Duke Energy

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Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555

Re: McGuire Nuclear Station Unit 1 Docket No. 50-369
McGuire Nuclear Station Unit 2 Docket No. 50-370
Changes to Emergency Plan Implementing Procedures

Attached to this letter are a revised Emergency Plan Implementing Procedure (EPIP) Index and a number of revised Emergency Plan Implementing Procedures. These procedure changes were evaluated pursuant to the requirements of 10 CFR 50.54 (q). These changes do not constitute a reduction in the effectiveness of the emergency plan and continue to meet the requirements of 10 CFR 50.47 (b) and 10 CFR 50.54 Appendix E. As such, these changes do not require NRC approval prior to implementation. Revision bars in each individual procedure indicate the procedure changes. The following index and procedure changes have been implemented:

EPIP Index Page 1	RP/0/A/5700/012
EPIP Index Page 2	RP/0/A/5700/026
EPIP Index Page 3	HP/0/B/1009/024

There are no new regulatory commitments in this document. Duke is also supplying two copies of this submittal to the Regional Administrator of Region II. Questions on this document should be directed to Steve Mooneyhan at (704) 875-4646.

Very truly yours,

H. B. Barron
Vice President, McGuire Nuclear Station
Duke Energy Corporation

HBB:jcm

Attachments

A045

xc: (w/attachment)
Mr. Luis Reyes,
Regional Administrator
U.S. Nuclear Regulatory Commission
Region II
61 Forsyth St., SW, Suite 23T85
Atlanta, Georgia 30303

(w/o attachment)
NRC Resident Inspector

Frank Rinaldi, USNRC

Lee Keller (EC05O)

Electronic Licensing Library (EC05O)

EP File 111

DUKE

McGUIRE NUCLEAR SITE

EMERGENCY PLAN IMPLEMENTING PROCEDURES

APPROVED: Bryan J. Dolan
SAFETY ASSURANCE MANAGER

DATE APPROVED 3/6/00

EPIP Index Page 1	Dated 03/06/2000
EPIP Index Page 2	Dated 03/06/2000
EPIP Index Page 3	Dated 03/06/2000
RP/0/A/5700/012	Dated 03/06/2000
RP/0/A/5700/026	Dated 03/06/2000
HP/0/B/1009/024	Dated 03/06/2000

EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

PROCEDURE #	TITLE	REVISION NUMBER
RP/0/A/5700/000	Classification of Emergency	Rev. 004
RP/0/A/5700/001	Notification of Unusual Event	Rev. 012
RP/0/A/5700/002	Alert	Rev. 012
RP/0/A/5700/003	Site Area Emergency	Rev. 012
RP/0/A/5700/004	General Emergency	Rev. 012
RP/0/A/5700/05	Care and Transportation of Contaminated Injured Individual(s) From Site to Offsite Medical Facility	DELETE
RP/0/A/5700/006	Natural Disasters	Rev. 005
RP/0/A/5700/007	Earthquake	Rev. 006
RP/0/A/5700/008	Release of Toxic or Flammable Gases	Rev. 003
RP/0/A/5700/09	Collisions/Explosions	Rev. 000
RP/0/A/5700/010	NRC Immediate Notification Requirements	Rev. 010
RP/0/A/5700/011	Conducting a Site Assembly, Site Evacuation or Containment Evacuation	Rev. 005
RP/0/A/5700/012	Activation of the Technical Support Center (TSC)	Rev. 017
RP/0/A/5700/013	Activation of the Emergency Operations Facility (EOF)	DELETE
RP/0/A/5700/14	Emergency Telephone Directory	DELETE
RP/0/A/5700/015	Notifications to the State and Counties from the EOF	Rev. 008
RP/0/A/5700/16	EOF Commodities and Facilities Procedure	DELETE
RP/0/A/5700/17	Emergency Data Transmittal System Access	DELETE
RP/0/A/5700/018	Notifications to the State and Counties from the TSC	Rev. 005
RP/0/A/5700/019	Core Damage Assessment	Rev. 003
RP/0/A/5700/020	Activation of the Operations Support Center (OSC)	Rev. 010
RP/0/A/5700/21	EOF Access Control	DELETE
RP/0/A/5700/022	Spill Response Procedure	Rev. 009
RP/0/A/5700/024	Recovery and Reentry Procedure	Rev. 001
RP/0/A/5700/026	Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)	Rev. 001
RP/0/B/5700/023	Community Relations Emergency Response Plan	Rev. 000
OP/0/B/6200/090	PALSS Operation for Accident Sampling	Rev. 010

EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

PROCEDURE #	TITLE	REVISION NUMBER
HP/0/B/1009/002	Alternative Method for Determining Dose Rate Within the Reactor Building	Rev. 002
HP/0/B/1009/003	Recovery Plan	Rev. 002
HP/0/B/1009/05	Initial Evaluation of Protective Action Guides Due to Abnormal Plant Conditions	DELETED
HP/0/B/1009/006	Procedure for Quantifying High Level Radioactivity Releases During Accident Conditions	Rev. 004
HP/0/B/1009/010	Releases of Radioactive Effluents Exceeding Selected Licensee Commitments	Rev. 005
HP/1/B/1009/015	Unit 1 Nuclear Post-Accident Containment Air Sampling System Operating Procedure	Rev. 003
HP/2/B/1009/015	Unit 2 Nuclear Post-Accident Containment Air Sampling System Operating Procedure	Rev. 003
HP/0/B/1009/016	Distribution of Potassium Iodide Tablets in the Event of a Radioiodine Release	Rev. 001
HP/0/B/1009/020	Manual Procedure for Offsite Dose Projections	DELETED
HP/0/B/1009/021	Estimating Food Chain Doses Under Post-Accident Conditions	Rev. 001
HP/0/B/1009/022	Accident and Emergency Response	Rev. 002
HP/0/B/1009/023	Environmental Monitoring for Emergency Conditions	Rev. 002
HP/0/B/1009/024	Personnel Monitoring for Emergency Conditions	Rev. 001
HP/0/B/1009/029	Initial Response On-Shift Dose Assessment	Rev. 004
SH/0/B/2005/001	Emergency Response Offsite Dose Projections	Rev. 000
SH/0/B/2005/002	Protocol for the Field Monitoring Coordinator During Emergency Conditions	Rev. 000
SR/0/B/2000/01	Standard Procedure for Public Affairs Response to the Emergency Operations Facility	Rev. 001
SR/0/B/2000/002	Standard Procedure for EOF Commodities and Facilities	Rev. 001
SR/0/B/2000/003	Activation of the Emergency Operations Facility	Rev. 003

EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

PROCEDURE #	TITLE		REVISION NUMBER
McGuire Site Directive 280	Site Assembly/Accountability and Evacuation/Containment Evacuation		DELETED
EP Group Manual	Section 1.1	Emergency Organization	Rev. 017
MNS RP Manual:	Section 18.1	Accident and Emergency Response	DELETED
	Section 18.2	Environmental Monitoring for Emergency Conditions	DELETED
	Section 18.3	Personnel Monitoring for Emergency Conditions	DELETED
	Section 18.4	Planned Emergency Exposure	DELETED

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1) ID No. **HP/0/B/1009/024**
Revision No. **001**

PREPARATION

(2) Station **McGuire Nuclear Station**

(3) Procedure Title **Personnel Monitoring for Emergency Conditions**

(4) Prepared By G F Terrell Date 1/24/00

(5) Requires 10CFR50.59 evaluation?

- ☐ Yes (New procedure or revision with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By Steve D. Abernathy (QR) Date 1-26-00

Cross-Disciplinary Review By _____ (QR) NA SDA Date 1-26-00

Reactivity Mgmt. Review By _____ (QR) NA SDA Date 1-26-00

(7) Additional Reviews

Reviewed By K.L. Murray Date 1-26-00

Reviewed By _____ Date 3/6/2000

(8) Temporary Approval (*if necessary*)

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) Approved By William F. Byron Date 3/6/2000

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

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(11) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- ☐ Yes ☐ NA Check lists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?
- ☐ Yes ☐ NA Listed enclosures attached?
- ☐ Yes ☐ NA Data sheets attached, completed, dated, and signed?
- ☐ Yes ☐ NA Charts, graphs, etc. attached dated, identified, and marked?
- ☐ Yes ☐ NA Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks (*Attach additional pages, if necessary*)

Duke Power Company McGuire Nuclear Station **Personnel Monitoring for Emergency Conditions** **Information Use**	Procedure No. HP/0/B/1009/024 Revision No. 001 Electronic Reference No. MC0095LZ

Personnel Monitoring for Emergency Conditions

1. Purpose

1.1 To provide personnel monitoring during a Site Evacuation due to a radiological emergency.

2. References

2.1 Nuclear System Directive 114, Site Assembly/Evacuation Process

2.2 HP/0/B/1009/016, Distribution of Potassium Iodide Tablets in the Event of a Radioiodine Release

2.3 SH/0/B/2001/003, Investigation of Skin and Clothing Contaminations

2.4 HP/0/B/1009/022, Accident and Emergency Response

2.5 SH/0/B/2000/004, Taking, Counting and Recording Surveys

3. Precautions and Limitations

3.1 Survey teams can be advised to don appropriate respiratory equipment based on assessed conditions.

3.2 If survey teams are expected to be exposed to I^{131}, consult Reference 2.2 for a determination of whether the survey team should ingest Potassium Iodide Tablets.

