facility Managers are responsible for:
 - 4.6.1 Approving all additions and/or deletions of Emergency Response Organization personnel assigned to their respective team and facility.
- 4.7 The Manager, Training, or designee, is responsible for:
 - 4.7.1 Providing training to Emergency Response Organization members in accordance with OPGP03-ZT-0139, Emergency Response Training Program.

Emergency Response Organization**5.0 Procedure****5.1 Assignment to the Emergency Response Organization**

- 5.1.1 Assignment of personnel to the Emergency Response Organization is primarily based upon the functional area background and experience required to perform the duties and responsibilities of the assigned position.
- 5.1.2 Facility Managers should seek and recommend personnel to fill vacant positions on their team.
- 5.1.3 A change to an Emergency Response Organization Roster assignment may be initiated by the requesting party by filling out and submitting a Form 1, Emergency Response Organization Roster Data Work Sheet, to the Facility Manager for approval and then forwarded to the Supervisor, Emergency Response for processing.

5.2 Initial Training and Qualification

- 5.2.1 Training requirements for each Emergency Response Organization position are outlined in OPGP03-ZT-0139, Emergency Response Training Program.
- 5.2.2 Initial training and qualification should be completed as soon as possible.
- 5.2.3 Initial training and qualification shall be documented in accordance with OPGP03-ZT-0139, Emergency Preparedness Training Program.
- 5.2.4 An individual shall not be assigned to the Emergency Response Organization until training and qualification is complete.

5.3 Requalification

- 5.3.1 Emergency Response Organization members shall maintain qualifications in accordance with OPGP03-ZT-0139, Emergency Preparedness Training Program.

5.4 Emergency Response Organization Duty Rotation

- 5.4.1 Emergency Response Organization teams should stand the duty for one week every three weeks.
- 5.4.2 If an Emergency Response Organization position is staffed less than three deep, the remaining team member(s) shall cover the duty until the position is fully staffed.

Emergency Response Organization**6.0 References**

- 6.1 STPEGS Emergency Plan
- 6.2 OPGP05-ZV-0002, Emergency Response Activities Schedule
- 6.3 OPGP03-ZT-0139, Emergency Preparedness Training Program
- 6.4 NGP-150, Emergency Preparedness
- 6.5 OERP01-ZV-IN03, Emergency Response Organization Notification

7.0 Documentation

- 7.1 Training records shall be maintained in accordance with reference 6.3.

8.0 Support Documents

- 8.1 Addendum 1 – Emergency Response Organization Personnel Responsibilities
- 8.2 Form 1 - Emergency Response Organization Roster Data Work Sheet

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Emergency Response Organization			
Addendum 1	Emergency Response Organization Personnel Responsibilities		Page 1 of 2

- 1.0 This provides guidance for the members of the Emergency Response Organization regarding the requirement for Emergency Response Organization membership, responsibilities and Emergency Response Organization actions to be taken.

- 2.0 NUREG-0654/FEMA-REP-1, Rev. 1, Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants, requires that: Each principal organization shall be capable of continuous (24-hour) operations for a protracted period. The individual in the principal organization who will be responsible for assuring continuity of resources (technical, administrative and material) shall be specified by title.

- 3.0 The same document specifies that the licensee must augment the plant staff in the following areas:
 - 3.1 Logistics support for emergency personnel;
 - 3.2 Technical support for planning and reentry/recovery operations;
 - 3.3 Management level interface with governmental authorities; and,
 - 3.4 Release of information to news media during an emergency (coordinated with governmental authorities).

- 4.0 The Emergency Response Organization provides the necessary manpower to contend with an emergency condition for a sustained period of time. The individuals selected for the Emergency Response Organization must have the prerequisite training as found in OPGP03-ZT-0139, Emergency Response Training Program.

- 5.0 To protect the health and safety of the public and the workers at STPEGS, the resources to mitigate and manage the emergency situation must be available as soon as possible. In the event of an emergency declaration by the Shift Supervisor, the Onshift Response Organization is activated immediately and the individuals assigned assume their respective titles and the responsibilities for their position upon notification.

- 6.0 Those members of the Emergency Response Organization who are not on site at the time of the emergency shall be able to augment the Onshift Response Organization within 60 or 75 minutes of being notified as defined in Table C-1 of the STPEGS Emergency Plan.

- 7.0 The Operations Support Center and Technical Support Center Emergency Response Organizations are required to be activated at an Alert classification. The Operations Support Center may be activated independently of the Technical Support Center. The Emergency Operations Facility and Joint Information Center are staffed at the Alert and may be activated at the discretion of the Emergency Director. The Emergency Operations Facility and Joint Information Center shall be activated at a Site Area Emergency classification.

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Emergency Response Organization			
Addendum 1	Emergency Response Organization Personnel Responsibilities		Page 2 of 2

- 8.0 Notification of the Emergency Response Organization is accomplished by using a pager system, public address system, auto dialing system, or manual telephone call-out. Personnel will be issued pagers for prompt notification. Details of Emergency Response Organization notification are contained in OERP01-ZV-IN03 Emergency Response Organization Notification.
- 9.0 Regardless of the method of notification used, the result is to be the same, timely response to the STPEGS and activation of the Emergency Response Facilities.

NOTE

The Fitness for Duty Program is described in procedure OPGP09-ZA-0002.

- 10.0 Emergency Response Organization members who are unable, in their opinion, to respond to an Emergency Response Organization activation due to alcohol consumption or other physical/mental impairment should answer the Fitness For Duty question in response to the pager notification as NO. If contacted by manual call-out the member should provide details with regard to their inability to respond.
- 11.0 Emergency Response Organization members responding to an Emergency Response Organization activation with duties inside the Protected Area who have consumed alcohol within the previous five (5) hours must wait at the East Gate outside the protected area and identify themselves to Plant Protection personnel. Breathalyzer results for personnel testing 0.040 BAC or above will be reported to and evaluated by their respective Emergency Response Facility Manager to determine if they should be allowed to report to their Emergency Response Facility.
- 12.0 Personnel responding to the Emergency Operations Facility who have consumed alcohol in the previous five (5) hours must identify themselves to the Support Orientation Coordinator in the Emergency Operations Facility or the Licensing Director if the Support Orientation Coordinator has been relocated to the Central Processing Facility. The Emergency Operations Facility Director will determine if persons testing 0.040 BAC or above can be allowed to assume their duties.
- 13.0 Changes to the Emergency Response Organization roster will be accomplished in accordance with this procedure. Members of the Emergency Response Organization should not be assigned to more than one (1) position at a time; although they may be qualified to fill more than one position, unless authorized by the Supervisor, Emergency Response. An Emergency Response Organization member who transfers from one job to another, onsite, will continue to serve in that position until a replacement is trained and qualified.

Emergency Response Organization

Form 1

Emergency Response Organization Roster Data
Work Sheet

Page 1 of 1

Completed by Candidate:

Name _____ SS# _____

Work Phone _____ Home Phone _____

Response time in minutes from your home to your facility _____

Known allergy to iodine? _____

Emergency Response Organization Position Requested _____

Current Pager Number _____

Team _____ STP Job Title _____

Completed by Emergency Response Division:

Approved by Facility Manager (Date/Method) _____

Required Training Complete _____

Security Access Level Correct _____

Pager # _____ Dialogics Updated _____

E-Mail Updated _____ Roster/Call Out List Updated _____

Roster Change Complete (Emergency Response Division Supervisor or Designee):

ST# 31059073

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

O:\PROCEDURES\APPROVED\PGP05\ZV0006.02x
Effective Date: 03/16/00
Print Time / Date: 2:36 PM 03/10/00

OPGP05-ZV-0006

Rev. 2

Page 1 of 4

Emergency Notification and Response System

Quality

Non Safety-Related

Usage: Available

Effective Date: 03/16/00

Max Keyes

N/A

N/A

Emergency Response Division

PREPARER

TECHNICAL

USER

COGNIZANT ORGANIZATION

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Emergency Notification and Response System**1.0 Purpose and Scope**

- 1.1 This procedure assigns responsibility for the administration, maintenance, and operation of the Emergency Notification and Response System (ENRS).
- 1.2 The scope of this procedure delineates responsibilities for the various elements required to utilize the ENRS.
- 1.3 This procedure implements portions of the STPEGS Emergency Plan specific to notification of the Emergency Response Organization (ERO).

2.0 Definitions

- 2.1 **ADMINISTRATION:** Perform manipulation of the operating system of the ENRS to meet the operating needs of the system.
- 2.2 **MAINTENANCE:** Maintain the hardware and software of the ENRS in a state of readiness to support Emergency Response requirements.
- 2.3 **OPERATION:** Activate the ENRS to support Emergency Response requirements.

3.0 Responsibilities

- 3.1 The Supervisor, Emergency Response, or designee, is responsible for:
 - 3.1.1 Establishing ENRS requirements and maintaining applicable procedures.
 - 3.1.2 Providing management oversight of system administration, operation and maintenance.
 - 3.1.3 Ensuring that appropriate training is provided for designated Nuclear Plant Protection personnel in the operation and administration of the ENRS.
 - 3.1.4 Maintaining contract with Dialogics Corporation for annual maintenance support.
- 3.2 The Manager, Information Systems, or designee, is responsible for:
 - 3.2.1 Providing system technical hardware and maintenance support.
 - 3.2.2 Providing backup Emergency Communications.

Emergency Notification and Response System

- 3.3 The Manager, Plant Protection, or designee, is responsible for:
 - 3.3.1 System administration, including database entry, update, and programming the ENRS to meet Emergency Response requirements.
 - 3.3.2 Operation of the ENRS when directed by the Emergency Director for emergencies, or the Emergency Response Division for testing and training.
- 3.4 The Acting OSC Coordinator (Duty Maintenance Supervisor), or designee, is responsible for:
 - 3.4.1 Retrieving messages from the ENRS upon declaration of an emergency, or during a drill or exercise, in the event that warehousemen personnel are not available to perform this function.
- 3.5 Duty Warehouse personnel are responsible for:
 - 3.5.1 Retrieving, review and tabulation of ERO Roster Fax Reports generated by ENRS.
 - 3.5.2 Reporting the above results to the TSC Administrative Manager during a Drill or Emergency.
 - 3.5.3 Conducting ERO manual call-out in the event of ENRS system failure.

4.0 Procedure

- 4.1 Plant Protection personnel, qualified in the operation of the ENRS, shall activate the ENRS when directed by the Emergency Director, for emergencies, or Emergency Response personnel for tests and drills, in accordance with 0ERP01-ZV-IN03, Emergency Response Organization Notification.
- 4.2 Duty Warehouse personnel shall retrieve messages from the ENRS in accordance with 0ERP01-ZV-IN03, Emergency Response Organization Notification.
- 4.3 If required, a manual callout of the duty ERO will be performed by duty warehouse personnel. If duty warehousemen are not available, the Acting OSC Coordinator (Duty Maintenance Supervisor) shall perform this function.

Emergency Notification and Response System

4.4 In the event of an unplanned loss of all onsite or offsite communications capabilities, rendering the ENS and ENRS inoperable, the shift supervisor shall make required notifications via any other method which will ensure that a report is made as soon as possible to the NRC Operations Center, as required per 10CFR50.72. This would normally be through either the micro-wave link with Corporate Headquarters or via the 800 MHZ Radio Telephone System through the EC-DC dispatcher.

5.0 References

5.1 STPEGS Emergency Plan

5.2 0ERP01-ZV-IN03, Emergency Response Organization Notification

5.3 10CFR50.72, Immediate Notification Requirements for Operating Nuclear Power Reactors.

6.0 Support Documents

6.1 None

SATA 31059217

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

<small>O:\PROCEDURES\APPROVED\PGP050ZV0007.03x Effective Date: 03/16/00 Print Time / Date: 2:50 PM 03/10/00</small>		OPGP05-ZV-0007	Rev. 3	Page 1 of 19
Prompt Notification System				
Quality	Non-Safety-Related	Usage: IN HAND (Forms Only)	Effective Date: 03/16/00	
Max Keys	N/A	N/A	Emergency Response Division	
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION	

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Prompt Notification System**1.0 Purpose and Scope**

- 1.1 This procedure provides overall guidance for the administration, maintenance, testing and distribution of the Prompt Notification System.
- 1.2 This procedure assigns responsibility for the administration, maintenance, testing and distribution of the alert radio subsystem of the Prompt Notification System.
- 1.3 This procedure assigns responsibility for the administration, maintenance and testing of the siren subsystem of the Prompt Notification System.
- 1.4 This procedure implements portions of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan specific to general public notification of emergencies at the STPEGS.

2.0 Definitions

- 2.1 **SUBSYSTEM ADMINISTRATION:** Alert Radios - Updating, on a quarterly basis, the Emergency Planning Zone database by reviewing the electric utility listings, followed by verifying the data with the use of an information card. Sirens - Defining the hardware requirements and testing frequency of the siren subsystem, as well as reviewing test results and submitting documentation to the State of Texas Division of Emergency Management and the Federal Emergency Management Agency (FEMA).
- 2.2 **SUBSYSTEM TESTING:** Alert Radios – Performing back-up Emergency Alert System testing from the Matagorda County Sheriff's Department on an annual basis.
- 2.3 **SUBSYSTEM MAINTENANCE:** Maintaining the hardware of the alert radio and siren subsystems in a state of readiness to support emergency response requirements.
- 2.4 **SUBSYSTEM DISTRIBUTION:** Providing alert radios to designated locations based on the Emergency Planning Zone database (electric utility listings). For residents only, verifying the data with the use of an information card.

3.0 Responsibilities

- 3.1 The Supervisor, Emergency Response, or designee, is responsible for:
 - 3.1.1 Administration of the alert radio subsystem.
 - 3.1.1.1 Overseeing the administration of the alert radios through quarterly database reviews using electric utility listings and verifying the data through the use of information cards.

Prompt Notification System

- 3.1.1.2 Purchasing alert radios in accordance with the established technical specifications.
 - 3.1.1.3 Coordinating annual activation of the alert radios with Matagorda County officials and the lead Emergency Alert System radio station.
 - 3.1.1.4 Establishing maintenance and operational testing of the alert radios in accordance with the manufacture's specifications and providing them to the Manager of the Metrology and Radiological Laboratory or designee.
- 3.1.2 Distribution of the Alert Radio
- 3.1.2.1 Distributing alert radios in accordance with the FEMA approved REP-10 Addendum, "Prompt Notification System For The South Texas Project Electric Generating Station".
 - 3.1.2.2 Distributing alert radio to industrial locations, special facilities, and recreational areas within the 10-mile Emergency Planning Zone and residents located outside effective siren range, but within the 10-mile Emergency Planning Zone via mail-outs or individual delivery.
 - 3.1.2.3 Tracking alert radio distribution.
- 3.1.3 Administration of the Siren Subsystem.
- 3.1.3.1 Establishing the hardware requirements for the siren subsystem and providing them to the Manager, Information Systems, or designee.
 - 3.1.3.2 Establishing the testing schedule of the siren subsystem, and providing it to the Manager, Information Systems, or designee in accordance with Addendum 1, "Siren and Alert Radio Subsystem Test Schedule".
 - 3.1.3.3 Reviewing the test results and submitting completed documentation to the Records Management System.
 - 3.1.3.4 Submitting Form 4, "Siren Subsystem Maintenance and Operability Report" as required per OPGP05-ZV-0002, "Emergency Response Activities Schedule" to Records Management System.

Prompt Notification System

- 3.1.3.5 Coordinating activation of the siren system with Matagorda County officials, businesses and residents located within the 10 mile Emergency Planning Zone.
- 3.1.4 Developing and maintaining current alert radio and siren subsystem test procedures.
- 3.2 The Manager, Information Systems, or designee, is responsible for:
 - 3.2.1 Maintenance and testing of the back-up Emergency Alert System and siren subsystem.
 - 3.2.1.1 Performing an annual test of the back-up Emergency Alert System, located in the Matagorda County Sheriff's Department dispatch office in accordance with an approved schedule between STP Emergency Response Division, Matagorda County Sheriff's Department and the lead Emergency Alert System radio station.

NOTE

The lead radio station tests the primary Emergency Alert System, located at the radio station, in conjunction with the Federal Communication Commission's requirements.

- 3.2.1.2 Performing tests of the siren subsystem hardware as required in accordance with approved vendor specifications, and the test schedule in accordance with Addendum 1, "Siren and Alert Radio Subsystem Test Schedule".
- 3.2.1.3 Performing Poll (Silent) Tests, Growl Tests and visuals, as needed after a severe weather (e.g. thunderstorm, high wind, hurricane, etc.) incident (CR 99-2717).
- 3.2.1.4 Contacting the Supervisor, Emergency Response, or designee when the back-up Emergency Alert System or a siren(s) is or will be out of service.
- 3.2.1.5 Coordinating repair of the siren subsystem with Facilities Management or outside contractor as appropriate.
- 3.2.1.6 Contacting Matagorda County Emergency Management officials when a siren(s) is or will be out of service for 24 hours or longer.
- 3.2.1.7 Forwarding test results to the Supervisor, Emergency Response, or designee, for review and approval.

Prompt Notification System

3.3 Manager, Metrology and Radiological Laboratories or designee, is responsible for:

3.3.1 Performing operational tests on the alert radios as required in accordance with approved vendor specifications.

3.3.2 Affixing a STPEGS identification tag on the alert radio for tracking purposes.

3.3.3 Disposition of damaged or returned radios.

3.4 The Public Information Officer, Public Affairs and Communications, is responsible for:

3.4.1 Notifying residents, special facilities, industrial locations and recreational areas within the 10-mile Emergency Planning Zone (EPZ) prior to any Complete Cycle Test via letter, newsletter or local news media.

4.0 Procedure

4.1 Alert Radio Subsystem

4.1.1 Maintain a current Emergency Planning Zone database composed of residents located outside effective siren range and within the 10-mile Emergency Planning Zone who have been provided an alert radio via a record compiled from electric utility listings and verified by the use of an information card.

4.1.2 Maintain a current Emergency Planning Zone database composed of industrial locations, special facilities, and recreational areas within the South Texas Project 10-mile Emergency Planning Zone who have been provided an alert radio, via a record compiled from electric utility customer listings.

4.1.3 Update the alert radio database, on a quarterly basis.

4.1.3.1 Check new electric utility listing to determine if the residents are within the 10-mile Emergency Planning Zone, but outside effective siren range or if the special facilities, industrial location, or recreational areas are within the 10-mile Emergency Planning Zone.

4.1.3.2 Mail-out an information card to verify the resident's address and physical location.

4.1.3.3 Using the updated Emergency Planning Zone database and the returned information card, determine if the residents require an alert radio.

Prompt Notification System

- 4.1.3.4 If an alert radio is required, mail-out the unit with a return receipt or deliver the unit to the resident's home.
- 4.1.3.5 Residents located outside effective siren range and all special facilities, industrial locations, and recreational areas will receive an alert radio.
- 4.1.3.6 A written back-up listing of radio recipients will be kept on file in the Emergency Response Division.
- 4.1.4 Maintain documentation (e.g., information card, date of distribution etc.,) of alert radios distributed to the designated locations via the Emergency Planning Zone database.
- 4.1.5 Send defective or broken radio to the Metrology Laboratory for repair or replacement.
- 4.1.6 Purchase alert radios as necessary to support distribution.
- 4.2 Back-up Emergency Alert System Test
 - 4.2.1 Contact lead Emergency Alert System radio station to conduct the back-up test.

NOTE

Do not conduct the test without the assistance of radio station personnel. Station officials will ensure the test is conducted off the air. Activation of the system without contacting radio station staff will result in live over the air broadcast.

- 4.2.2 Upon approval from lead Emergency Alert System radio staff, initiate the test.
- 4.2.3 Turn on the radio and ENDEC encoder before conducting the system test.
- 4.2.4 Perform the following steps on the ENDEC encoder.
 - 4.2.4.1 The display will read MENU in the lower left corner---Press ENTER
 - 4.2.4.2 The arrow should be pointing to ALERTS---Press ENTER
 - 4.2.4.3 The arrow should be pointing to ORIGINATE ALERT---Press ENTER
 - 4.2.4.4 To ensure password, press ENTER four times

Prompt Notification System

- 4.2.4.5 To select TEMPLETE---Press the button underneath TEMPLATE
- 4.2.4.6 The display will read OUTGOING TEMPLATE KMKS---Press ENTER
- 4.2.4.7 The display will read ADJUST TEMPLATE---Press the button underneath NO
- 4.2.4.8 The display will read DURATION 1:00---Press ENTER
- 4.2.4.9 The display will read KMKS---Press ENTER

NOTE

Upon completing the above steps, the radio should key up (red transmit light should illuminate) followed by a series of attention tones. This is the amount of time available to conduct the voice test.

- 4.2.4.10 Press the PTT button on the base of the microphone.
 - 4.2.4.11 Speak clearly approximately six inches away from the microphone.
 - 4.2.4.12 Start the announcements with, "This is a test, this is only a test, this is a test of the back-up emergency alert system". End the announcements with, "This has been a test of the back-up emergency alert system. This was only a test".
 - 4.2.4.13 Confirm test results with the radio station staff.
 - 4.2.4.14 Repeat test, if the initial test is unsuccessful.
 - 4.2.4.15 Upon completion of the test, turn off the radio and ENDEC encoder.
- 4.2.5 Complete Form 5, "Back-up Emergency Alert System Results".
 - 4.2.6 Forwarding test results to the Supervisor, Emergency Response or designee, for review and approval.

Prompt Notification System

NOTE

Conduct Siren Subsystem testing in accordance with Addendum 1, "Siren and Alert Radio Subsystem Test Schedule". Verify the correct date and time is shown on the computer screen. If not, correct the date and time. (SPR 933336)

4.3 Siren Subsystem

4.3.1 Poll (Silent) Test

4.3.1.1 Select "CompuLert" icon

4.3.1.2 Select "STATUS"

4.3.1.3 Select "POLL"

4.3.1.4 Type in "****"

4.3.1.5 Select "SEND"

4.3.1.6 Select "REPORT"

4.3.1.7 Select "NEW ACTIVITIES"

4.3.1.8 If the siren(s) do not respond to the Poll Test, repeat the test. If there is no response after a second attempt, indicate the siren(s) as failed (CR 99-2717).

4.3.1.9 Using Form 1, "Prompt Notification System Test Results", document the Poll Test, and attach test printout to Form 1.

4.3.1.10 Forward completed test package to the Supervisor, Emergency Response, or designee for approval.

4.3.2 Growl Test

4.3.2.1 Select "CompuLert" icon

4.3.2.2 Select "STATUS"

4.3.2.3 Select "GROWL"

4.3.2.4 Type in "****"

4.3.2.5 Select "SEND"

Prompt Notification System

- 4.3.2.6 Select "STATUS"
 - 4.3.2.7 Select "POLL"
 - 4.3.2.8 Verify "Run Status" on all sirens
 - 4.3.2.9 Select "STATUS"
 - 4.3.2.10 Select "RESET STAT"
 - 4.3.2.11 Select "STATUS"
 - 4.3.2.12 Select "POLL"
 - 4.3.2.13 Verify "RF OK"
 - 4.3.2.14 Select "REPORT"
 - 4.3.2.15 Select "NEW ACTIVITIES"
 - 4.3.2.16 Using Form 1, "Prompt Notification System Test Results", document the Growl Test, and attach test printout to Form 1.
 - 4.3.2.17 Forward completed test package to the Supervisor, Emergency Response, or designee for approval.
- 4.3.3 Visual Inspection
- 4.3.3.1 Using Form 2, "Prompt Notification System Visual Inspection", perform and document the Visual Test.
 - 4.3.3.2 Perform the Poll test per Step 4.3.1.
 - 4.3.3.3 Forward completed test package to the Supervisor, Emergency Response, or designee for approval.
- 4.3.4 Complete Cycle Test
- 4.3.4.1 Ensure businesses residents, schools, industrial facilities and recreational areas within the 10-mile EPZ have been notified prior to the test.
 - 4.3.4.2 Ensure the Matagorda County Sheriff's Office (MSCO) has been notified prior to the test.
 - 4.3.4.3 Assign personnel as Observers at each siren.

Prompt Notification System

- 4.3.4.4 Conduct a pre-test briefing for all involved test participants.
- 4.3.4.5 Place key into the "EMERGENCY ENABLE" switch and turn to the right.
- 4.3.4.6 Depress the "ALERT" pushbutton.
- 4.3.4.7 Observe the "Bsy" light on the radio transmitter.
- 4.3.4.8 Perform the Poll test per Step 4.3.1.
- 4.3.4.9 Using Form 1, "Prompt Notification System Test Results" and Form 3, "Complete Cycle Test Local Observation", document the Complete Cycle Test, attach test printout to Form 1 and 3.
- 4.3.4.10 Forward completed test package to the Supervisor, Emergency Response, or designee for approval.
- 4.3.5 Post Maintenance or Severe Weather Condition
 - 4.3.5.1 Following any preventive and/or corrective maintenance, perform post maintenance testing for the affected sirens:
 - a. Visual Inspection (per Section 4.3.3), and
 - b. Growl Test (per Section 4.3.2).
 - 4.3.5.2 Following a Severe Weather Condition, perform a Poll Test (per Section 4.3.1).
 - 4.3.5.3 Forward completed test packages to the Supervisor, Emergency Response, or designee for approval.

5.0 References

- 5.1 STPEGS Emergency Plan
- 5.2 NUREG-0654/FEMA-REP-1, Criteria for Preparation and Evaluation of Radiological Emergency Plans and Preparedness in Support of Nuclear Power Plants
- 5.3 FEMA-REP-10, Guide for the Evaluation of Alert and Notification System for Nuclear Power Plants
- 5.4 Addendum, Prompt Notification System For the South Texas Project Electric Generating Station, FEMA-REP-10, April 1997

Prompt Notification System

- 5.5 STPEGS Response Report to FEMA-REP-10, ST-HL-FD-198
- 5.6 Emergency Management Plan for Matagorda County, Bay City, and Palacios
- 5.7 0PGP05-ZV-0002, Emergency Response Activities Schedule
- 5.8 Vendor Manual, Penetrator 10 and 15 Rotating Directional Siren
- 5.9 SPR 933336
- 5.10 CR 99-2717
- 6.0 Documentation
 - 6.1 Documents generated in the execution of this procedure shall be retained in the Records Management System for five years.
- 7.0 Support Documents
 - 7.1 Addendum 1 – Siren and Alert Radio Subsystem Test Schedule
 - 7.2 Form 1 - Prompt Notification System Test Results (IN HAND)
 - 7.3 Form 2 - Prompt Notification System Visual Inspection (IN HAND)
 - 7.4 Form 3 - Complete Cycle Test Local Observation (IN HAND)
 - 7.5 Form 4 - Siren Subsystem Maintenance and Operability Report (IN HAND)
 - 7.6 Form 5 – Back-up Emergency Alert System (EAS) Test Results (IN HAND)

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Prompt Notification System			
Addendum 1	Siren and Alert Radio Subsystem Test Schedule		Page 1 of 1

NOTE

Siren tests shall not be performed outside of these hours without prior permission from the Supervisor, Emergency Response. The only exception is visual tests may be postponed one working day based upon severe weather if recommended by the Supervisor, Communications. (SPR 933336)

- | | |
|------------------|---|
| Biweekly | <p>(B) - Perform Poll (silent) Test at least every two weeks. The Poll Test will be conducted from either the Emergency Operations Center or Matagorda County Sheriff's Office on Wednesday.</p> |
| Quarterly | <p>(Q) - Perform Growl Test at least quarterly. The Growl Test shall be conducted from the Matagorda County Sheriff's Office on a Wednesday at approximately 12:00 Noon.</p> <p>- Perform Visual Inspections at least quarterly.</p> |
| Annual | <p>(A) - Complete Cycle Test - Perform the Complete Cycle Test at least annually. The Complete Cycle Test shall be conducted from the Matagorda County Sheriff's Office on a Wednesday at approximately 12:00 Noon.</p> <p>- Back-up Emergency Alert System Test at least annually from the Matagorda County Sheriff's Office.</p> |
| Post Maintenance | <p>(P) - Perform Poll Test, Visual Inspection and Growl Test of the affected siren(s) following preventive and/or corrective maintenance.</p> |
| Post Weather | <p>(W) - Perform Poll Test after a severe weather condition is identified; additional maintenance and testing may be required if unsat test results are determined.</p> |

1. Notifications:
 - a. MCSO notified (Poll, Growl, Complete Cycle Test) _____
 - b. Residents, schools, industrial facilities and recreational areas within the EPZ notified (Complete Cycle Test) _____
2. Performed at: _____ Matagorda County Sheriff's Office (MCSO)
 _____ STPEGS Emergency Operations Facility
3. Test Date/Time: _____ / _____
4. Quarterly Check of MCSO Central Controller Printer _____

NOTE

Major loss of the offsite notification system is when greater than 50 percent of the sirens are inoperable. Immediately notify the Unit 1 Shift Supervisor of this condition. NRC notification within one hour is required pursuant to 10 CFR 50.72(b)(1)(v).

5. Complete Form 1, Page 2 of 2 for affected sirens.
6. Supervisor, Emergency Response or designee notified of siren failure(s)
 (Reference Steps 3.2.1.4 and 3.2.1.6)

NAME	SIREN CODE(S)	DATE	TIME
7. Help Desk No. _____			
8. Comments: _____			

9. Attach Test Computer Print-out Sheets
10. Test Completed By: _____ Date: _____
 Signature
- Results Reviewed By: _____ Date: _____
 Supervisor, Communications
- Results Approved By: _____ Date: _____
 Supervisor, Emergency Response
 or designee

Results: (Test Type, B = Biweekly, Q = Quarterly, A = Annual, P = Post Maintenance, W = Weather)

SIREN CODE	SIREN LOCATION	TEST TYPE	TEST		PHYSICAL RESET RECOMMENDED	VISUAL INSPECTION RECOMMENDED
			ACCEPT-ABLE	UNACCEPT-ABLE		
AAA	Wadsworth Volunteer Fire Department					
ABA	Selkirk, North					
ABB	Selkirk, South					
ABC	Matagorda Volunteer Fire Department					
ABD	Matagorda Beach at end of road					
ABE	Hwy 2668, 0.5 mi (S) of Riverside Park					
ABF	Selkirk Volunteer Fire Department					
ADA	Markham Volunteer Fire Department					
ADB	EL Maton @ Hwy 1095					
AEA	Hwy 35 @ Hwy 71					
AEB	Blessing Volunteer Fire Department					
AEC	Tidewater Oaks @ 2853					
AED	Tres Palacios Oaks Volunteer Fire Department					
AEE	Collegeport Volunteer Fire Department					
BAA	Celanese Rd @ Hwy 2668					
BAB	Hwy 2078 @ Hwy 2668					
BAC	North Gulf/Old River Road					
BAD	River Bend Boat Access					
BBA	Sheppard-Mott Rd @ Hwy 60					
BBB	Equistar Plant (Rt. 60)					
BBC	South Gulf Road					
CAA	Buckeye Rd (Railroad Tracks)					
CAB	Hwy 35 @ Hwy 521					
CBA	Wilson Creek Rd @ Hwy 1095					
CBB	Hwy 2853 @ Hwy 521					
CCA	Hwy 1095 @ Tin Top					
CCB	Citrus Grove @ Hwy 1095					
CCD	West Side of Reservoir (STP)					
CCE	East Side of Reservoir (STP)					
CDA	Million Dollar Rd @ Brazos Tower Rd.					
CDB	Harrison Rd @ Hwy 2853					

File: Z18.01

Site Location: _____

CAUTION

Due to electrical shock hazard, all manual growl tests shall be conducted from the radio control box by pressing the TEST or GROWL button on the Control Panel.

- | | | | |
|----|---|------------------------------|-----------------------------|
| 1. | Fuse box padlock in place and locked: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. | All box exteriors acceptable: | | |
| a. | Fuse Box | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. | Radio Control Box | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. | Electronic Switch Box | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. | Failure lights illuminated: | | |
| a. | AC POWER FAIL | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. | DOOR OPEN | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. | Other electronic indications acceptable
(if no, explain in comments) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. | Siren Growl | | |
| a. | Siren motion observed | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

File: Z18.01

5. System restored:

a. AC Power ON

Yes No

b. Padlocks in place and locked

Yes No

NOTE

After performing all visual inspections, perform poll test, per Section 4.3.1, to assure operability of sirens.