3.3 Survey teams shall don protective clothing when contamination levels are expected to be > 1000 dpm/100 cm^2 $\beta\gamma$, > 20 dpm/100 cm^2 α.

3.4 Survey teams shall wear TLD's and ED's (electronic dosimeters).

4. Procedure

4.1 Upon initiation of a Site Evacuation (Reference 2.1) due to a radiological emergency, Radiation Protection shall dispatch emergency personnel survey teams to the following locations.

4.1.1 North VAP Area (as needed)

- Emergency kit for the North VAP is located in the RP Instrument Lab.

4.1.2 South PAP Area

- Emergency kit for the South PAP is located in Room 158.

4.1.3 Evacuation Facility (Cowan's Ford Dam)

- Emergency kits for Cowan's Ford Dam is located on the first level to the right in a room labeled "MNS Emergency kits".

4.1.4 Evacuation Facility (Tech. Training Center)

- Emergency kits for the TTC are located on the first floor in the stairwell across from the canteen.

- Both Evacuation Facilities will not necessarily be activated simultaneously.

4.2 Each location is equipped with an emergency kit containing the following (in addition to various miscellaneous items):

4.2.1 One Eberline E-520 or E-120 with HP-260 probe or equivalent instrument (supplemental equipment is in service at each PAP).

4.2.2 Four (4) particulate respirators.

4.2.3 Electronic Dosimeters

4.2.4 Six (6) sets of protective clothing.

4.2.5 Radiation boundary ribbon or rope and cautions signs with inserts.

4.2.6 Potassium Iodide tablets.

4.2.7 A copy of SH/0/B/2001/003, Investigation of Skin and Clothing Contaminations (Reference 2.3).

4.2.8 A copy of HP/0/B/1009/024, Personnel Monitoring for Emergency Conditions.

4.2.9 A copy of HP/0/B/1009/022, Accident and Emergency Response (Reference 2.4).

4.2.10 One (1) case of disposable coveralls at each of the four (4) locations.

4.3 Upon reaching their predesignated locations the survey teams shall verify communications with the Operation Support Center Radiation Protection Supervisor and maintain open communications.

4.4 The North VAP and South PAP Area survey teams shall monitor all personnel and vehicles leaving via this area to insure there is no spread of contamination outside of the protected area.

4.4.1 In the event that a vehicle and/or its passengers are found to be contaminated, the survey team shall:

4.4.1.1 Notify the OSC RP Supervisor. The OSC RP Supervisor shall in turn notify the TSC Radiation Protection Manager.

4.4.1.2 Dress the contaminated individual(s) in the appropriate protective clothing and isolate that individual(s) until proper decontamination can be accomplished.

4.4.1.3 Escort the contaminated person(s) to the contaminated change room for decontamination. If unable to return to the station, proceed to the Evacuation Facility (Technical Training Center or Cowans Ford Dam) for decontamination. Personnel shall be decontaminated per Reference 2.3.

4.4.1.4 Prevent movement of the vehicle especially from leaving the protected area.

4.4.1.5 When all personnel have cleared the area notify the OSC RP Supervisor and await instructions, i.e., a) proceed to the evacuation facility to assist or b) report back to the OSC.

4.5 The Evacuation Facilities survey teams shall stand by at the designated evacuation facility in preparation for monitoring incoming personnel in the event of a subsequent Site Evacuation.

4.5.1 In the event that an individual(s) or vehicle(s) is found to be contaminated, the survey team shall:

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4.5.1.2 Dress the contaminated individual(s) in the appropriate protective clothing and isolate that individual(s) until proper decontamination can be accomplished.

4.5.1.3 Escort the contaminated person(s) to the contaminated change room at McGuire. If unable to return to the contaminated change room at McGuire, use the showers at the Evacuation Facility, i.e. Technical Training Center or Cowans Ford Dam. Personnel shall be decontaminated per Reference 2.3.

4.5.1.4 Post a Radiation Control Zone around the contaminated vehicle.

4.5.1.5 Survey the area to determine the existence of further contamination.

4.5.1.6 Document all surveys per Reference 2.5.

4.6 Survey teams shall be supplemented, relieved, or secured as directed by the Radiation Protection Manager.

5. Enclosures

N/A

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1) ID No. **HP/0/B/1009/024**
Revision No. **001**

PREPARATION

(2) Station **McGuire Nuclear Station**

(3) Procedure Title **Personnel Monitoring for Emergency Conditions**

(4) Prepared By G F Ferrell Date 1/24/00

(5) Requires 10CFR50.59 evaluation?

- ☐ Yes (New procedure or revision with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By Glen D. Abernathy (QR) Date 1-26-00

Cross-Disciplinary Review By _____ (QR) NA SDA Date 1-26-00

Reactivity Mgmt. Review By _____ (QR) NA SDA Date 1-26-00

(7) Additional Reviews

Reviewed By K.L. Murray Date 1-26-00

Reviewed By _____ Date 3/6/2000

(8) Temporary Approval (*if necessary*)

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) Approved By William F. Boyer Date 3/6/2000

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

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- ☐ Yes ☐ NA Data sheets attached, completed, dated, and signed?
- ☐ Yes ☐ NA Charts, graphs, etc. attached dated, identified, and marked?
- ☐ Yes ☐ NA Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks (*Attach additional pages, if necessary*)

Duke Power Company McGuire Nuclear Station **Personnel Monitoring for Emergency Conditions** **Information Use**	Procedure No. HP/0/B/1009/024 Revision No. 001 Electronic Reference No. MC0095LZ

Personnel Monitoring for Emergency Conditions

1. Purpose

1.1 To provide personnel monitoring during a Site Evacuation due to a radiological emergency.

2. References

2.1 Nuclear System Directive 114, Site Assembly/Evacuation Process

2.2 HP/0/B/1009/016, Distribution of Potassium Iodide Tablets in the Event of a Radioiodine Release

2.3 SH/0/B/2001/003, Investigation of Skin and Clothing Contaminations

2.4 HP/0/B/1009/022, Accident and Emergency Response

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3. Precautions and Limitations

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4.2.6 Potassium Iodide tablets.

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4.2.8 A copy of HP/0/B/1009/024, Personnel Monitoring for Emergency Conditions.

4.2.9 A copy of HP/0/B/1009/022, Accident and Emergency Response (Reference 2.4).

4.2.10 One (1) case of disposable coveralls at each of the four (4) locations.

4.3 Upon reaching their predesignated locations the survey teams shall verify communications with the Operation Support Center Radiation Protection Supervisor and maintain open communications.

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4.4.1.4 Prevent movement of the vehicle especially from leaving the protected area.

4.4.1.5 When all personnel have cleared the area notify the OSC RP Supervisor and await instructions, i.e., a) proceed to the evacuation facility to assist or b) report back to the OSC.

4.5 The Evacuation Facilities survey teams shall stand by at the designated evacuation facility in preparation for monitoring incoming personnel in the event of a subsequent Site Evacuation.

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4.5.1.4 Post a Radiation Control Zone around the contaminated vehicle.

4.5.1.5 Survey the area to determine the existence of further contamination.

4.5.1.6 Document all surveys per Reference 2.5.

4.6 Survey teams shall be supplemented, relieved, or secured as directed by the Radiation Protection Manager.

5. Enclosures

N/A

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1) ID No. RP/0/A/5700/026
Revision No. 001

PREPARATION

(2) Station **McGuire Nuclear Station**

(3) Procedure Title Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)

(4) Prepared By _____ Date 1/31/00

(5) Requires 10CFR50.59 evaluation?

- [x] Yes (New procedure or revision with major changes)
- [ ] No (Revision with minor changes)
- [ ] No (To incorporate previously approved changes)

(6) Reviewed By S. Hackney (QR) Date 2/17/00

Cross-Disciplinary Review By _____ (QR) NA JSN Date 2/17/00

Reactivity Mgmt. Review By _____ (QR) NA JSN Date 2/17/00

(7) Additional Reviews

Reviewed By _____ Date 2/4/00

Reviewed By _____ Date 2/9/00

(8) Temporary Approval *(if necessary)*

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) Approved By _____ Date 3/6/2000

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

(10) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(11) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- ☐ Yes ☐ N/A Check lists and/or blanks initialed, signed, dated or filled in NA, as appropriate?
- ☐ Yes ☐ N/A Listed enclosures attached?
- ☐ Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐ Yes ☐ N/A Charts, graphs, etc. attached, dated, identified, and marked?
- ☐ Yes ☐ N/A Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company McGuire Nuclear Station **Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)** **Multiple Use**	Procedure No. RP/**0**/A/5700/026 Revision No. 001 Electronic Reference No. MP0070NJ

NOTE: Any technical changes to this procedure will be performed by the appropriate Operations or Engineering personnel. Operations or Engineering personnel will complete the required 10CFR50.59 reviews/signatures and then submit the procedure change to Emergency Planning personnel for an "Additional Review" and overall "Approval" of the Procedure Process Record. The "Additional Review" by Emergency Planning will be focused on verification that any steps providing instructions to the Control Room include references to valid OPS procedures.

Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)

1. Symptoms

This procedure will normally be performed by Operations Procedure Support and System Engineering Manager positions in the Technical Support Center (TSC) to provide for the technical evaluation of the appropriate plant equipment and/or plant parameters. The exact plant equipment and/or plant parameters to be monitored will be determined by the Operations Procedure Support and System Engineering Manager positions based on the existing and potential plant status. RP/0/A/5700/012 [Activation of the Technical Support Center (TSC)] activation checklist will direct Operations and Engineering personnel to obtain this procedure as the TSC is being staffed.

2. Immediate Actions

None

3. Subsequent Actions

NOTE: This procedure is not intended to be followed in a step-by step sequence. Sections of the procedure are to be implemented as the applicable action becomes necessary.

3.1 Operations and Engineering personnel will review the current plant status and begin evaluation of the various plant equipment/parameters as directed in Enclosures 4.1 (Operations Procedure Support Technical Evaluation Checklist) and 4.2 (System Engineering Manager Technical Evaluation Checklist).

3.2 Each represented group is responsible for ensuring their appropriate checklist are completed (Enclosures 4.1 and 4.2)

4. Enclosures

4.1 Operations Procedure Support Technical Evaluation Checklist

4.2 System Engineering Manager Technical Evaluation Checklist

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

NOTE:	If needed during drills or real events, up to date VTO flow diagrams are maintained in the Work Control Center (WCC). {PIP-M-99-05381}.

——— **PERFORM** the following if NS actuates during this event {PIPs 0-M93-807, 0-M97-397}

1. During NS pump operation in recirculation, monitor Sump Level and confirm corresponding containment pressure decay. **IF** corresponding containment pressure decay is not observed and/or sump level decreases are evidenced, **THEN** NS piping leakage may be present in the annulus. Assess need to secure affected train and rely on remaining NS train and/or ND spray capability.

2. **WHEN** CPCS interlock is met AND continued NS capability is required during the event, **THEN** ensure NS pump is run AT LEAST once per 12 hours. Pump should be run long enough to establish NS flow and refill NS header. DO NOT run NS longer than required, especially if suction is still on FWST (to prevent swap to cold leg recirc). Refer to OP/1(2)/A/6200/07 (Containment Spray System).

3. **WHEN** CPCS is controlling operation of the NS pumps **AND** both trains of NS are no longer required, **THEN** secure one NS train to minimize pump cycling and the potential for water hammer as follows:

   a. Reset Containment Spray on train to be secured.

   b. Stop one train NS Pump.

   c. Close NS Pump discharge isolation valves on secured train.

   d. **IF** NS System capability is still required, **THEN** ensure secured train is run at least once per 12 hours PER Step 2 above.

4. **WHEN** no longer running NS Pump(s) every 12 hours, **THEN** perform the following within 12 hours of last NS Pump run:

   a. Tagout NS Pumps to prevent NS operation.
   b. Do not clear NS Pump tags until NS headers drained.
   c. **WHEN** conditions allow, **THEN** drain NS header(s) on secured NS train(s). Refer to OP/1(2)/A/6200/07, Containment Spray System.

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

_____ **PERFORM** the following if a faulted S/G outside containment exists: {DW - 93 -024}

1. Request RP to monitor area of steam release to atmosphere for radiation and to notify TSC of any abnormal radiation condition

2. **IF** abnormal radition exists on faulted S/G. **THEN** evaluate potential rupture on S/G using:

   - NC inventory control
   - Faulted S/G level and pressure.

_____ **PERFORM** the following to turn off H2 Igniters when desired. {PIP-0-M97-0222}

1. Determine if adequate core cooling has existed for this entire event.

2. **IF** adequate core cooling has existed for this entire event, **THEN**:

   WHEN containment pressure is less than .25 PSIG, **THEN** turn H2 Igniters off.

3. **IF** inadequate core cooling has existed during this event, **THEN** turn H2 Igniters off 24 hours after adequate core cooling has been established.

NOTE:
- If seal return containment isolation valves are closed, seal return will go to PRT.
- Closing seal return containment isolation valves if NCDT pressure approaches VCT pressure prevents back flow through NC pump #2 and 3 seals. {PIP M95-1902}
- NCDT relief pressure is 100 psig.

CAUTION:
- If excess letdown is in service, it must be aligned to NCDT prior to closing seal return containment isolation valves.
- Closing seal return containment isolation valves will reduce NC pump seal DP by approximately 100 psid.
- An evaluation must be done prior to pumping high activity water outside containment.

——— **IF** normal NCDT cooling and release has been lost (LOOP, SI, Loss of VI), **THEN** monitor NCDT temperature and pressure:

- **IF** NCDT pressure is approaching VCT pressure, **THEN** evaluate making recommendation to close and maintain closed the seal return containment isolation valves 1(2)NV-94AC and 95B), or to reduce NCDT pressure. If NCDT pressure is greater than or equal to VCT pressure, and NV-94AC or 95B is closed, place info tag on valves to contact TSC prior to opening.

- **IF** NCDT pumps are running without KC cooling water (SI or Loss VI) for an extended period of time, and NCDT temperature is approaching 200°F, **THEN** evaluate stopping NCDT pumps prior to flashing KC water in NCDT Hx, or exceeding NCDT piping design temperatures. (Ref MCFD 1(2)565-01.01 and 1(2)573-03.01).

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

—— **PERFORM** the following if a loss of off-site power has occurred during this event: {PIP 0-M95-2052}

1. **IF** off-site power cannot be restored for at least 48 hours from when loss of off-site power occurred, **THEN** perform the following to align power to IPB fans prior to power restoration:

   a. Notify the Control room that IPB fan cooling is required to dry out ductwork prior to power restoration to associated unit's busses.

NOTE:	Time to complete these actions will depend upon availability of alternate power sources.

   b. Verify retail power is available (by measuring voltage) at either Unit 1 Retail Power Panel (located in front of Warehouse #1) or Unit 2 Retail Power Panel (located near Unit 2 turbine building roll-up door). Voltage of approximately 600 VAC should be observed.

   c. **IF** voltage is not present at either retail power panel, **THEN** arrangements to have portable (rental or other means) generator brought on site needs to be made. The portable generator should be sized to be able to run a 150 HP motor rated at 575, 3 phase, 60 Hz VAC with 140 FLA and 870 LRA.

   d. From retail panel or portable power source, run 3/c 2/0 cable or larger, to applicable MCC (1MXG for 1A, 1MXH for 1B, 2MXG for 2A and 2MXH for 2B) for fan to be used. Use site engineering criteria or NEC for alternate cable based upon availability and actual cable length based upon location of power source.

   e. **WHEN** power is aligned to IPB fan, **THEN** dispatch operator to start fan **PER** OP/1/B/6300/10 **OR** OP/2/B/6300/10 (Generator Isolated Phase Bus Cooling), Enclosure 4.4 (Isolated Phase Bus Cooling system Operation in Once-Through Cooling Mode) for a minimum of 2 hours prior to re-energizing buslin3es to ensure moisture has been removed from IPB ductwork.

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

_____ **WITHIN** 10 hours of SI initiation, and prior to the onset of Spent Fuel Pool boiling, evaluate restoring SFP cooling **PER** AP/1(2)/A/5500/041 (Loss Of Spent Fuel Pool Cooling Or Level). {PIP 0-M96-3040}

_____ **PERFORM** the following if a S/G PORV isolation valve was required to be closed to isolate a failed open or leaking S/G PORV{PIP 0-M98-1325}:

NOTE:	As affected S/G pressure drops, the S/G PORV isolation valve may start leaking. This may be a concern if the S/G is ruptured.

1 . Locally monitor affected S/G PORV line for leakage while depressurizing associated S/G.
2. **IF** S/G PORV starts leaking again, **THEN** dispatch operator to close PORV isolation valve further.

_____ As S/Gs are depressurized, ensure CA control valves for idle CA pumps are also throttled as required to prevent CA suction sources from overfilling S/Gs (due to gravity feed).

_____ **IF AT ANY TIME** containment radiation read on EMF - 51A or B ever reaches 10 E5 R/hr, **THEN** notify control room to ensure abnormal containment condition (ACC) setpoints are used in the emergency procedures.{DW - 93-27} (This criteria is used in addition to reaching 3 PSIG in containment. Note that for design basis events, using just the 3 PSIG containment pressure criteria is adequate for determining when ACC setpoints must be used. For some beyond basis LOCAs outside containment, high containment radiation may be reached hours into the event, without reaching 3 PSIG in containment).

_____ **IF AT ANY TIME** Emergency Coolant Recirc is established and subsequently lost, **THEN REFER TO** EP/1(2)/A/5000/ECA-1.1 (Loss Of Emergency Coolant Recirc) for guidance to maintain core cooling {DW - 93-39 & DW - 96 -16}

_____ **IF AT ANY TIME** all of the following conditions exist, **THEN** evaluate the need to perform steps to transfer to Hot Leg Recirc at times greater than or equal to times specified in EP/1(2)/A/5000/E-1 (Loss of Reactor or Secondary Coolant). {DW-97-2}

- LOCA inside containment.
  AND
- Transfer to Cold Leg Recirc had been completed.
  AND
- EP/1/(2)A/5000/E-1 (Loss of Reactor or Secondary Coolant) is NOT in effect.
  AND
- NC subcooling based on core exit thermocouples is less than 0°.

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

_____ **PROVIDE** completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

NOTE:	If needed during drills or real events, up to date VTO flow diagrams are maintained in the Work Control Center (WCC). {PIP-M-99-05381}.

——— **MONITOR** RN/KC heat exchanger differential pressure and schedule a heat exchanger superflush (per the RN System Operating Procedure OP/1/A/6400/06, Enclosure 4.9 or OP/2/A/6400/06, Enclosure 4.9) if the five minute average corrected differential pressure(P1222 or P1223) exceeds 9.0 psid on a continuous basis. Differential pressure readings should be taken on the following schedule:{PIP 0-M94-1429}

First reading: As soon as possible after TSC activation

Subsequent readings: dp 0 - 8 psid, every 2 hours
dp 8.1 - 8.9 psid, every 30 minutes

——— **PERFORM** the following if NS actuates during this event {PIPs 0-M93-807, 0-M97-397}

1. During NS pump operation in recirculation, monitor Sump Level and confirm corresponding containment pressure decay. **IF** corresponding containment pressure decay is not observed and/or sump level decreases are evidenced, **THEN** NS piping leakage may be present in the annulus. Assess need to secure affected train and rely on remaining NS train and/or ND spray capability.

2. **WHEN** CPCS interlock is met AND continued NS capability is required during the event, **THEN** ensure NS pump is run AT LEAST once per 12 hours. Pump should be run long enough to establish NS flow and refill NS header. DO NOT run NS longer than required, especially if suction is still on FWST (to prevent swap to cold leg recirc). Refer to OP/1(2)/A/6200/07 (Containment Spray System).

3. **WHEN** CPCS is controlling operation of the NS pumps **AND** both trains of NS are no longer required, **THEN** secure one NS train to minimize pump cycling and the potential for water hammer as follows:

   a. Reset Containment Spray on train to be secured.

   b. Stop one train NS Pump.

   c. Close NS Pump discharge isolation valves on secured train.

   d. **IF** NS System capability is still required, **THEN** ensure secured train is run at least once per 12 hours PER Step 2 above.

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

4. **WHEN** no longer running NS Pump(s) every 12 hours, **THEN** perform the following within 12 hours of last NS Pump run:

   a. Tagout NS Pumps to prevent NS operation.

   b. Do not clear NS Pump tags until NS headers drained.

   c. **WHEN** conditions allow, **THEN** drain NS header(s) on secured NS train(s). Refer to OP/1(2)/A/6200/07, Containment Spray System.

——— Actions TSC System Engineering Manager must take following an ESF actuation and automatic alignment of RN Train B to the Stanby Nuclear Service Water Pond{PIP-0-M-00281}:

1. **IF** the operating YC Chiller is **NOT** supplied service water from the SNSWP, **THEN** no action is required.

2. **IF** the operating YC Chiller is supplied service water from the SNSWP, **THEN** monitor SNSWP temperature to ensure the supply temperature is less than or equal to 84 degrees F. Monitoring should begin at approximately 100 hours from the initiation of the ESF actuation and continue every 24 hours as long as the YC Chiller is supplied cooling water from the SNSWP.

3. **IF** SNSWP temperature is greater then 84 degrees F, **THEN** recommend that the operating RN Train should be aligned to Lake Norman (following the reset of the ESF signals) to ensure proper operation of the YC Chillers.

——— **PERFORM** the following to turn off H2 Igniters when desired. {PIP-0-M97-0222}

1. Determine if adequate core cooling has existed for this entire event.

2. **IF** adequate core cooling has existed for this entire event, **THEN**:
   WHEN containment pressure is less than .25 PSIG, **THEN** turn H2 Igniters off.

3. **IF** inadequate core cooling has existed during this event, **THEN** turn H2 Igniters off 24 hours after adequate core cooling has been established.

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

NOTE:
- If seal return containment isolation valves are closed, seal return will go to PRT.
- Closing seal return containment isolation valves if NCDT pressure approaches VCT pressure prevents back flow through NC pump #2 and 3 seals. {PIP M95-1902}
- NCDT relief pressure is 100 psig.

CAUTION:
- If excess letdown is in service, it must be aligned to NCDT prior to closing seal return containment isolation valves.
- Closing seal return containment isolation valves will reduce NC pump seal DP by approximately 100 psid.
- An evaluation must be done prior to pumping high activity water outside containment.

——— **IF** normal NCDT cooling and release has been lost (LOOP, SI, Loss of VI), **THEN** monitor NCDT temperature and pressure:

- **IF** NCDT pressure is approaching VCT pressure, **THEN** evaluate making recommendation to close and maintain closed the seal return containment isolation valves 1(2)NV-94AC and 95B), or to reduce NCDT pressure. If NCDT pressure is greater than or equal to VCT pressure, and NV-94AC or 95B is closed, place info tag on valves to contact TSC prior to opening.
- **IF** NCDT pumps are running without KC cooling water (SI or Loss VI) for an extended period of time, and NCDT temperature is approaching 200°F, **THEN** evaluate stopping NCDT pumps prior to flashing KC water in NCDT Hx, or exceeding NCDT piping design temperatures. (Ref MCFD 1(2)565-01.01 and 1(2)573-03.01)

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

——— **PERFORM** the following if a loss of off-site power has occurred during this event: {PIP 0-M95-2052}

1. **IF** off-site power cannot be restored for at least 48 hours from when loss of off-site power occurred, **THEN** perform the following to align power to IPB fans prior to power restoration:

   a. Notify the Control room that IPB fan cooling is required to dry out ductwork prior to power restoration to associated unit's busses.

NOTE: Time to complete these actions will depend upon availability of alternate power sources.

   b. Verify retail power is available (by measuring voltage) at either Unit 1 Retail Power Panel (located in front of Warehouse #1) or Unit 2 Retail Power Panel (located near Unit 2 turbine building roll-up door). Voltage of approximately 600 VAC should be observed.

   c. **IF** voltage is not present at either retail power panel, **THEN** arrangements to have portable (rental or other means) generator brought on site needs to be made. The portable generator should be sized to be able to run a 150 HP motor rated at 575, 3 phase, 60 Hz VAC with 140 FLA and 870 LRA.

   d. From retail panel or portable power source, run 3/c 2/0 cable or larger, to applicable MCC (1MXG for 1A, 1MXH for 1B, 2MXG for 2A and 2MXH for 2B) for fan to be used. Use site engineering criteria or NEC for alternate cable based upon availability and actual cable length based upon location of power source.

   e. **WHEN** power is aligned to IPB fan, **THEN** dispatch operator to start fan **PER** OP/1/B/6300/10 **OR** OP/2/B/6300/10 (Generator Isolated Phase Bus Cooling), Enclosure 4.4 (Isolated Phase Bus Cooling System Operation in Once-Through Cooling Mode) for a minimum of 2 hours prior to re-energizing buslines to ensure moisture has been removed from IPB ductwork.

——— **IF** NV auxiliary spray is used on Unit 1, **THEN** evaluate number of charging nozzle thermal transients per PIP-0-M-97-325. (The number of transients depends on charging flow and how many times check valve 1NV-20 may have cycled.)

——— **WITHIN** 10 hours of SI initiation, and prior to the onset of Spent Fuel Pool boiling, evaluate restoring SFP cooling **PER** AP/1(2)/A/5500/041 (Loss Of Spent Fuel Pool Cooling Or Level). {PIP 0-M96-3040}

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

_____ **PERFORM** the following if a S/G PORV isolation valve was required to be closed to isolate a failed open or leaking S/G PORV {PIP 0-M98-1325}:

NOTE:	As affected S/G pressure drops, the S/G PORV isolation valve may start leaking. This may be a concern if the S/G is ruptured.

1. Locally monitor affected S/G PORV line for leakage while depressurizing associated S/G.
2. **IF** S/G PORV starts leaking again, **THEN** dispatch operator to close PORV isolation valve further.

_____ As S/Gs are depressurized, ensure CA control valves for idle CA pumps are throttled as required to prevent CA suction sources from overfilling S/Gs (due to gravity feed).