6. Polling test results satisfactory

Yes No

7. Emergency Response Supervisor or designee notified of unsatisfactory results?

Yes No N/A

8. Help Desk No. _____

9. Comments: _____

10. Visual Inspection Performed By: _____
Signature

Date: _____

Time: _____
(SPR 933336)

11. Results Reviewed By: _____
Supervisor, Communications

Date: _____

12. Results Approved By: _____
Supervisor, Emergency Response
or designee

Date: _____

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Prompt Notification System			
Form 3	Complete Cycle Test Local Observation (IN HAND)	Page 1 of 1	

Siren Location _____

1.0 Observer Name _____

Three minute run

1.1 Siren Sounds _____
YES/NO

1.2 Siren Rotates _____
YES/NO

1.3 Siren Stops _____
YES/NO

1.4 Siren Run Time (minutes): _____

2.0 Return completed form to the Supervisor, Emergency Response or designee.

Observer Signature

Date: _____

3.0 Siren Test Results

Sat Unsat

Supervisor, Emergency Response
or designee

Date: _____

Prompt Notification System

Form 4

Siren Subsystem Maintenance and Operability Report (IN HAND)

Page 1 of 1

DATE: _____

QUARTER

YEAR

MONTH(S)	TOTAL NO. OF SIRENS VERIFIED	TOTAL NO. OF SIREN FAILURES	SIREN FAILURE LOCATION	NATURE OF EACH SIREN FAILURE	DATE FAILURE NOTED	DATE RESTORED TO SERVICE	OPERABILITY PERCENTAGE
	_____ (SIRENS x WEEKS)						%
	_____ (SIRENS x WEEKS)						%
	_____ (SIRENS x WEEKS)						%
FEMA REGION VI							AVERAGE = %
STATE OF TEXAS, DIVISION OF EMERGENCY MANAGEMENT			$\% \text{ Operability} = \frac{\text{Total Sirens Tested} - \text{Total Reported Failures} \times 100}{\text{Total Sirens Tested}}$				
GENERAL INFORMATION							
TOTAL SIRENS IN SYSTEM: 31			PREPARED BY: _____				
TESTING CYCLE -- BIWEEKLY			APPROVED BY: _____				

This page, when completed, shall be retained as per the Document Type List (DTL).

NOTE

Before conducting the test, contact the lead EAS radio station to ensure the staff have disabled the live over the air broadcast capability.

1. Test Type: _____ Test Date/Time: _____

2. Equipment functional:

- | | | |
|---|------------------------------|--------------------------------|
| a. Radio | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. ENDEC Encoder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Microphone | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Activation Card Available | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Back-up Emergency Alert System Test: | <input type="checkbox"/> Sat | <input type="checkbox"/> Unsat |

4. Test Completed By: _____ Date: _____
Signature

Results Reviewed By: _____ Date: _____
Supervisor, Communications

Results Approved By: _____ Date: _____
Supervisor, Emergency Response
or designee

371# 31058816

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Emergency Facility Inventories and Inspections					
Quality	Non Safety-Related	Usage: Referenced	Effective Date: 03/16/00		
Vivian T. Wagnon	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Emergency Facility Inventories and Inspections**1.0 Purpose and Scope**

- 1.1 This procedure lists Emergency Response Facilities (ERFs) and requirements for completing inventories.
- 1.2 This procedure outlines the requirements to verify the operational readiness and availability of the emergency facilities, equipment and supplies required for the implementation of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan.

2.0 Definitions

- 2.1 **DRILL/EXERCISE:** A period of instruction/testing that simulates an actual emergency.
- 2.2 **EMERGENCY LOCKERS:** Designated cabinets and spaces used to store equipment and supplies in the ERFs and other locations for use during a declared emergency or drill/exercise.
- 2.3 **EMERGENCY RESPONSE FACILITIES (ERFs):** Facilities which are manned during an emergency which provide technical and communications support for the Control Room and provide information and services to protect the health and safety of the public and site personnel.
- 2.4 **INSPECTION:** The act of visually verifying the state of readiness of an ERF.
- 2.5 **INVENTORY:** The act of verifying and checking the operational readiness of emergency equipment and supplies in an ERF or locker.

3.0 Limitations and Precautions

- 3.1 If an instrument must be removed from an emergency locker for calibration/repair, it should be replaced within 24 hours of removal.
- 3.2 Any emergency respiratory protection equipment used for an actual emergency or drill shall be inspected or replaced within 24 hours of the termination of the emergency or drill.

4.0 Responsibilities

- 4.1 The Supervisor, Emergency Response, or designee, is responsible for:
 - 4.1.1 Performing inspections of ERFs, except Control Rooms.
 - 4.1.2 Ensuring inventories are completed at least once per calendar quarter with no more than 120 days between consecutive inventories.
 - 4.1.3 Reviewing for completeness and accuracy, and approving inventory forms.

Emergency Facility Inventories and Inspections

- 4.1.4 Providing replacement, non-radiological related, supplies for use in ERFs and emergency lockers.
- 4.1.5 Verifying during inventory performance that radiation detection equipment is within scheduled calibration.
- 4.2 The Manager, Health Physics, or designee, is responsible for:
 - 4.2.1 The maintenance/replacement of Respiratory Protection Equipment and Associated Documentation in the Owner Controlled Area.
 - 4.2.2 Performing inventories using procedure OPGP05-ZV-0012, Emergency Facility Inventories, Form 2 - Technical Support Center Inventory, Form 3 - Operations Support Center Inventory, Form 4 - Emergency Operations Facility Inventory, Form 6 - Offsite Survey Team Kit Inventory, Form 9 - Rad Van Inventory, and Form 11 - Site Ambulance Inventory in accordance with Step 4.1.2 of this procedure.
 - 4.2.3 Approving Health Physics restricted materials for restocking ERFs/emergency lockers.
- 4.3 The Manager, Meteorology and Radiological Laboratory, or designee, is responsible for:
 - 4.3.1 Replacing radiation detection equipment located in ERFs and/or emergency lockers when it must be removed for calibration/repairs or has been expended through use.
 - 4.3.2 Maintaining emergency response radiation detection equipment records, to include equipment type, serial number, storage location, and calibration due date.
 - 4.3.3 Performing inventories using procedure OPGP05-ZV-0012, Emergency Facility Inventories, Form 5 - Support Hospital Inventory, Form 7 - State/County Offsite Survey Team Kit Inventory, Form 8 - Alternate Emergency Operations Facility Inventory, Form 10 - Offsite Ambulance Instrument Inventory, Form 12 - Environmental Health Department (EHD) Inventory, Form 13 - Matagorda County Sheriff's Office Inventory in accordance with Step 4.1.2 of this procedure.
- 4.4 The Manager, Operations, or designee, is responsible for:
 - 4.4.1 Performing inventories using procedure OPGP05-ZV-0012, Emergency Facility Inventories, Form 1, Control Room Inventory (both Units) emergency response equipment in accordance with Step 4.1.2 of this procedure.
 - 4.4.2 Verify during inventory performance that radiation detection equipment is within scheduled calibration.

Emergency Facility Inventories and Inspections

5.0 Procedure

NOTE

ERFs and/or emergency lockers/equipment are maintained in the following locations:

- a. Control Room (both Units)
- b. Technical Support Center (both Units)
- c. Operations Support Center (both Units)
- d. Emergency Operations Facility
 - 1) Celanese
 - 2) EquiStar
- e. Offsite Survey Team (Kits A and B)
- f. Rad Van
- g. Onsite Ambulance Services (Site Ambulance and Transport)
- h. Alternate Emergency Operations Facility (Bay City Service Center)
- i. Matagorda General Hospital
- j. Wagner General Hospital
- k. Emergency Operations Center (Matagorda County Sheriff's Office)
- l. State/County Survey Team (Kits A, B, C, D, E and F)
- m. Environmental Health Department (EHD)
- n. Offsite Ambulance Services
 - 1) Bay City Emergency Medical Services
 - 2) Palacios Area Emergency Medical Services
- o. Telephone cell (Inspection only)
- p. Joint Information Center (Best Western Matagorda Hotel - Inspection only)
- q. State of Texas Bureau of Radiation Control Staging Area (Bay City Civic Center – Inspection only)
- r. Reception Center (McAllister Junior High School/Palacios Senior High School Field House - Inspection only)

5.1 A complete inspection and inventory (if required) of ERFs and/or emergency lockers/equipment shall be performed within 24 hours following a drill/exercise for those ERFs used, within 24 hours after the termination of a declared emergency if the ERF/locker was utilized, or when a locker is found unsealed or unlocked.

5.1.1 During the 1st Quarter inspection and inventory of lockers/equipment, all sealed packages with the exception of those sealed from the manufacturer, shall be broken open and physically counted and inspected.

Emergency Facility Inventories and InspectionsNOTE

This does not include those packaged items/kits that contain items/equipment requiring an operational check or functional check.

- 5.1.2 Packaged items/kits found to be sealed from the last inventory may be signed off and documented as inventoried. For documenting purposes, the accounted inventory will be the same quantity as the required inventory.
- 5.2 A partial inventory is required, of affected items, when the locker(s) is found secure and equipment (such as respiratory or radiation detection) is being changed out.
- 5.3 To perform inventories utilize the applicable Facility Inventory form (Forms 1-13) from procedure OPGP05-ZV-0012, Emergency Facility Inventories.
- 6.0 References
 - 6.1 STPEGS Emergency Plan
 - 6.2 NUREG 0654, FEMA-REP-1, Criteria for the Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants
 - 6.3 NUREG 0696, Functional Criteria for Emergency Response Facilities
 - 6.4 Matagorda County Annex W, REP Plan
 - 6.5 OPGP05-ZV-0012, Emergency Facility Inventories

ST# 31058875

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

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Quality		Non Safety-Related		Usage: Available		Effective Date: 03/16/00	
Max Keys		N/A		N/A		Emergency Response Division	
PREPARER		TECHNICAL		USER		COGNIZANT ORGANIZATION	

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Emergency Plan Revision**1.0 Purpose and Scope**

- 1.1 This procedure provides guidance for the revision and approval of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan and implementing procedures.
- 1.2 This procedure defines the requirements of Title 10, Code of Federal Regulations, Part 50.54(q), for submission of revisions of the Emergency Plan to the Nuclear Regulatory Commission (NRC).
- 1.3 This procedure provides for the evaluation of proposed plant changes or procedures that may affect the Emergency Plan or the emergency planning effort at the STPEGS, in accordance with OPAP01-ZA-0103, License Compliance Review.
- 1.4 This procedure implements appropriate portions of the STPEGS Emergency Plan.

2.0 Responsibilities

- 2.1 The Vice President, Business Services, is responsible for:
 - 2.1.1 Final approval of Revisions and Interim Change Notices (ICNs) to the Emergency Plan.
 - 2.1.2 Approval of select implementing procedures.
- 2.2 The Supervisor, Emergency Response, or designee, is responsible for:
 - 2.2.1 Maintaining the Emergency Plan and implementing procedures in accordance with appropriate regulations.
 - 2.2.2 Performing an annual review of the Emergency Plan and implementing procedures, to include:
 - 2.2.2.1 written critiques and evaluations of drills/exercises;
 - 2.2.2.2 changes in key personnel that are part of the Emergency Response Organization;
 - 2.2.2.3 changes in the organizational structure;
 - 2.2.2.4 changes in applicable Federal and State regulations;
 - 2.2.2.5 changes in functional capability of support organizations;

Emergency Plan Revision

- 2.2.2.6 modifications to the Station facilities, procedures, emergency response facilities, site or operating status that could affect emergency response;
- 2.2.2.7 recommendations received from other organizations, such as Federal, State, or County agencies or private support groups;
- 2.2.2.8 annual independent audit findings;
- 2.2.2.9 comments from the State and County annual review;
- 2.2.2.10 documented Condition Report or NRC Inspection Report identified items; and
- 2.2.2.11 changes to implementing procedures.

This review shall be performed and documented in accordance with OPGP05-ZV-0002, Emergency Response Activities Schedule.

2.3 Appropriate Department Managers, or designees, are responsible for:

2.3.1 Reviewing and commenting on proposed Revisions and ICNs to the Emergency Plan.

2.4 The Plant General Manager is responsible for:

2.4.1 Recommending for approval Revisions and ICNs to the Emergency Plan.

2.4.2 Approving Revisions to select implementing procedures.

3.0 Procedure

3.1 Emergency Plan Revision

3.1.1 Revisions to the Emergency Plan shall be accomplished, as needed, and shall include items identified in Section 2.2.2.

3.1.2 Revisions/Interim Change Notices (ICN) shall be prepared as follows:

Emergency Plan RevisionNOTE

Revisions/ICNs which include changes to the Emergency Action Level (EAL) tables shall be submitted to the State, County, and NRC for review and approval prior to implementation.

Revisions/ICNs which do not decrease the effectiveness of the emergency response program, or which do not include changes to the EAL tables, may be processed without prior State, County, or NRC review and approval.

- 3.1.2.1 Every page of the Emergency Plan shall be marked to reflect the proposed revision number. For ICN's, affected pages shall be marked per step 3.2.1.1
- 3.1.2.2 A review shall be performed to determine if 10CFR50.59 applies to the proposed revision. This review shall be documented on a License Compliance Review Form, in accordance with OPAP01-ZA-0103, License Compliance Review.
- 3.1.2.3 The proposed Revision/ICNs shall be reviewed for compliance with 10CFR50.54 and NUREG 0654/FEMA-REP-1, Rev. 1, standards. This review shall be documented on Form 2, Emergency Plan Revision Checklist.
- 3.1.2.4 An independent technical review shall be performed utilizing OPAP01-ZA-0102, Form 4, Technical Review Checklist.
- 3.1.2.5 The proposed Revision/ICN, the completed License Compliance Review Form and Technical Review Checklist shall be submitted to the following Managers/Officials for review and comment (this list may not be all inclusive):
- At least one facility manager from each of the emergency response facilities (Emergency Operations Facility, Technical Support Center and Operations Support Center),
 - Chemistry,
 - Health Physics,
 - Information Systems,
 - Licensing,
 - Operations,

Emergency Plan Revision

- Quality Assurance,
- Security,
- State of Texas, Department of Emergency Management, State Coordinator,
- State of Texas, Bureau of Radiation Control Director, Emergency Response and Investigation Branch,
- Matagorda County, Emergency Management Coordinator.

3.1.2.6 Once the proposed Revision/ICN has completed the review and comment cycle, and all comments have been resolved, it shall be forwarded to the Plant Operations Review Committee (PORC) for recommendation for approval.

3.1.2.7 If the proposed Revision/ICN is recommended for approval by PORC, it shall be forwarded to the Plant General Manager for review and concurrence as documented on Form 3, Emergency Plan Approval Form.

3.1.2.8 The proposed Revision/ICN shall be submitted to the Vice President, Business Services, for final approval, as documented on Form 3.

3.1.2.9 Once the revision has received final approval, the revision's effective date shall be typed on the bottom of every page of the Emergency Plan.

3.1.2.10 Once the effective date has been typed on all pages of the Emergency Plan, it shall be forwarded to Document Control for distribution.

3.2 Interim Change Notice (ICN)

3.2.1 In instances where a revision to a page or several pages of the Emergency Plan is necessary, outside the full revision, an ICN may be processed as follows:

Emergency Plan RevisionNOTE

ICNs may not be processed for changes to Emergency Action Levels.

ICNs which do not decrease the effectiveness of the emergency response program may be processed without prior State, County, or NRC review and approval.

- 3.2.1.1 The affected page(s) shall be marked with the ICN number (e.g., current revision number-dash-sequential ICN number: 18-1, 18-2, etc.)
- 3.2.1.2 The ICN shall be processed in accordance with steps 3.1.2.2 thru 3.1.2.8.
- 3.2.1.3 Once the ICN has received final approval, the ICN's effective date shall be typed on the bottom of all affected pages.
- 3.2.1.4 Once the effective date has been typed on all affected pages, the affected pages shall be forwarded to Document Control for distribution.

3.3 State/County Review of Emergency Plan

- 3.3.1 A copy of proposed Revisions that decrease the effectiveness of the Emergency Plan or contain changes to the EAL tables shall be forwarded to the State and County for review and approval prior to implementation. This review shall be documented on Form 1.

3.4 NRC Review of Emergency Plan

- 3.4.1 A copy of proposed Revisions that decrease the effectiveness of the Emergency Plan or contain changes to the EAL tables shall be forwarded to the NRC for review and approval prior to implementation.

3.5 Emergency Plan Implementing Procedure Revisions

- 3.5.1 Revisions to implementing procedures shall be completed in accordance with OPAP01-ZA-0102, Plant Procedures.
- 3.5.2 Implementing procedures may be revised without a concurrent Emergency Plan revision, except in cases where changes are proposed to the EAL tables, or for changes that would decrease the effectiveness of the emergency response program.

Emergency Plan Revision

3.5.3 Implementing procedure revisions that could potentially decrease the effectiveness of the emergency response program shall be reviewed in accordance with Form 4, Emergency Response Program Evaluation.

3.6 NRC Transmittal

3.6.1 Within thirty (30) days after a Revision/ICNs' effective date to the Emergency Plan and/or implementing procedures, two copies of the Revision/ICN shall be transmitted to the Administrator, Region IV, NRC, Arlington, Texas, one copy to the Document Control Desk, NRC, Washington, D.C., and one copy to the Site Resident Inspector.

4.0 References

- 4.1 STPEGS Emergency Plan
- 4.2 10CFR50, Appendix E
- 4.3 10CFR50.47
- 4.4 10CFR50.54(q)
- 4.5 10CFR50.59
- 4.6 10CFR50.4
- 4.7 NUREG 0654, FEMA-REP-1, Rev. 1
- 4.8 OPAP01-ZA-0103, License Compliance Review
- 4.9 OPAP01-ZA-0102, Plant Procedures
- 4.10 OPGP05-ZV-0002, Emergency Response Activities Schedule

5.0 Support Documents

- 5.1 Form 1, State of Texas/Matagorda County Acknowledgment Letter (Typical)
- 5.2 Form 2, Emergency Plan Revision Checklist
- 5.3 Form 3, Emergency Plan Approval Form
- 5.4 Form 4, Emergency Response Program Evaluation

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Form 1	State of Texas/Matagorda County Acknowledgment Letter (Typical)		Page 1 of 1

I, _____, acting on behalf of the
 _____ do hereby
 acknowledge that Revision/Interim Change Notice _____ of the South Texas Project Electric
 Generating Station Emergency Plan has been received and reviewed.

Comments: _____

 Signature/Title/Date

Return to:
 Emergency Response Supervisor
 South Texas Project Electric Generating Station
 P. O. Box 289
 Wadsworth, Texas 77483

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Form 2	Emergency Plan Revision Checklist		Page 1 of 5

Proposed revisions to the STPEGS Emergency Plan shall be checked against each of the following checklist items. The Reviewer shall answer each checklist item by initialing in the space provided. Any item answered YES shall be described in full detail. Provide supplemental sheets, as required.

10CFR50.54(q) states, in part:

The nuclear power reactor licensee may make changes to these plans without Commission approval only if the changes do not decrease the effectiveness of the plans and the plans, as changed, continue to meet the standards of 10CFR50.47(b) and the requirements of Appendix E of this part. NUREG 0654/FEMA-REP-1, Rev. 1 provides specific guidance in regard to the requirement of these standards.

- a) Does the revision affect this standard?
- b) Does the revision decrease the effectiveness of the STPEGS Emergency Plan?
- c) Bases for answer to a) and/or b).

Standards

1. Primary responsibilities for emergency response by the licensee and State and County organizations within the Emergency Planning Zones have been assigned, the emergency responsibilities of the various supporting organizations have been specifically established, and each principal response organization has staff to respond and to augment its initial response on a continuous basis

- a) YES _____ NO _____ (If NO, skip b and c)
- b) YES _____ NO _____ N/A
- c) BASES: _____

2. Onshift licensee responsibilities for emergency response are defined, adequate staffing to provide initial facility accident response in key functional areas is maintained at all times, timely augmentation of response capabilities is available and the interfaces among various onsite response activities and offsite support and response activities are specified.

- a) YES _____ NO _____ (If NO, skip b and c)
- b) YES _____ NO _____ N/A
- c) BASES: _____

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Form 2	Emergency Plan Revision Checklist		Page 2 of 5

3. Arrangements for requesting and effectively using assistance resources have been made, arrangements to accommodate State and County staff at the licensee's Emergency Operation Facility have been made, and other organizations capable of augmenting the planned response have been identified.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

4. An emergency classification and emergency action level scheme, the basis of which include facility system and effluent parameters, is in use by the licensee, and State and County emergency management plans call for reliance on information provided by facility licensees for determinations of minimum initial offsite response measures.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

5. Procedures have been established for notification, by the licensee, of State and County response organizations and for notification of emergency personnel by all organizations; the content of initial and follow-up messages to response organizations and the public has been established; and means to provide early notification and clear instruction to the populace within the plume exposure pathway Emergency Planning Zone (EPZ) have been established.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

6. Provisions exist for prompt communications among principal response organizations to emergency personnel and to the public.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

7. Information is made available to the public on a periodic basis on how they will be notified and what their initial actions should be in an emergency (e.g., listening to a local broadcast station), the principal points of contact with the news media for dissemination of information during an emergency (including the physical location or locations) are established in advance, and procedures for coordinated dissemination of information to the public are established.

- a) YES _____ NO _____ (If NO, skip b and c)
- b) YES _____ NO _____ N/A
- c) BASES: _____

8. Adequate emergency response facilities and equipment to support the emergency response are provided and maintained.

- a) YES _____ NO _____ (If NO, skip b and c)
- b) YES _____ NO _____ N/A
- c) BASES: _____

9. Adequate methods, systems, and equipment for assessing and monitoring actual or potential offsite consequences of a radiological emergency condition are in use.

- a) YES _____ NO _____ (If NO, skip b and c)
- b) YES _____ NO _____ N/A
- c) BASES: _____

10. 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.

- a) YES _____ NO _____ (If NO, skip b and c)
- b) YES _____ NO _____ N/A
- c) BASES: _____

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11. Means for controlling radiological emergency exposures, are established for emergency workers. The means for controlling radiological exposures shall include exposure guidelines consistent with EPA Emergency Worker and Lifesaving Activity Protective Action Guidelines.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

12. Arrangements are made for medical services for contaminated injured individuals.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

13. General plans for recovery and reentry are developed.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

14. Periodic exercises are conducted to evaluate major portions of emergency response capabilities, periodic drills are conducted to develop and maintain key skills, and deficiencies identified as a result of exercises or drills are corrected.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

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Form 2	Emergency Plan Revision Checklist		Page 5 of 5

15. Radiological emergency response training is provided to those who may be called on to assist in an emergency.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

16. Responsibilities for emergency plan development, review, and distribution are established, and planners are properly trained.

a) YES _____ NO _____ (If NO, skip b and c)

b) YES _____ NO _____ N/A

c) BASES: _____

REVIEW FINDINGS: _____

REVIEWER: _____

DATE: _____

REVIEW APPROVAL: _____
 Supervisor, Emergency Response

DATE: _____

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Form 3	Emergency Plan Approval Form		Page 1 of 1

Attached for your review and approval is Revision/Interim Change Notice _____ of the STPEGS Emergency Plan.

PORC Meeting No. _____

Review & Concurrence: _____ / _____
Plant General Manager Date

Approved: _____ / _____
Vice President, Business Services Date

Effective Date: _____

When completed, this form shall serve as certification that Revision/Interim Change Notice _____ is the current revision of the STPEGS Emergency Plan.

When completed, a copy of this form shall become the cover page of the revision for controlled distribution

Document: _____ Rev.: _____ FC# _____

NOTE

Any change that would decrease the effectiveness of the STPEGS Emergency Response Program requires PRIOR NRC APPROVAL BEFORE IMPLEMENTATION!

Any change to Emergency Action Levels requires NRC, STATE AND COUNTY REVIEW AND APPROVAL BEFORE IMPLEMENTATION.

1. Does the proposed change differ from the requirements of NUREG-0654/FEMA REP-1, Rev. 1 in any of the following areas:

- | | | | |
|--|------------------------------|-----------------------------|--|
| a. Assignment of Responsibility (Organization Control) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| b. Onsite Emergency Organization | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| c. Emergency Response Support and Resources | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| d. Emergency Classification System | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| e. Notification Methods and Procedures | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| f. Emergency Communications | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| g. Public Education and Information | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| h. Emergency Facilities and Equipment | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| i. Accident Assessment | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| j. Protective Response | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| k. Radiological Exposure Control | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| l. Medical and Public Health Support | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| m. Recovery and Reentry Planning and Post-Accident Operations | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| n. Exercises and Drills | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| o. Radiological Emergency Response Training | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| p. Responsibility for the Planning Effort: Development, Periodic, Review and Distribution of Emergency Plans | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

2. If YES was answered for any of the previous questions, then provide justification that the document would not decrease the effectiveness of the Emergency Response Program per 10CFR50.54(q):

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Form 4	Emergency Response Program Evaluation		Page 2 of 2

3. Does the document involve changes to:
 a. Emergency Action Levels Yes No

4. Evaluation Comments: _____

5. Evaluated by: _____ Date: ____/____/____

6. Approved E-Plan Revision Required Before Implementation

Disapproved/Reason: _____

 Supervisor, Emergency Response ____/____/____
Date

31059261

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Quality	Non Safety-Related	Usage: Available	Effective Date: 03/16/00		
Max Keys	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Emergency Communications**1.0 Purpose and Scope**

- 1.1 This procedure provides guidance in the use of emergency communications systems when responding to an emergency or drill/exercise at the South Texas Project Electric Generating Station (STPEGS).

2.0 Definitions

- 2.1 FTS 2000 System: A federal telephone system used by the Nuclear Regulatory Commission (NRC) and nuclear utilities for emergency communications.
- 2.2 RINGDOWN LINE: A telephone line which does NOT require the operator or caller to dial a number to activate the circuit.
- 2.3 UNIT OVERRIDE: A circuit select switch (CSS) found on selected communications consoles, which when selected, activates prioritization circuitry for public address announcements. Additionally, when activated, this button directs announcements to **ALL** public address zones.

3.0 Responsibilities

- 3.1 The Emergency Director, or designee, is responsible for activating the Emergency Notification System (ENS) to notify the NRC of drills/exercises or a declared emergency, and to maintain communications with the NRC Operations Center.
- 3.2 The Emergency Director, or designee, is responsible for activating the State/County ringdown line to notify State/County officials of a declared emergency.
- 3.3 The Radiological Manager or Radiological Director is responsible for activating the Health Physics Network (HPN) if requested by the NRC, to inform the Health Physics Section of the NRC of the emergency radiological environmental conditions and to coordinate health physics information and response during a declared emergency or during drills/exercises at the STPEGS.
- 3.4 The Manager, Information Systems or designee is responsible for the installation, testing, maintenance, and modifications of the emergency communications systems.

Emergency Communications

4.0 Emergency Communications System

NOTE

Refer to Addendum 2, Notification Methods to Offsite Agencies, for alternate telephone numbers and notification methods to be used throughout this procedure.

IF all other onsite communication methods are unavailable, THEN use the Satellite Briefcase Telephone to communicate with off-site agencies (e.g., NRC, State, County, etc.)

4.1 Emergency Telephone Circuits

4.1.1 Emergency Notification System (ENS)

4.1.1.1 The ENS is a telephone circuit provided by the NRC and is terminated on an FTS 2000 telephone. The principal method of communications with the NRC is the ENS. The circuit may also be activated by the NRC. The ENS is activated to notify the NRC of drills/exercises or a declared emergency and to maintain communications with the NRC Operations Center.

4.1.1.2 IF the ENS is determined to be out of service and upon subsequent return to service, THEN notify the NRC Operations Center.

4.1.1.3 ACTIVATE the ENS by lifting the handset on the telephone and dialing the appropriate number.

4.1.2 State and County Ringdown Line

4.1.2.1 The State/County ringdown line is provided to notify State and County officials of a declared emergency. The State/County ringdown line is an automatic ringdown telephone circuit terminated on a communications console OR an ORANGE telephone.

4.1.2.2 ACTIVATE the State/County ringdown line by:

a. LIFTING the HANDSET on the ORANGE telephone

or

b. UTILIZING the communication console in accordance with Step 4.8.3.

Emergency Communications

- 4.1.3 Health Physics Network (HPN)
 - 4.1.3.1 The Health Physics Network (HPN) is a telephone circuit provided by the NRC and is terminated on an FTS 2000 telephone. It is to be used only at the request of the NRC. The HPN telephone is designed to provide communications with the NRC Health Physics Section and/or other nuclear power plants during a declared emergency or drill/exercises. STPEGS health physics personnel MAY request a conference call with other nuclear power plants on the HPN by asking the NRC to connect the desired plant(s).
 - 4.1.3.2 IF the HPN telephone line is determined to be out of service and upon subsequent return to service, THEN notify the NRC Operations Center. (IEN 89-19)
 - 4.1.3.3 ACTIVATE the HPN by lifting the handset on the telephone and dialing the appropriate number.
- 4.1.4 HL&P Dispatcher Ringdown Line
 - 4.1.4.1 The HL&P Dispatcher ringdown line is an automatic ringdown between the Energy Control and Distribution Center and STPEGS communications consoles.
 - 4.1.4.2 Utilize the communications console in accordance with Step 4.8.3.
- 4.2 800 Megahertz Radio
 - 4.2.1 The 800 Mhz radio is a dual operation radio, meaning that it can operate on trunking or conventional systems. HL&P uses both trunking and conventional radio systems. STPEGS has a DGT9000 console.
 - 4.2.2 To send an emergency alarm or call:
 - 4.2.2.1 Press the emergency [red button-upper left-marked EMER] button to begin an emergency transmission. An alarm signal will be sent to ECDC. The dispatcher will call you back and acknowledge the emergency.
 - 4.2.2.2 To send an urgent call press the URGT key and a dispatcher will answer.
 - 4.2.2.3 To send a normal call press the ECC button and a dispatcher will answer.

Emergency Communications

- 4.2.2.4 To make phone calls:
- a. Press the phone key [#8] to select the phone function. Use the MODE switch to scroll to the "KEYPAD DIAL" display. Press the [Sel] select key to enable the keypad. Enter the number from the keypad; each digit is dialed as it is entered.
 - b. To hang up hit the HOME key.

4.3 Telephone System

- 4.3.1 The STPEGS Telephone System consists of company owned and maintained telephone switching equipment and cable. The onsite system is connected to regular telephone services via an onsite demarcation point. The offsite services are provided by General Telephone and Electronics (GTE) and Southwestern Bell Telephone. Offsite commercial telephone services are augmented by an HL&P owned and operated microwave system. The microwave system provides telephone and data services via tie lines into the Houston corporate offices. The corporate office telephone system interconnects into the local telephone system in Houston. The combined microwave and corporate office telephone systems provide augmentation to the normal local onsite - offsite telephone services at STPEGS.
- 4.3.2 Calling in (from offsite) may be accomplished in one of two ways:
- 4.3.2.1 Direct inward dialing (DID), OR
 - 4.3.2.2 Calling the site number of (361) 972-3611 and using the automated attendant. DID extensions begin with a 7 or 8. All others must go through the automated attendant.
- 4.3.3 Calling offsite (from onsite) may be accomplished in one of two ways:
- 4.3.3.1 DIAL 9-1-AREA CODE - telephone number, OR
 - 4.3.3.2 DIAL 32-0 to the HI Plaza (24 hours) and have the Operator complete the call.
- 4.3.4 Onsite calling is accomplished by dialing the desired extension number.
- 4.3.5 Four (4) mobile cellular telephones are provided to Offsite Field Teams as a back-up to radio communications.

Emergency Communications

4.4 Satellite Briefcase Telephone

NOTE

A portable, independent telephone briefcase is provided to the Station as a backup to all company owned and commercial telephone equipment/services. This telephone can be utilized for world-wide access via a geo-stationary satellite. The telephone briefcase is maintained in 1 of the 2 control rooms.

An unobstructed view of the southeast sky is required for an adequate link to the satellite. For this reason, the telephone briefcase must be used outside. Ensure personal safety is maintained in the event of inclement weather, etc.

- 4.4.1 CONNECT the telephone to an available source of power.
- 4.4.2 DEPRESS the "POWER" switch on the telephone base to energize the telephone.
- 4.4.3 AIM the briefcase telephone antenna at the satellite (120 degrees with 45 degrees elevation).
- 4.4.4 DEPRESS the "SHIFT/F7" keys and ADJUST the antenna for the highest signal-to-noise ratio.
 - 4.4.4.1 When the highest value has been obtained, DEPRESS the "ESC" key to return to the main menu.
- 4.4.5 DIAL "00" for the international calling code.
- 4.4.6 DIAL "1" for the country code - United States.
- 4.4.7 Dial the desired area code and telephone number.
 - 4.4.7.1 DEPRESS the "#" key to send/commence the call.
 - 4.4.7.2 DEPRESS the "ESC" key end/complete the call.

Emergency Communications

4.5 Radio Communications

- 4.5.1 The Radio Communications System consists of repeaters, mobile, handheld, and base two-way FM transceivers licensed to HL&P by the Federal Communications Commission. The radio repeaters are installed in a radio communications building at the base of the radio antenna tower onsite. The repeaters are supplied normal power from the plant power and emergency power from an automatic starting engine driven generator. The generator is supplied fuel from a local fuel tank. The handheld, mobile and base stations are programmed to operate through the repeaters or direct.
- 4.5.2 Radio communications with the Matagorda County Emergency Operations Center is accomplished by the use of a radio transmitter/receiver in the Security Central and Secondary Alarm Stations, and a transmitter/receiver at the Matagorda County Sheriff's Office tuned to an STPEGS radio frequency.
- 4.5.3 Offsite Field Team radio communications are accomplished on HL&P licensed radio channels. The repeaters provide coverage of the ten mile Emergency Planning Zone from one handheld radio to another handheld radio or to a base station.