_____ **IF AT ANY TIME** containment radiation read on EMF - 51A or B ever reaches 10 E5 R/hr,**THEN** notify control room to ensure abnormal containment condition (ACC) setpoints are used in the emergency procedures.{DW - 93-27} (This criteria is used in addition to reaching 3 PSIG in containment. Note that for design basis events, using just the 3 PSIG containment pressure criteria is adequate for determining when ACC setpoints must be used. For some beyond basis LOCAs outside containment, high containment radiation may be reached hours into the event, without reaching 3 PSIG in containment.

_____ **IF AT ANY TIME** all of the following conditions exist, **THEN** evaluate the need to perform steps to transfer to Hot Leg Recirc at times greater than or equal to times specified in EP/1(2)/A/5000/E-1 (Loss of Reactor or Secondary Coolant). {DW-97-2}

- LOCA inside containment.
  AND
- Transfer to Cold Leg Recirc had been completed.
  AND
- EP/1/(2)A/5000/E-1 (Loss of Reactor or Secondary Coolant) is NOT in effect.
  AND
- NC subcooling based on core exit thermocouples is less than 0°.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1) ID No. RP/0/A/5700/026
Revision No. 001

PREPARATION

(2) Station **McGuire Nuclear Station**

(3) Procedure Title Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)

(4) Prepared By _____ Date 1/31/00

(5) Requires 10CFR50.59 evaluation?

- [x] Yes (New procedure or revision with major changes)
- [ ] No (Revision with minor changes)
- [ ] No (To incorporate previously approved changes)

(6) Reviewed By S. Hackney (QR) Date 2/17/00

Cross-Disciplinary Review By _____ (QR) NA JSN Date 2/17/00

Reactivity Mgmt. Review By _____ (QR) NA JSN Date 2/11/00

(7) Additional Reviews

Reviewed By _____ Date 2/4/00

Reviewed By _____ Date 2/9/00

(8) Temporary Approval *(if necessary)*

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) Approved By _____ Date 3/6/2000

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

(10) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(11) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- [ ] Yes [ ] N/A Check lists and/or blanks initialed, signed, dated or filled in NA, as appropriate?
- [ ] Yes [ ] N/A Listed enclosures attached?
- [ ] Yes [ ] N/A Data sheets attached, completed, dated and signed?
- [ ] Yes [ ] N/A Charts, graphs, etc. attached, dated, identified, and marked?
- [ ] Yes [ ] N/A Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company McGuire Nuclear Station **Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)** **Multiple Use**	Procedure No. RP/**0**/A/5700/026 Revision No. 001 Electronic Reference No. MP0070NJ

NOTE: Any technical changes to this procedure will be performed by the appropriate Operations or Engineering personnel. Operations or Engineering personnel will complete the required 10CFR50.59 reviews/signatures and then submit the procedure change to Emergency Planning personnel for an "Additional Review" and overall "Approval" of the Procedure Process Record. The "Additional Review" by Emergency Planning will be focused on verification that any steps providing instructions to the Control Room include references to valid OPS procedures.

Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)

1. Symptoms

This procedure will normally be performed by Operations Procedure Support and System Engineering Manager positions in the Technical Support Center (TSC) to provide for the technical evaluation of the appropriate plant equipment and/or plant parameters. The exact plant equipment and/or plant parameters to be monitored will be determined by the Operations Procedure Support and System Engineering Manager positions based on the existing and potential plant status. RP/0/A/5700/012 [Activation of the Technical Support Center (TSC)] activation checklist will direct Operations and Engineering personnel to obtain this procedure as the TSC is being staffed.

2. Immediate Actions

None

3. Subsequent Actions

NOTE: This procedure is not intended to be followed in a step-by step sequence. Sections of the procedure are to be implemented as the applicable action becomes necessary.

3.1 Operations and Engineering personnel will review the current plant status and begin evaluation of the various plant equipment/parameters as directed in Enclosures 4.1 (Operations Procedure Support Technical Evaluation Checklist) and 4.2 (System Engineering Manager Technical Evaluation Checklist).

3.2 Each represented group is responsible for ensuring their appropriate checklist are completed (Enclosures 4.1 and 4.2)

4. Enclosures

4.1 Operations Procedure Support Technical Evaluation Checklist

4.2 System Engineering Manager Technical Evaluation Checklist

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

NOTE:	If needed during drills or real events, up to date VTO flow diagrams are maintained in the Work Control Center (WCC). {PIP-M-99-05381}.

——— **PERFORM** the following if NS actuates during this event {PIPs 0-M93-807, 0-M97-397}

1. During NS pump operation in recirculation, monitor Sump Level and confirm corresponding containment pressure decay. **IF** corresponding containment pressure decay is not observed and/or sump level decreases are evidenced, **THEN** NS piping leakage may be present in the annulus. Assess need to secure affected train and rely on remaining NS train and/or ND spray capability.

2. **WHEN** CPCS interlock is met AND continued NS capability is required during the event, **THEN** ensure NS pump is run AT LEAST once per 12 hours. Pump should be run long enough to establish NS flow and refill NS header. DO NOT run NS longer than required, especially if suction is still on FWST (to prevent swap to cold leg recirc). Refer to OP/1(2)/A/6200/07 (Containment Spray System).

3. **WHEN** CPCS is controlling operation of the NS pumps **AND** both trains of NS are no longer required, **THEN** secure one NS train to minimize pump cycling and the potential for water hammer as follows:

   a. Reset Containment Spray on train to be secured.

   b. Stop one train NS Pump.

   c. Close NS Pump discharge isolation valves on secured train.

   d. **IF** NS System capability is still required, **THEN** ensure secured train is run at least once per 12 hours PER Step 2 above.

4. **WHEN** no longer running NS Pump(s) every 12 hours, **THEN** perform the following within 12 hours of last NS Pump run:

   a. Tagout NS Pumps to prevent NS operation.
   b. Do not clear NS Pump tags until NS headers drained.
   c. **WHEN** conditions allow, **THEN** drain NS header(s) on secured NS train(s). Refer to OP/1(2)/A/6200/07, Containment Spray System.

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

_____ **PERFORM** the following if a faulted S/G outside containment exists: {DW - 93 -024}

1. Request RP to monitor area of steam release to atmosphere for radiation and to notify TSC of any abnormal radiation condition

2. **IF** abnormal radition exists on faulted S/G. **THEN** evaluate potential rupture on S/G using:

   - NC inventory control
   - Faulted S/G level and pressure.

_____ **PERFORM** the following to turn off H2 Igniters when desired. {PIP-0-M97-0222}

1. Determine if adequate core cooling has existed for this entire event.

2. **IF** adequate core cooling has existed for this entire event, **THEN**:

   WHEN containment pressure is less than .25 PSIG, **THEN** turn H2 Igniters off.

3. **IF** inadequate core cooling has existed during this event, **THEN** turn H2 Igniters off 24 hours after adequate core cooling has been established.

NOTE:
- If seal return containment isolation valves are closed, seal return will go to PRT.
- Closing seal return containment isolation valves if NCDT pressure approaches VCT pressure prevents back flow through NC pump #2 and 3 seals. {PIP M95-1902}
- NCDT relief pressure is 100 psig.

CAUTION:
- If excess letdown is in service, it must be aligned to NCDT prior to closing seal return containment isolation valves.
- Closing seal return containment isolation valves will reduce NC pump seal DP by approximately 100 psid.
- An evaluation must be done prior to pumping high activity water outside containment.

——— **IF** normal NCDT cooling and release has been lost (LOOP, SI, Loss of VI), **THEN** monitor NCDT temperature and pressure:

- **IF** NCDT pressure is approaching VCT pressure, **THEN** evaluate making recommendation to close and maintain closed the seal return containment isolation valves 1(2)NV-94AC and 95B), or to reduce NCDT pressure. If NCDT pressure is greater than or equal to VCT pressure, and NV-94AC or 95B is closed, place info tag on valves to contact TSC prior to opening.

- **IF** NCDT pumps are running without KC cooling water (SI or Loss VI) for an extended period of time, and NCDT temperature is approaching 200°F, **THEN** evaluate stopping NCDT pumps prior to flashing KC water in NCDT Hx, or exceeding NCDT piping design temperatures. (Ref MCFD 1(2)565-01.01 and 1(2)573-03.01).

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

——— **PERFORM** the following if a loss of off-site power has occurred during this event: {PIP 0-M95-2052}

1. **IF** off-site power cannot be restored for at least 48 hours from when loss of off-site power occurred, **THEN** perform the following to align power to IPB fans prior to power restoration:

   a. Notify the Control room that IPB fan cooling is required to dry out ductwork prior to power restoration to associated unit's busses.