CAUTION

Handheld radios SHALL NOT be used to transmit from inside the ESF Switch Gear Room, Control Room, Technical Support Center, Emergency Operations Facility, Auxiliary Shut Down Panel Rooms, Computer Rooms, nor within ten (10) feet of an open instrument cabinet, computer or computer terminals. The only exception to the above restrictions are emergencies where a threat exists to the plant OR human safety and no other means of emergency communications are available.

- 4.5.4 **PERFORM** the following to use a radio for communication:
- 4.5.4.1 **ALIGN** the assigned radio channel on the handheld by selecting the appropriate channel number and Modes A and B for repeater, or Mode C for direct communication.
- 4.5.4.2 **PRESS** the microphone button and talk, keeping the microphone about 2 inches in front of the mouth, and
- 4.5.4.3 **RELEASE** the microphone button to receive, AND ADJUST the volume by turning the knob marked "VOL."

Emergency Communications

4.5.4.4 ADJUST the squelch by turning the knob marked "SQUELCH" until noise is heard, then back until the speaker is quiet. This setting is for the maximum sensitivity, only on mobile radios.

4.5.4.5 Communicate with other portable, mobile or base radio stations.

4.6 Emergency Response Organization (ERO) Pager System

4.6.1 The ERO pager system is a tone system which may be activated from plant telephones or from an offsite touch-tone telephone. The ERO pager system has a range of over 60 miles radially from the site. The ERO pager system transmitters are connected to emergency power generators with automatic starting equipment.

4.6.2 Instructions for activating the ERO pager system are contained in OERP01-ZV-IN03, Emergency Response Organization Notification.

4.7 Maintenance Jack Communications System

4.7.1 A maintenance jack amplified and sound-powered telephone system is available for onsite communication between certain areas. Refer to Addendum 4, Related Maintenance Jacks. The system is powered by amplifiers on predesigned circuits. Each circuit may be activated or combined with another circuit by the proper selections on the system control panels located in each Control Room. The system has the capability to be voice activated. The voice-activated circuit is one loop which interconnects each of the maintenance jack terminals into one circuit.

4.7.2 IF it is desired to have amplified voice communications, THEN PERFORM the following:

4.7.3 SELECT the desired zones on the selection panel in the Control Room.

4.7.3.1 INSERT a headset plug into one of the jack stations marked 1 or 2 at the area.

4.7.3.2 INSERT a headset plug into the jack marked plant for voice-powered communications at the desired jack station.

Emergency Communications**4.8 Communications Console System**

4.8.1 The communications console is an integrated communications panel and switching system which is subdivided into seven groups: direct line (ringdown), telephone, radio (RF), public address (PA), alarm system, conference, and voice direct line (VDL). Refer to Addendum 1, Communications Console Panel, for locations of the console controls. Each communications group is composed of several two position switches. These positions are:

4.8.1.1 MONITOR - Top position (amber light will glow)

4.8.1.2 TALK/LISTEN - Down position (green light will glow)

4.8.2 These panels are installed in the Control Rooms, Auxiliary Shutdown Panel Rooms, Operations Support Centers, Technical Support Centers, Emergency Operations Facility, Security Force Supervisor's Office, Central and Secondary Alarm Stations, Simulator and in the Maintenance Office Facility. During Refueling Outages, panel(s) may be installed on the applicable units One Stop Shop.

Emergency Communications**NOTE**

Many circuits may be monitored simultaneously. These circuits are heard through the left ear if using the headset. The volume for the monitor position is controlled by the MONITOR VOLUME control located in the Handset/Headset Control Group.

Usually the communicator operating the console will be talking (TALK/LISTEN switch is activated) on only one circuit at a time. These conversations will be heard through the right ear if using the headset. The volume control for the TALK/LISTEN position is controlled with the RECEIVE VOLUME control also located in the Handset/Headset Control Group.

The communicator may actively communicate with all circuits simultaneously. It is important to note that all circuits with the TALK/LISTEN switch activated will hear the communicators conversation, which may not be desirable. To deactivate, depress the TALK/LISTEN switch a second time to clear the green light.

4.8.3 Direct Line (Ringdown) Group Operation**CAUTION**

Activating the circuit select switch (CSS) in the MONITOR (top position) will activate an "Idle Circuit" and cause the ringdown line to ring. The position switch SHALL be in the TALK/LISTEN (bottom position) before speaking.

4.8.3.1 WHEN it is desired to place a call, THEN perform the following:**NOTE**

The next step will ringdown the other phone.

- a. Activate the appropriate circuit select switch in the TALK/LISTEN position.
- b. WHEN the phone is answered, THEN PRESS the push-to-talk button when speaking.
- c. WHEN communication is terminated, THEN DEACTIVATE the bottom TALK/LISTEN position switch.

Emergency CommunicationsNOTE

An audible signal will be heard through the speaker and the CSS red lamp will flash when a party is calling.

4.8.3.2 WHEN a call is received, THEN perform the following:

- a. ACTIVATE the bottom TALK/LISTEN position switch.
- b. WHEN it is desired to talk, THEN press the push-to-talk button when speaking.
- c. WHEN communication is terminated THEN deactivate the bottom TALK/LISTEN position switch.

4.8.4 Telephone Group Operation

NOTE

All normal site phone functions are available through the console.

4.8.4.1 IF it is desired to make a call, THEN PERFORM the following:

- a. ACTIVATE the circuit select switch for selected extension in the TALK/LISTEN (bottom) position AND WAIT until a dial tone is received on the headset or handset.
- b. DIAL the number using the telephone keypad.
- c. WHEN the number called answers, THEN PRESS the push-to-talks button while speaking.
- d. WHEN communication is terminated, THEN DEACTIVATE the TALK/LISTEN switch.

4.8.4.2 WHEN a call is received, THEN PERFORM the following:

NOTE

An audible signal will be heard through the speaker and the CSS red light will flash when another party is calling.

- a. ACTIVATE the circuit select switch (CSS) in the TALK/LISTEN (bottom position).

Emergency Communications

- b. WHEN it is desired to talk, THEN PRESS the push-to-talk button while speaking.
- c. WHEN communication is terminated THEN DEACTIVATE the two position TALK/LISTEN switch.
- d. IF it is desired to place a call on hold, THEN ACTIVATE the MONITOR switch.

4.8.5 Radio Group Operation**NOTE**

Radio channels may be monitored by moving the circuit select switch (CSS) to the MONITOR (top) position.

- 4.8.5.1 IF it is desired to transmit a message on a radio frequency, THEN activate the circuit select switch to the TALK/LISTEN (bottom) position.
- 4.8.5.2 PRESS the push-to-talk button when speaking.
- 4.8.5.3 WHEN communication is terminated THEN deactivate the bottom TALK/LISTEN position switch.

4.8.6 Plant Public Address and Alarm System**NOTE**

Emergency alarm and public address override switch capabilities are found on the communications console panels in the following locations: all panels in each Unit's Control Room, and Technical Support Center, the Emergency Operations Facility, Central Alarm Station, Secondary Alarm Station, and the Simulator.

- 4.8.6.1 IF it is desired to make a public address announcement, THEN perform the following:
 - a. SELECT the two position switch corresponding to the desired zone (listed on Addendum 3) that is to receive the announcement.
 - b. Activate the two position switch(es) to the TALK/LISTEN (bottom) position in the appropriate zone(s).

Emergency Communications

- c. PRESS the push-to-talk button when speaking.
- d. Deactivate the bottom TALK/LISTEN position switch at the conclusion of the announcement.

4.8.6.2 Emergency Public Address Alarms and Announcement**NOTE**

There are three public address emergency alarms: Assembly, Fire, and RCB Evacuation Alarm. Alarms will be broadcast as directed over the PA system. Alarm switches actuate for 8 seconds, then disconnect unless the PUSH-TO-TALK button on the handset is depressed.

- a. WHEN directed, THEN select the appropriate alarm.
- b. WHEN the alarm is completed, THEN DEACTIVATE the alarm switch, activate the Unit override switch, AND make the appropriate emergency announcement over the PA system as directed.
- c. WHEN the alarm/announcement is completed, THEN deactivate all switches.

4.8.7 Conference Network**NOTE**

Loops may be monitored for informational purposes by selecting the MONITOR circuit select switch.

4.8.7.1 PERFORM the following to establish group conference:

- a. VERIFY that all conferring parties are on the same "loop."
- b. VERIFY that all conferring parties on the loop have the circuit select switch (CSS) in the TALK/LISTEN (bottom) position.
- c. WHEN it is desired to talk, THEN press the push-to-talk button when speaking.
- d. WHEN communication is terminated, THEN deactivate the bottom TALK/LISTEN position switch.

Emergency Communications

4.8.8 Voice Direct Line (VDL)

4.8.8.1 The Voice Direct Line (VDL) is a direct line from Quintron communication console to console.

- a. Lift the handset on the appropriate console.
- b. Activate the appropriate circuit selector switch on the communication to the TALK/LISTEN position.

5.0 Maintenance

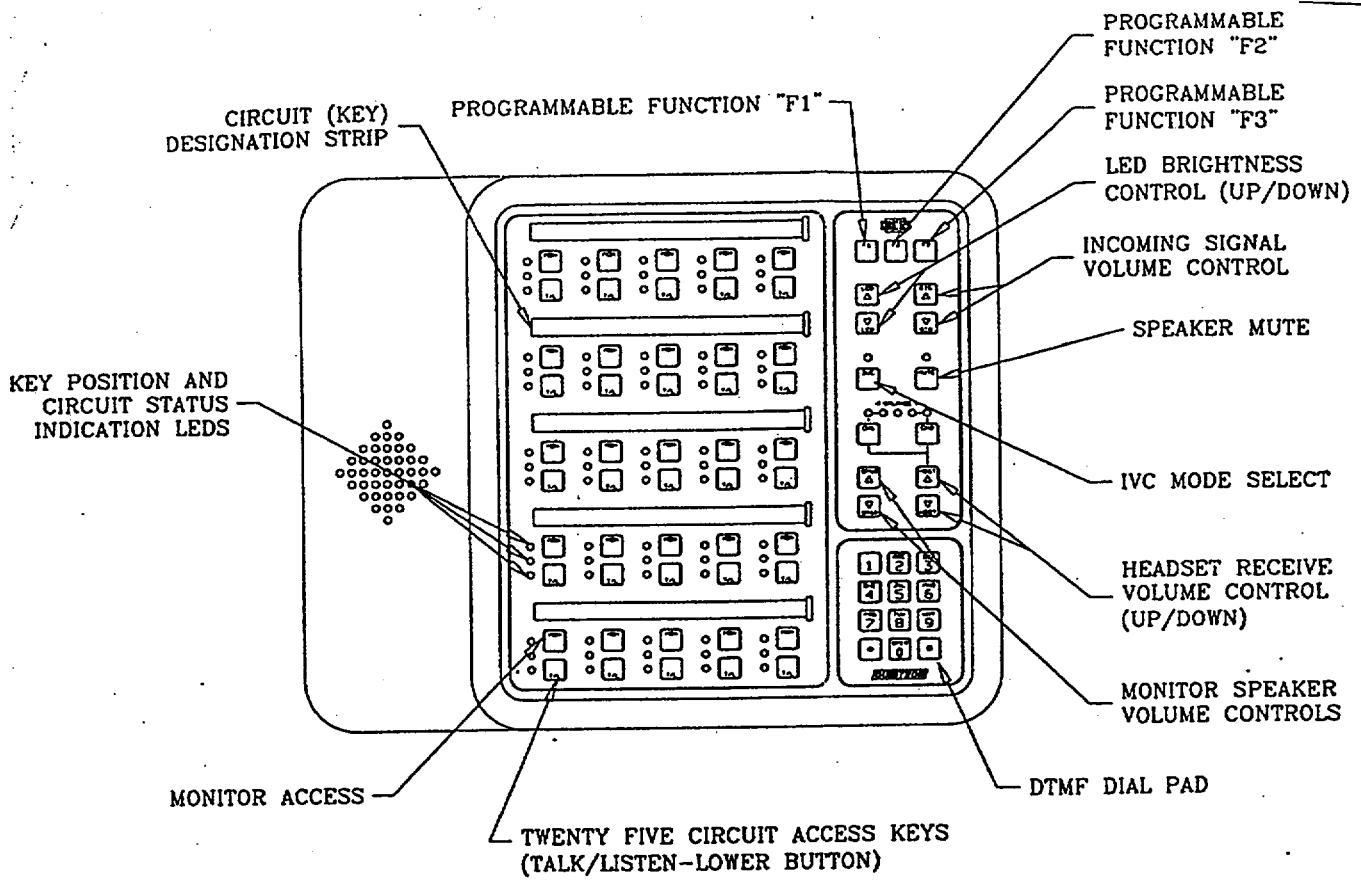
- 5.1 Information Systems personnel SHALL maintain the emergency communications systems.
- 5.2 Maintenance SHALL be done as required to keep the system in good operating condition and as committed to in license documents.

6.0 References

- 6.1 NUREG-0654/FEMA-REP-1, Criteria For the Development and Evaluation of Emergency Preparedness in Support of Nuclear Power Plants, Rev. 2
- 6.2 South Texas Project Electric Generating Station Emergency Plan
- 6.3 OPGP07-ZA-0011, Communications Systems
- 6.4 OERP01-ZV-IN03, Emergency Response Organization Notification
- 6.5 IEN 89-19, Health Physics Network

7.0 Support Documents

- Addendum 1 - Communications Console Panel
- Addendum 2 - Notification Methods to Offsite Agencies
- Addendum 3 - Station Public Address Selections
- Addendum 4 - Related Maintenance Jacks



25 KEY DESKTOP

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Addendum 2	Notification Methods to Offsite Agencies		Page 1 of 1

ENS	STATE (DPS, PIERCE)	COUNTY (SHERIFF)	HPN
1-301-816-5100	1-979-543-6878	1-979-245-5526	1-301-816-5100
1-301-951-0550	1-979-532-1740		1-301-951-0550

	NRC	State/County
ENS	✓	
Ringdown Line to the DPS, Disaster District Sub 2C (State of Texas) and the Matagorda County Sheriff's Office (Matagorda County)		✓
OUTSIDE TELEPHONE LINES	✓	✓
Control Room Direct Line to Bay City	✓	✓
Microwave Line to the HI Plaza and call forwarded to appropriate number	✓	✓
Ringdown Line (800 Mhz) to the Energy Control and Distribution Center (ECDC) and call forwarded to the appropriate number	✓	✓
Security Radio communication to the Matagorda County Sheriff's Office (and call forwarded to the NRC)	✓	✓
Satellite Briefcase telephone	✓	✓

Emergency Communications

Addendum 3

Station Public Address Selections

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Unit 1 ALL	Unit 2 ALL	Units 1 & 2 ALL	Unit Override	50 Telephone	51 Telephone
Zone 1	Zone 2	Zones 1,2, & 3	Zones 1 - 4	Zone 3	Zone 4
Electrical Auxiliary Building (EAB) Mechanical Auxiliary Building (MAB) Isolation Valve Cubicle (IVC) Reactor Containment Building (RCB) Fuel Handling Building (FHB) Diesel Generator Building (DGB) Turbine Generator Building (TGB)	Electrical Auxiliary Building (EAB) Mechanical Auxiliary Building (MAB) Isolation Valve Cubicle (IVC) Reactor Containment Building (RCB) Fuel Handling Building (FHB) Diesel Generator Building (DGB) Turbine Generator Building (TGB)	Unit 1 & 2 Yard	All Zones simultaneously with activated prioritization circuitry	Essential Cooling Water Intake Structure (ECWIS) Circulating Water Intake Structure (CWIS) Lighting Diesel Generator Building (LD) Load Center Buildings 12J, 12K, 12L, 12M and the Electrical Load Center Building (EL) Hypochlorination Make Up Demineralizer (MUD) South/East Load Center Building Fire Pump House North, East and West Gate Houses Units 1 and 2 Main and Standby Transformer Emergency Transformer Fuel Storage Building Low Level Waste Building CWS Load Center Warehouse and Machine Shop Units 1 & 2	Nuclear Support Center (NSC), Nuclear Training Facility (NTF) Owner Controlled Area

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Addendum 4	Related Maintenance Jacks		Page 1 of 1

		UNIT 1	UNIT 2
TRANSFER SWITCH PANEL	TRAIN A	ESF1	ESF1
TRANSFER SWITCH PANEL	TRAIN A	ESF2	ESF2
TRANSFER SWITCH PANEL	TRAIN B	ESF8	ESF3
TRANSFER SWITCH PANEL	TRAIN B	ESF9	ESF9
TRANSFER SWITCH PANEL	TRAIN C	ESF10	ESF10
TRANSFER SWITCH PANEL	TRAIN C	ESF11	ESF11
STANDBY DIESEL GENERATOR CONTROL PANEL	TRAIN A	1SDG3	2SDG3
STANDBY DIESEL GENERATOR CONTROL PANEL	TRAIN B	1SDG2	2SDG2
STANDBY DIESEL GENERATOR CONTROL PANEL	TRAIN C	1SDG1	2SDG1
CHILLER CONTROL PANEL, COLUMN 18V		TGI-17	TGI-17
BORIC ACID TANK ROOM ELE. 29' MAB, ROOM 076		RW-16	RW-16
CCW SURGE TANK ROOM ELE. 60' MAB		MA-18	MA-18
ESSENTIAL CHILLED WATER INTAKE STRUCTURE	TRAIN A	1YD5	2YD8
ESSENTIAL CHILLED WATER INTAKE STRUCTURE	TRAIN B	1YD6	2YD9
ESSENTIAL CHILLED WATER INTAKE STRUCTURE	TRAIN C	1YD7	2YD10
AUXILIARY FEEDWATER STORAGE TANK AREA, COLUMN 19Q		TGI-12	TGI-12

31059274

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

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Emergency Facility Inventories					
Quality	Non Safety-Related	Usage: IN HAND (Forms Only)	Effective Date: 03/16/00		
Vivian T. Wagnon	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Emergency Facility Inventories**1.0 Purpose and Scope**

- 1.1 This procedure lists the emergency equipment and supplies stored in Emergency Response Facilities (ERFs) and/or emergency lockers.
- 1.2 Provides guidance on completing inventories.

2.0 Limitations and Precautions

- 2.1 This procedure is to be used in conjunction of OPGP05-ZV-0009, Emergency Facility Inventories and Inspections.

3.0 Responsibilities

- 3.1 Responsibilities for completing these Forms is addressed in procedure OPGP05-ZV-0009, Emergency Facility Inventories and Inspections.

4.0 Procedure**NOTE**

Emergency lockers shall be sealed utilizing either a plastic/paper seal, a break-away lock, or contained within a locked space, as needed to assure availability of stored equipment.

- 4.1 Utilize the applicable Facility Inventory form (Forms 1-13) from this procedure when performing inventories.
 - 4.1.1 Complete all required information on each form. Shaded areas are not applicable for that inventoried item.
 - 4.1.2 The COMMENTS section of the form may be used to document shortages, additions and deletions of equipment/supplies, other equipment, or explain abnormal conditions in inventory.
- 4.2 Replace any missing inventory items within 5 working days. For those items not in stock, a notation should be made in the comments section of the inventory sheet specifying an expected delivery date. A copy of the Purchase Requisition should be attached to the inventory sheet.
- 4.3 Document replacement supplies on original form in comments section or perform new inventory if needed, to clarify actions taken.

Emergency Facility Inventories

NOTE

Instrument functional checks verify response to source, not instrument accuracy.

- 4.4 An instrument Functional Check shall be performed for those kits which have radiation detection instruments, utilizing the check sources located in the ERFs and/or emergency lockers.

NOTE

Operability checks verify physical capability by using AC or battery power and good battery condition.

- 4.5 An Operability Check shall be performed on applicable emergency supplies and equipment located in the ERFs and/or emergency lockers.
- 4.6 Sign the form on the "Inventory Performed By" line.
- 4.7 A copy of the inventory will be placed with each emergency locker.
- 4.8 For all discrepancies (missing inventory, expired inventory, failed operability equipment, etc.) inform an emergency response representative within 24 hours (1 working day).

NOTE

Approved Forms will be forwarded to Records Management System as quality records by the Emergency Response Division.

- 4.9 Forward the completed ORIGINAL form to the Supervisor, Emergency Response, for review and signature within two (2) working days.
- 4.10 Inventory Form Instruction:
- 4.10.1 If the inventory is being performed to meet the quarterly inventory requirement, place a check in the space following **Scheduled:** (May be checked if full inventory is performed for other reason during prescribed period).
- 4.10.2 Reason inventory is being performed. Designate accordingly by placing an "X" on the appropriate line. For reason other than specified, place an "X" beside **other** and specify reason. **Other:** (Seal broken, Lock broken, Supplies added, etc.)
- 4.10.3 If applicable, place the Unit number in the space following **Unit:** and circle the unit number below the space.

Emergency Facility Inventories

- 4.10.4 In the first column headed **QTY: REQ/ACT.**, write the item quantity verified in an emergency locker or facility up to the required minimum. For those items in excess of minimum, denote the required minimum number followed by a plus (+) sign. Any discrepancies may be noted in the **Comments** section. Should packaged items/kits be found sealed from the previous inventory, the item may be signed off and documented as inventoried. For documenting purposes, the accounted inventory will be the same quantity as the required inventory.
- 4.10.5 If a partial inventory is required, document non-inventoried items/equipment by placing "N/A" in the Qty: Req/Act. column for the first incompleted inventory item/equipment and draw a line through the following non-inventoried items/equipment.
- 4.10.6 In the third column, on applicable inventory forms, provide the required information. Following **Functional Check** mark SAT for proper response or UNSAT for improper response. Following **Exp. Date** place the date provided on the equipment by the manufacturer. If multiple items within one category have different dates, list the date that is nearest to present date. Following **Functional Insp. Date**, place the date the respirator was inspected. Following **Exp. Date**, place the date the cartridge expires. The AgX Cartridges expiration date depends upon whether the manufacturer's plastic bag is sealed or not. The expiration date is 5 years from manufacture or 1 year from the date found opened. This date should be placed in the space following the **Exp. Date**. Any discrepancies may be noted in the **Comments** section (i.e., opened manufacturer's bag, holes in manufacturer's bag, etc.).
- 4.10.7 Indicate if the kit was found **Locked** or **Sealed** by circling applicable action and by placing a check after **Yes** or **No**. Indicate if the kit was left **Locked** or **Sealed** by circling the applicable action and by placing a check after **Yes** or **No**.
- 4.10.8 Person performing inventory should place their signature and print their name in the space following **Inventory Performed By:**.
- 4.10.9 Place the date the inventory is completed in the space after **Date**.
- 4.10.10 The Supervisor, Emergency Response or person designated in writing will place, their signature in the **Inventory Reviewed By:** after reviewing for inventory completion and correctness.
- 4.10.11 Place the date the inventory is reviewed in the space after **Date**. (This is the date of record for use on RMS transmittal).

Emergency Facility Inventories**5.0 References**

5.1 OPGP05-ZV-0009, Emergency Facility Inventories and Inspections

6.0 Support Documents

6.1 Addendum 1 - E-Plan Kit Designators and Locations

6.2 Form 1 - Control Room Inventory

6.3 Form 2 - Technical Support Center Inventory

6.4 Form 3 - Operations Support Center Inventory

6.5 Form 4 - Emergency Operations Facility Inventory

6.6 Form 5 - Support Hospital Inventory

6.7 Form 6 - Offsite Survey Team Kit Inventory

6.8 Form 7 - State/County Offsite Survey Team Kit Inventory

6.9 Form 8 - Alternate Emergency Operations Facility Inventory

6.10 Form 9 - Rad Van Inventory

6.11 Form 10 - Offsite Ambulance Instrument Inventory

6.12 Form 11 - Site Ambulance Inventory

6.13 Form 12 - Environmental Health Department (EHD) Inventory

6.14 Form 13 - Matagorda County Sheriff's Office Inventory

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Addendum 1	E-Plan Kit Designators and Locations		Page 1 of 1

DESIGNATOR	DESCRIPTION	LOCATION
E01	Control Room Inventory	Control Room: U1
E02	Control Room Inventory	Control Room: U2
E03	Emer. Ops. Facility Inventory	NTF
E04	Support Hospital Inventory	Matagorda General, Bay City
E05	Support Hospital Inventory	Wagner General, Palacios
E06	Matagorda County Sheriff's Office Inventory	Matagorda County Sheriff's Office, Bay City
E07	Site Ambulance Inventory	Bldg. 33/N. U-1 TGB
E08	Alt. Emer. Ops. Fac. Inventory	Bay City Service Center
E09	Rad Van Inventory	NTF
E10	Ops. Support Ctr. Inventory	U1
E11	Tech. Support Ctr. Inventory	U1
E12	Tech. Support Ctr. Inventory	U2
E13	Offsite Ambulance Inventory	Bay City Emergency Medical Services, Bay City
E14	Offsite Ambulance Inventory	Palacios Area EMS, Palacios
E15	Offsite Survey Team "A" Inventory	NTF
E16	Offsite Survey Team "B" Inventory	NTF
E19	State/County Offsite Survey Team Kit Inventory	Matagorda County Sheriff's Office, Bay City
E20	Ops. Support Ctr. Inventory	U2
E21	Environ. Health Dept. Inventory	County of Matagorda Annex Building, Bay City
E22	Celanese	NTF
E23	EquiStar	NTF

Emergency Facility Inventories

Form 1

Control Room Inventory

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Control Room Inventory performed by: **PLANT OPERATIONS** Unit: _____
 Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____ I/II
 Tampered Kit/Locker: _____ Other: _____ (E01/E02)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
1 /	First Aid Kit, small	
5 /	Flashlights	
1 /	Clock, Count Down (May be stored outside locker)	Operational Check _____
20 /	"D" Batteries	Exp. Date _____
2 /	"AA" Batteries	Exp. Date _____
1 /	Utility Knife w/blades	
20 /	Potassium Iodide, bottles	Exp. Date _____
1 /	Tweezers	
# 14 /	SCBAs	
# 50 /	Spare SCBA bottles	
2 /	Duct Tape, roll	
30 /	Plastic Bags (small, medium and large)	
2 /	Step-off Pads	
5 /	Protective Clothing, sets **	
* 5 /	0-5R Dosimeters	
* 15 /	0-200mR Dosimeters	
* 1 /	Dosimeter Charger	Operational Check _____
# 10 /	Respirators w/MSA GMR-I or equivalent canisters: (1) small, (8) medium, (1) large; Store in a manner that does not cause distortion or distention. (e.g., Do not stack. Lay with face piece lens down).	Resp. Insp. Date _____ Canister Exp. Date _____
1 / (Unit 1 only)	Satellite Communication Briefcase (Unit 1 only)	Operability Check _____ To be performed by Licensed Operator Name: _____
5 /	Position Manuals (Set of volumes equals one manual)	
5 /	Emergency Communications Directory (Including site directory)	

* Maintained by Met Lab
 # Maintained by H.P.
 ** Includes: Disposable or cotton coveralls with hood, plastic or cloth booties, rubber shoe covers, cotton glove liners, and rubber gloves.

Kit was Found: Locked/Sealed Yes _____ No _____
 Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____
 Is the housekeeping satisfactory? Yes _____ No _____
 Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
 (Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 2

Technical Support Center Inventory

Page 1 of 2

Inventory to be performed by: **HEALTH PHYSICS** Unit: _____
 Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____ I/II
 Tampered Kit/Locker: _____ Other: _____ (E11/E12)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
15 /	Position Manuals (Set of Volumes equals one manual)	
6 /	Emergency Communications Directory (includes site directory)	
15 /	Emergency Action Log Books (minimum 5 forms)	
2 /	Quintron Console w/handset	
5 /	Telephone Headsets	
50 /	Potassium Iodide, bottles	Exp. Date _____
2 /	"9V" Batteries	Exp. Date _____
20 /	"D" Batteries	Exp. Date _____
4 /	"AA" Batteries	Exp. Date _____
5 /	Flashlights	
1 /	Clock, Countdown	Operational Check _____
1 /	Tweezers	
1 /	Utility Knife w/blades	
1 /	First Aid Kit	
100 /	Smears	
* 1 /	Air Sampler, Portable, AC Powered	Operational Check _____
2 /	Air Sampler Filter Holder Assemblies with adequate O-Rings	
# 10 /	Sealed AgX Cartridges	Exp. Date _____
# 1 /	Check Source, Cs-137, button	
2 /	Duct Tape, roll	
2 /	Step-off Pads	
1 /	100' Extension Cord	
40 /	Plastic Bags (small, medium, large)	
20 /	Protective Clothing, sets **	
20 /	Surgical Gloves, pr.	
* 10 /	0-5 R Dosimeters	
* 40 /	0-200 mR Dosimeters	
* 47 /	TLDs Control (2) Issue (45) – TLDs should be stored in the kit as far from the source as possible.	
* 2 /	Dosimeter Chargers	Operational Check _____
* 2 /	Alarm Ratemeter w/power cord (177 Series)	Functional Check _____
* 2 /	GM Probe w/cables	

This page, when completed, shall be retained as per the Document Type List (DTL).

Emergency Facility Inventories

Form 2

Technical Support Center Inventory

Page 2 of 2

Unit: _____

I/II
(E11/E12)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
* 1 /	Dose Rate Survey Meter (i.e., RS05)	Functional Check _____
1 /	Polaroid Camera w/film	Film Exp. Date _____

* Maintained by Met Lab

Maintained by H.P.

** Includes: Disposable or cotton coveralls with hood, plastic or cloth booties, rubber shoe covers, cotton glove liners, and rubber gloves.

Kit was Found: Locked/Sealed Yes _____ No _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____

Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
(Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 3

Operations Support Center Inventory

Page 1 of 2

Inventory to be performed by: **HEALTH PHYSICS** Unit: _____
 Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____ I/II
 Tampered Kit/Locker: _____ Other: _____ (E10/E20)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
2 /	Step Off Pads	
5 /	Plastic Bags, large	
1 /	Duct Tape, roll	
6 /	Lantern Batteries	Exp. Date _____
4 /	"AA" Batteries	Exp. Date _____
10 /	Flashlights	
40 /	"D" Batteries	Exp. Date _____
6 /	Keys-Hot Tool Room (3), Bldg. 26 (1), Drawing Cabinet (2)	
60 /	Potassium Iodide, bottles	Exp. Date _____
2 /	Tool Kit, electrical	
2 /	Tool Kit, mechanical	
2 /	Tool Kit, I&C	
21 /	Telephones	
2 /	Telephone Headsets	
2 /	Proximity Suits	
13 /	Position Manuals (set of volumes equals one manual) * Acting Rad Mgr. Position Manual located in HP office - 41'.	
5 /	Emergency Communication Directory (includes site directory)	
10 /	Emergency Action Log Books (minimum 5 forms)	
1 /	100' Extension Cord	
3 /	Rad Barrier Rope Stanchion	
1 /	100' Yellow and Magenta Rope	
3 /	Rad Signs w/inserts	
# 8 /	SCBAs	
10 /	Protective Clothing sets **	
# 9 /	MSA GMR - I or Equivalent Canisters	Exp. Date _____
# 11 /	Respirators: (1) small, (9) medium, (1) large; Store in a manner that does not cause distortion or distention (e.g., Do not stack. Lay with face piece lens down.)	Resp. Insp. Date _____
# 10 /	Lapel AgX Cartridges, Sealed	Exp. Date _____
2 /	Lapel Cartridge Holder Assemblies	
50 /	Lapel Air Sample Particulate Filters	
50 /	Air Sample Particulate Filters	
* 40 /	TLDs Control (1) Issue (39) - TLDs should be stored in the kit as far from the source as possible.	
1 /	Facsimile Machine	
1 /	First Aid Kit	

Emergency Facility Inventories

Unit: _____
I/II
(E10/E20)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
1 /	Quintron w/handset	
1 /	Shaving cream	
5 /	Razors	
1 /	Polaroid Camera w/film	Film Exp. Date _____

* Maintained by Met Lab
Maintained by H.P.
** Includes: Disposable or cotton coveralls with hood, plastic or cloth booties, rubber shoe covers, cotton glove liners, and rubber gloves.