NOTE:	Time to complete these actions will depend upon availability of alternate power sources.

   b. Verify retail power is available (by measuring voltage) at either Unit 1 Retail Power Panel (located in front of Warehouse #1) or Unit 2 Retail Power Panel (located near Unit 2 turbine building roll-up door). Voltage of approximately 600 VAC should be observed.

   c. **IF** voltage is not present at either retail power panel, **THEN** arrangements to have portable (rental or other means) generator brought on site needs to be made. The portable generator should be sized to be able to run a 150 HP motor rated at 575, 3 phase, 60 Hz VAC with 140 FLA and 870 LRA.

   d. From retail panel or portable power source, run 3/c 2/0 cable or larger, to applicable MCC (1MXG for 1A, 1MXH for 1B, 2MXG for 2A and 2MXH for 2B) for fan to be used. Use site engineering criteria or NEC for alternate cable based upon availability and actual cable length based upon location of power source.

   e. **WHEN** power is aligned to IPB fan, **THEN** dispatch operator to start fan **PER** OP/1/B/6300/10 **OR** OP/2/B/6300/10 (Generator Isolated Phase Bus Cooling), Enclosure 4.4 (Isolated Phase Bus Cooling system Operation in Once-Through Cooling Mode) for a minimum of 2 hours prior to re-energizing buslin3es to ensure moisture has been removed from IPB ductwork.

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

_____ **WITHIN** 10 hours of SI initiation, and prior to the onset of Spent Fuel Pool boiling, evaluate restoring SFP cooling **PER** AP/1(2)/A/5500/041 (Loss Of Spent Fuel Pool Cooling Or Level). {PIP 0-M96-3040}

_____ **PERFORM** the following if a S/G PORV isolation valve was required to be closed to isolate a failed open or leaking S/G PORV{PIP 0-M98-1325}:

NOTE:	As affected S/G pressure drops, the S/G PORV isolation valve may start leaking. This may be a concern if the S/G is ruptured.

1 . Locally monitor affected S/G PORV line for leakage while depressurizing associated S/G.
2. **IF** S/G PORV starts leaking again, **THEN** dispatch operator to close PORV isolation valve further.

_____ As S/Gs are depressurized, ensure CA control valves for idle CA pumps are also throttled as required to prevent CA suction sources from overfilling S/Gs (due to gravity feed).

_____ **IF AT ANY TIME** containment radiation read on EMF - 51A or B ever reaches 10 E5 R/hr, **THEN** notify control room to ensure abnormal containment condition (ACC) setpoints are used in the emergency procedures.{DW - 93-27} (This criteria is used in addition to reaching 3 PSIG in containment. Note that for design basis events, using just the 3 PSIG containment pressure criteria is adequate for determining when ACC setpoints must be used. For some beyond basis LOCAs outside containment, high containment radiation may be reached hours into the event, without reaching 3 PSIG in containment).

_____ **IF AT ANY TIME** Emergency Coolant Recirc is established and subsequently lost, **THEN REFER TO** EP/1(2)/A/5000/ECA-1.1 (Loss Of Emergency Coolant Recirc) for guidance to maintain core cooling {DW - 93-39 & DW - 96 -16}

_____ **IF AT ANY TIME** all of the following conditions exist, **THEN** evaluate the need to perform steps to transfer to Hot Leg Recirc at times greater than or equal to times specified in EP/1(2)/A/5000/E-1 (Loss of Reactor or Secondary Coolant). {DW-97-2}

- LOCA inside containment.
  AND
- Transfer to Cold Leg Recirc had been completed.
  AND
- EP/1/(2)A/5000/E-1 (Loss of Reactor or Secondary Coolant) is NOT in effect.
  AND
- NC subcooling based on core exit thermocouples is less than 0°.

OPERATIONS PROCEDURE SUPPORT
TECHNICAL EVALUATION CHECKLIST

_____ **PROVIDE** completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

NOTE: If needed during drills or real events, up to date VTO flow diagrams are maintained in the Work Control Center (WCC). {PIP-M-99-05381}.

——— **MONITOR** RN/KC heat exchanger differential pressure and schedule a heat exchanger superflush (per the RN System Operating Procedure OP/1/A/6400/06, Enclosure 4.9 or OP/2/A/6400/06, Enclosure 4.9) if the five minute average corrected differential pressure(P1222 or P1223) exceeds 9.0 psid on a continuous basis. Differential pressure readings should be taken on the following schedule:{PIP 0-M94-1429}

First reading: As soon as possible after TSC activation

Subsequent readings: dp 0 - 8 psid, every 2 hours
dp 8.1 - 8.9 psid, every 30 minutes

——— **PERFORM** the following if NS actuates during this event {PIPs 0-M93-807, 0-M97-397}

1. During NS pump operation in recirculation, monitor Sump Level and confirm corresponding containment pressure decay. **IF** corresponding containment pressure decay is not observed and/or sump level decreases are evidenced, **THEN** NS piping leakage may be present in the annulus. Assess need to secure affected train and rely on remaining NS train and/or ND spray capability.

2. **WHEN** CPCS interlock is met AND continued NS capability is required during the event, **THEN** ensure NS pump is run AT LEAST once per 12 hours. Pump should be run long enough to establish NS flow and refill NS header. DO NOT run NS longer than required, especially if suction is still on FWST (to prevent swap to cold leg recirc). Refer to OP/1(2)/A/6200/07 (Containment Spray System).

3. **WHEN** CPCS is controlling operation of the NS pumps **AND** both trains of NS are no longer required, **THEN** secure one NS train to minimize pump cycling and the potential for water hammer as follows:

   a. Reset Containment Spray on train to be secured.

   b. Stop one train NS Pump.

   c. Close NS Pump discharge isolation valves on secured train.

   d. **IF** NS System capability is still required, **THEN** ensure secured train is run at least once per 12 hours PER Step 2 above.

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

4. **WHEN** no longer running NS Pump(s) every 12 hours, **THEN** perform the following within 12 hours of last NS Pump run:

   a. Tagout NS Pumps to prevent NS operation.

   b. Do not clear NS Pump tags until NS headers drained.

   c. **WHEN** conditions allow, **THEN** drain NS header(s) on secured NS train(s). Refer to OP/1(2)/A/6200/07, Containment Spray System.

——— Actions TSC System Engineering Manager must take following an ESF actuation and automatic alignment of RN Train B to the Stanby Nuclear Service Water Pond{PIP-0-M-00281}:

1. **IF** the operating YC Chiller is **NOT** supplied service water from the SNSWP, **THEN** no action is required.

2. **IF** the operating YC Chiller is supplied service water from the SNSWP, **THEN** monitor SNSWP temperature to ensure the supply temperature is less than or equal to 84 degrees F. Monitoring should begin at approximately 100 hours from the initiation of the ESF actuation and continue every 24 hours as long as the YC Chiller is supplied cooling water from the SNSWP.

3. **IF** SNSWP temperature is greater then 84 degrees F, **THEN** recommend that the operating RN Train should be aligned to Lake Norman (following the reset of the ESF signals) to ensure proper operation of the YC Chillers.

——— **PERFORM** the following to turn off H2 Igniters when desired. {PIP-0-M97-0222}

1. Determine if adequate core cooling has existed for this entire event.

2. **IF** adequate core cooling has existed for this entire event, **THEN**:
   WHEN containment pressure is less than .25 PSIG, **THEN** turn H2 Igniters off.

3. **IF** inadequate core cooling has existed during this event, **THEN** turn H2 Igniters off 24 hours after adequate core cooling has been established.

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

NOTE:
- If seal return containment isolation valves are closed, seal return will go to PRT.
- Closing seal return containment isolation valves if NCDT pressure approaches VCT pressure prevents back flow through NC pump #2 and 3 seals. {PIP M95-1902}
- NCDT relief pressure is 100 psig.

CAUTION:
- If excess letdown is in service, it must be aligned to NCDT prior to closing seal return containment isolation valves.
- Closing seal return containment isolation valves will reduce NC pump seal DP by approximately 100 psid.
- An evaluation must be done prior to pumping high activity water outside containment.

——— **IF** normal NCDT cooling and release has been lost (LOOP, SI, Loss of VI), **THEN** monitor NCDT temperature and pressure:

- **IF** NCDT pressure is approaching VCT pressure, **THEN** evaluate making recommendation to close and maintain closed the seal return containment isolation valves 1(2)NV-94AC and 95B), or to reduce NCDT pressure. If NCDT pressure is greater than or equal to VCT pressure, and NV-94AC or 95B is closed, place info tag on valves to contact TSC prior to opening.
- **IF** NCDT pumps are running without KC cooling water (SI or Loss VI) for an extended period of time, and NCDT temperature is approaching 200°F, **THEN** evaluate stopping NCDT pumps prior to flashing KC water in NCDT Hx, or exceeding NCDT piping design temperatures. (Ref MCFD 1(2)565-01.01 and 1(2)573-03.01)

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

——— **PERFORM** the following if a loss of off-site power has occurred during this event: {PIP 0-M95-2052}

1. **IF** off-site power cannot be restored for at least 48 hours from when loss of off-site power occurred, **THEN** perform the following to align power to IPB fans prior to power restoration:

   a. Notify the Control room that IPB fan cooling is required to dry out ductwork prior to power restoration to associated unit's busses.