Kit was Found: Locked/Sealed Yes _____ No _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____

Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
(Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 4

Emergency Operations Facility Inventory

Page 1 of 2

Inventory to be performed by: **HEALTH PHYSICS** E03
 Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____
 Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
1 /	Clock, Countdown	Operational Check _____
1 /	Tape Recorder/Tape	Operational Check _____
1 /	Binoculars	
4 /	"AA" Batteries	Exp. Date _____
25 /	Emergency Action Log Books (minimum 5 forms)	
5 /	Flashlights	
40 /	"D" Batteries	Exp. Date _____
10 /	"9V" Batteries	Exp. Date _____
2 /	Duct Tape, rolls	
2 /	Rad Tape, rolls	
2 /	Shampoo, bottle	
4 /	Soap, bar	
100 /	Bath Towels, cloth or paper	
5 /	Washcloths	
100 /	Potassium Iodide, bottles	Exp. Date _____
29 /	Position Manuals (set of volumes equals one manual)	
15 /	Emergency Communications Directory (includes site directory)	
1 /	Command Console/Radio	
1 /	Quintron Console w/handset	
3 /	Radiation Warning Sign w/inserts	
* 3 /	Count Rate Survey Meter (i.e., LUD 3)	Functional Check _____
* 3 /	GM Probe w/cables	
* 3 /	Dose Rate Survey Meter (i.e., RSO5)	Functional Check _____
* 1 /	Air Sampler, Portable, AC Powered	Operational Check _____
20 /	Air Sample Particulate Filters	
2 /	Air Sample Filter Holder Assemblies with adequate O-rings	
# 10 /	Sealed AgX Cartridges	Exp. Date _____
# 1 /	Check Source, Cs-137, button	
40 /	Protective Clothing, sets **	
60 /	Plastic Bags	
* 10 /	0-5 R Dosimeters	
* 1 /	Dosimeter Charger	Operational Check _____
2 /	Step-off Pads	
* 160 /	TLDs Control (2) Issue (158) – TLDs should be stored in the kit as far from the source as possible	
3 /	Mobile Phones	Operational check _____

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Emergency Facility Inventories

Form 4

Emergency Operations Facility Inventory

Page 2 of 2

E03

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
1 /	100' Extension Cord	
40 /	Surgeons Gloves, pr.	
5 /	Shoes, pr.	
100 /	Smears	
50 /	Shoe Cover, pr.	
3 /	Fluorescent Light, Battery Powered	
# 2 /	SCBAs	
# 2 /	Respirators (1) small, (1) large. Store in a manner that does not cause distortion or distention. (e.g., Do not stack. Lay with face piece lens down.)	Resp. Insp. Date _____
2 /	Shaving Cream, can	
5 /	Razors, disposable	
1 /	Tweezers	
1 /	First Aid Kit	
1 /	Polaroid Camera w/film	Film Exp. Date _____

* Maintained by Met Lab

Maintained by H.P.

** Includes: Disposable or cotton coveralls with hood, plastic or cloth booties, rubber shoe covers, cotton glove liners, and rubber gloves.

Kit was Found: Locked/Sealed Yes _____ No _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____

Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
 (Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 5

Support Hospital Inventory

Page 1 of 3

Inventory to be performed by: **METROLOGY and RADIOLOGICAL LABORATORY**

Matagorda/Wagner
(E04/E05)

Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____

Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
50 /	Radiation Labels or Tags	
* 22 /	TLDs-Issue (20) Control (2) – TLDs should be stored in the kit as far from the source as possible.	
8 /	Magnets, barrier rope	
4 /	Duct Tape, roll	
4 /	Masking Tape, roll	
1 /	Lead Shield (Pig)	
2 /	Double Sided Tape, rolls	
2 /	Rad Tape, rolls	
150 /	Rad Barrier Rope (ft.)	
4 /	Rope Stanchions ****	
12 /	Rad Barrier Signs w/inserts	
5 /	Step-off Pads	
25 /	Isolation Gowns, waterproof front or gown sets ** OR ER Gowns	
300 /	Smears	
10 /	Plastic Bags, small	
10 /	Plastic Bags, X-ray size	
10 /	Plastic Bags, large	
10 /	Masslin Cloths	
1 /	Masslin Mop	
2 /	Dress-Out Sign	
1 /	Hospital Setup Sign	
1 /	Art Portfolio	
1 /	Herculite, White, Roll	
1 /	Anatomical Diagram	
1 /	Dosimetry Issue Log	
1 /	Matagorda County Hospital District Radiological Hospital Plan ***	
1 /	Emergency Communication's Directory ***	
2 /	Garbage Cans	
Decontamination Kit		
20 /	Swabs	
4 /	Pens, ink	
1 /	Scissors, pr.	
1 /	Tweezers	
2 /	Clippers, nail	
1 /	Hand Brush	
1 /	Abrasive Soap	

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Emergency Facility Inventories			
Form 5	Support Hospital Inventory		Page 2 of 3
			Matagorda/Wagner (E04/E05)
QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK	
Decontamination Kit, cont.			
1 /	Shampoo, bottle		
1 /	Sloughing Lotion		
1 /	Irrijet		
1 /	Clorox		
2 /	Surgical Sheets, Disposable		
Radiological Equipment Kit			
6 /	"D" Batteries	Exp. Date _____	
2 /	"9V" Batteries	Exp. Date _____	
* 1 /	Ion Chamber/Survey Meter, 0-5R/Hr (RS05)	Functional Check _____	
* 2 /	Survey Meters (LUD 3)	Functional Check _____	
# 1 /	Check Source, 137 Cs-1 button		
* 2 /	GM Probes w/cables		
* 10 /	0-5R Dosimeters		
* 10 /	0-200mR Dosimeters		
* 2 /	Dosimeter Chargers	Operational Check _____	
1 /	Sample Holder for GM Probe		
10 /	Matagorda County Emergency Worker Badges		
2 /	Ziploc Baggies, gallon		
2 /	Ziploc Baggies, half gallon		
4 /	Ziploc Baggies, sandwich		
<p>* Maintained by Met Lab # Maintained by H. P. ** Includes: Disposable gown, plastic or cloth booties, cotton glove liners, surgeon gloves, safety shield. *** Kept on shelf in ER. Not located in kit. **** Kept in "Maintenance" office (Wagner only)</p>			

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Emergency Facility Inventories

Form 5

Support Hospital Inventory

Page 3 of 3

Matagorda/Wagner
(E04/E05)

Kit was Found: Locked/Sealed Yes _____ No _____ Seal # _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____ Seal # _____

Is the facility appearance satisfactory? Yes _____ No _____ Seal # _____

Seal # _____

Seal # _____

Seal # _____

Seal # _____

Seal # _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
(Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 6

Offsite Survey Team Kit Inventory

Page 1 of 2

Inventory to be performed by:

HEALTH PHYSICS

Kit: _____

Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____

A/B

Tampered Kit/Locker: _____ Other: _____

(E15/E16)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
1 /	First Aid Kit, small	
1 /	Utility Knife w/ blades	
2 /	Maps, 10 mi. EPZ, full sets	
1 /	Calculator	Operational Check _____
2 /	Tweezers	
10 /	"D" Batteries	Exp. Date _____
10 /	"9V" Batteries	Exp. Date _____
* 1 /	Count Rate Survey Meter (i.e., LUD 3)	Functional Check _____
* 1 /	GM Probe w/cables	
* 1 /	Dose Rate Survey Meter (i.e., RS05)	Functional Check _____
* 1 /	Air Sampler, Portable, DC Powered	Operational Check _____
2 /	Air Sample Filter Holder Assemblies with adequate O-Rings	
50 /	Air Sample Particulate Filters	
# 5 /	Sealed AgX Cartridges	Exp. Date _____
# 1 /	Check Source, Cs-137, button	
2 /	Potassium Iodide, bottles	Exp. Date _____
* 1 /	Lapel Sampling Pump	Operational Check _____
# 2 /	Sealed AgX Lapel Cartridges	Exp. Date _____
1 /	Lapel Cartridge Holder Assembly	
2 /	Lapel Air Sample Particulate Filters	
# 2 /	Respirators (medium); Store in a manner that does not cause distortion or distention, (e.g., Do not stack. Lay with face piece lens down.)	Resp. Insp. Date _____
# 4 /	MSA GMR-I or equivalent canisters	Canister Exp. Date _____
2 /	Protective Clothing, sets **	
100 /	Smears	
10 /	Plastic bags, 2" x 4"	
1 /	Duct Tape, roll	
* 2 /	0-200 mR Dosimeters	
* 2 /	0-5R Dosimeters	
* 1 /	Dosimeter Charger	Operational Check _____
10 /	Sampling Labels	
5 /	Plastic Bags, clear, medium for instruments	
1 /	Marinelli, 1 liter	
25 /	Surgeons Gloves, pr.	

This page, when completed, shall be retained as per the Document Type List (DTL).

Emergency Facility Inventories

Form 6

Offsite Survey Team Kit Inventory

Page 2 of 2

Kit: _____
A/B
(E15/E16)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
Environmental Sampling Kit:		
1 /	Gloves, pr.	
1 /	Grass shears	
5 /	Autoclavable Bags, Biohazard	
1 /	Garden Spade, small	
5 /	Pouches, 10" x 12"	
1 /	Bucket (one gallon) w/rope	
5 /	Cubitainer (one gallon)	
5 /	Cubitainer Transport Boxes	
1 /	Masking Tape	
1 /	12" Ruler	
5 /	Ziploc Bags, 1 gallon	
5 /	Ziploc Bags, 2 gallon	
1 /	Flat Bladed Hoe, sml	
2 /	Sheet Protectors	
1 /	Paper Towels, roll	
10 /	Container, 16 oz.	
5 /	Trash Bags, lg. (22" x 28")	
1 /	Funnel	

* Maintained by Met Lab

Maintained by H.P.

** Includes: Disposable or cotton coveralls with hood, plastic or cloth booties, rubber shoe covers, cotton glove liners, and rubber gloves.

Kit was Found: Locked/Sealed Yes _____ No _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____

Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
(Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 7

State/County Offsite Survey Team Kit Inventory

Page 1 of 1

Inventory to be performed by: **METROLOGY AND RADIOLOGICAL LABORATORY** Kit: _____
 Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____ A/B/C/D/E/F
 Tampered Kit/Locker: _____ Other: _____ (E19)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
* 1 /	GM Survey Meter (14-C)	Functional Check _____
* 1 /	GM Probe w/cable	
1 /	Check Source, lantern mantle	
10 /	Shoe Covers, pr.	
10 /	Surgeons Gloves, pr.	
10 /	Poly Trash Bags	
1 /	Maps, 10 mile EPZ, full set	
25 /	BRC Monitor Data Forms	
1 /	Potassium Iodide, bottle	Exp. Date _____
4 /	"D" Batteries	Exp. Date _____

* Maintained by Met Lab

Kit was Found: Locked/Sealed Yes _____ No _____
 Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____
 Is the housekeeping satisfactory? Yes _____ No _____
 Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
 (Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 8

Alternate Emergency Operations Facility Inventory

Page 1 of 1

Inventory to be performed by: METROLOGY AND RADIOLOGICAL LABORATORY

E08

Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____

Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
16 /	Telephones	
1 /	Telephone Distribution Box	
20 /	Pens, ink	
10 /	Pencils, mechanical	
6 /	Tablets, writing	
1 /	ERPs, controlled set	
1 /	Emergency Plan, controlled	
15 /	Emergency Communications Directory (includes site directory)	
29 /	Position manuals (set of volumes equals one manual)	
* 1 /	Count Rate Survey Meter (i.e., LUD 3)	Functional Check _____
2 /	"D" Batteries	Exp. Date _____
1 /	Check Source, lantern mantle	
* 1 /	GM Probe w/cable	
1 /	Base Station Radio	
2 /	Facsimile Machines	
4 /	Computers	
2 /	Printers	
25 /	Emergency Action Log books (minimum 5 forms)	
1 /	First Aid Kit	

* Maintained by Met Lab

Kit was Found: Locked/Sealed Yes _____ No _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____

Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
 (Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 9

Rad Van Inventory

Page 1 of 2

Inventory to be performed by:

HEALTH PHYSICS

E09

Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____

Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
25 /	Surgeons Gloves, pr.	
4 /	Duct Tape, roll	
4 /	Air Sampler Filter Holder Assembly with adequate O-Rings	
100 /	Air Sample Particulate Filters	
# 10 /	Sealed AgX Lapel Cartridges	Exp. Date _____
10 /	Lapel Air Sample Particulate Filters	
# 2 /	Lapel Cartridge Holder Assemblies	
1 /	Check Source	
300 /	Smears	
20 /	Air Sample Labels	
2 /	Calculator	Operational Check _____
# 20 /	Sealed AgX Cartridges	Exp. Date _____
1 /	Ziploc Baggies, box	
20 /	"D" Batteries	Exp. Date _____
4 /	"9V" Batteries	Exp. Date _____
4 /	Tweezer	
25 /	Rad Material Stickers/Labels	
# 2 /	Respirators w/MSA GMR-I or equivalent canisters (medium); Store in a manner that does not cause distortion or distention. (e.g., Do not stack. Lay with face piece lens down.)	Resp. Insp. Date _____ Canister Exp. Date _____
10 /	Protective clothing, sets **	
6 /	Plastic Bags, medium (clear for instruments)	
* 2 /	Count Rate Survey Meters (i.e., LUD 3)	Functional Check _____
* 2 /	GM Probe w/cables	
* 2 /	Dose Rate Survey Meters (i.e., RS05)	Functional Check _____
* 1 /	Air Sampler, Portable, DC Powered	Operational Check _____
* 1 /	Lapel Sampling Pump	Operational Check _____
* 54 /	TLD - EquiStar (1) Control (22) Issue, Celanese (1) Control (30) Issue. TLDs should be stored in the kit as far from the source as possible.	
* 102 /	0-200 mR Dosimeters - EquiStar (40), Celanese (60), STP Kit (2)	
* 3 /	Dosimeter Chargers - EquiStar (1), Celanese (1), STP Kit (1)	Operational Check _____
52 /	0-20R (SOT) Dosimeters - EquiStar (22), Celanese (30)	
* 2 /	0-5R Dosimeters	
2 /	Potassium Iodide, bottles	Exp. Date _____

This page, when completed, shall be retained as per the Document Type List (DTL).

Emergency Facility Inventories

Form 10

Offsite Ambulance Instrument Inventory

Page 1 of 1

Ambulances: Bay City

Inventory to be performed by: METROLOGY AND RADIOLOGICAL LABORATORY

Kit A/B/C/D/E (E13)

Scheduled: Instrument Change Out: Post Drill/Exercise:

Palacios

Tampered Kit/Locker: Other:

Kit A/B (E14)

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
* 7 /	TLDs- Control (4) Issue (10) – TLDs should be stored in the kit as far from the source as possible.	
* 5 /	0-200 mR Dosimeters	
* 5 /	0-5R Dosimeters	
* 1 /	Dosimeter Chargers	Operational Check _____
2 /	"D" Batteries	Exp. Date _____
5 /	Matagorda County Emergency Worker Badges	
1 /	Dosimetry Issue Log	
1 /	Site Map	

* Maintained by Met Lab

Kit was Found: Locked/Sealed Yes _____ No _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____

Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
(Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 11

Site Ambulance Inventory

Page 1 of 1

Inventory to be performed by: **HEALTH PHYSICS** Ambulance/Transport Vehicle
 Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____ E07
 Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
1 /	Carry Case	
20 /	Disposable Booties, pr.	
4 /	Disposable Coveralls, pr.	
20 /	Surgeon Gloves, pr.	
2 /	Herculite Fabric, 5' x 8'	
# 7 /	TLDs-Control (2) Issue (5) - TLDs should be stored in the kit as far from the source as possible.	

Maintained by H.P.

Kit was Found: Locked/Sealed Yes _____ No _____
 Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____
 Is the housekeeping satisfactory? Yes _____ No _____
 Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
 (Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 12

Environmental Health Department (EHD) Inventory

Page 1 of 1

Inventory to be performed by: **METROLOGY AND RADIOLOGICAL LABORATORY**

E21

Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____

Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
* 137 /	TLDs-Control (7) Issue (130) – TLDs should be stored in the kit as far from the source as possible.	
* 50 /	0-200 mR Dosimeters	
* 6 /	Dosimeter Chargers	Operational Check _____
* 10 /	Survey Meters (14C, Ludlum) with GM Probes and Cables	Operational Check _____
20 /	Batteries, D	Exp. Date _____

* Maintained by Met Lab

Kit was Found: Locked/Sealed Yes _____ No _____ Seal # _____

Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____

Is the housekeeping satisfactory? Yes _____ No _____ Seal # _____

Is the facility appearance satisfactory? Yes _____ No _____ Seal # _____

Comments: _____

Inventory Performed By: _____ (Sign) _____ (Print) Date: _____

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

Emergency Facility Inventories

Form 13

Matagorda County Sheriff's Office Inventory

Page 1 of 1

Inventory to be performed by: METROLOGY AND RADIOLOGICAL LABORATORY

E06

Scheduled: _____ Instrument Change Out: _____ Post Drill/Exercise: _____

Tampered Kit/Locker: _____ Other: _____

QTY: REQ/ACT.	ITEM	BATT/OPER/FUNC CHECK
* 77 /	TLDs (75) Issue (2) Control – TLDs should be stored in the kit as far from the source as possible.	
* 40 /	0-200 mR Dosimeters	
40 /	(SOT) 0-20 R Dosimeters	
* 40 /	0-20 R Dosimeters	
* 6 /	Dosimeter Chargers	Operational Check _____
* 2 /	Survey Meters (14C, Ludlum) with CM Probe and Cable	Operational Check _____
20 /	"D" Batteries	Exp. Date _____
100 /	Potassium Iodide, bottles	Exp. Date _____

* Maintained by Met Lab
 SOT Owned and Maintained by the State of Texas.

Kit was Found: Locked/Sealed Yes _____ No _____
 Kit was Left: Locked/Sealed Yes _____ No _____ Seal # _____
 Is the housekeeping satisfactory? Yes _____ No _____
 Is the facility appearance satisfactory? Yes _____ No _____

Comments: _____

Inventory Performed By: _____ / _____ Date: _____
 (Sign) (Print)

Inventory Reviewed By: _____ Date: _____

Shaded areas are not applicable to the associated item.

ST# 31059285

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

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Documentation

Quality	Safety-Related	Usage: N/A	Effective Date: 03/16/00
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Max Keyes	N/A	N/A	Emergency Response Division
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION

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Documentation**1.0 Purpose and Scope**

- 1.1 This procedure provides guidance for developing the necessary documentation of emergency activities after a declared emergency at the South Texas Project Electric Generating Station (STPEGS).
- 1.2 This procedure implements the requirements of the STPEGS Emergency Plan specific to documentation.
- 1.3 This procedure establishes the requirements for ensuring proper documentation and subsequent investigation of declared emergencies are conducted at the STPEGS.

2.0 Precautions and Limitations

- 2.1 The documentation requirements of this procedure shall be completed upon termination of any declared emergency.
- 2.2 This procedure shall be implemented in conjunction with, and as supplementary documentation to, OPGP03-ZX-0002, Condition Reporting Process.

3.0 Responsibilities

- 3.1 Any individual assigned as Significant Condition Adverse to Quality (SCAQ) Investigator is responsible for integrating the documentation requirements of this procedure with the requirements of OPGP03-ZX-0002.
- 3.2 IF Unusual Event is the highest Emergency Classification, THEN the Emergency Director/Shift Supervisor is responsible for coordinating the activities of personnel assigned to the Control Room and onshift to support an emergency in the completion of required documentation.
- 3.3 IF the Emergency Classification is an ALERT or higher, THEN the Assistant TSC Manager is responsible for coordinating the activities of personnel assigned to the Control Room, Technical Support Center (TSC), and Operations Support Center (OSC) in the completion of required documentation.
- 3.4 IF the Emergency Classification is an ALERT or higher, THEN the Deputy EOF Director is responsible for coordinating the activities of personnel assigned to the EOF and Joint Information Center (JIC) in the completion of required documentation.
- 3.5 The Supervisory, Emergency Response, or designee, is responsible for:
 - 3.5.1 Assigning an Emergency Response staff member to review documentation of a declared emergency.

Documentation

- 3.5.2 Providing results of the preliminary review of declared emergency documentation relative to Emergency Plan implementation to the Significant Condition Adverse to Quality (SCAQ) Investigator in charge of the event investigation.
- 3.5.3 Recommending corrective action to the SCAQ Investigator for any problems identified in Emergency Plan implementation.
- 3.6 Assigned Emergency Response Division Staff Member is responsible for:
 - 3.6.1 Reviewing documentation of and tracking declared emergencies, as assigned by the Supervisor, Emergency Response.
 - 3.6.2 Preparing a preliminary report of the effectiveness of Emergency Plan implementation during the emergency.
 - 3.6.3 Forwarding all documentation to Records Management System (RMS).
- 3.7 Manager, Quality and Licensing is responsible for:
 - 3.7.1 Submitting a Licensing Event Report (LER) within 30 days of the Reportable Event in accordance with 10CFR50.73.
- 4.0 Procedure
 - 4.1 The Emergency Director shall direct all Emergency Response Organization personnel to complete Form 1, Corrective Action Items List if appropriate when Recovery or Termination is declared.
 - 4.2 The Supervisor, Emergency Response, or designee, shall ensure all documentation is collected in a central location.
 - 4.3 The Supervisor, Emergency Response shall ensure a Condition Report (CR) is initiated for the event.
 - 4.4 Assigned Emergency Response Division Staff Member shall:
 - 4.4.1 Collect all documentation generated during the emergency from the Emergency Director.
 - 4.4.2 Review all documentation for errors and make a note of any identified errors.
 - 4.4.3 Review all documentation for problems which impacted or could have impacted the ability of the STPEGS to respond to the emergency.
 - 4.4.4 Complete Form 2, Emergency Event Documentation Worksheet.

Documentation

4.4.5 Emergency Event Tracking

4.4.5.1 Assign each event a unique tracking number on Form 4, Emergency Event Index, as follows:

- Sequential number determined from Form 4.
- Unit number (all common events shall be listed under the Unit which assumed Emergency Director responsibilities; however, the Unit designator shall be followed by a "C" to indicated a common emergency (i.e., 1C).
- Last two digits of the year.

4.4.5.2 Enter the following information on Form 4:

- Highest Emergency Classification;
- Assigned ER Staff Member;
- Date of declaration;
- Date of termination; and
- CR number.

4.4.6 Emergency Event Tracking

4.4.7 Prepare a preliminary report of the vent within two days of event termination using Addendum 1, Emergency Response Summary Report Outline, as guidance in preparing report.

4.4.8 Provide copies of Emergency Response Facility documentation to the SCAQ Investigator.

4.5 Emergency Event Evaluation

4.5.1 The Supervisor, Emergency Response, or designee, shall review the preliminary report for problems which may require immediate response, and take necessary actions.

4.5.2 The Supervisor, Emergency Response, or designee, shall ensure a full summary report, describing Emergency Plan implementation of the event is prepared. The report shall include, as a minimum:

4.5.2.1 A description of the emergency and the emergency classification;

Documentation

- 4.5.2.2 A determination of whether or not the emergency was correctly classified;
- 4.5.2.3 A statement that regulatory requirements have been met, and if not, that a CR has been initiated; and
- 4.5.2.4 A brief description of problems which should be addressed by the site and recommended corrective actions to improve the emergency response effort.
- 4.5.3 The Supervisor, Emergency Response, or designee, shall ensure the report is delivered to the SCAQ Investigator in charge of the event investigation.
- 4.6 A copy of the Condition Report shall be forwarded to the Supervisor, Emergency Response, and appropriate management.
- 5.0 References
 - 5.1 STPEGS Emergency Plan
 - 5.2 OPGP03-ZX-0002, Corrective Action Program
 - 5.3 10CFR50.73
- 6.0 Documentation
 - 6.1 A copy of completed Form 2, Emergency Event Documentation Worksheet, and attached report shall be retained by the Emergency Response Division.
 - 6.2 The following shall be forwarded to RMS for retention (lifetime of the plant) with Form 2 being the cover document:
 - 6.2.1 All original checklists and notification forms;
 - 6.2.2 Preliminary report; and
 - 6.2.3 Emergency Response Summary Report.
- 7.0 Support Documents
 - 7.1 Addendum 1, Emergency Response Summary Report Outline
 - 7.2 Form 1, Corrective Action Items List
 - 7.3 Form 2, Emergency Event Documentation Worksheet

- 7.4 Form 3, Emergency Event Continuation Worksheet
- 7.5 Form 4, Emergency Event Index

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1.0 Executive Summary

1.1 Key Authors:

- 1.1.1 Deputy EOF Director
- 1.1.2 Assistant TSC Manager
- 1.1.3 Operations Manager/Shift Supervisor

1.2 Recommended Outline:

- 1.2.1 Overview of Initiating Events and Subsequent Events
- 1.2.2 Summary of Response Actions
- 1.2.3 Extent of Damage to Plant Systems and Equipment
- 1.2.4 Radiological Consequences
 - 1.2.4.1 Onsite Radiological Problems
 - 1.2.4.2 Onsite Personnel Exposures
 - 1.2.4.3 Offsite Radiological Releases

2.0 Emergency Investigation Report

2.1 Recommended Outline:

- 2.1.1 Initiating Events (Prior to Classification of an Emergency)
- 2.1.2 Key Authors:
 - 2.1.2.1 Operations Manager
 - 2.1.2.2 Shift Supervisor

2.2 Recommended Subheadings:

- 2.2.1 Time Line of Events
- 2.2.2 Systems and Equipment Failures
- 2.2.3 Automatic Safety Systems Activated

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- 2.2.4 Manual Operator Actions Taken to Mitigate the Situation
- 2.2.5 Emergency Operating Procedures (EOPs) and/or Off Normal Operating Procedures (ONOPs) Initiated
- 2.2.6 Plant Emergency Teams Initially Dispatched

3.0 Initial Classification of the Emergency

3.1 Key Authors:

- 3.1.1 Operations Manager
- 3.1.2 Shift Supervisor

3.2 Recommended Subheadings:

- 3.2.1 Major Events and Key Equipment Failures
- 3.2.2 Emergency Action Level Exceeded
- 3.2.3 Notifications to Offsite Agencies and NRC
- 3.2.4 Extent of Activation of the Emergency Response Organization
- 3.2.5 Activation of Support Organizations
- 3.2.6 Secondary Events and Equipment Problems
- 3.2.7 Automatic Safety Systems Activated
- 3.2.8 Manual Operator Actions Taken to Mitigate the Situation
- 3.2.9 Emergency Operator Procedures and Off Normal Operating Procedures Implemented

4.0 Changes in Emergency Classification (Repeat this section for each change in Emergency Classification)

4.1 Key Authors:

- 4.1.1 Operations Manager
- 4.1.2 Shift Supervisor

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4.1.3 Technical Manager

4.1.4 System Status Evaluator

4.2 Recommended Subheadings:

4.2.1 Major Events and Key Equipment Failures

4.2.2 Emergency Action Level Exceeded

4.2.3 Notifications to Offsite Agencies and NRC

4.2.4 Extent of Activation of the Emergency Response Organization

4.2.5 Activation of Support Organizations

4.2.6 Secondary Events and Equipment Problems

4.2.7 Automatic Safety Systems Activated

4.2.8 Manual Operator Actions Taken to Mitigate the Actuation

4.2.9 Emergency Operator Procedures and Off-Normal Operating Procedures Implemented

5.0 Radiological Response

5.1 Key Authors:

5.1.1 Radiological Director

5.1.2 Radiological Manager

5.1.3 Radiological Coordinator

5.2 Recommended Subheadings:

5.2.1 Implant Radiological Conditions and Problems

5.2.2 Precautionary Radiological Controls Established

5.2.3 Protective Actions Taken for Site Personnel

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5.2.4 Radiological Releases

5.2.4.1 Source of the Release

5.2.4.2 Monitoring Readings and Flow Rates

5.2.4.3 Meteorological Conditions

5.2.4.4 Projected Downwind Dose Rates and Doses

5.2.4.5 Measured Downwind Dose Rates

5.2.4.6 Environmental TLD Results

5.2.4.7 Environmental Contamination Levels Measured

5.2.5 Public Protective Action Recommendations (PARs)

5.2.5.1 Basis for PAR

5.2.5.2 Extent of Implementation of the Recommended PAR

5.2.5.3 Problems Encountered in Implementing the PAR

6.0 Fission Product Barriers

6.1 Key Authors:

6.1.1 Technical Director

6.1.2 Technical Manager

6.1.3 Radiological Manager

6.1.4 Chemical/Radiochemical Manager

6.1.5 Nuclear Engineer

6.2 Recommended Subheadings:

6.2.1 Fuel Cladding Status During the Event

6.2.2 Reactor Coolant System Status During the Event

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6.2.3 Containment Status During the Event

6.2.4 Post Accident Sampling Results

6.2.5 Core Damage Calculations

7.0 Repair Activities

7.1 Key Authors:

7.1.1 Maintenance Manager

7.1.2 OSC Coordinator

7.1.3 Recommended Subheadings:

7.1.3.1 Plant Emergency Team Activities

7.1.3.2 Equipment Repair Problems

8.0 Security Response

8.1 Key Authors:

8.1.1 Security Manager

8.1.2 Security Supervisor

8.1.3 Security Coordinator

8.1.4 Security Force Supervisor

8.2 Recommended Subheadings:

8.2.1 Special Security Actions Taken Onsite

8.2.2 Security Interface with Offsite Law Enforcement Agencies

9.0 Recovery

9.1 Key Authors:

9.1.1 Recovery Manager (assigned by Emergency Director)

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9.1.2 Radiological Director

9.1.3 Maintenance Manager

9.2 Recommended Subheadings:

9.2.1 Equipment Repair Priorities

9.2.2 Estimated Repair Times and Cost

9.2.3 Reverification Program of Repairs Completed During the Emergency Condition

9.2.4 Recovery Phase Radiation Protection Program

10.0 Radiological Summary

10.1 Key Authors:

10.1.1 Radiological Director

10.1.2 Radiological Manager

10.1.3 Radiological Coordinator

10.2 Recommended Subheadings:

10.2.1 Emergency Response Personnel Exposures and Total Estimated Man-Rem

10.2.2 Exposures Exceeding 10CFR20

10.2.3 Use of Potassium Iodide (KI)

10.2.4 Summary of Radiological Release(s)

10.2.5 Highest Estimated Exposures and Estimated Man-Rem to the Public

11.0 Emergency Response Organization Activation (Develop a separate section for each key discipline)

11.1 Key Authors:

11.1.1 All EOF Directors, Supervisors, and Liaisons

11.1.2 All TSC Managers and Supervisors

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11.1.3 ISC Coordinator and Assistant OSC Coordinator

11.1.4 Corporate Central Evaluation Center Director

11.2 Recommended Subheadings:

11.2.1 Staff Notification Times

11.2.2 Staff Arrival Times to Emergency Facilities

11.2.3 Timeline of Key Activities and Response Actions

11.2.4 Documentation (Documentation generated in chronological order)

STI # 31059322

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

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Severe Accident Management					
Quality	Non Safety-Related	Usage: N/A	Effective Date: 03/16/00		
Max Keyes	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Severe Accident Management

1.0 Purpose and Scope

This procedure addresses the control and use of the South Texas Project Severe Accident Management Guidelines. Severe Accident Management Guidelines (SAMGs) have been developed for Westinghouse Pressurized Water Reactors (PWRs) by the Westinghouse Owners Group, and have been adapted for use at the South Texas Project with site specific information.

- 1.1 This procedure describes the South Texas Project's response to an accident involving severe reactor core damage.
- 1.2 This procedure implements the requirements of USNRC Generic Letter 88-20, Appendix 3, Accident Management.
- 1.3 This procedure implements the industry initiative outlined in NEI 91-04, Rev 1, Severe Accident Issue Closure Guidelines.

2.0 Definitions

- 2.1 Severe Accident: A nuclear accident involving a loss of reactor core cooling and damage so severe that there are core geometry changes and possible relocation of core materials, e. g. a core melt. In accordance with the Severe Accident Management Guidelines, a severe accident has occurred when core exit thermocouple temperatures are greater than 1200 degrees F and actions to cool the core have been, and continue to be, unsuccessful. The plant is outside of the Design Bases for the station.
- 2.2 Guidelines: The Severe Accident Management Guidelines (SAMGs) are designated "guidelines" rather than procedures, because the specific actions discussed in the guidelines are not requirements, but rather are subject to evaluation and may be rejected or implemented according to the circumstances.
- 2.3 Emergency Response Organization (ERO): A designated group of personnel who respond to declared emergencies at the STPEGS.
- 2.4 Evaluator: Those personnel who use the flow charts and computational aids to determine a strategy, evaluate the consequences of implementing vs. not implementing a strategy, recommend implementation of the appropriate strategy, and then monitor the implemented strategy for the desired effects. The following ERO positions are evaluators:
 - 2.4.1 Assistant Operations Manager
 - 2.4.2 Engineering Supervisor
 - 2.4.3 Electrical Engineer

Severe Accident Management

- 2.4.4 Instrumentation and Control Engineer
 - 2.4.5 Mechanical Engineer
 - 2.4.6 Nuclear Engineer
 - 2.4.7 Operations Manager
 - 2.4.8 Radiological Manager
 - 2.4.9 Risk/Reliability Engineer
 - 2.4.10 Technical Manager
- 2.5 Decision Maker: Those personnel who decide which strategy to follow and when that strategy should be implemented. The following ERO positions are decision makers:
- 2.5.1 Assistant TSC Manager
 - 2.5.2 Deputy EOF Director
 - 2.5.3 EOF Director
 - 2.5.4 TSC Manager
- 2.6 Implementor: Those personnel who receive instructions from the Technical Support Center (TSC) to implement a strategy, track equipment availability, recommend/perform system lineups, communicate parameter changes to the TSC, supervise/repair equipment, supervise/measure radiation levels, and supervise/analyze chemical and radiochemical samples. The following ERO positions are implementers:
- 2.6.1 Licensed Operator
 - 2.6.2 Shift Technical Advisor
 - 2.6.3 TSC Operations Communicator

Severe Accident Management**3.0 Responsibilities**

- 3.1 The Plant General Manager is responsible for approving the Severe Accident Management Procedure.
- 3.2 The Administrator, Risk Management, or designee, is responsible for:
 - 3.2.1 Maintaining the Technical Support Center Severe Accident Management Guidelines (SAMGs), Severe Challenge Guidelines (SCGs), and Computational Aids (CAs) to include technical review and updates.
 - 3.2.2 Providing SAMG drill support in the form of scenario development and plant parameter data.
 - 3.2.3 Assigning personnel to the Emergency Response Organization to act as members of the Technical Staff and SAMG Evaluators in the Technical Support Center.
- 3.3 The Manager, Operations Support, or designee, is responsible for:
 - 3.3.1 Maintaining the Emergency Operating Procedure (EOP) interfaces with the Severe Accident Management Guidelines (SAMGs).
 - 3.3.2 Maintaining the Severe Accident Control Room Guidelines (SACRGs) to include technical review and updates.
- 3.4 The Supervisor, Emergency Response, or designee, is responsible for:
 - 3.4.1 Maintaining this procedure, Severe Accident Management.
 - 3.4.2 Maintaining the SAMG interfaces with the Emergency Plan and the Emergency Plan Implementing and Administrative procedures.
 - 3.4.3 Conducting a drill/exercise on the appropriate frequency to provide Emergency Response Organization (ERO) training in the use of the SAMGs.
 - 3.4.4 Defining the ERO positions and training necessary for implementation of the Severe Accident Management Guidelines. OPGP03-ZT-0139 Emergency Preparedness Training Program describes Severe Accident Management training.
 - 3.4.5 Conducting specialized training for Emergency Response Organization personnel, to include classroom training for qualification of Decision Makers, Evaluators and Implementers.

Severe Accident Management

- 3.5 The Manager, Training, or designee, is responsible for:
- 3.5.1 Tracking and maintaining qualifications of the Licensed Operators in respect to the Severe Accident Management Guidelines.
 - 3.5.2 Ensuring that learning objectives and related training materials are developed and maintained using applicable guidance from the systematic approach to training (SAT).
- 3.6 The Shift Supervisor, or designee, is responsible for:
- 3.6.1 Supervising the performance of the Severe Accident Control Room Guidelines, SACRG-1 and SACRG-2, at the appropriate time in accordance with the Emergency Operating Procedures (EOPs).
 - 3.6.2 Implementing the accident mitigation strategies, chosen by the Emergency Director, and as directed by the Technical Support Center.
- 3.7 The Technical Support Center Technical Manager, or designee, is responsible for:
- 3.7.1 Coordinating and supervising the efforts of the Evaluators assigned to the TSC Technical Staff.
 - 3.7.2 Formulating a strategy or strategies based on an evaluation of plant conditions, evaluating the consequences of implementing vs. not implementing those strategies, recommending the appropriate strategy to the Emergency Director, and then monitoring the implemented strategy for the desired effects.
- 3.8 The Emergency Director is responsible for:
- 3.8.1 Declaring entry into the Severe Accident Management Guidelines at the appropriate time in accordance with the Emergency Operating Procedures. This responsibility shall not be delegated.
 - 3.8.2 Deciding which strategy will be implemented, based upon recommendations from the Technical Support Center Technical Staff.

Severe Accident Management**4.0 Procedure****4.1 Transition To The Severe Accident Management Guidelines**

- 4.1.1 In the case of a severe accident in progress, the Emergency Director makes the decision to transition from the Emergency Operating Procedures (EOPs) to the Severe Accident Management Guidelines (SAMGs) when those specific transition points are reached within the EOPs, or as identified/communicated by the Shift Supervisor.
- 4.1.2 The Emergency Director will base his decision on the status of plant systems and the behavior of core exit thermocouples as instructed in the EOPs. Other supporting evidence of core damage and operation outside the Design Bases, such as low vessel water level, high primary loop temperatures, and high radiation levels should be used to assist in this decision.
- 4.1.3 When the Emergency Director declares the transition from the EOPs to the SAMGs, individual tasks designed to cope with the emergency may continue; however, the EOPs will be abandoned and the Operators will implement the SAMGs by entering SACRG-1.
- 4.1.4 When the Technical Support Center (TSC) is activated, and at the appropriate step in SACRG-1, the Control Room transitions to SACRG-2.

4.2 Implementation of the Severe Accident Management Guidelines

- 4.2.1 The TSC Technical Staff will monitor the Diagnostic Flow Chart and the Severe Challenge Status Tree, evaluate plant status, and recommend strategies to cope with the accident.
- 4.2.2 The Emergency Director will choose the appropriate strategies and then direct the Technical Support Center to have the Shift Supervisor and Implementers implement those strategies.

5.0 References

- 5.1 USNRC Generic Letter 88-20, Appendix 3, Accident Management
- 5.2 Industry Initiative NEI 91-04, Rev 1, Severe Accident Issue Closure Guidelines
- 5.3 Westinghouse Owners Group, Severe Accident Management Guidelines
- 5.4 SECY 88-147, Severe Accident Closure Plan

- 5.5 SECY 89-012, Severe Accident Management Program
- 5.6 OPGP03-ZT-0139, Emergency Preparedness Training Program
- 5.7 South Texas Project Electric Generating Station Emergency Plan
- 5.8 OPGP05-ZV-0001, Emergency Response Exercises and Drills
- 5.9 OPGP05-ZV-0004, Emergency Plan Implementing Procedure Users Guide

6.0 Support Documents

None

ST# 31059344

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

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Shift Supervisor				
Quality	Non Safety-Related	Usage: N/A	Effective Date: 03/16/00	
Max Keyes	N/A	N/A	Emergency Response Division	
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION	

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Shift Supervisor**1.0 Purpose and Scope**

- 1.1 This procedure specifies the actions to be completed by the Shift Supervisor in the Control Room during a declared emergency.

2.0 Responsibilities

- 2.1 The Shift Supervisor of the affected Unit is responsible for:

- 2.1.1 Recognizing, classifying and declaring the emergency.
- 2.1.2 Assuming the responsibilities and authorities of the Emergency Director until relieved by the TSC Manager or EOF Director.
- 2.1.3 Completing notifications and Protective Action Recommendations (PARs) to offsite agencies until relieved of Emergency Director responsibility and authority.
- 2.1.4 Directing initial onsite emergency response activities.
- 2.1.5 Monitoring plant conditions for changes in emergency action levels (EALs) and emergency classification.
- 2.1.6 Directing Control Room response to mitigate the emergency condition.
- 2.1.7 Approving departures from license conditions per 10CFR50.54(x) for Control Room Operator actions and equipment manipulations.
- 2.1.8 Directing notification of the Emergency Response Organization (ERO), until relieved of Emergency Director responsibility and authority.
- 2.1.9 Approving, or delegating approval of, press releases prior to issuance until relieved of Emergency Director responsibility and authority.

- 2.2 The Shift Supervisor of the unaffected Unit is responsible for:

- 2.2.1 Assuming the responsibilities and authority of Emergency Director if the Shift Supervisor of the affected Unit is unable to assume or continue to perform the duties of the Emergency Director.

- 2.3 The Unit 1 Shift Supervisor is responsible for:

- 2.3.1 Assuming the responsibilities and authorities of Emergency Director for events common to both Units.

Shift Supervisor

3.0 References

- 3.1 STPEGS Emergency Plan
- 3.2 0ERP01-ZV-IN01, Emergency Classification
- 3.3 0ERP01-ZV-IN02, Notifications to Offsite Agencies
- 3.4 0ERP01-ZV-IN03, Emergency Response Organization Notification
- 3.5 0ERP01-ZV-IN04, Assembly and Accountability
- 3.6 0ERP01-ZV-IN05, Site Evacuation
- 3.7 0ERP01-ZV-TS01, TSC Manager
- 3.8 0ERP01-ZV-RE02, Documentation
- 3.9 0POP04-ZO-0004, Personnel Emergencies
- 3.10 0POP02-HE-0002, Technical Support Center HVAC System
- 3.11 0PGP09-ZA-0002, Fitness for Duty Program
- 3.12 0ERP01-ZV-TP03, Severe Accident Management
- 3.13 NRC Inspection Report 90-10-03 (LCTS #9000789-936)

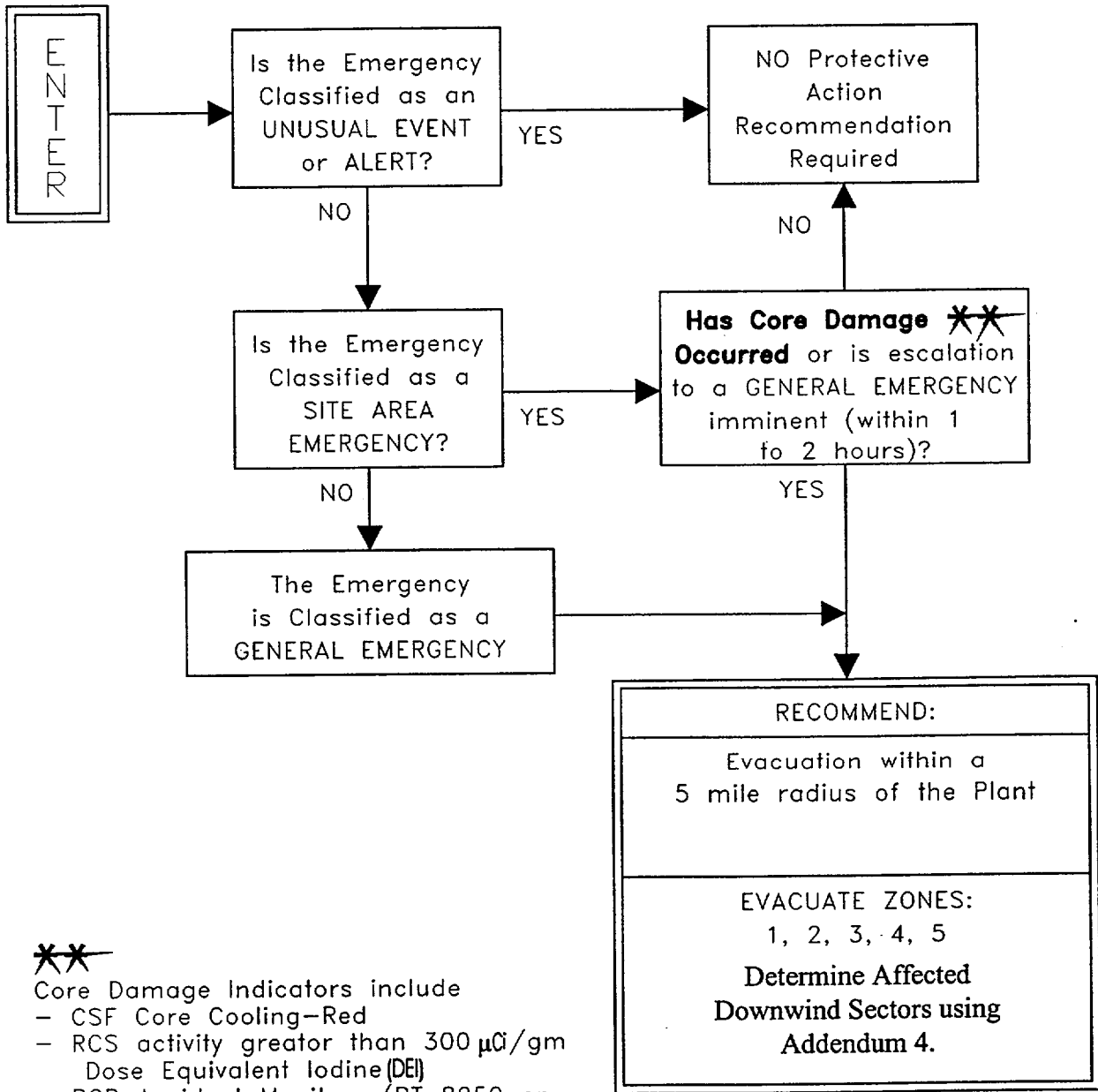
4.0 Procedure

- 4.1 If an Unusual Event or higher emergency classification is declared, implement the appropriate checklist (1, 2, 3, or 4) based on the emergency classification declared. Use these checklists as guides to help direct emergency activities.
- 4.2 If the emergency classification changes, then terminate completion of the current checklist and initiate a new checklist (2, 3, 4, or 5) based on the new emergency classification.
- 4.3 Request a licensed Reactor Operator from the unaffected Unit (if available) be dispatched to assist.
- 4.4 Assume the responsibilities and authorities of the Emergency Director. The Emergency Director is responsible for making certain key decisions and ensuring their implementation. The responsibilities which CANNOT be delegated include:
 - 4.4.1 Declaring a new emergency classification.

Shift Supervisor

- 4.4.2 Approving Protective Action Recommendations (PARs) issued to State and County authorities.
- 4.4.3 Approving required notifications to the State and County.
- 4.4.4 Approving exposures in excess of 10CFR20 limits and authorizing the use of Potassium Iodide (KI).
- 4.4.5 Approving departure from license conditions per 10CFR50.54(x).
- 4.4.6 Declaring entry into Severe Accident Management Guidelines.
- 4.5 The following Emergency Director responsibilities and authorities MAY be delegated:
 - 4.5.1 Requesting federal assistance.
 - 4.5.2 Approving press releases prior to issuance.
 - 4.5.3 Approving commitments to the NRC.
 - 4.5.4 Approving required communications with the NRC.
- 4.6 Upon arrival of the TSC Manager or EOF Director, provide a turnover briefing per 0ERP01-ZV-TS01, Data Sheet 2, Emergency Director Turnover Briefing.
- 4.7 When Emergency Director responsibilities have been transferred to the TSC Manager or EOF Director, then the Shift Supervisor shall perform the following:
 - 4.7.1 Keep the Emergency Director informed of any plant conditions which could change the EAL or PARs.
 - 4.7.2 Provide ongoing assessment and interface with the Operations Manager, including recommending priorities for repair activities.
 - 4.7.3 Approve departure from license conditions per 10CFR50.54(x) for Control Room Operator actions and equipment manipulations.
- 5.0 Support Documents
 - 5.1 Addendum 1 - Initial Protective Action Recommendation Flowchart
 - 5.2 Addendum 2 - Core/Containment Status Table
 - 5.3 Addendum 3 - Radiological Release Table

- 5.4 Addendum 4 - Protective Response Zones
- 5.5 Data Sheet 1 - Unusual Event Checklist
- 5.6 Data Sheet 2 - Alert Checklist
- 5.7 Data Sheet 3 - Site Area Emergency Checklist
- 5.8 Data Sheet 4 - General Emergency Checklist
- 5.9 Data Sheet 5 - Termination Checklist



 Core Damage Indicators include
 - CSF Core Cooling-Red
 - RCS activity greater than 300 $\mu\text{Ci/gm}$
 Dose Equivalent Iodine (DEI)
 - RCB Accident Monitors (RT 8050 or RT 8051) greater than 100R/hr
 - Failed Fuel Monitor (RT 8039) equal to or greater than 870 $\mu\text{Ci/ml}$

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Addendum 2	Core/Containment Status Table		Page 1 of 1

**ENTRY REQUIREMENTS: GENERAL EMERGENCY AND
A RADIOLOGICAL RELEASE IS NOT IN PROGRESS**

CONTAINMENT HIGH RANGE RADIATION MONITOR (RT-8050, 8051)	CONTAINMENT PRESSURE	PROTECTIVE ACTION RECOMMENDATIONS
		EVACUATION
Less Than 50 R/hr	N/A	2 Mile Radius
50 R/hr to 100 R/hr	< 20 psig	
		≥ 20 psig
>100 R/hr to 5,000 R/hr	< 40 psig	
		≥ 40 psig
> 5,000 R/hr	< 20 psig	5 Mile Radius
	≥ 20 psig	10 Mile Radius

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Addendum 3	Radiological Release Table		Page 1 of 1

ENTRY REQUIREMENTS: SITE AREA EMERGENCY OR GENERAL EMERGENCY WITH A RADIOLOGICAL RELEASE IN PROGRESS
(Below List in order of preference based on available data)

CONDITION	PROTECTIVE ACTION
	EVACUATE
I. <u>DOSE RATES MEASURED AT PLUME CENTERLINE ON EXCLUSION AREA BOUNDARY</u> a. <100 mr/hr b. 100 mr/hr to 1000 mr/hr c. >1000 mr/hr	a. None (Site Area Emergency) Two mile radius (General Emergency) b. Two mile radius and zones in affected downwind sectors to 5 miles c. Five mile radius and zones in affected downwind sectors to 10 miles
II. <u>PROJECTED DOSES</u> (For Short Duration Puffs only < 30 min) a. Projected doses < PAG (1 rem TEDE or 5 rem Thyroid CDE) b. Projected doses ≥ PAG (1 rem TEDE or 5 rem Thyroid CDE)	a. None (Site Area Emergency) Two mile radius (General Emergency) b. Two mile radius and zones in any sector projected to exceed PAG
III. <u>PROJECTED DOSES BEYOND EXCLUSION AREA BOUNDARY</u> a. Projected doses < PAG (1 rem TEDE or 5 rem Thyroid CDE) b. Projected doses ≥ PAG 0-5 miles (1 rem TEDE or 5 rem Thyroid CDE) c. Projected doses ≥ PAG 5-10 miles (1 rem TEDE or 5 rem Thyroid CDE) d. Projected doses ≥ PAG at greater than 10-miles and dose projection is supported by field team measurements (1 rem TEDE or 5 rem Thyroid CDE)	a. None (Site Area Emergency) Two mile radius (General Emergency) b. Two mile radius and zones in affected downwind sectors to 5 miles c. Five mile radius and zones in affected downwind sectors to 10 miles d. Ten mile radius and affected downwind sectors in 2-mile increments until PAG is not exceeded.
IV. <u>RELEASE RATES</u> a. < EAL for Site Area Emergency (SAE) b. ≥ EAL for Site Area Emergency (SAE)* c. ≥ EAL for General Emergency	a. None (Site Area Emergency) b. Two mile radius (optional for SAE) c. Five mile radius and zones in affected downwind sectors to 10 miles
V. <u>DEFAULT VALUES</u> a. Site Area Emergency with <u>NO</u> core damage b. Site Area Emergency <u>with</u> core damage c. General Emergency	a. None b. Five mile radius c. Five mile radius

* Complete dose projections to verify General Emergency EALs (1 Rem TEDE/5 Rem Thyroid CDE) are not exceeded.

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Addendum 4	Protective Response Zones		Page 1 of 1

AFFECTED ZONES: Determine affected downwind sectors and protective response zones and enter onto 0ERP01-ZV-IN02, Data Sheet 1, Offsite Agency Notification Message Form.

TWO MILE RADIUS: PROTECTIVE RESPONSE ZONES: 1

FIVE MILE RADIUS: PROTECTIVE RESPONSE ZONES: 1, 2, 3, 4, 5

TEN MILE RADIUS: PROTECTIVE RESPONSE ZONES: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11

DIRECTION WIND FROM(°)	AFFECTED DOWNWIND SECTORS	PROTECTIVE RESPONSE ZONES	
		2-5 Miles (includes 1-mile radius)	5-10 Miles (includes 5-mile radius)
164-174	Q, R, A, B	1, 2, 5	1, 2, 3, 4, 5, 6, 10, 11
175-185	R, A, B	1, 2	1, 2, 3, 4, 5, 6, 11
186-196	R, A, B, C	1, 2	1, 2, 3, 4, 5, 6, 11
197-208	A, B, C	1, 2	1, 2, 3, 4, 5, 6, 11
209-219	A, B, C, D	1, 2	1, 2, 3, 4, 5, 6, 11
220-230	B, C, D	1, 2	1, 2, 3, 4, 5, 6
231-241	B, C, D, E	1, 2, 3	1, 2, 3, 4, 5, 6, 7
242-253	C, D, E	1, 2, 3	1, 2, 3, 4, 5, 6, 7
254-264	C, D, E, F	1, 2, 3	1, 2, 3, 4, 5, 6, 7
265-275	D, E, F	1, 2, 3	1, 2, 3, 4, 5, 6, 7
276-286	D, E, F, G	1, 2, 3	1, 2, 3, 4, 5, 6, 7
287-298	E, F, G	1, 3	1, 2, 3, 4, 5, 7
299-309	E, F, G, H	1, 3	1, 2, 3, 4, 5, 7, 8
310-320	F, G, H	1, 3	1, 2, 3, 4, 5, 7, 8
321-331	F, G, H, J	1, 3	1, 2, 3, 4, 5, 7, 8
332-343	G, H, J	1	1, 2, 3, 4, 5, 7, 8
344-354	G, H, J, K	1	1, 2, 3, 4, 5, 7, 8, 9
355-5	H, J, K	1	1, 2, 3, 4, 5, 8, 9
6-16	H, J, K, L	1	1, 2, 3, 4, 5, 8, 9
17-28	J, K, L	1	1, 2, 3, 4, 5, 8, 9
29-39	J, K, L, M	1, 4	1, 2, 3, 4, 5, 8, 9
40-50	K, L, M	1, 4	1, 2, 3, 4, 5, 8, 9
51-61	K, L, M, N	1, 4, 5	1, 2, 3, 4, 5, 8, 9, 10
62-73	L, M, N	1, 4, 5	1, 2, 3, 4, 5, 9, 10
74-84	L, M, N, P	1, 4, 5	1, 2, 3, 4, 5, 9, 10
85-95	M, N, P	1, 4, 5	1, 2, 3, 4, 5, 9, 10
96-106	M, N, P, Q	1, 4, 5	1, 2, 3, 4, 5, 9, 10, 11
107-118	N, P, Q	1, 5	1, 2, 3, 4, 5, 9, 10, 11
119-129	N, P, Q, R	1, 5	1, 2, 3, 4, 5, 9, 10, 11
130-140	P, Q, R	1, 5	1, 2, 3, 4, 5, 10, 11
141-151	P, Q, R, A	1, 2, 5	1, 2, 3, 4, 5, 10, 11
152-163	Q, R, A	1, 2, 5	1, 2, 3, 4, 5, 10, 11

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Data Sheet 1	Unusual Event Checklist		Page 1 of 6

(Name)	(Date)	(Unit)
Action		
	Time	

A. INITIAL ACTIONS

1. Announce to Control Room personnel the declaration of an **Unusual Event** and the assumption of Emergency Director responsibilities by the Shift Supervisor. _____
2. Ensure the following announcement (or similar announcement) is made over the public address system using the **Unit Override** button: _____

(READ SLOWLY) "ATTENTION ALL PERSONNEL; ATTENTION ALL PERSONNEL. AN UNUSUAL EVENT HAS BEEN DECLARED IN UNIT(S) _____. ALL PERSONNEL SHOULD CONTINUE WITH THEIR NORMAL DUTIES UNLESS ASSIGNED EMERGENCY RESPONSE ACTIONS FOR AN UNUSUAL EVENT." (Optional: Give brief description of the event).

(Repeat the announcement.)

3. Direct the Control Room Communicators or available personnel to complete the required notifications as described in 0ERP01-ZV-IN02, Notifications to Offsite Agencies. N/A
 - a. No PARs are required for an Unusual Event.
 - b. State/County shall be contacted within 15 minutes of declaration of the Unusual Event to make emergency notifications.

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Data Sheet 1	Unusual Event Checklist		Page 2 of 6

Action	Time
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- | | |
|--|--|
| <p>c. NRC notification shall be made immediately upon completion of State/County notification and no later than one hour after declaring the Unusual Event. If more than one Communicator is available, NRC notification may be made concurrently with State/County notification.</p> | |
| <p>4. Ensure that the following on-shift personnel have responded to their emergency duty station or have contacted the Control Room and are available to respond if needed:</p> <ul style="list-style-type: none"> • Onsite Communicator (Control Room) • State/County Communicator (Control Room) • ENS Communicator (Control Room) • Acting Radiological Manager • Shift Technical Advisor (Control Room) • Acting OSC Coordinator • Acting Security Manager | <hr style="border: 0.5px solid black;"/> |
| <p>5. Direct the Onsite Communicator to notify select management personnel of the declaration of an Unusual Event in accordance with 0ERP01-ZV-IN03, Emergency Response Organization Notification.</p> | <hr style="border: 0.5px solid black;"/> |
| <p>6. Contact the Duty Operations Manager and brief him on the situation.</p> | <hr style="border: 0.5px solid black;"/> |
| <p>7. Contact the Duty Plant Manager and brief him on the situation.</p> | <hr style="border: 0.5px solid black;"/> |
| <p>8. Contact the Energy Control and Dispatching Center (ECDC) Dispatcher and advise her/him of the nature of the emergency.</p> | <hr style="border: 0.5px solid black;"/> |

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Data Sheet 1	Unusual Event Checklist		Page 3 of 6

Action	Time
9. Initiate an Emergency Action Log.	N/A
10. If conditions could deteriorate to an Alert or higher emergency classification, then direct the notification of the Emergency Response Organization in accordance with 0ERP01-ZV-IN03, Emergency Response Organization Notification.	_____
11. If any of the following conditions exist, then consider establishing the OSC:	_____
<ul style="list-style-type: none"> • In-plant radiological conditions are deteriorating; • Search and rescue efforts are necessary; • Security threat is in progress; • Offsite chemical plant release occurs which may impact site operations; • Vital equipment in the plant is in a degraded condition; • Shift Supervisor judgment. 	
A. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED	
1. Early Dismissal of Non-Essential Personnel	
a. Consider early dismissal of non-essential personnel for the following conditions: <ul style="list-style-type: none"> • The event is declared due to radiological problems and the condition could worsen. • A Security event is in progress and removal of personnel from the site would facilitate the ability of Security to respond. • Notification of severe weather has been received which could impact the safety of personnel onsite. • Notification of an incident at a nearby chemical facility has been received that could impact the site. 	N/A

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Data Sheet 1	Unusual Event Checklist		Page 4 of 6

Action	Time
<ul style="list-style-type: none"> • An orderly shutdown of activities and movement of personnel offsite is warranted. • A situation which has a significant potential to develop into unsafe or hazardous conditions onsite exists. 	
b. Discuss with the Duty Operations Manager the advisability of conducting early dismissal.	_____
c. If early dismissal of non-essential personnel in the Protected Area is determined appropriate, then make the following announcement: <p style="margin-left: 40px;">(READ SLOWLY) “ATTENTION ALL PERSONNEL; ATTENTION ALL PERSONNEL. THE EMERGENCY DIRECTOR HAS ORDERED THE EARLY DISMISSAL OF ALL NON-ESSENTIAL PERSONNEL. ALL NON-ESSENTIAL PERSONNEL SHALL SECURE THEIR WORK AREA, INFORM THEIR SUPERVISOR OF JOB STATUS, AND EXIT THE SITE UNLESS DIRECTED OTHERWISE BY SUPERVISION. MONITOR LOCAL RADIO BROADCASTS FOR ADDITIONAL INFORMATION.”</p> <p style="text-align: center;">(Repeat the announcement.)</p>	_____
d. If early dismissal of non-essential personnel in the Owner Controlled Area is determined appropriate, then contact the Security Force Supervisor (Acting Security Manager) and request notification of personnel in the Owner Controlled Area.	_____
2. Assembly and Accountability	
a. Implement 0ERP01-ZV-IN04, Assembly and Accountability.	_____

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Data Sheet 1	Unusual Event Checklist		Page 5 of 6

Action	Time
<ul style="list-style-type: none"> b. IF the OSC has been activated, THEN instruct Plant Operators that have not been assigned tasks to proceed to the OSC for accountability and remain there to support OSC operations. 	_____
<ul style="list-style-type: none"> c. If persons are determined to be missing as a result of performing Assembly and Accountability, then contact the Duty Maintenance Supervisor (Acting OSC Coordinator) and provide names and last known locations of the missing persons. Direct the Duty Maintenance Supervisor (Acting OSC Coordinator) to form and dispatch Search and Rescue teams. 	_____
3. Site Evacuation	
<ul style="list-style-type: none"> a. Implement 0ERP01-ZV-IN05, Site Evacuation. 	_____
4. Personnel Emergencies	
<ul style="list-style-type: none"> a. Implement 0POP04-ZO-0004, Personnel Emergencies. 	LOG
5. Potential for Radiological Release Occurring or Imminent	
<ul style="list-style-type: none"> a. Place the affected Unit's TSC HVAC System in emergency/isolation mode or verify automatic transfer has occurred using 0POP02-HE-0002, TSC HVAC System. 	_____
<ul style="list-style-type: none"> b. Contact unaffected Unit's Shift Supervisor and recommend placing the unaffected Unit's TSC HVAC in emergency/isolation mode. 	_____
6. Toxic Gas/Chemical Release from Nearby Chemical Facilities	
<ul style="list-style-type: none"> a. If time permits, then initiate 0ERP01-ZV-IN04, Assembly and Accountability and 0ERP01-ZV-IN05, Site Evacuation. 	_____

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Action	Time
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- | | |
|--|----------------------------|
| <ul style="list-style-type: none"> b. Otherwise, announce over the public address system for all personnel to seek shelter in buildings and turn off ventilation systems. Repeat the announcement. Direct the Security Force Supervisor (Acting Security Manager) to warn personnel outside the Protected Area. | <hr style="width: 100%;"/> |
|--|----------------------------|

B. ONGOING ACTIONS

- | | |
|--|-----|
| 1. Continuously assess plant conditions against 0ERP01-ZV-IN01, Emergency Classification, to determine if changes to the current emergency classification are warranted. | N/A |
| 2. Evaluate the need for continued staffing of ERO positions and release unnecessary personnel to return to normal duties. | N/A |
| 3. Maintain an Emergency Action Log. | N/A |
| 4. Review and approve press releases as applicable. | LOG |

-END-

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Shift Supervisor			
Data Sheet 2	Alert Checklist		Page 1 of 7

(Name)	(Date)	(Unit)
Action		Time

A. INITIAL ACTIONS

1. Announce to Control Room personnel the declaration of an **Alert** and the continuation (or assumption) of Emergency Director responsibilities by the Shift Supervisor. _____

2. Ensure the following announcement (or a similar announcement) is made over the public address system using the **Unit Override** button: _____

(READ SLOWLY) "ATTENTION ALL PERSONNEL; ATTENTION ALL PERSONNEL. AN ALERT HAS BEEN DECLARED IN UNIT(S) ____. ALL DESIGNATED MEMBERS OF THE EMERGENCY RESPONSE ORGANIZATION REPORT TO YOUR FACILITY. ALL OTHER PERSONNEL ARE TO CONTINUE WITH THEIR NORMAL DUTIES UNLESS FURTHER INSTRUCTIONS ARE GIVEN." (Optional: Give brief description of the event.)

(Repeat the announcement.)

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Action	Time
<p>3. Direct the Control Room Communicators or available personnel to complete the required notifications as described in 0ERP01-ZV-IN02, Notifications to Offsite Agencies.</p> <p>a. No PARs are required for an Alert.</p> <p>b. State/County shall be contacted within 15 minutes of the declaration of the Alert to make emergency notifications.</p> <p>c. NRC notification shall be made immediately upon completion of State/County notification and not later than one hour after declaring the Alert. If more than one Communicator is available, NRC notification may be made concurrently with State/County notification.</p> <p>d. Activate Emergency Response Data System (ERDS) at the time the NRC Operations Center is notified of the Alert.</p>	N/A
4. Contact the Alarm Station Operator at extension 6042 to verify Emergency Notification and Response System activation.	_____
5. Contact the Duty Operations Manager and brief him on the situation.	_____
6. Contact the Duty Plant Manager and brief him on the situation.	_____
7. Contact the Energy Control and Dispatching Center (ECDC) Dispatcher and advise her/him of the nature of the emergency.	_____

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Action	Time
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8. Ensure that the following on-shift personnel have responded to their emergency duty station:

- Onsite Communicator (Control Room)
- State/County Communicator (Control Room)
- ENS Communicator (Control Room)
- Shift Technical Advisor (Control Room)
- Acting Radiological Manager
- Acting OSC Coordinator
- Acting Security Manager

B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED

1. Early Dismissal of Non-Essential Personnel

a. Consider early dismissal of non-essential personnel for the following conditions:

N/A

- The event is declared due to radiological problems and the condition could worsen.
- A Security event is in progress and removal of personnel from the site would facilitate the ability of Security to respond.
- Notification of severe weather has been received which could impact the safety of personnel onsite.
- Notification of an incident at a nearby chemical facility has been received that could impact the site.
- An orderly shutdown of activities and movement of personnel offsite is warranted.
- A situation with a significant potential to develop into unsafe or hazardous conditions exists onsite.