NOTE: Time to complete these actions will depend upon availability of alternate power sources.

   b. Verify retail power is available (by measuring voltage) at either Unit 1 Retail Power Panel (located in front of Warehouse #1) or Unit 2 Retail Power Panel (located near Unit 2 turbine building roll-up door). Voltage of approximately 600 VAC should be observed.

   c. **IF** voltage is not present at either retail power panel, **THEN** arrangements to have portable (rental or other means) generator brought on site needs to be made. The portable generator should be sized to be able to run a 150 HP motor rated at 575, 3 phase, 60 Hz VAC with 140 FLA and 870 LRA.

   d. From retail panel or portable power source, run 3/c 2/0 cable or larger, to applicable MCC (1MXG for 1A, 1MXH for 1B, 2MXG for 2A and 2MXH for 2B) for fan to be used. Use site engineering criteria or NEC for alternate cable based upon availability and actual cable length based upon location of power source.

   e. **WHEN** power is aligned to IPB fan, **THEN** dispatch operator to start fan **PER** OP/1/B/6300/10 **OR** OP/2/B/6300/10 (Generator Isolated Phase Bus Cooling), Enclosure 4.4 (Isolated Phase Bus Cooling System Operation in Once-Through Cooling Mode) for a minimum of 2 hours prior to re-energizing buslines to ensure moisture has been removed from IPB ductwork.

——— **IF** NV auxiliary spray is used on Unit 1, **THEN** evaluate number of charging nozzle thermal transients per PIP-0-M-97-325. (The number of transients depends on charging flow and how many times check valve 1NV-20 may have cycled.)

——— **WITHIN** 10 hours of SI initiation, and prior to the onset of Spent Fuel Pool boiling, evaluate restoring SFP cooling **PER** AP/1(2)/A/5500/041 (Loss Of Spent Fuel Pool Cooling Or Level). {PIP 0-M96-3040}

SYSTEM ENGINEERING MANAGER
TECHNICAL EVALUATION CHECKLIST

_____ **PERFORM** the following if a S/G PORV isolation valve was required to be closed to isolate a failed open or leaking S/G PORV {PIP 0-M98-1325}:

NOTE:	As affected S/G pressure drops, the S/G PORV isolation valve may start leaking. This may be a concern if the S/G is ruptured.

1. Locally monitor affected S/G PORV line for leakage while depressurizing associated S/G.
2. **IF** S/G PORV starts leaking again, **THEN** dispatch operator to close PORV isolation valve further.

_____ As S/Gs are depressurized, ensure CA control valves for idle CA pumps are throttled as required to prevent CA suction sources from overfilling S/Gs (due to gravity feed).

_____ **IF AT ANY TIME** containment radiation read on EMF - 51A or B ever reaches 10 E5 R/hr,**THEN** notify control room to ensure abnormal containment condition (ACC) setpoints are used in the emergency procedures.{DW - 93-27} (This criteria is used in addition to reaching 3 PSIG in containment. Note that for design basis events, using just the 3 PSIG containment pressure criteria is adequate for determining when ACC setpoints must be used. For some beyond basis LOCAs outside containment, high containment radiation may be reached hours into the event, without reaching 3 PSIG in containment.

_____ **IF AT ANY TIME** all of the following conditions exist, **THEN** evaluate the need to perform steps to transfer to Hot Leg Recirc at times greater than or equal to times specified in EP/1(2)/A/5000/E-1 (Loss of Reactor or Secondary Coolant). {DW-97-2}

- LOCA inside containment.
  AND
- Transfer to Cold Leg Recirc had been completed.
  AND
- EP/1/(2)A/5000/E-1 (Loss of Reactor or Secondary Coolant) is NOT in effect.
  AND
- NC subcooling based on core exit thermocouples is less than 0°.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1) ID No. RP/0/A/5700/012
Revision No. 017

PREPARATION

(2) Station **McGuire Nuclear Station**

(3) Procedure Title Activation of the Technical Support Center (TSC)

(4) Prepared By _____ Date 2/28/00

(5) Requires 10CFR50.59 evaluation?

- [x] Yes (New procedure or revision with major changes)
- [ ] No (Revision with minor changes)
- [ ] No (To incorporate previously approved changes)

(6) Reviewed By Alan L. Beaver (QR) Date 3/2/00

Cross-Disciplinary Review By _____ (QR) NA AEB Date 3/2/00

Reactivity Mgmt. Review By _____ (QR) NA AEB Date 3/2/00

(7) Additional Reviews

Reviewed By _____ Date _____

Reviewed By _____ Date _____

(8) Temporary Approval *(if necessary)*

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) Approved By _____ Date 3/6/2000

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

(10) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(11) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- [ ] Yes [ ] N/A Check lists and/or blanks initialed, signed, dated or filled in NA, as appropriate?
- [ ] Yes [ ] N/A Listed enclosures attached?
- [ ] Yes [ ] N/A Data sheets attached, completed, dated and signed?
- [ ] Yes [ ] N/A Charts, graphs, etc. attached, dated, identified, and marked?
- [ ] Yes [ ] N/A Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company McGuire Nuclear Station **Activation of the Technical Support Center (TSC)** **Multiple Use**	Procedure No. **RP/0/A/5700/012** Revision No. 017 Electronic Reference No. MC0048MF

Activation of the Technical Support Center (TSC)

1. Symptoms

Conditions exist where events are in progress or have occurred which indicate a potential degradation of the level of safety of the plant and activation of the Emergency Response Organization (ERO) has been initiated.

2. Immediate Actions

None

3. Subsequent Actions

NOTE: This procedure is not intended to be followed in a step-by step sequence. Sections of the procedure are to be implemented as the applicable action becomes necessary.

3.1 The TSC is required to be activated for an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. It may also be activated for an UNUSUAL EVENT if deemed necessary by the Operations Shift Manager/Emergency Coordinator.

3.2 The TSC must be activated within ONE (1)HOUR AND 15 MINUTES (75 MINUTES) of an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. This time frame must be met anytime it is deemed necessary to activate the TSC.

3.3 Upon notification to activate, the station manager or designee shall report and notify Operations Shift Manager in the Control Room of arrival.

3.3.1 Personnel in the Emergency Response Organization (ERO) assigned to the TSC shall report to the facility upon notification to activate.

3.3.2 The initial responders shall be responsible for the completion of their appropriate group enclosures and having Operational Responsibilities reviewed.

3.4 Each represented group is responsible for ensuring their appropriate initial checklist is completed.

3.5 The following definitions are applicable to the Emergency Notification Form for "Plant Condition": {PIP 0-M97-4210 NRC-1}

- **Improving**: Emergency conditions are improving in the direction of a lower classification or termination of the event.
- **Stable:** The emergency situation is under control. Emergency core cooling systems, equipment, plant, etc., are operating as designed.
- **Degrading**: Given current and projected plant conditions/equipment status, recovery efforts are not expected to prevent entry into a higher emergency classification or the need to upgrade offsite Protective Action Recommendations.

3.6 Upon termination of the drill/emergency, the Emergency Coordinator/designee shall assume responsibility for ensuring the proper resolutions to all completed copies of the McGuire Operations Configuration Control Card(s) prior to the TSC/OSC being deactivated. The Emergency Coordinator/designee shall have overall responsibility for ensuring all cards are properly resolved or items logged prior to plant turn-over to the Operations Shift Manager. Once the items/cards have been properly resolved, the TSC/OSC may be deactivated. All completed cards shall be filed by Emergency Planning with other drill/emergency paperwork.

4. Enclosures

4.1 Emergency Coordinator Initial TSC Activation Checklist/Operational Responsibilities

4.2 Assistant Emergency Coordinator Initial TSC Activation Checklist/Operational Responsibilities

4.3 Radiation Protection Manager Initial TSC Activation Checklist/Operational Responsibilities

4.4 Offsite Dose Assessor Initial TSC Activation Checklist/Operational Responsibilities

4.5 Offsite Agency Communicator Initial TSC Activation Checklist/Operational Responsibilities

4.6 NRC Communicator Initial TSC Activation Checklist/Operational Responsibilities

4.7 Reactor Engineer Initial TSC Activation Checklist/Operational Responsibilities

4.8 Operations Manager in the TSC Initial TSC Activation Checklist/Operational Responsibilities

4.9 Operations Procedure Support Initial TSC Activation Checklist/Operational Responsibilities

4.10 System Engineering Manager Initial TSC Activation Checklist/Operational Responsibilities

4.11 Emergency Planner Initial TSC Activation Checklist

4.12 Status Coordinator Initial TSC Activation Checklist

4.13 IAE Communications Initial TSC Activation Checklist

4.14 Operations Manager in the Control Room Activation Checklist/Operational Responsibilities

4.15 Data Coordinator Initial TSC Activation Checklist/Operational Responsibilities

4.16 Site Assembly Coordinator Initial TSC Activation Checklist

4.17 Emergency Coordinator / Emergency Operations Facility Director Turnover Checklist

4.18 Emergency Classification Termination Criteria

4.19 Fitness For Duty Questionnaire

4.20 Site Evacuation Coordinator Initial TSC Activation Checklist

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **ESTABLISH** a log of activities.

——— **NOTIFY** the Operations Shift Manager in the Control Room of arrival.

——— **RECEIVE** turnover from the Control Room as soon as practical utilizing Enclosure 4.17.