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<u>Action</u>	<u>Time</u>
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b. Discuss with the Duty Operations Manager the advisability of conducting early dismissal. _____

c. If early dismissal of non-essential personnel in the Protected Area is determined appropriate, then make the following announcement: _____

(Read Slowly) "ATTENTION ALL PERSONNEL; ATTENTION ALL PERSONNEL. THE EMERGENCY DIRECTOR HAS ORDERED THE EARLY DISMISSAL OF ALL NON-ESSENTIAL PERSONNEL. ALL NON-ESSENTIAL PERSONNEL SHALL SECURE THEIR WORK AREA, INFORM THEIR SUPERVISOR OF JOB STATUS, AND EXIT THE SITE UNLESS DIRECTED OTHERWISE BY SUPERVISION. MONITOR LOCAL RADIO BROADCASTS FOR ADDITIONAL INFORMATION."

(Repeat the Announcement)

d. If early dismissal of non-essential personnel in the Owner Controlled Area is determined appropriate, then contact the Security Force Supervisor (Acting Security Manager) and request notification of personnel in the Owner Controlled Area. _____

2. Assembly and Accountability

a. Implement 0ERP01-ZV-IN04, Assembly and Accountability. _____

b. Instruct Plant Operators that have not been assigned tasks to proceed to the OSC for Accountability and remain there to support OSC operations. _____

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Action	Time
<ul style="list-style-type: none"> c. If missing persons are discovered as a result of performing Assembly and Accountability, then contact the Duty Maintenance Supervisor (Acting OSC Coordinator) and provide names and last known locations of the missing persons. Direct the Duty Maintenance Supervisor (Acting OSC Coordinator) to form and dispatch Search and Rescue teams. 	_____
<ul style="list-style-type: none"> 3. Site Evacuation <ul style="list-style-type: none"> a. Implement 0ERP01-ZV-IN05, Site Evacuation. 	_____
<ul style="list-style-type: none"> 4. Personnel Emergencies <ul style="list-style-type: none"> a. Implement 0POP04-ZO-0004, Personnel Emergencies. 	LOG
<ul style="list-style-type: none"> 5. Radiological Release Occurring or Imminent <ul style="list-style-type: none"> a. Place the affected Unit's TSC HVAC System in emergency/isolation mode or verify automatic transfer has occurred using 0POP02-HE-0002, TSC HVAC System. b. Contact the Unit's Shift Supervisor and recommend placing the unaffected Unit's TSC HVAC in emergency/isolation mode. c. Direct all Plant Operators to report to the 41' RCA Access Control Point and obtain an electronic dosimeter. d. Direct the Dose Assessment Specialist in the EOF to perform dose projections. If the Dose Assessment Specialist is not available, then direct the Acting Radiological Manager to perform dose projections. 	 _____ _____ _____ _____

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Action	Time
6. Toxic Gas/Chemical Release from Nearby Chemical Facilities	
a. If time permits, then initiate 0ERP01-ZV-IN04, Assembly and Accountability and 0ERP01-ZV-IN05, Site Evacuation.	_____
b. Otherwise, announce over the public address system for all personnel to seek shelter in buildings and turn off ventilation systems. Repeat the announcement. Direct the Security Force Supervisor (Acting Security Manager) to warn personnel outside the Protected Area.	_____
C. ONGOING ACTIONS	
1. Continuously assess plant conditions against 0ERP01-ZV-IN01, Emergency Classification, to determine if changes to the current emergency classification are warranted.	N/A
2. Evaluate the adequacy of the current Operations staffing and request assistance from the unaffected Unit and/or call out additional personnel.	N/A
3. Make periodic site public address announcements on the status of the emergency including any radiological hazard precautions. Repeat announcements.	LOG
4. Until relieved as the Emergency Director, update off-site agencies (State, County, BRC) about hourly (or more frequently if warranted) on the status of the emergency.	LOG
5. Maintain an Emergency Action Log.	N/A
6. Keep Plant Operators in the field advised of plant status and radiological conditions as applicable.	LOG
7. Review and approve press releases as applicable.	LOG

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Data Sheet 2	Alert Checklist		Page 7 of 7

Action	Time
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D. FOLLOWING EMERGENCY DIRECTOR TURNOVER TO THE TSC
MANAGER OR EOF DIRECTOR

- | | | |
|----|--|-----|
| 1. | Maintain ENS communications with the NRC if requested. | N/A |
| 2. | Advise the Emergency Director of conditions which may change the emergency classification. | N/A |
| 3. | Periodically brief Control Room staff of the status of the emergency and ongoing repair efforts. | N/A |

-END-

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Data Sheet 3	Site Area Emergency Checklist		Page 1 of 6

_____	_____	_____
(Name)	(Date)	(Unit)
Action		Time

NOTE

Continue with this checklist only if the TSC Manager or EOF Director has not assumed Emergency Director responsibilities and authorities.

A. INITIAL ACTIONS

1. Announce to Control Room personnel the declaration of a **Site Area Emergency (SAE)** and the continuation (or assumption) of Emergency Director responsibilities by the Shift Supervisor. _____

2. Make the following announcement (or similar announcement) over the public address system using the **Unit Override** button: _____

(Read Slowly) "ATTENTION ALL PERSONNEL; ATTENTION ALL PERSONNEL. A SITE AREA EMERGENCY HAS BEEN DECLARED IN UNIT(S) ___."

(Optional: Give brief description of the event.)

(Repeat the announcement.)

3. If Assembly and Accountability has not been completed, then determine wind direction and implement Assembly and Accountability (Step 4). _____

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Action	Time
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4. Sound the assembly alarm for about 15 seconds and make the following announcement: _____

“ATTENTION. ATTENTION. ASSEMBLY AND ACCOUNTABILITY HAS BEEN ORDERED FOR ALL PERSONNEL IN THE PROTECTED AREA. ALL EMERGENCY RESPONSE ORGANIZATION PERSONNEL REPORT TO YOUR DESIGNATED ASSEMBLY AREA AND IMMEDIATELY CARD-IN ON ACCOUNTABILITY CARDREADERS. ALL OTHER PERSONNEL EXIT THE PROTECTED AREA VIA THE FOLLOWING ROUTE:

(Read one of the following as determined by wind direction)

[Wind Direction: 000-090] PERSONNEL SHOULD GO NORTH OF UNITS 1 AND 2 AND EXIT THE EAST GATEHOUSE, AND ASSEMBLE IN THE NUCLEAR SUPPORT CENTER. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

OR

[Wind Direction: 091-180] PERSONNEL SHOULD GO SOUTH OF UNITS 1 AND 2 AND EXIT THE EAST GATEHOUSE, AND ASSEMBLE IN THE NUCLEAR SUPPORT CENTER. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

OR

[Wind Direction: 181-270] PERSONNEL SHOULD GO SOUTH OF UNITS 1 AND 2 AND EXIT THE WEST GATEHOUSE, AND ASSEMBLE IN THE CENTRAL PROCESSING FACILITY. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

OR

[Wind Direction: 271-359] PERSONNEL SHOULD GO NORTH OF UNITS 1 AND 2 AND EXIT THE WEST GATEHOUSE, AND ASSEMBLE IN THE CENTRAL PROCESSING FACILITY. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

(Repeat the assembly alarm and announcement as appropriate to ensure personnel accountability is complete).

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Data Sheet 3	Site Area Emergency Checklist		Page 3 of 6

Action	Time
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5. Direct the Control Room Communicators or available personnel to complete the required notifications as described in 0ERP01-ZV-IN02, Notifications to Offsite Agencies.
 - a. **IF** time does not permit the calculation and evaluation of downwind doses **OR** personnel are not available to complete these calculations, **THEN** determine the Protective Action Recommendation using Addendum 1, Initial Protective Action Recommendation Flowchart. _____
 - b. **IF** a radiological release has occurred, **AND** Offsite Prompt Dose Assessment (OPDA) is available, **THEN** obtain the Protective Action Recommendation from the printout. _____
 - c. **IF** a radiological release is in progress, **AND** Offsite Prompt Dose Assessment (OPDA) is not available, **THEN** use manual dose assessment, actual field readings, or release rates to determine the Protective Action Recommendation using Addendum 3, Radiological Release Table. _____
 - d. **IF** dose assessment results indicate ≥ 1 rem TEDE or ≥ 5 rem Thyroid CDE (PAGs) are exceeded at 10 miles, and field team measurements verify projected dose, **THEN** recommend evacuation of 10 mile radius and downwind sectors greater than 10-miles in 2-mile increments until PAGs are not exceeded. _____
 - e. **Determine** affected downwind sectors and zones using Addendum 4, Protective Response Zones. _____
 - f. **State/County shall be contacted within 15 minutes of the declaration of the SAE to make emergency notifications.** _____
 - g. **NRC notification shall be made immediately upon completion of State/County notification and not later than one hour after declaring the SAE.** If more than one Communicator is available, NRC notification may be made concurrently with State/County notification. _____
 - h. **Activate Emergency Response Data System (ERDS) at the time the NRC Operations Center is notified of the Site Area Emergency, if not previously activated.** _____

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Action	Time
6. IF not already accomplished, THEN contact the Alarm Station Operator at extension 6042 to verify Emergency Notification and Response System activation.	_____
7. Instruct Plant Operators that have not been assigned tasks to proceed to the OSC for Accountability and remain there to support OSC operations. Ensure Plant Operators that remain under Control Room direction obtain an electronic dosimeter.	_____
8. Contact the Energy Control and Dispatching Center (ECDC) Dispatcher and advise her/him of the nature of the emergency.	_____
9. Verify that the following on-shift personnel have responded to their emergency duty station: <ul style="list-style-type: none"> • Onsite Communicator (Control Room) • State/County Communicator (Control Room) • ENS Communicator (Control Room) • Shift Technical Advisor (Control Room) • Acting Radiological Manager • Acting OSC Coordinator • Acting Security Manager 	_____
10. If the event is Radiologically based and the TSC HVAC has not been transferred to emergency/isolation mode, Then: <ol style="list-style-type: none"> a. Place the affected Unit's TSC HVAC System in emergency/isolation mode or verify automatic transfer has occurred using OPOP02-HE-0002, TSC HVAC System. b. Contact the unaffected Unit's Shift Supervisor and recommend placing the unaffected Unit's TSC HVAC in emergency/isolation mode. 	 _____ _____

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Action	Time
11. If site evacuation has not been completed, then implement 0ERP01-ZV-IN05, Site Evacuation upon completion of Assembly and Accountability.	_____
B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED	
1. Personnel Emergencies	
a. Implement 0POP04-ZO-0004, Personnel Emergencies.	LOG
2. Radiological Release Occurring or Imminent	
a. Direct all Plant Operators to report to the 41' RCA Access Control Point and obtain an electronic dosimeter.	_____
b. Direct the Dose Assessment Specialist in the EOF to perform dose projections. If the Dose Assessment Specialist is not available, then direct the Acting Radiological Manager to perform the dose projections.	_____
3. Toxic Gas/Chemical Release from Nearby Chemical Facilities	
a. If conditions did not permit Assembly and Accountability and Evacuation, announce over the public address system for all personnel to seek shelter in buildings and turn off ventilation systems. Repeat the announcement. Direct the Security Force Supervisor (Acting Security Manager) to warn personnel outside the Protected Area.	_____
4. Missing Persons	
a. If missing persons are discovered as a result of performing Assembly and Accountability, then contact the Duty Maintenance Supervisor (Acting OSC Coordinator) and provide names and last known locations of the missing persons. Direct the Duty Maintenance Supervisor (Acting OSC Coordinator) to form and dispatch Search and Rescue teams.	_____

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Data Sheet 3	Site Area Emergency Checklist		Page 6 of 6

Action	Time
C. ONGOING ACTIONS	
1. Continuously assess plant conditions against 0ERP01-ZV-IN01, Emergency Classification to determine if changes to the current emergency classification are warranted.	N/A
2. Evaluate the adequacy of the current Operations staffing and request assistance from the unaffected Unit and/or call out additional personnel.	N/A
3. Make periodic site public address announcements of the status of the emergency including any radiological hazard precautions. Repeat the announcements.	LOG
4. Until relieved as the Emergency Director, update off-site agencies (State, County, BRC) about hourly (or more frequently if warranted) on the status of the emergency.	LOG
5. Maintain an Emergency Action Log.	N/A
D. FOLLOWING EMERGENCY DIRECTOR TURNOVER TO THE TSC MANAGER	
1. Maintain ENS communications with the NRC if requested.	N/A
2. Advise the Emergency Director of conditions which may change the emergency classification.	N/A
3. Periodically brief the Control Room staff of the status of the emergency and ongoing repair efforts.	N/A
4. Keep Plant Operators in the field advised of plant status and radiological conditions as applicable.	LOG
5. Review and approve press releases as applicable.	LOG

-END-

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Data Sheet 4	General Emergency Checklist		Page 1 of 6

(Name)	(Date)	(Unit)
Action		Time

NOTE

Continue with this checklist only if the TSC Manager or EOF Director has not assumed Emergency Director responsibilities and authorities.

A. INITIAL ACTIONS

1. Announce to Control Room personnel the declaration of a **General Emergency (GE)** and the continuation (or assumption) of Emergency Director responsibilities by the Shift Supervisor. _____

2. Ensure the following announcement (or similar announcement) is made over the public address system using the **Unit Override** button: _____

(Read Slowly) "ATTENTION ALL PERSONNEL; ATTENTION ALL PERSONNEL. A GENERAL EMERGENCY HAS BEEN DECLARED IN UNIT(S) ___."

(Optional: Give brief description of the event.)

(Repeat the announcement.)

3. If Assembly and Accountability has not been completed, then determine wind direction and implement Assembly and Accountability (Step 4). _____

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Shift Supervisor			
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Action	Time
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4. Sound the assembly alarm for about 15 seconds and make the following announcement:

“ATTENTION. ATTENTION. ASSEMBLY AND ACCOUNTABILITY HAS BEEN ORDERED FOR ALL PERSONNEL IN THE PROTECTED AREA. ALL EMERGENCY RESPONSE ORGANIZATION PERSONNEL REPORT TO YOUR DESIGNATED ASSEMBLY AREA, AND IMMEDIATELY CARD-IN ON ACCOUNTABILITY CARDREADERS. ALL OTHER PERSONNEL EXIT THE PROTECTED AREA VIA THE FOLLOWING ROUTE:

(Read one of the following as determined by wind direction)

[Wind Direction: 000-090] PERSONNEL SHOULD GO NORTH OF UNITS 1 AND 2 AND EXIT THE EAST GATEHOUSE, AND ASSEMBLE IN THE NUCLEAR SUPPORT CENTER. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

OR

[Wind Direction: 091-180] PERSONNEL SHOULD GO SOUTH OF UNITS 1 AND 2 AND EXIT THE EAST GATEHOUSE, AND ASSEMBLE IN THE NUCLEAR SUPPORT CENTER. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

OR

[Wind Direction: 181-270] PERSONNEL SHOULD GO SOUTH OF UNITS 1 AND 2 AND EXIT THE WEST GATEHOUSE, AND ASSEMBLE IN THE CENTRAL PROCESSING FACILITY. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

OR

[Wind Direction: 271-359] PERSONNEL SHOULD GO NORTH OF UNITS 1 AND 2 AND EXIT THE WEST GATEHOUSE, AND ASSEMBLE IN THE CENTRAL PROCESSING FACILITY. NO EATING, DRINKING, SMOKING, OR CHEWING IS ALLOWED BY EVACUEES.”

(Repeat the assembly alarm and announcement as appropriate to ensure personnel accountability is complete.)

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Action	Time
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5. Direct the Control Room Communicators or available personnel to complete the required notifications as described in 0ERP01-ZV-IN02, Notifications to Offsite Agencies.
 - a. **IF** time does not permit the calculation and evaluation of downwind doses **OR** personnel are not available to complete these calculations, **THEN** determine the Protective Action Recommendation using Addendum 1, Initial Protective Action Recommendation Flowchart. _____
 - b. **IF** a radiological release has not occurred, **THEN** use Addendum 2, Core/Containment Status Table. _____
 - c. **IF** a radiological release has occurred, **AND** Offsite Prompt Dose Assessment (OPDA) is available, **THEN** obtain the Protective Action Recommendation from the printout. _____
 - d. **IF** a **radiological** release is in progress, **AND** Offsite Prompt Dose Assessment (OPDA) is not available, **THEN** use manual dose assessment, actual field readings, or release rates to determine the Protective Action Recommendation using Addendum 3, Radiological Release Table. _____
 - e. **IF** dose assessment results indicate ≥ 1 rem TEDE or ≥ 5 rem Thyroid CDE (PAGs) are exceeded at 10 miles, and field team measurements verify projected dose, **THEN** recommend evacuation of 10 mile radius and downwind sectors greater than 10-miles in 2-mile increments until PAGs are not exceeded. _____
 - f. Determine affected downwind sectors and zones using Addendum 4, Protective Response Zones. _____
 - g. **State/County shall be contacted within 15 minutes of the declaration of the GE to make emergency notifications.** _____
 - h. **NRC notification shall be made immediately upon completion of State/County notification and not later than one hour after declaring the GE.** If more than one Communicator is available, NRC notification may be made concurrently with State/County notification. _____

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Action	Time
<p>i. Activate Emergency Response Data System (ERDS) at the time the NRC Operations Center is notified of the GE, if not previously activated.</p>	_____
<p>6. IF not already accomplished, THEN contact the Alarm Station Operator at extension 6042 to verify Emergency Notification and Response activation.</p>	_____
<p>7. Instruct Plant Operators that have not been assigned tasks to proceed to the OSC for Accountability and remain there to support OSC operations. Ensure Plant Operators that remain under Control Room direction obtain an electronic dosimeter.</p>	_____
<p>8. Contact the Energy Control and Dispatching Center (ECDC) Dispatcher and advise her/him of the nature of the emergency.</p>	_____
<p>9. Verify that the following on-shift personnel have responded to their emergency duty station:</p> <ul style="list-style-type: none"> • Onsite Communicator (Control Room) • State/County Communicator (Control Room) • ENS Communicator (Control Room) • Shift Technical Advisor (Control Room) • Acting Radiological Manager • Acting OSC Coordinator • Acting Security Manager 	_____
<p>10. If the event is Radiologically based and the TSC HVAC has not been transferred to emergency/isolation mode, then:</p>	
<p>a. Place the affected Unit's TSC HVAC System in emergency/isolation mode or verify automatic transfer has occurred using 0POP02-HE-0002, TSC HVAC System.</p>	_____
<p>b. Contact the unaffected Shift Supervisor and recommend placing the unaffected Unit's TSC HVAC in emergency/isolation mode.</p>	_____

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Action	Time
<ul style="list-style-type: none"> c. Direct the Dose Assessment Specialist in the EOF to perform dose projections. If the Dose Assessment Specialist is not available, then direct the Acting Radiological Manager to perform dose projections. 	_____
<ul style="list-style-type: none"> 11. IF site evacuation has not been completed, THEN implement 0ERP01-ZV-IN05, Site Evacuation upon completion of Assembly and Accountability. 	_____
B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED	
<ul style="list-style-type: none"> 1. Personnel Emergencies <ul style="list-style-type: none"> a. Implement 0POP04-ZO-0004, Personnel Emergencies. 	LOG
<ul style="list-style-type: none"> 2. Missing Persons <ul style="list-style-type: none"> a. If missing persons are discovered as a result of performing Assembly and Accountability, then contact the Duty Maintenance Supervisor (Acting OSC Coordinator) and provide names and last known locations of the missing persons. Direct the Duty Maintenance Supervisor (Acting OSC Coordinator) to form and dispatch Search and Rescue teams. 	_____
C. ONGOING ACTIONS	
<ul style="list-style-type: none"> 1. Continuously assess plant conditions against 0ERP01-ZV-IN01, Emergency Classification to determine if changes to the current emergency classification are warranted. 	N/A
<ul style="list-style-type: none"> 2. Evaluate the adequacy of the current Operations staffing and request assistance from the unaffected Unit and/or call out additional personnel. 	N/A
<ul style="list-style-type: none"> 3. Make periodic site public address announcements of the status of the emergency including any radiological hazard precautions. Repeat the announcements. 	LOG

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Action	Time
4. Until relieved as the Emergency Director, update off-site agencies (State, County, BRC) about hourly (or more frequently if warranted) on the status of the emergency.	LOG
5. Maintain an Emergency Action Log.	N/A
6. Keep Plant Operators advised of Plant Status and radiological conditions as applicable.	N/A
C. ONGOING ACTIONS (Cont'd)	
7. Review and approve press releases as applicable.	N/A
8. IF severe reactor core damage is identified, THEN implement procedure 0ERP01-ZV-TP03, Severe Accident Management.	N/A
D. FOLLOWING EMERGENCY DIRECTOR TURNOVER TO THE TSC MANAGER	
1. Maintain ENS communications with the NRC if requested.	N/A
2. Advise the Emergency Director of conditions which may change the classification of the emergency.	N/A
3. Periodically brief the Control Room staff of the status of the emergency and ongoing repair efforts.	N/A

(Name)	(Date)	(Unit)
Action		Time

A. TERMINATION ACTIONS

1. Announce termination of the emergency condition over the public address system. Repeat the announcement. _____
2. Complete notifications to offsite agencies per 0ERP01-ZV-IN02, Notifications to Offsite Agencies, if applicable. _____
3. For termination of an Unusual Event, notify all individuals notified on declaration of the event that the event is terminated. _____
4. Determine if Fitness for Duty post-accident screening should be initiated per OPGP09-ZA-0002, Fitness For Duty Program. _____
5. Provide a list of any supplies or forms needing replenishment to the Supervisor, Emergency Response. _____
6. Develop a list of activities and tasks which should be completed using 0ERP01-ZV-RE02, Form 1, Corrective Action Items List. _____
 - Collect the lists developed by the Acting Radiological Manager, Acting Security Manager, and the Acting OSC Coordinator. Review the lists and forward them to the Manager, Emergency Response. _____
7. Following termination from an Unusual Event, collect all logs and data sheets pertaining to the event and forward to the Supervisor, Emergency Response. _____
8. Following termination from an Alert or higher classification, forward all control room documentation to the Assistant TSC Manager. _____

-END-

SA# 31059364

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

O:\PROCEDURES\APPROVED\ERP01\02VSH03.04x Effective Date: 03/16/00 Print Time / Date: 8:44 AM 03/10/00		OERP01-ZV-SH03		Rev. 4	Page 1 of 15
Acting Security Manager					
Quality	Non Safety-Related	Usage: Referenced	Effective Date: 03/16/00		
Max Keys	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Acting Security Manager**1.0 Purpose and Scope**

- 1.1 This procedure specifies the actions to be completed by the Acting Security Manager during a declared emergency.
- 1.2 This procedure implements the necessary Security emergency response actions for an Unusual Event and for initial immediate response for higher emergency classifications until relieved by the Security Manager.
- 1.3 This procedure implements the requirements of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan specific to the Acting Security Manager.

2.0 Responsibilities

- 2.1 The Security Force Supervisor assumes the responsibilities of the Acting Security Manager until relieved. Those responsibilities include:
 - 2.1.1 Directing the implementation of on-site security emergency response activities.
 - 2.1.2 Implementing assembly and accountability efforts.
 - 2.1.3 Assisting with Protected and Owner Controlled Areas evacuation.
 - 2.1.4 Establishing special access controls.
 - 2.1.5 Providing for the expedient entry/exit of emergency vehicles.
 - 2.1.6 Directing changes to security operations based on radiological conditions.
 - 2.1.7 Determining level of compliance with current security procedures.
 - 2.1.8 Notification of ERO personnel utilizing The Emergency Notification and Response System (ENRS) as described in 0ERP01-ZV-IN03, Emergency Response Organization Notification.

3.0 Precautions and Limitations

- 3.1 0ERP01-ZV-IN04, Assembly and Accountability are required at a Site Area Emergency Classification or greater unless to do so would put site personnel at risk. Assembly and Accountability may be ordered by the Emergency Director at anytime as dictated by conditions.
- 3.2 0ERP01-ZV-IN05, Site Evacuation is required at a Site Area Emergency Classification or greater unless to do so would put site personnel at risk. Site Evacuation may be ordered by the Emergency Director at anytime as dictated by conditions.

Acting Security Manager

4.0 References

- 4.1 STPEGS Emergency Plan
- 4.2 0ERP01-ZV-IN03 Emergency Response Organization Notification
- 4.3 0ERP01-ZV-IN04 Assembly and Accountability
- 4.4 0ERP01-ZV-IN05 Site Evacuation
- 4.5 0ERP01-ZV-RE02 Documentation
- 4.6 0POP04-ZO-0007 Aircraft Crash Onsite

5.0 Procedure

- 5.1 IF an Unusual Event or higher emergency classification is declared, implement the appropriate portion of the Acting Security Manager Checklist based on the emergency classification declared. Use this checklist as a guide to help direct emergency activities.
- 5.2 IF the emergency classification changes, use the appropriate column based on the new emergency classification.
- 5.3 IF contacted by the Security Manager, provide a briefing of the current situation and the security activities underway using Data Sheet 3, Security Briefing Checklist.
- 5.4 WHEN responsibilities have been transferred to the Security Manager, THEN return to the implementation of Security procedures and discontinue the use of this procedure.
- 5.5 During an Alert of higher classification, ensure an ERO Qualified EMT is onsite.

6.0 Support Documents

- 6.1 Data Sheet 1 Acting Security Manager Checklist
- 6.2 Data Sheet 2 Termination Checklist
- 6.3 Data Sheet 3 Security Briefing Checklist

_____ (Name) _____ (Date) _____ (Unit)

Action **Time**

A. INITIAL ACTIONS

Unusual Event	Alert	Site Area	Gen Emer.
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1. Activate the Emergency Response Organization as required by and in accordance with 0ERP01-ZV-IN03, Emergency Response Organization Notification.

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2. Initiate an Emergency Action Log of significant activities. Document telephone calls made/received and any data or information received from or provided to other persons.

LOG

3. Verify the Emergency Notification and Response System (ENRS) was activated in accordance with 0ERP01-ZV-IN03, Emergency Response Organization Notification.

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4. Contact the Shift Supervisor (Emergency Director) and inform him of your location. Obtain a briefing of the current situation. Determine if any special security actions should be implemented.

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5. Contact Acting Radiological Manager to determine if any radiological conditions exist which may impact security operations. Advise Security Force personnel of the necessary precautions.

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6. Contact the Acting OSC Coordinator and determine if any special support from security is needed for planned inplant emergency team activities.

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Action

Time

A. INITIAL ACTIONS (cont'd)

Unusual Event	Alert	Site Area	Gen Emer.
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7. Implement the following actions:

a. Broadcast over the security frequency what classification has been declared, determine locations of, and complete a roll call of the Security Force.

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b. Ensure posting of the appropriate Emergency Classification signs at the East and West Gatehouses.

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c. Ensure an Emergency Response Organization qualified Emergency Medical Technician is responding to the Operations Support Center when activated.

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d. Report any unusual activities or alarms that may be relevant to the current emergency condition to the Shift Supervisor (Emergency Director).

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e. Dispatch a Security Officer to the OSC with vital area keys and 10 portable radios located at the MOF. This officer may be released upon arrival of the OSC Security Coordinator.

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f. Establish access control to the Protected Area. Allow entry of ERO personnel and NRC augment personnel responding to the Control Room, TSC, and OSC. Emergency Director approval is required for all other entries.

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Action

Time

A. INITIAL ACTIONS (cont'd)

Unusual Event	Alert	Site Area	Gen Emer.
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g. Establish access control to the Owner Controlled Area by positioning Security personnel at the access roads to FM 521 and allowing entrance only to personnel with STP badges, Federal badges, State/County Agency badges, or emergency response vehicles. Shift Supervisor (Emergency Director) approval is required for all other entries.

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h. Dispatch a Security Officer to the EOF (when activated) to perform access control functions.

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i. Activate additional personnel as required.

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j. Initiate assembly and accountability as directed by Shift Supervisor (Emergency Director) or at a Site Area Emergency of higher classification.

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Action	Time
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B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED

Unusual Event	Alert	Site Area	Gen Emer.
---------------	-------	-----------	-----------

1. Personnel Emergency

a. When informed by the Shift Supervisor (Emergency Director) of the arrival of an offsite ambulance, and the location where the ambulance would meet the injured person, THEN:

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1) Arrange for expedient entry/exit of the ambulance.

LOG

2) Determine where the ambulance should be directed and notify the Shift Supervisor (Emergency Director) when the ambulance arrives at and leaves the site.

LOG

2. Assembly/Accountability

a. Coordinate with the Shift Supervisor (Emergency Director) and complete the Security Manager's responsibilities in 0ERP01-ZV-IN04, Assembly and Accountability.

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b. Direct the Secondary Alarm Station (SAS) Operator to activate the accountability software.

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c. Direct the Unit Lieutenants to implement assembly and accountability.

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Action	Time
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B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED (cont'd)

Unusual Event	Alert	Site Area	Gen Emer.
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3. Search and Rescue

a. Coordinate with the Acting OSC Coordinator to assist in search and rescue efforts.

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b. Determine the names, badge numbers, and last known location of the missing persons identified.

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c. Provide the Acting OSC Coordinator with any Security information that could impact Search and Rescue Team efforts.

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4. Site Evacuation

a. Coordinate with the Shift Supervisor (Emergency Director) and complete the Security Manager's responsibilities in 0ERP01-ZV-IN05, Site Evacuation.

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5. Security Threat

a. Direct the Security Force to implement necessary response actions to the security threat.

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b. Brief the Shift Supervisor (Emergency Director) of any special security actions underway in response to the emergency condition.

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Action

Time

B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED (cont'd)

		Unusual Event	Alert	Site Area	Gen Emer.
c.	Coordinate with the Shift Supervisor (Emergency Director) to identify vital equipment that could be at risk due to the Security threat and take the necessary Security precautions.				
d.	Advise the Shift Supervisor (Emergency Director) of any protective measures that should be taken by the Control Room.				
e.	<u>IF</u> the events underway are radiologically based, <u>THEN</u> coordinate with the Acting Radiological Manager and determine any special radiological precautions for Security Force Personnel. Broadcast over the Security frequency any radiological precautions which should be taken.				
f.	Brief the Acting OSC Coordinator of the security threat and recommend precautionary actions which should be taken by the emergency teams.				
g.	Contact the Matagorda County Sheriff's Office and provide a briefing. Maintain periodic contact.				

Action

Time

B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED (cont'd)

Unusual Event	Alert	Site Area	Gen Emer.
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6. Radiological Release Occurring or Imminent

a. Review with the Acting Radiological Manager the impact of the radiological release on Security operations.

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b. IF the events underway are radiologically based, THEN coordinate with the Acting Radiological Manager and determine any special radiological precautions for Security Force Personnel. Broadcast over the Security frequency any radiological precautions which should be taken.

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c. IF necessary, THEN reduce the number of Security Force personnel on patrol, in the Protected Area, and at Security facilities.

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d. IF necessary, THEN relocate Protected Area Access Control to other locations.

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e. Verify that ALNOR dosimeters are being provided to all Security Officers and to the following locations:

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West Gatehouse (SAS)

--	--	--	--

Unit 1 Power Block 60' Elev. (CAS)

--	--	--	--

f. Direct the Security Officers to inform you of any alarms on the ALNOR dosimeters.

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Action

Time

B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED (cont'd)

Unusual Event	Alert	Site Area	Gen Emer.
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g. Inform the Acting Radiological Manager of any alarms on ALNOR dosimeters and request further instructions.

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1) Confer with the Acting Radiological Manager to determine which of the following facilities can continue to be occupied or used to relocate Security personnel and any support required.

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a) CAS (maintain operational by rotating personnel)

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b) SAS

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c) East Gatehouse

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d) West Gatehouse

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h. Request notification when any offsite agency personnel arrive onsite and recommend any precautionary radiological actions to be taken at that time.

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Action

Time

B. SPECIAL ACTIONS TO BE IMPLEMENTED AS NEEDED (cont'd)

Unusual Event	Alert	Site Area	Gen Emer.
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NOTE
Consumption of KI is voluntary.

7. Issuance of Potassium Iodide (KI)

- a. Contact the Acting OSC Coordinator and verify distribution of KI to Security Force Personnel. Assist with distribution of KI to Security Force Personnel.

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8. Toxic Gas/Chemical Release From Nearby Chemical Facilities

- a. Warn personnel outside the Protected Area to seek shelter in buildings and turn off any ventilation system (or put in recirculation mode).

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9. Aircraft Crash in the Owner Controlled Area

- a. Coordinate response actions for the airplane crash (utilize Security Supervisor, if available, for areas outside Protected Area).
- b. Dispatch security personnel to the scene to secure and preserve the crash scene as much as possible without hindering rescue efforts or plant emergency response efforts.
- c. Obtain information to complete OPOP04-ZO-0007, Aircraft Crash Information Form and provide to the Shift Supervisor (Emergency Director).

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Action

Time

C. ONGOING ACTIONS

1. Periodically brief the Shift Supervisor (Emergency Director) of any special Security activities underway onsite.
2. IF the events underway are radiologically based, THEN periodically confer with the Acting Radiological Manager concerning radiological conditions which could impact security operations and personnel.
3. Periodically brief the Security Force of current activities.
4. When the Security Manager arrives, provide a briefing of the current situation and security activities underway using Data Sheet 3, Security Briefing Checklist.
5. When responsibilities have been transferred to the Security Manager, then return to the implementation of security procedures and discontinue the use of this procedure.

	Unusual Event	Alert	Site Area	Gen Emer.

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Acting Security Manager			
Data Sheet 2	Termination Checklist		Page 1 of 1

(Name)	(Date)	(Unit)
Action		Time

A. TERMINATION ACTIONS

1. Broadcast over the Security frequency that the emergency classification has been terminated. _____
2. Remove the emergency classification signs at the East and West Gatehouses. _____
3. Direct a Security Officer to collect the 10 portable radios and vital area keys delivered to the OSC. _____
4. Develop a list of activities and tasks which should be completed using 0ERP01-ZV-RE02, Form 1, Corrective Action Items Lists, and provide a copy of the list to the Shift Supervisor (Emergency Director). _____
5. Provide a list of any supplies or forms needing replenishment to the Shift Supervisor (Emergency Director). N/A
6. Organize your logs and documents generated in chronological order and deliver to the Shift Supervisor (Emergency Director). N/A
7. Assist the Shift Supervisor (Emergency Director) in completing the Emergency Response Summary Report in accordance with 0ERP01-ZV-RE02, Documentation. N/A

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Acting Security Manager			
Data Sheet 3	Security Briefing Checklist		Page 1 of 1

ACTING SECURITY MANAGER: _____
(Name)
(Date/Time)
(Unit)

TSC SECURITY MANAGER: _____
(Name)
(Date/Time)

1. Security activities in response to the emergency:

2. Status of Electronic Security System:

3. Radiological events impacting Security operations:

4. Current or expected deviation from Security procedures:

5. Current staffing and needs for additional personnel:

ST# 31059378

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

D0527

O:\PROCEDURES\APPROVED\ERP01\0ZVEF25.04x Effective Date: 03/16/00 Print Time / Date: 8:50 AM 03/10/00		0ERP01-ZV-EF25		Rev. 4	Page 1 of 23
Site Public Affairs Coordinator					
Quality	Non Safety-Related	Usage: N/A	Effective Date: 03/16/00		
Max Keyes	N/A	N/A	Emergency Response Division		
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION		

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Site Public Affairs Coordinator**1.0 Purpose and Scope**

- 1.1 This procedure specifies the actions to be completed by the Site Public Affairs Coordinator or STP Communications and Public Affairs Group in the Emergency Operations Facility during a declared emergency.
- 1.2 This procedure implements the requirements of the South Texas Project Electric Generating Station (STPEGS) Emergency Plan specific to the Site Public Affairs Coordinator.

2.0 Responsibilities

- 2.1 The Site Public Affairs Coordinator or STP Communications and Public Affairs Group is responsible for:
 - 2.1.1 Gathering pertinent information relating to the emergency from the appropriate emergency response facility (Control Room, Technical Support Center, or Emergency Operations Facility).
 - 2.1.2 Developing understandable, complete, and accurate press releases, and/or press bullets describing the emergency situation.
 - 2.1.3 Obtaining approval of press releases and/or news bullets from the Emergency Director before the information is released.
 - 2.1.3.1 The Emergency Director may delegate approval authority for press releases and/or news bullets.
 - 2.1.4 Disseminating the approved press releases and/or news bullets to the public in a timely manner as described in the checklist.
 - 2.1.5 Delegating, as necessary, public affairs activities within the Emergency Operations Facility to either the Site Public Affairs Specialist or to the Site Public Affairs Administrative Assistant.

3.0 Precautions and Limitations

- 3.1 Ensure offsite notifications are complete prior to issuing press release.
- 3.2 Prior to activation of the Joint Information Center:
 - 3.2.1 The Site Public Affairs Coordinator is responsible for preparing, obtaining authorization, and disseminating press releases from the Emergency Operations Facility.

Site Public Affairs Coordinator

3.3 Upon activation of the Joint Information Center:

3.3.1 The Site Public Affairs Coordinator is responsible for preparing, obtaining authorization, and ensuring news bullets are sent to the Joint Information Center from the Emergency Operations Facility.

4.0 Procedure

4.1 When responding to the Emergency Operations Facility at an Alert or higher Emergency Classification, implement Data Sheet 1, Site Public Affairs Coordinator Checklist, Initial Activities.

4.1.1 Insert the time an activity is initiated, for reoccurring items document using the Emergency Action Log.

4.1.2 Telephone numbers are located in the Emergency Communications Directory.

4.2 Use these Addendums and Checklists to help direct emergency activities.

5.0 References

5.1 STPEGS Emergency Plan

5.2 OPGP05-ZV-0004, Emergency Plan Implementing Procedure Users Guide

5.3 0ERP01-ZV-RE01, Recovery Operations

5.4 0ERP01-ZV-RE02, Documentation

5.5 0ERP01-ZV-OF02, Joint Information Center Activation, Operation, and Deactivation

6.0 Support Documents

6.1 Addendum 1 – Pre-Written Press Releases

6.2 Addendum 2 – External Distribution List For Press Releases Prior to Activation of Joint Information Center

6.3 Addendum 3 – Emergency Operations Facility Distribution List for Press Releases

6.4 Addendum 4 – Categories For Bullet Format After Activation of Joint Information Center

6.5 Data Sheet 1 – Site Public Affairs Coordinator Checklist

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 1 of 12

For each of the emergency classifications, there are three pre-written press releases, numbered I through III, progressing from least to most specific information about the current event.

To issue a pre-written press release use Pages 2 – 12 as examples of format requirements and perform the following:

- Remove the statement PRE-WRITTEN PRESS RELEASE - #.
- Fill in blanks (i.e., date, time etc.).
- Remove note to Editors.
- Submit for approval.

The pre-written press releases follow in order:

- A. Alert I
- B. Alert II
- C. Alert III

- D. Site Area Emergency I
- E. Site Area Emergency II
- F. Site Area Emergency III

- G. General Emergency I
- H. General Emergency II
- I. General Emergency III

- J. Recovery I

- K. Termination I

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 2 of 12

PRE-WRITTEN PRESS RELEASE - A

ALERT I

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. - - The South Texas Project Electric Generating Station declared an "Alert" today at _____ a.m./p.m. The nuclear plant is located 12 miles southwest of Bay City in Matagorda County. County, State, and Federal authorities have been notified.

Residents in the 10-mile Emergency Planning Zone around the plant are asked to tune their radios to the local Emergency Alert System, Station KMKS-FM (102.5) or KIOX-FM (96.9) or KXGJ-FM (101.7). Additional information will be released as it becomes available.

Emergency conditions at a nuclear power plant are classified into one of four classifications. In order of least serious to most serious, these are: Unusual Event, Alert, Site Area Emergency, and General Emergency. The Alert Classification indicates there is, no hazard to the public, but a decreased level of safety may exist at the plant.

Currently the station is activating their emergency response organization and taking all possible actions to mitigate the situation.

Approved by: _____

Time: _____

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 3 of 12

PRE-WRITTEN PRESS RELEASE - B

ALERT II

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. -- At _____ a.m./p.m. today, officials at the South Texas Project Electric Generating Station declared an "Alert" when _____

_____ (description of event and designation of Unit)

There were/was/is/are _____

_____ (description of injury or hazards)

to plant personnel and/but no immediate hazard to persons outside the plant.

There was _____ damage to _____.
 (no, minor, some) (describe affected area)

Activation of the onsite Technical Support Center for engineering support, the Operations Support Center for craft support, and the Emergency Operations Facility for management support have been initiated and company personnel are staffing support positions to monitor and evaluate the plant's condition.

Additional information will be released as it becomes available.

Approved by: _____

Time: _____

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 4 of 12

PRE-WRITTEN PRESS RELEASE - C

ALERT III

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. -- The "Alert" which was declared on _____, at _____ a.m./p.m. at the South Texas Project Electric Generating Station remains in effect as of _____ a.m./p.m. today.

Conditions at the nuclear plant near Bay City (have not changed/have improved/have deteriorated) due to _____

Plant officials report that _____

 (describe efforts to resolve the situation)

The "Alert" was declared earlier because _____.
 Employees at the plant who are not currently needed are _____.
 There is no current threat to employees or to the public.
 Additional information will be released as it becomes available.

Approved by: _____

Time: _____

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 5 of 12

PRE-WRITTEN PRESS RELEASE - D

SITE AREA EMERGENCY I

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____

(Date) _____

BAY CITY, TX. – The South Texas Project Electric Generating Station declared a "Site Area Emergency" today at _____ a.m./p.m. The nuclear plant is located 12 miles southwest of Bay City in Matagorda County. There is no immediate danger to the public. Company officials have notified the appropriate local, federal and state authorities.

Should conditions warrant, residents living in the 10-mile Emergency Planning Zone around the plant will be advised of the emergency by a prompt notification system which includes warning sirens, alert radios, and an electronic telephone autodialer. If the warning sirens, alert radios, or autodialer are activated, residents in the 10-mile zone should tune their radios to KMKS-FM (102.5) or KIOX-FM (96.9) or KXGJ-FM (101.7) and await instructions.

Emergency conditions at a nuclear power plant are classified into one of four classifications. In order from least serious to most serious, these are: Unusual Event, Alert, Site Area Emergency, and General Emergency. The Site Area Emergency Classification indicates actual or likely failures of plant safety functions, requiring protection of plant personnel.

Employees at the plant who are not currently needed are _____.

Additional information will be released as it becomes available.

Approved by: _____

Time: _____

(Optional - To be added only if the Joint Information Center in Bay City has been established):

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 6 of 12

PRE-WRITTEN PRESS RELEASE - E

SITE AREA EMERGENCY II

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. -- At _____ a.m./p.m. today, company officials declared a "Site Area Emergency" at the South Texas Project Electric Generating Station when _____

(description of event)

(describe potential hazard to residents in EPZ)

(describe injury or hazard to site personnel)

(describe any damage to plant)

Residents within 10 miles of the plant are advised to tune their radios to local radio stations KMKS-FM (102.5), KIOX-FM (96.9) or KXGJ-FM (101.7) for instructions.

The plant's full emergency response plan has been activated, and Company officials have notified the appropriate local, federal and state authorities.

Additional information will be released as it becomes available.

Approved by: _____ Time: _____

(Optional - To be added only if the Joint Information Center in Bay City has been established):

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 7 of 12

PRE-WRITTEN PRESS RELEASE - F

SITE AREA EMERGENCY III

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____

(Date) _____

BAY CITY, TX. - The "Site Area Emergency" which was declared at _____ a.m./p.m. on _____ at the South Texas Project Electric Generating Station near Bay City, Texas, continues as of _____ a.m./p.m.

There is (no/a minor/a moderate) radiological release. (Conditional, if a release is in progress): This radiological release affects only the plant site. Residents within 10 miles of the plant are urged to keep their radios tuned to KMKS-FM (102.5) or KIOX-FM (96.9), or KXGJ-FM (101.7) for current information and any changes in conditions that might warrant instructions for them.

Maintenance teams have been dispatched to attempt to (stop the release, repair the _____, etc.).

Radiation monitoring teams have been deployed and are currently monitoring the status of the release.

Additional information will be released as it becomes available.

Approved by: _____

Time: _____

(Optional - To be added only if the Joint Information Center in Bay City has been established):

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 8 of 12

PRE-WRITTEN PRESS RELEASE - G

GENERAL EMERGENCY I

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____

(Date) _____

BAY CITY, TX. -- A "General Emergency" was declared at the South Texas Project Electric Generating Station at _____ a.m./p.m. The nuclear plant is located 12 miles southwest of Bay City in Matagorda County, Texas. Appropriate local, federal, and state officials have been notified.

A General Emergency may mean a release of radioactivity is in progress or imminent. It is the most serious of the four classifications of emergencies at nuclear power plants.

Local residents living in the 10-mile Emergency Planning Zone around the plant are being notified of the General Emergency through a prompt notification system which includes warning sirens in the area, alert radios which were distributed to area residents earlier, and through an electronic telephone autodialer.

Matagorda County officials will/are issue/issuing recommended actions for people close to the plant.

Matagorda County residents and visitors to the area are asked to tune their radios to one of the local Emergency Alert Stations, KMKS-FM (102.5) or KIOX-FM (96.9) or KXGJ-FM (101.7) for more information and specific instructions.

Additional information will be released as it becomes available.

Approved by: _____

Time: _____

(Optional - To be used only if the Joint Information Center established):

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 9 of 12

PRE-WRITTEN PRESS RELEASE - H

GENERAL EMERGENCY II

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____

(Date) _____

BAY CITY, TX. -- The "General Emergency" which was declared at _____ a.m./p.m. on _____ at the South Texas Project Electric Generating Station continues as of _____ a.m./p.m. The nuclear plant is located 12 miles southwest of Bay City in Matagorda County and approximately 90 miles southwest of Houston, Texas.

A radiological release (is, is not) in progress at the plant. Radiation monitoring teams are currently in the area around the plant monitoring the status.

(if a release is in progress, describe cause of release and characterize seriousness)

Local officials will/are recommend(ing) actions residents and visitors should take on local radio stations. Residents and visitors within 10 miles of the plant should tune their radios to local radio stations KMKS-FM (102.5) or KIOX-FM (96.9) or KXGJ-FM (101.7) and should consult the Emergency Information section in the front of their STP Emergency Preparedness Calendar for additional information.

Additional information will be released as it becomes available.

Approved by: _____

Time: _____

(Optional - To be used only if the Joint Information Center established):

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 10 of 12

PRE-WRITTEN PRESS RELEASE - I

GENERAL EMERGENCY III

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. -- The "General Emergency" still exists as of _____ a.m./p.m. at the South Texas Project Electric Generating Station according to company officials at the nuclear plant near Bay City.

The General Emergency was declared at _____ a.m./p.m. when _____

(cause of the General Emergency classification)

A radiological release (is, is not) occurring.

(Conditional, if a release is occurring): The release which began at _____ a.m./p.m., is (continuing, decreasing, increasing) at this time. The path of the plume has been determined to be (give direction from the plant):

Matagorda County officials have recommended _____

(describe current county protective action recommendations)

Efforts to resolve this emergency situation are continuing and include

(actions being taken by plant personnel)

Approved by: _____ Time: _____

(Optional - To be used only if the Joint Information Center established):

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 11 of 12

PRE-WRITTEN PRESS RELEASE - J

RECOVERY I

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. -- At _____ a.m./p.m. on _____, South Texas Project Electric Generating Station officials announced that the emergency situation which had been declared earlier has now entered the "Recovery" stage. This means that the plant is in a safe, stable condition and plant emergency activities will be phased out.

Local, federal, and state officials have concurred with the decision to enter the "Recovery" phase. There is no longer a potential for an uncontrolled release of radioactivity to the environment.

Additional information and instructions for area residents will be announced as they become available.

Approved by: _____ Time: _____

Note to Editors: A Joint Information Center has been established at the Best Western - Matagorda Hotel and Conference Center in Bay City on State Highway 35 West. The most complete and accurate information will be available there. Do not come to the plant site! You will be referred to the Joint Information Center in Bay City. Media inquiries can be made to (979) 245-7712. Personnel will be available at that number around the clock for the duration of the emergency.

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Site Public Affairs Coordinator			
Addendum 1	Pre-Written Press Releases		Page 12 of 12

PRE-WRITTEN PRESS RELEASE - K

TERMINATION OF EMERGENCY I

PRESS RELEASE FROM THE SOUTH TEXAS PROJECT

Press Release Number _____ (Date) _____

BAY CITY, TX. - Company officials announced at _____ a.m./p.m. today that the emergency conditions at the South Texas Project Electric Generating Station no longer exist and that emergency-related activities are being discontinued.

Local, federal and state officials have been notified that the emergency activities at the nuclear plant near Bay City, Texas, have been terminated.

Any significant additional or follow-up information will be released as available.

Approved by: _____

Time: _____

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Site Public Affairs Coordinator			
Addendum 2	External Distribution List for Press Releases Prior To Activation of Joint Information Center		Page 1 of 1

NOTE: Fax/Post news releases to these locations until the Joint Information Center is activated.

Matagorda County Emergency Operations Center

Division of Emergency Management

Bureau of Radiation Control

Nuclear Regulatory Commission

Federal Emergency Management Agency

Department of Public Safety - Pierce

Department of Public Safety - Houston

Reliant Energy - HLP

Central Power & Light

City of San Antonio

City of Austin

Southwest PR Newswire

Associated Press

NOTE

Telephone/Fax numbers can be found in the Emergency Communication Directory.

- END -

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Site Public Affairs Coordinator			
Addendum 3	Emergency Operations Facility Distribution List for Press Releases		Page 1 of 1

NOTE: Distribute press releases and news bullets to each of the following positions within the Emergency Operations Facility immediately following their release. Return original to Site Public Affairs Administrative Assistant.

Emergency Director

Nuclear Regulatory Commission (NRC)

Owners' Liaison

Licensing Director

Support Organization Director

Site Public Affairs Coordinator

Federal Response Agency Liaison

Bureau of Radiation Control (BRC)

Division of Emergency Management (DEM)

Federal Emergency Management Agency (FEMA)

- END -

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Site Public Affairs Coordinator			
Addendum 4	Categories for Bullet Format After Activation of Joint Information Center		Page 1 of 1

NOTE: After the activation of the Joint Information Center, the information flow from the Emergency Operations Facility to the Joint Information Center is in the format of approved news bullets. As a minimum, use the following categories for each set of news bullets.

PLANT STATUS

UNAFFECTED UNIT

RADIOLOGICAL CONDITIONS

EMPLOYEE/PUBLIC INJURIES AND/OR HAZARDS

- END -

(Name)	(Date)	(Unit)
--------	--------	--------

Action	Time
---------------	-------------

1.0 INITIAL ACTIVITIES

- 1.1 Report to the Emergency Operations Facility and sign in on the Emergency Operations Facility Staffing Board. _____
- 1.2 Inform the Deputy Emergency Operations Facility Director of your arrival. _____
- 1.3 Initiate an Emergency Action Log of significant activities. In particular, document telephone calls made and received and any data or information received from or provided to other persons. _____
- 1.4 Look in the fax machine for a copy of 0ERP01-ZV-IN02, Data Sheet 1, Offsite Agency Notification Form. _____
- 1.5 Obtain necessary information to complete or assist the Joint Information Center in the completion of the pre-written press release from Addendum 1, Pre-Written Press Releases. _____
- 1.6 Determine if any press releases have been issued. Obtain copies and inform Emergency Director as necessary. _____
- 1.7 Upon activation, ensure Joint Information Center has received any written press releases sent from the Station. _____
- 1.8 If approval authority has not been delegated by the Emergency Director, then upon completion of the pre-written press release, obtain written or oral approval for release from the Emergency Director. _____

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Site Public Affairs Coordinator			
Data Sheet 1	Site Public Affairs Coordinator Checklist		Page 2 of 5

Action	Time
1.9 Prior to Joint Information Center activation, ensure approved press releases are transmitted as outlined in Addendum 2, External Distribution List for Press Releases Prior to Activation of Joint Information Center.	_____
1.10 Direct Public Affairs Assistant to perform the following:	
6.5.1 Ensure operability of the public affairs personal computer and to verify pre-scripted press releases are the correct revision.	_____
6.5.2 Until the Joint Information Center is activated, fax approved press releases using Addendum 2, External Distribution List for Press Releases Prior to Activation of the Joint Information Center.	_____
6.5.3 Distribute approved press releases and news bullets in the Emergency Operations Facility using Addendum 3, Emergency Operations Facility Distribution List for Press Releases.	_____
6.5.4 Retain a copy of approved Press Releases and News Bullets.	_____
2.0 ONGOING ACTIVITIES	
2.1 Continue to obtain updated information from the Control Room staff until the Technical Support Center is activated and turnover is complete. At that time, obtain the necessary information from the Administrative Manager in the Technical Support Center.	_____
2.2 For static conditions, update press releases hourly for issuance until Joint Information Center is activated.	_____
2.3 For dynamic conditions, issue press releases as needed, until Joint Information Center is activated.	_____

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Site Public Affairs Coordinator			
Data Sheet 1	Site Public Affairs Coordinator Checklist		Page 3 of 5

Action	Time
2.4 After the Joint Information Center is activated, maintain continuous telephone contact and fax and confirm receipt of approved news bullets to the Joint Information Center approximately every thirty minutes using the format and categories described in Addendum 4, Categories for Bullet Format After Activation of Joint Information Center.	_____
2.5 Maintain an open telephone line with the Joint Information Center to respond to their inquiries promptly and accurately and to help them prepare for periodic press briefings.	_____
2.6 Participate in the periodic Emergency Operations Facility Director's briefing.	_____
2.7 During periods of slow activity or steady state condition, prepare a narrative summary of the events that have occurred to date for approval and release	_____
2.8 Provide the Emergency Operations Facility Director or Deputy Emergency Operations Facility Directory copies of all press releases that have been issued and report on any significant media events or inquiries.	_____
3.0 RECOVERY ACTIVITIES	
3.1 Coordinate writing recovery press releases with the Joint Information Center by obtaining the necessary information to complete the pre-written press release for the Recovery classification (Press Release J - Recovery in Addendum 1) from the Deputy Emergency Operations Facility Director	_____
3.2 If approval authority has not been delegated by the Emergency Director, then upon completion of the pre-written press release, obtain written approval from the Emergency Director.	_____
3.3 Fax the approved press release to the Joint Information Center for distribution, if the Joint Information Center is still activated. If the Joint Information Center is not activated, ensure the Emergency Operations Facility Administrative Staff faxes and distributes press releases as per Addendum 2.	_____

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Site Public Affairs Coordinator			
Data Sheet 1	Site Public Affairs Coordinator Checklist		Page 4 of 5

Action	Time
3.4 Based on the anticipated level of activity during Recovery, determine through discussion with the Joint Information Center Director the optimum frequency for continuing press releases.	_____
3.5 Continues to generate news bullets for release to the Joint Information Center.	_____
3.6 Prepare a narrative summary of the events that have occurred.	_____
3.7 Obtain approval on all news bullets and narrative summary before release.	_____
3.8 Fax approved news bullets to the Joint Information Center for composition and distribution as press releases for as long as the Joint Information Center is activated or until Termination of the event.	_____
3.9 If the Joint Information Center is deactivated prior to Termination of the event, begin again to develop and fax approved press releases at a frequency appropriate to the level of public interest.	_____
3.10 Continue to distribute the approved news bullets or press releases to the internal distribution list in Addendum 3, Emergency Operations Facility Distribution List for Press Releases, until the event is terminated.	_____
3.11 If the Joint Information Center is deactivated prior to Termination of the event, begin again to develop and fax approved press releases at a frequency appropriate to the level of public interest.	_____

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Site Public Affairs Coordinator			
Data Sheet 1	Site Public Affairs Coordinator Checklist		Page 5 of 5

Action	Time
---------------	-------------

4.0 TERMINATION ACTIVITIES

- 4.1 Coordinate writing termination press release with Joint Information Center if it is still activated by obtaining the necessary information from the Deputy Emergency Operations Facility Director to complete the pre-written press release for termination of the event. _____
- 4.2 Prepare a narrative summary of the events that have occurred. _____
- 4.3 If approval authority has not been delegated by the Emergency Director then obtain approval of the press release from the Emergency Director. _____
- 4.4 If the Joint Information Center is still activated, fax the approved press release to the Joint Information Center for distribution. _____
- 4.5 If the Joint Information Center is no longer activated, fax the approved press release to the locations identified in Addendum 3, Emergency Operations Facility Distribution List for Press Releases. _____
- 4.6 Collect and organize in chronological order all press releases, news bullets, and summaries. _____
- 4.7 Turn over all documents generated during the emergency to the Deputy Emergency Operations Facility Director. _____

- END -

ST# 31059411

O:\PROCEDURES\APPROVED\ERP01\Ozvin02.10x Effective Date: 03/16/00 Print Time / Date: 8:57 AM 03/10/00		OERP01-ZV-IN02	Rev. 10	Page 1 of 29
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Quality	Non Safety-Related	Usage: N/A	Effective Date: 03/16/00	
Max Keyes	N/A	N/A	Emergency Response Division	
PREPARER	TECHNICAL	USER	COGNIZANT ORGANIZATION	

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Notifications To Offsite Agencies**1.0 Purpose and Scope**

- 1.1 This procedure specifies the actions to be taken for notifying offsite agencies and the Nuclear Regulatory Commission of a declared emergency at the South Texas Project Electric Generating Station (STPEGS).

2.0 Definitions

- 2.1 Emergency Notification System (ENS) - FTS2000 Telephone System, used for initial notification of an emergency to the NRC.

3.0 Precautions and Limitations**NOTE**

Addendum 3, "Emergency Communications" provides information on the following communications links:

- NRC Emergency Notification System (ENS)
- State and County Ringdown Line
- Health Physics Network (HPN)
- HL&P Dispatcher Ringdown Line
- 800 Mhz Radio

- 3.1 Notifications to offsite agencies shall meet the following time limits and criteria:

- 3.1.1 The State of Texas and Matagorda County shall be contacted within 15 minutes of the Emergency Director declaring:

- Initial classification of the emergency;
- Change in the classification; or
- Change in Protective Action Recommendations (PARs) for the public, including changes in wind direction resulting in PARs affecting new downwind sectors.

Once contacted, the information contained in Items 1-8 and 12 of Data Sheet 1 "Offsite Agency Notification Message Form" shall be transmitted. All information shall be provided after message Number 1.

Notifications To Offsite Agencies

- 3.1.2 Notify the NRC Operations Center immediately following notifications to the State/County and no later than one hour after the emergency has been declared. Use Data Sheet 4, "NRC Event Notification Worksheet," as a record of conversation. If more than one communicator is available, NRC notification may be made concurrently with State/County notification.
- 3.1.3 The Emergency Response Data System (ERDS) shall be activated at the time the NRC Operations Center is notified of the Alert, Site Area Emergency or General Emergency (see Addendum 4, "Instructions for Operating Emergency Response Data System").
- 3.1.4 Issue updates to the State and County approximately hourly unless a State/County consensus is obtained for a reduced frequency (e.g. a static condition).
- 3.1.5 Immediately update the NRC, via the open line of communications, per Section 5.2.1.4 of this procedure.
- 3.1.6 After Offsite Agency Notification Message Number 1, all subsequent notifications shall be completed in entirety.
- 3.2 If the Emergency Classification or PARs are changed during the 15 minute notification period, then continue to complete notifications to the State/County prior to initiating the new notification, and inform the agencies that a change in classification or change in PAR will be forthcoming. (LCTS 9100453-936)
- 3.2.1 An exception to this situation is when Termination is declared before the offsite agencies are notified of the emergency condition. For this situation, issue both notification forms concurrently.
- 3.3 Notifications to offsite agencies shall follow the guidelines in Addendum 3, "Emergency Communications," when communication system deficiencies exist.
- 3.4 Any revisions to this procedure that directly or indirectly affect the format or usage of Data Sheet 1 shall be reviewed by the Texas Department of Health, Bureau of Radiation Control (BRC) prior to becoming effective.

Notifications To Offsite Agencies

4.0 Responsibilities

NOTE

Refer to Addendum 1, "Responsibilities for Notification."

- 4.1 The individual with Emergency Director authority is responsible for approving all notifications to offsite agencies and ensuring notifications are made within the required time frames.
- 4.2 The Shift Supervisor is responsible for implementation of this procedure while functioning as the Emergency Director. Actual completion of forms may be delegated to the communicators.
- 4.3 The Control Room ENS Communicator is responsible for maintaining the open line with the NRC, unless otherwise directed by the NRC. This responsibility shall not transfer to the Technical Support Center (TSC) or Emergency Operations Facility (EOF).
- 4.4 The Control Room ENS Communicator is responsible for activating the ERDS at the time the NRC Operations Center is notified of the Alert, Site Area Emergency, or General Emergency (see Addendum 4).
- 4.5 The Control Room State/County Communicator is responsible for notifications to the State/County and for maintaining Data Sheet 3, "Offsite Agencies Log," while the Shift Supervisor has Emergency Director authority.
- 4.6 The Chemical/Radiochemical Manager in the TSC is responsible for gathering information and preparing Data Sheet 1 and implementation of this procedure while the TSC Manager has Emergency Director authority. The Chemical/Radiochemical Manager is responsible for ensuring the correctness and timeliness of Data Sheet 1.
- 4.7 The TSC Communicator in the TSC is responsible for completing notifications to the State/County and NRC when provided completed notification forms from the Chemical/Radiochemical Manager, and maintaining Data Sheet 3. The TSC Communicator shall maintain a file containing copies of all Data Sheet 1 which originate from either the Control Room or Technical Support Center.
- 4.8 The Engineering Assistant in the EOF is responsible for implementation of this procedure while the EOF Director has Emergency Director authority. The Engineering Assistant is responsible for gathering information and preparing Data Sheet 1, and has primary responsibility for the correctness and timeliness of Data Sheet 1. The Engineering Assistant should also, if time permits, routinely complete Data Sheet 2.

Notifications To Offsite Agencies

- 4.9 The Offsite Agency Communicator in the EOF is responsible for completing notifications to the State/County, when directed by the Emergency Director, and for maintaining Data Sheet 3. The Offsite Agency Communicator shall maintain a file containing a copy of all Data Sheet 1 from the start of the event to recovery.
- 4.10 The Licensing Director in the EOF is responsible for completing notifications to the NRC over the ENS once the EOF is activated.

5.0 Procedure

CAUTION

The State and County are required to be contacted within 15 minutes of the Emergency Director declaring any of the following:

- Initial classification of the emergency, (Item 4)
- Change in the classification, (Item 4) or
- Change in Protective Action Recommendations (PARs) for the public, including changes in wind direction resulting in PARs affecting new downwind sectors, (Item 6).

5.1 Offsite Agency Notification (State/County)

NOTE

Print the information on Data Sheet 1 (black ink should be used).

ONLY BLOCKS 1-8 AND 12 ARE REQUIRED TO BE COMPLETED UPON INITIAL NOTIFICATION. ALL INFORMATION SHALL BE PROVIDED AFTER MESSAGE NUMBER 1.

5.1.1 Complete Data Sheet 1

NOTE

The Communicator, at the time of contact, enters the names of the persons contacted at DPS Pierce and Matagorda County at the top of each form. Record the time of contact.

- 5.1.1.1 ITEM 1 - Name of the STPEGS person communicating information to offsite agencies. Mark the applicable Unit. If the event is common unit, then mark Unit 1.
- 5.1.1.2 ITEM 2 - Mark if notification is or is not a drill.

Notifications To Offsite Agencies

- 5.1.1.3 ITEM 3 - Start with number one (1). Number sequentially, independent of facility originating Data Sheet 1, and indicate which facility is originating the message.
- 5.1.1.4 ITEM 4 - Mark if the classification is new or unchanged. Fill in the date and time the current classification was declared. Mark the event classification.
- 5.1.1.5 ITEM 5 - A radiological release is defined as exceeding the Emergency Action Level (EAL) for an Unusual Event.
- 5.1.1.6 ITEM 6 - Mark if the recommended protective actions are new or unchanged.
- a. Refer to 0ERP01-ZV-IN07, "Offsite Protective Action Recommendations" for PARs. Mark Block A or B. If Block A is marked then go to Step 5.1.1.7.
 - b. Ensure correct notations are used for zones and sectors. Zones range from 1 to 11. Sectors range from A to R. Refer to Addendum 4 in 0ERP01-ZV-IN07, "Offsite Protective Action Recommendations," for a cross reference of zones and sectors.
- 5.1.1.7 ITEM 7 - Indicate BRC disposition on PARs recommendation or "BRC Not Contacted."
- 5.1.1.8 ITEM 8 - Mark if the event description is new or unchanged. Enter the alpha numeric designator in the initiating condition line.
- a. Addendum 6 contains suggested wording which may be used by the communicator as an aid.
 - b. If wording other than that provide in Addendum 6 is used, then, include a brief explanation of the event in lay terms for clarification to offsite agencies. Legibly print a non-technical description of the event. **DO NOT USE ACRONYMS.**

Notifications To Offsite Agencies

NOTE

Only Blocks 1 - 8 and 12 are required to be completed upon initial notification. The remainder of the form should be completed if time allows. The entire form shall be completed on all subsequent notifications or updates.

- c. ITEM 9 - Mark "NEW" or "UNCHANGED." Meteorological data is available on Emergency Response Facility Data Acquisition Display System (ERFDADS) or RM-21. Ensure 15 minute average lower wind speed and wind direction are used. See Addendum 5, "Atmospheric Stability Classification."
 - 5.1.1.9 ITEM 10 - Mark "NEW" or "UNCHANGED." A radiological release is defined as exceeding the EAL for an Unusual Event. Use a default 4 hour value if the release duration unknown.
 - 5.1.1.10 ITEM 11 - Additional remarks, if any.
 - 5.1.1.11 ITEM 12 - Signature of Emergency Director authorizing release of Data Sheet 1.
- 5.1.2 Complete notifications using Data Sheet 3.
 - 5.1.2.1 Contact State/County on ringdown line or alternate numbers.
 - a. Read ITEMS 1-8.
 - b. Supply information in Items 9-11, if available.
 - 5.1.2.2 Fax notification forms. Log time fax completed and confirmed.
 - 5.1.2.3 If the Communicator is also making NRC notifications, complete Section 5.2 of this procedure prior to continuing.
 - 5.1.2.4 Contact BRC and issue information on Data Sheet 1.
 - 5.1.2.5 Notify unaffected Unit Control Room that an emergency fax notification has been made.
 - 5.1.2.6 Notify HL&P System Operations on ECDC Unit 1 or Unit 2 ringdown lines that emergency fax notification has been made.
- 5.1.3 Issue update notifications to State and County approximately hourly unless a State/County consensus is obtained for a reduced frequency (e.g. a static condition).

Notifications To Offsite Agencies

- 5.1.3.1 Update notifications are made using Data Sheet 1, "Offsite Agency Notification Message Form."
- 5.1.3.2 If the Emergency Director is located in the Emergency Operations Facility and events are not rapidly changing, then, following issuance of Data Sheet 1, issue Data Sheet 2, "Supplemental Notification Form." (Guidance for issuing Data Sheet 2 is found in Addendum 2, "Special Instructions for Completing Supplemental Notification Form.")
- 5.1.4 If Data Sheet 1 or Data Sheet 2 is issued with incorrect information, then immediately contact the notified agencies, correct the information and follow-up with a corrected Data Sheet 1 or Data Sheet 2.
- 5.1.5 If Data Sheet 1 or Data Sheet 2 is being transmitted with incorrect information, then immediately stop transmission, gather the correct information, and re-transmit a corrected Data Sheet 1 or Data Sheet 2.

5.2 NRC Notification**NOTE**

Complete Data Sheet 4 (black ink should be used) for initial NRC notification. Complete all applicable blocks on the worksheet.

- 5.2.1 Notify the NRC Operations Center immediately following initial notification of State/County agencies and no later than one hour after the emergency has been declared. If more than one communicator is available, these notifications may be done concurrently. Use Data Sheet 4 as a record of initial conversation. Additional records of conversation may be made on Emergency Action Log Sheets.
- 5.2.1.1 Description - Provide a description of the event to include systems affected, actuation's and initiating signals, causes, effect of event on plant, actions taken or planned, etc. Additional space is provided on back of Data Sheet 4. Check block when Control Room Log Book entry is made.
- 5.2.1.2 Radiological Releases - Complete this section if the event is radiologically based. Information from Data Sheet 1 may be used if information described in Data Sheet 4 is not available and obtaining it would likely cause a late notification.
- 5.2.1.3 Activate the ERDS at the time the NRC Operations Center is notified of the Alert, Site Area Emergency or General Emergency (see Addendum 4).

Notifications To Offsite Agencies

5.2.1.4 The Control Room ENS Communicator must maintain an open telephone line with the NRC, unless otherwise directed by the NRC. During the course of the event, immediately report any further degradation in the level of safety of the plant or other worsening conditions, including those that require declaration of any of the emergency classes, or may change from one emergency class to another, or a termination of the emergency class. Immediately report the results of ensuing evaluations or assessments of plant conditions, the effectiveness of response or protective measures taken, and information relating to plant behavior that is not understood.

5.2.2 Notify NRC Resident Inspector. Log time of contact on Data Sheet 4.

6.0 References

- 6.1 STPEGS Emergency Plan
- 6.2 OPGP05-ZV-0004, Emergency Plan Implementing Procedure Users Guide
- 6.3 0ERP01-ZV-IN07, Offsite Protective Action Recommendations
- 6.4 0ERP01-ZV-IN01, Emergency Classification
- 6.5 10CFR50.72(a)ii.3
- 6.6 Inspection Report 91-03-01 (LCTS 9100453-936)
- 6.7 10CFR50 Appendix E - IV.D.3
- 6.8 IEN 89-89

7.0 Support Documents

- 7.1 Data Sheet 1 - Offsite Agency Notification Message Form (Typical)
- 7.2 Data Sheet 2 - Supplemental Notification Form (Typical)
- 7.3 Data Sheet 3 - Offsite Agencies Log
- 7.4 Data Sheet 4 - NRC Event Notification Worksheet (Typical)
- 7.5 Addendum 1 - Responsibilities for Notifications
- 7.6 Addendum 2 - Special Instructions for Completing Supplemental Notification Form
- 7.7 Addendum 3 - Emergency Communications

- 7.8 Addendum 4 - Instructions for Operating Emergency Response Data System (ERDS)
- 7.9 Addendum 5 - Atmospheric Stability Classification
- 7.10 Addendum 6 - Suggested Wording for Event Description

Notification To Offsite Agencies

TP 1686C (12/99)
REV. 8

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

SUPPLEMENTAL NOTIFICATION FORM

THIS IS A DRILL
 THIS IS NOT A DRILL

1. MESSAGE S- _____ 3. EMERGENCY DIRECTOR LOCATION: () CR () TSC () EOF
() AEOF
2. UNIT STATUS: UNIT 1 POWER _____ NAME: _____
UNIT 2 POWER _____

STATUS OF BOUNDARY	4. FUEL CLADDING	5. REACTOR COOLANT SYSTEM	6. CONTAINMENT
INTACT	()	()	()
POTENTIAL LOSS	()	()	()
LOSS	()	()	()
RE-ESTABLISHED	N/A	()	()

7. PROGNOSIS OF SITUATION
() IMPROVING () STABLE
() DEGRADING SLOWLY () DEGRADING QUICKLY
() UNKNOWN, UNDER ASSESSMENT
8. EAL #: _____
9. NUMBER OF FUNCTIONAL SAFETY TRAINS: _____

10. OFFSITE SUPPORT REQUESTED
() NONE
() AMBULANCE
() FIRE
() LOCAL LAW ENFORCEMENT
() WESTINGHOUSE
() BECHTEL
() INPO
() NRC
() OTHER _____

11. ONSITE PROTECTIVE MEASURES ORDERED	YES	NO
ACCOUNTABILITY	_____	_____
EVACUATION OF NON-ESSENTIALS	_____	_____
CONTROL ROOM EVACUATION	_____	_____
TSC/OSC RELOCATION	_____	_____
EOF RELOCATION	_____	_____
POTASSIUM IODIDE ISSUED	_____	_____
MEDICAL EMERGENCY OFFSITE TRANSPORT	_____	_____
OTHER _____	_____	_____

12. ORGANIZATION /FACILITIES ACTIVATED
() TSC/OSC
() EOF
() ALTERNATE EOF
() JIC

14. MISCELLANEOUS INFORMATION

13. PROJECTED OFFSITE DOSES (CENTERLINE)	TEDE (REM)	THYROID CDE (REM)
A. EXCLUSION AREA BOUNDARY	_____	_____
B. 2 MILES	_____	_____
C. 5 MILES	_____	_____
D. 10 MILES	_____	_____
E. ESTIMATED RELEASE DURATION	_____	HRS
F. RELEASE RATE	_____	µCi/sec

15. EMERGENCY DIRECTOR APPROVAL:

SIGNATURE

DATE

TIME

16. ACKNOWLEDGMENT OF RECEIPT:

SIGNATURE

DATE

TIME

MESSAGE NUMBER	*MATAGORDA COUNTY	*DPS - PIERCE	FAX COMPLETED AND CONFIRMED	*TEXAS DEPT. OF HEALTH (BRC)	*UNAFFECTED UNIT CONTROL ROOM HL&P ECDC	NOTIFICATIONS COMPLETED
	CONSOLE OR 979-245-5526 OR 979-244-1178 (When EOC Activated)	CONSOLE OR 979-543-6878 OR 979-532-1740	(Refer to Addendum 2)	512-834-6688 OR 512-458-7460	U1-8614/8610/ 8595/7732 U2-7953/8549/ 8683/8156 ECDC Ringdown or 281-897-2202	BY: NAME/LOCATION
15 MINUTE NOTIFICATION REQUIRED						

***LOG THE TIME OF CONTACT.**

WHEN COMPLETED, THIS RECORD SHALL BE RETAINED IN ACCORDANCE WITH THE DOCUMENT TYPE LIST (DTL).

NRC FORM 301 (3-90) U.S. NUCLEAR REGULATORY COMMISSION OPERATIONS CENTER

EVENT NOTIFICATION WORKSHEET

NOTIFICATION TIME	FACILITY OR ORGANIZATION	UNIT	CALLER'S NAME	CALL BACK #: _____ ENS _____ or () _____
-------------------	--------------------------	------	---------------	--

EVENT TIME & ZONE	EVENT DATE / /
POWER/MODE BEFORE	POWER/MODE AFTER

1-Hr Non-Emergency 10 CFR 50.72(b)(1)			(v) Emergency Siren INOP	AESS
			(vi) Fire	AFIR
(i)(A)	TS Required S/D	ASHU	(vi) Toxic Gas	ACHE
(i)(B)	TS Deviation	ADEV	(vi) Rad Release	ARAD
(i)	Degraded Condition	ADEG	(vi) Oth Hampering Safe Op.	AHIN
(ii)(A)	Unanalyzed Condition	AUNA	4-Hr Non-Emergency 10 CFR 50.72(b)(2)	
(ii)(B)	Outside Design Basis	AOUT	(i) Degrade While S/D	ADAS
(ii)(C)	Not Covered by OPs/EPs	ACNC	(i) RPS Actuation (scram)	ARPS
(iii)	Earthquake	ANEA	(i) ESF Actuation	AESF
(iii)	Flood	ANFL	(ii)(A) Safe S/D Capability	AINA
(iii)	Hurricane	ANHU	(ii)(B) RHR Capability	AINB
(iii)	Ice/Hail	ANIC	(ii)(C) Control of Rad Release	AINC
(iii)	Lightning	ANLI	(iii)(D) Accident Mitigation	AIND
(iii)	Tornado	ANTO	(iv)(A) Air Release > 2X App B	AAJR
(iii)	Oth Natural Phenomenon	ANOT	(iv)(B) Liq Release > 2X App B	ALUQ
(iv)	ECCS Discharge to RCS	ACCS	(v) Offsite Medical	AMED
(v)	Lost ENS	AENS	(vi) Offsite Notification	APRE
(v)	Lost Other Assessment/Comms	AARC		

EVENT CLASSIFICATIONS	
GENERAL EMERGENCY	GEN/AAEC
SITE AREA EMERGENCY	SIT/AAEC
ALERT	ALE/AAEC
UNUSUAL EVENT	UNU/AAEC
50.72 NON-EMERGENCY (see next columns)	
PHYSICAL SECURITY (73.71)	D???
TRANSPORTATION	NTRA
MATERIAL/EXPOSURE	B??/?E??/?F???
FITNESS FOR DUTY	HFIT
OTHER	N??/?AC??/?G???

DESCRIPTION

Include: Systems affected, actuations & their initiating signals, causes, effect of event on plant, actions taken or planned, etc.

CONTROL ROOM LOG BOOK entry w/description made.

NOTIFICATIONS	YES	NO	WILL BE	ANYTHING UNUSUAL OR NOT UNDERSTOOD?	YES (Explain above)	NO
NRC RESIDENT						
STATE(s)				DID ALL SYSTEMS FUNCTION AS REQUIRED?	YES	NO (Explain above)
LOCAL						
OTHER GOV AGENCIES				MODE OF OPERATION UNTIL CORRECTED:	ESTIMATED RESTART DATE:	ADDITIONAL INFO ON BACK?
MEDIA/PRESS RELEASE						<input type="checkbox"/> YES <input type="checkbox"/> NO

NRC FORM 361 (3-89)

ADDITIONAL INFORMATION

USNRC OPERATIONS CENTER

RADIOLOGICAL RELEASES: CHECK OR FILL IN APPLICABLE ITEMS (specific details/explanations should be covered in event description)

LIQUID RELEASE	GASEOUS RELEASE	UNPLANNED RELEASE	PLANNED RELEASE	ONGOING	TERMINATED
MONITORED	UNMONITORED	OFFSITE RELEASE	T.S. EXCEEDED	RM ALARMS	AREAS EVACUATED
PERSONNEL EXPOSED OR CONTAMINATED		OFFSITE PROTECTIVE ACTIONS RECOMMENDED		*State release path in description.	

	Release Rate (Ci/sec)	% T.S. LIMIT	HOO GUIDE	Total Activity (Ci)	% T.S. LIMIT	HOO GUIDE
Noble Gas			0.1 Ci/sec			1000 Ci
Iodine			10 uCi/sec			0.01 Ci
Particulate			1 uCi/sec			1 mCi
Liquid (excluding tritium & dissolved noble gases)			10 uCi/min			0.1 Ci
Liquid (tritium)			0.2 Ci/min			5 Ci
Total Activity						

	PLANT STACK	CONDENSER/AIR EJECTOR	MAIN STEAM LINE	SG BLOWDOWN	OTHER
RAD MONITOR READINGS:					
ALARM SETPOINTS:					
% T.S. LIMIT (if applicable)					

RCS OR SG TUBE LEAKS: CHECK OR FILL IN APPLICABLE ITEMS: (specific details/explanations should be covered in event description)

LOCATION OF THE LEAK (e.g., SG = , valve, pipe, etc.):

LEAK RATE:	UNITS: gpm/gpd	T.S. LIMITS:	SUDDEN OR LONG TERM DEVELOPMENT:
LEAK START DATE:	TIME:	COOLANT ACTIVITY & UNITS	PRIMARY - SECONDARY -

LIST OF SAFETY RELATED EQUIPMENT NOT OPERATIONAL:

EVENT DESCRIPTION (Continued from front)

Notifications To Offsite Agencies

Addendum 1

Responsibilities For Notification

Page 1 of 1

RESPONSIBILITY	RESPONSIBLE PERSON BASED ON LOCATION OF EMERGENCY DIRECTOR		
	CR	TSC	EOF
Complete Data Sheet 1, "Offsite Agency Notification Message Form"	State/County Communicator	Chemical/Radiochemical Manager	Engineering Assistant
Complete Data Sheet 4, "NRC Event Notification Worksheet" and Maintain Open Line	ENS Communicator		
Update NRC on event status	ENS Communicator	Chemical/Radiochemical Manager	Licensing Director
Complete Data Sheet 2, "Supplemental Notification Form"			Engineering Assistant
Log State/County Notifications using Data Sheet 3, "Offsite Agencies Log"	State/County Communicator	TSC Communicator	Offsite Agency Communicator

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Notifications To Offsite Agencies			
Addendum 2	Special Instructions For Completing Supplemental Notification Form		Page 1 of 2

NOTE

- Data Sheet 2 should be completed using black ink. No items are to be left blank even if information is unchanged.
- The Engineering Assistant should, if time permits, routinely complete Data Sheet 2.

- ITEM 1 - Use same number as on Data Sheet 1, which will be completed in conjunction with this form.
- ITEM 3 - Identify the location of the Emergency Director and the name of the Communicator.
- ITEM 9 - Enter the number of Engineered Safety Features (ESF) trains in the affected unit which are functional.
- ITEM 10 - Mark offsite support requested which will be responding to the site. This block is completed to facilitate the support group requested through county established road blocks.
- ITEM 14 - Examples of miscellaneous information:
- a. Estimate of quantity of radioactive material released or being released and the points and heights of releases.
 - b. Chemical and physical form of released material, including estimates of the relative quantities and concentration of noble gases, iodines and particulates.
 - c. Estimate of any surface radioactive contamination in plant, onsite or offsite.
 - d. Any licensee emergency response actions underway.
- GENERAL -
- a. Enter "unavailable" if information is not known.
 - b. Enter "N/A" if item is not applicable.

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Notifications To Offsite Agencies			
Addendum 2	Special Instructions For Completing Supplemental Notification Form		Page 2 of 2

c. Fax the completed and approved Data Sheet 2 to all agencies listed below:

- Matagorda County Sheriff's Office Dispatcher
- Matagorda County Emergency Operations Center
- Texas Department of Public Safety (DPS) - Pierce, TX
- Texas Department of Health - BRC
- Division of Emergency Management
- Texas Department of Public Safety - Houston, TX
- Emergency Operations Facility
- Affected Unit's TSC
- Affected Unit's Control Room (when Emergency Direction is not in Control Room)
- Unaffected Unit's Control Room
- Site Public Affairs (EOF)
- Joint Information Center (JIC) (if activated)
- Energy Control Data Center

NOTE

Fax numbers can be found in the STPEGS Emergency Communications Directory.

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Notifications To Offsite Agencies			
Addendum 3	Emergency Communications (SPR 91 0447)		Page 1 of 4

1.0 Emergency Communications System

1.1 Emergency Notification System (ENS)

- 1.1.1 The ENS is a telephone circuit provided by the NRC.
- 1.1.2 The ENS is activated to notify the NRC of a declared emergency or drills/exercises and to maintain communications with the NRC Operations Center as needed.
- 1.1.3 If the ENS is activated, then a person SHALL remain on the line until the NRC agrees that the ENS may be terminated.
- 1.1.4 There are six (6) methods to notify the NRC. These are:
 - 1.1.4.1 ENS telephone
 - 1.1.4.2 Outside phone lines
 - 1.1.4.3 Control Room direct phone line to Bay City
 - 1.1.4.4 Microwave line to Reliant Energy Plaza and call forwarded to the NRC
 - 1.1.4.5 Ringdown line to the Energy Control and Distribution Center (ECDC) and call forwarded to the NRC
 - 1.1.4.6 Security radio communications to Matagorda County Sheriff's Office and forwarded to the NRC
- 1.1.5 The principal method of communications with the NRC is the ENS. The circuit may also be activated by the NRC.
- 1.1.6 If the ENS is out of service, then use outside phone lines to notify the NRC at one of the following telephone numbers (in order of priority) AND remain on the line.
 - 1.1.6.1 9-1-301-816-5100
 - 1.1.6.2 9-1-301-951-0550

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Notifications To Offsite Agencies			
Addendum 3	Emergency Communications (SPR 91 0447)		Page 2 of 4

- 1.1.7 If the outside telephone lines are out of service, then use the Control Room direct phone line to Bay City and notify the NRC at one of the following telephone numbers (in order of priority) AND remain on the line.
 - 1.1.7.1 1-301-816-5100
 - 1.1.7.2 1-301-951-0550
- 1.1.8 If the Control Room direct telephone line to Bay City is out of order, then use the microwave tower line (32-0) to Reliant Energy Plaza (24 hours) and have the operator/Security complete the phone call to the NRC AND remain on the line if requested by the NRC.
- 1.1.9 If the microwave tower line is out of service, then use the ringdown line to the ECDC and have the dispatcher forward the telephone call or information to the NRC AND remain on the line if requested by the NRC.
- 1.1.10 If the ringdown line to the ECDC is out of service, then use the Security radio console to contact the Matagorda County Sheriff's Office and request the information be forwarded to the NRC. Stay on the radio with the Matagorda County Sheriff's Office.
- 1.2 State and County Ringdown Line
 - 1.2.1 The State-County ringdown line is provided to notify State and County officials of a declared emergency.
 - 1.2.2 The State-County ringdown line is an automatic ringdown telephone circuit terminated on a communications console or an ORANGE telephone.
 - 1.2.3 There are six (6) methods to notify the State/County. These are:
 - 1.2.3.1 State/County ringdown telephone
 - 1.2.3.2 Outside telephone lines
 - 1.2.3.3 Control Room direct telephone line to Bay City

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- 1.2.3.4 Microwave line to Reliant Energy Plaza and call forwarded to the State and County.
- 1.2.3.5 Security radio communications with the County.
- 1.2.3.6 Ringdown line to the ECDC and call forwarded to the State/County.
- 1.2.4 If the State/County ringdown line is out of service, then use outside telephone lines to notify the State and County at one of the following telephone numbers:
 - 1.2.4.1 State/DPS-Pierce
 - a. 9-1-979-543-6878
 - OR
 - b. 9-1-979-532-1740
 - 1.2.4.2 Matagorda County Sheriff's Office
 - a. 9-1-979-245-5526
- 1.2.5 If outside telephone lines are out of service, then use the Control Room direct telephone line to Bay City to notify the State/County.
- 1.2.6 If the Control Room direct telephone line to Bay City is out of service, then use the microwave line (32-0) to Reliant Energy Plaza (24 hours) and have the Operator/Security complete the telephone calls to the State/County.
- 1.2.7 If the microwave line is out of service, then use the Security radio communications to notify the County.
- 1.2.8 If Security radio communications are out of service, then use the ringdown line to the ECDC and have the dispatcher forward the telephone call or information to the State/County.

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1.3 Health Physics Network (HPN)

1.3.1 The HPN is terminated on an FTS 2000 telephone.

1.3.2 The HPN is to be used only at the request of the NRC.

1.3.3 If the HPN telephone is out of service, then use outside telephone lines to contact the NRC at 301-951-1212.

1.3.4 If the outside telephone lines are out of service, then use the microwave line (32-0) to Reliant Energy Plaza (24 hours) and have the Operator/Security complete the telephone call to the NRC/HPN.

1.3.5 If the HPN telephone line is out of service, then notify the NRC Operations Center. (IEN 89-19)

1.3.5.1 NOTIFY the NRC when the telephone set has been returned to service. (IEN 89-19)

1.3.6 The HPN telephone is designed to provide communications with the NRC Health Physics Section and/or other nuclear power plants during a declared emergency or drill/exercise. STPEGS health physics personnel MAY request a conference call with other nuclear power plants on the HPN by asking the NRC to connect the desired plant(s).

1.4 HL&P Dispatcher Ringdown Line

1.4.1 The HL&P Dispatcher ringdown line is an automatic ringdown between the Energy Control and Data Center (ECDC) and STPEGS communications consoles.

1.5 800 MHz Radio

1.5.1 Press "HOME" on keypad to ensure channel 65 is on the LCD display. Channel 65 is monitored by the dispatcher.

1.5.2 If unnecessary traffic is coming over the radio, use "MODE" on the keypad until the prompt appears to put the radio to "sleep." Entering "0" will put the unit to sleep. Pressing any button on the keypad will wake the unit up. Traffic will again be monitored.

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- 1.5.3 To contact the dispatcher, press "ECC" on the keypad. Channel 65 should be displayed, and momentarily, the dispatcher will acknowledge the unit calling. The handset is a push to talk handset.
- 1.5.4 The 800 MHz has many additional capabilities, including, use as a radio-telephone. Contact the EOF Communications Supervisor for additional instructions.

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Addendum 4	Instructions For Operating Emergency Response Data Systems (ERDS)		Page 1 of 3

- 1.0 Emergency Response Data System (ERDS) Activation, Termination, and Error Handling Instructions:
- 2.0 Steps to Activate the ERDS from Integrated Computer System / Emergency Response Facility Data Acquisition Display System (ICS/ERFDADS) Main Menu:
 - 2.1 Click on the Menu UP Arrow (WDPF Main Menu)
 - 2.2 Select "Custom Graphics"
 - 2.3 Select "Top Level Menu"
 - 2.4 Select "AF, AM, AP, BR, & CC DISPLAYS"
 - 2.5 Select "NRC Link Control"
 - 2.6 Click in "ACTIVATE" Block to connect with the NRC ERDS Computer at the NRC Operations Center in Rockville, Maryland, via a dedicated telephone line.
 - 2.7 The dial-up should generally succeed within one minute, at which time the NRC Link Control screen will indicate "ACTIVE" and "ONLINE" and will begin counting "GOOD CYCLES." Otherwise, the ICS/ERFDADS will automatically re-dial and attempt to connect with the NRC ERDS computer several additional times. If no connection is established within approximately five minutes, then NRC Link Control screen will indicate the link status via error messages. If more than five minutes elapses without a successful response, then site personnel should notify the NRC before terminating efforts to establish the ERDS datalink.
 - 2.8 The display terminal may now be used for other purposes while the ERDS data continues to be transmitted to the NRC. Whenever the ERDS is active, it is suggested that "NRC Link Control" or "NRC Link Status" screen be used to monitor the status of the ERDS datalink.
- 3.0 Steps to terminate the ERDS:
 - 3.1 If "NRC Link Control" screen is not present on an ICS/ERFDADS terminal, repeat the ERDS activation steps 2.1, 2.2, 2.3, 2.4, and 2.5.

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- 3.2 When "NRC Link Control" screen is present on the terminal "CLICK" in the "TERMINATE" Block. This action causes the ICS/ERFDADS to disconnect the telephone connection with the NRC ERDS computer in Rockville, Maryland.
- 3.3 When the ERDS is terminated by STP, the "NRC Link Control" and "NRC Link Status" screens will show the message "Terminated" and the Link Status Block with the message "OFFLINE". When STP terminates the ERDS, then 15 minutes must lapse before attempting to activate the ERDS again from the same STP Unit.
- 4.0 Steps to handle ERDS error conditions:
- 4.1 If an error condition occurs, then the error messages will be displayed on "NRC Link Control" and "NRC Link Status" screens. If an error condition occurs, then obtain a hardcopy of the error message using Print Screen.
- 4.2 When the ERDS is active and no errors are occurring, then displays "NRC Link Control" and "NRC Link Status" screens will tag the ERDS Messages block with the message "Active," the Link Status block with the message "Online," the Read Error block with the message "OK," the Nonsensical error block with the message "OK." and the Write Error block with the message "OK."
- 4.3 If an attempt is made to activate the ERDS by STP and all telephone lines at NRC are busy, then displays "NRC Link Control" and "NRC Link Status" screens will tag the ERDS Messages block with the message "NRC lines busy." Obtain a hardcopy of the display showing the "NRC lines busy" message and then follow the steps to terminate the ERDS. Periodically try again to activate the ERDS, producing a hardcopy of the display each time the "NRC lines busy" message is shown.
- 4.4 If an attempt is made to activate the ERDS by STP and NRC denies access to the ERDS computer system in Rockville, Maryland, then displays "NRC Link Control" and "NRC Link Status" will tag the ERDS Messages block with the message "Unaccepted by NRC." Obtain a hardcopy of the display showing the denied access by NRC message and then follow the steps to terminate the ERDS. Periodically try again to activate the ERDS, producing a hardcopy of the display each time the denied access by NRC message is shown.
- 4.5 NRC has the ability to terminate an active ERDS link. If NRC terminates such a link, then displays "NRC Link Control" and "NRC Link Status" will tag the ERDS Messages block with the message "Terminated by NRC" and the Link Status block with the message "Offline." Obtain a hardcopy the display showing the ERDS link termination by NRC.

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- 4.6 If the ERDS link is active and the telephone line is disconnected, then the ICS/ERFDADS will automatically re-dial and attempt to reconnect with the NRC ERDS computer system. If the telephone line is disconnected, then displays "NRC Link Control" and "NRC Link Status" will tag the ERDS Messages block with either the message "Active" or with the message "Modem trouble," the Link Status block with the message "Offline," and the remainder of the status messages blocks with the message "OK" or the message "TRBL."

If the ERFDADS is not able to reconnect with the NRC ERDS computer system, then hardcopy the displayed error messages and contact the ERFDADS System Engineer.

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Addendum 5	Atmospheric Stability Classification		Page 1 of 1

Stability Classification	Class	Delta T (60m-10m)°F	Sigma-Theta
Extremely Unstable	A	< -1.7	≥ 22.5
Moderately Unstable	B	-1.71 TO -1.53	17.5 TO 22.5
Slightly Unstable	C	-1.52 TO -1.35	12.5 TO 17.5
Neutral	D	-1.34 TO - 0.45	7.5 TO 12.5
Slightly Stable	E	-0.44 TO 1.35	3.8 TO 7.5
Moderately Stable	F	1.36 TO 3.60	2.1 TO 3.8
Extremely Stable	G	> 3.60	< 2.1

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NOTE

Obtain Initiating Condition alpha-numeric designation from the Emergency Director. Match designation with list below and enter into item 8 of Data Sheet 1.

Fission Product Barrier Degradation

FU1	Loss or potential loss of Containment barrier
FA1	Loss or potential loss of Fuel Clad or Reactor Coolant System barrier
FS1	Loss or potential loss of two fission product barriers
FG1	Loss of two fission product barriers with potential loss or loss of the third barrier

System Malfunction

SU1	Loss of offsite power to safety systems. Multiple sources of emergency power are available.
SU2	Plant operation determined to be outside of plant safety specifications.
SU3	Unplanned loss of most Control Room safety system alarm indications.
SU4	Unplanned loss of all onsite or offsite communications capabilities.
SU5	Unplanned loss of safety related battery power causing difficulty monitoring plant conditions while shutdown.
SU6	Indication of degradation or potential loss of the Fuel Clad fission product barrier.
SU7	Indication of degradation of Reactor Coolant System fission product barrier.
SA1	Loss of all power to safety systems while the plant is shutdown and cooled down.
SA2	Reactor failed to automatically shutdown when required. Manual shutdown was successful.
SA3	Inability to maintain appropriate cooled down temperature while shutdown.
SA4	Difficulty monitoring changing plant conditions due to unplanned loss of most Control Room safety system alarm indications.
SA5	Electrical power to safety systems has degraded to a single source.
SS1	Loss of all electrical power to safety systems.
SS2	Reactor failed to automatically shutdown when required. Initial attempts at manual shutdown were not successful.
SS3	Unplanned loss of safety related battery power compromising the ability to monitor and control plant safety functions.
SS4	Complete loss of systems required for plant cooldown.
SS5	Loss of water level in the Reactor Vessel that has or will uncover the fuel in the Reactor Vessel while the plant is shutdown and cooled down.
SS6	Inability to monitor changing plant conditions due to unplanned loss of most Control Room safety system alarm indications.
SG1	Prolonged loss of all electrical power to safety systems which will lead to a loss of all three fission product barriers unless restored.
SG2	All attempts to shutdown the reactor have been unsuccessful which may lead to loss of all three fission product barriers.

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Abnormal Radiological Levels

- RU1 Unplanned release to the environment of very low levels of radioactivity which exceed effluent limits and indicates a degradation in plant radiological controls.
- RU2 Unexpected increase in plant radiation levels.
- RA1 Unplanned release to the environment of low levels of radioactivity which significantly exceed effluent limits and indicates a substantial degradation in plant radiological controls.
- RA2 Potential damage or damage to spent nuclear fuel outside of the Reactor Vessel.
- RA3 Elevated plant radiation levels impede necessary access to plant operating stations.
- RS1 Actual or projected radiological dose at the site boundary has reached a level which is equal to 10% of the dose which would prompt an offsite protective action recommendation.
- RS2 An unexpected increase in containment radiation levels indicate a loss or potential loss of two fission product barriers.
- RG1 Actual or projected radiological dose at the site boundary has reached a level which requires an offsite protective action recommendation.
- RG2 An unexpected increase in containment radiation levels indicate a loss of two fission product barriers with potential loss or loss of third barrier.

Hazards and Other Conditions

- HU1 Security event affecting normal operation of the plant.
- HU2 (Fire or Explosion) in the (Protected Area or Switchyard) which affects normal plant operations.
- HU3 (Toxic or Flammable) gasses are affecting normal plant operations.
- HU4 (Describe destructive event) _____ is affecting normal plant operations.
- HU5 Conditions exist, not specifically covered by the Station Emergency Plan, which are impacting normal plant operations and, in the judgment of the Emergency Director, warrants declaration of an Unusual Event.
- HA1 Security event inside the Protected Area may potentially affect safe operation of the plant.
- HA2 (Fire or Explosion) in a plant vital area may potentially affect safe operation of the plant.
- HA3 (Toxic or Flammable) gasses may potentially affect safe operation of the plant.
- HA4 (Describe destructive event) _____ may potentially affect safe operation of the plant.
- HA5 Evacuation of Main Control Room. Plant controls established at Auxiliary Shutdown Panel.
- HA6 Conditions exist, not specifically covered by the Station Emergency Plan, which may affect safe operation of the plant, and, in the judgment of the Emergency Director, warrants the declaration of an Alert.
- HS1 Security event in a plant vital area which could affect safe shutdown.
- HS2 Evacuation of Main Control Room and plant controls cannot be established.
- HS3 Events affect the ability to shutdown the plant or maintain it in a safe shutdown condition.
- HG1 Security event resulting in loss of ability to reach and maintain safe shutdown.
- HG2 Conditions exist, not specifically covered by the Station Emergency Plan, which may potentially result in a hazard to the public, and in the judgment of the Emergency Director, warrants the declaration of a General Emergency.