——— **ASSURE** the following TSC positions as a minimum are filled and prepared to assume their function prior to declaring the TSC activated:

-Emergency Coordinator
-Offsite Dose Assessor
-Offsite Agency Communicator
-NRC Communicator
-Reactor Engineer

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **CONDUCT** a Time Out prior to activating the TSC.

——— **DECLARE** the TSC activated and announce the following via the TSC/OSC public address system: "This is _____. I am the Emergency Coordinator. The TSC is officially activated as of _____. The plant status is as follows:

_____.

OR

"This is _____. I am the Emergency Coordinator. The TSC is officially activated as of _____. I will give an update in ____ minutes.

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **ANNOUNCE** over the TSC/OSC public address system the following:

"Anyone who is reporting to this facility outside of your normal work hours and has consumed alcohol within the past five (5) hours, notify either the Emergency Coordinator in the TSC or the OSC Coordinator in the OSC."

——— **ENSURE** the Data Coordinator has synchronized the clocks in the TSC. {PIP 0-M98-3522}

NOTE: The following step should be repeated following each shift turnover.

——— **ANNOUNCE** to TSC a reminder to complete a "Work Hour Extension Form" if applicable. {PIP 0-M98-2099}.

——— **TURN OFF** the plant page volume in TSC.

——— **DISCUSS** with the Radiation Protection Manager any radiological release or offsite radiological concerns.

——— **ANNOUNCE** over the TSC/OSC Public Address System the following if a release has occurred:

-Assume areas are contaminated until surveyed by RP.

-No eating or drinking until the TSC and OSC are cleared by RP.

——— **EVALUATE** with TSC personnel and the Radiation Protection Manager the need to conduct evacuation at this time based on the following criteria.

- Alert- determine by actual plant conditions
- Site Area Emergency- consider evacuation/relocation of non-essential personnel.
- General Emergency- evacuate all non-essential personnel
- Notify EOF anytime personnel are relocated onsite or evacuated from the premises.

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **REQUEST** all TSC and OSC Managers to have **FAXED** to the **OSC** the name, social security number and RP badge number of any person(s) who may be left onsite after evacuation of non-essential personnel but are located in an area other than the OSC.

_____ **UPON** declaration of a General Emergency the Emergency Coordinator shall **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Offsite Dose Assessor, Enclosure 4.4, page 5 of 6, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

OR

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **DIRECT** the Assistant Emergency Coordinator to FAX the turnover checklist (Enclosure 4.17) to the EOF Director (if time and situation permit). {PIP-0-M97-4112}

——— **CONDUCT** turnover to the EOF Director (EOFD) utilizing Enclosure 4.17.

NOTE: Provide periodic updates to the EOFD concerning plant status and request EOFD to provide assessment and field monitoring data on a periodic basis.

——— **REQUEST** the NRC Communicator to notify the NRC the EOF is activated.

——— **ANNOUNCE** to the TSC and OSC the EOF is activated.

——— **REVIEW** Operational Responsibilities (Enclosure 4.1, page 7 of 7).

——— **ENSURE** ALL completed copies of the McGuire Operations Configuration Control Cards are properly resolved prior to deactivation of the TSC/OSC.

IF the TSC becomes environmentally uninhabitable due to radiological or other conditions and the Control Room remains secure (habitable), **THEN:**

——— **SELECT** individuals to move inside the Control Room.

——— **INSTRUCT** all other TSC personnel to go to the EOF.

——— **IF** the Control Room also becomes uninhabitable due to radiological or other conditions, **THEN INSTRUCT** TSC personnel to report to the Simulator at the Training and Technology Center or EOF.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility

EMERGENCY COORDINATOR
OPERATIONAL RESPONSIBILITIES

1. Assure the TSC is maintained in a professional manner. Remind all groups to minimize noise and congestion.

2. Approximately every thirty (30) minutes, conduct a "Time-out" with the TSC staff to obtain current plant status. Ensure the OSC is aware of when "Time-outs" will take place.

3. Ensure all unnecessary communications are put on hold during "Time-outs".{PIP 0-M95-0160}

4. Establish priorities.

5. Following time out, announce to the TSC and OSC the emergency classification, plant status, and priorities via the TSC/OSC public address system.

6. Institute procedures necessary to allow the Control Room to maintain control of the emergency condition.

7. Establish communications with the EOF Director at the Emergency Operations Facility.

8. Establish communications with Federal, State and Local authorities at county warning points or Emergency Operations Centers.

9. Maintain line of communications with these agencies to ensure they are informed of plant emergency conditions at all times.

10. Make decisions concerning all aspects of the emergency situation including alternate strategies (outside of procedures) as plant conditions necessitate.

11. Periodically assess the need for 24 hour staffing and have the managers prepare as needed.

12. Establish a Recovery Organization **PER** (RP/0/A/5700/024, Recovery and Reentry Procedure) once the Emergency has been terminated. Applicable primarily for Site Area Emergency and General Emergency classifications. Refer to Enclosure 4.18 for Termination Criteria.

13. Make decisions on emergency classifications, mitigation strategies, contingency plans and protective actions for plant personnel and the general public.

14. Serve as Lead Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

ASSISTANT EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ASSIST** the Emergency Coordinator in gathering information to facilitate the activation of the Technical Support Center.

——— **FAX** turnover checklist (Enclosure 4.17) to the EOF Director when directed by the Emergency Coordinator. {PIP-0-M97-4112}

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

ASSISTANT EMERGENCY COORDINATOR OPERATIONAL RESPONSIBILITIES

1. Assist the Emergency Coordinator in all aspects of Emergency Response.
2. Act as a receiver of information when the Emergency Coordinator is unavailable and relay the information to the Emergency Coordinator in a timely manner.
3. Proactively seek information when the Emergency Coordinator is in a reactive mode.
4. Make face-to-face confirmation of information provided when the Emergency Coordinator is unavailable.
5. Serve as the Emergency Coordinator when needed.
6. Assist in making decisions on emergency classifications, mitigation strategies, contingency plans and protective actions for plant personnel and the general public.
7. Assist Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster and **ENSURE** all Radiation Protection personnel reporting to the TSC also sign the roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

_____ **ESTABLISH** communications with RP personnel in the OSC, Shift Lab and EOF using the cell phone, dial 4980. (Let it ring until you hear a beep. This connects you to the bridge line.).

_____ **COMMUNICATE** through Emergency Coordinator that dosimetry is required and a dose card shall be filled out if necessary (drill SRWP is 33).{PIP 0-M94-1495}

——— **DISCUSS** the following with Emergency Coordinator:

1) Any release in progress including dose rates (especially at the site boundary)
2) Field Team status/data
3) Onsite radiological concerns

_____ **ESTABLISH** contamination control in the TSC, OSC and Control Room as necessary.

1. **COMMUNICATE** through the Emergency Coordinator that frisking of hands and feet is required prior to entry.{PIP 0-M94-1495}

2. **ESTABLISH** smear survey frequency with OSC RP Supervisor (i.e., every 30 minutes).

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **EVALUATE** the need to administer Potassium Iodide to emergency workers on site and to Field Monitoring teams in accordance with HP/0/B/1009/016. Make a log entry describing the evaluation and subsequent decisions. {PIP M-99-5031}.

_____ **EVALUATE** with the Emergency Coordinator the need to:

1) Move any Assembly Points in the release path
2) Conduct site and/or area evacuation
3) Recommend protective actions for emergency workers
4) Recommend protective actions for the public.

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **UPON** declaration of a General Emergency the Emergency Coordinator shall **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Offsite Dose Assessor, Enclosure 4.4, page 5 of 6, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4,page 4 of 6 using wind direction.

OR

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

_____ **IF** SAMGs are implemented **AND** offsite releases approach, or exceed, 1Rem TEDE or 5 Rem Thyroid CDE, **THEN** notify the TSC Lead SAMG Evaluator. {PIP-M-99-5381}.

_____ **IF** a situation, which is immediately hazardous to life or valuable property, exists, **THEN** evaluate potential dose rates by one of the following methods:

1. Contact RP shift at Ext. 4282
2. Assess area monitors

AND

Ensure a Request for Emergency Exposure is completed in the OSC prior to dispatch of emergency workers.

_____ **REVIEW** RP/0/A/5700/000 criteria (EMFs, offsite dose, etc.) for emergency classification changes and discuss with OPS Procedure Support position.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

RADIATION PROTECTION MANAGER OPERATIONAL RESPONSIBILITIES

1. Provide and coordinate Radiation Protection resources as necessary.
2. Assure RP responders complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting outside their normal working hours.
3. Ensure all TSC personnel are wearing dosimetry and using dose cards (SRWP 33).
4. Ensure all necessary precautions of the Radiation Protection Manual Emergency Procedures are adhered to (i.e. administer Potassium Iodine tablets as required.)
5. Discuss with Operations Support Manager information regarding plant conditions such as power failures, valve closures as necessary.
6. Ensure responders are aware of the need for frisking prior to entry into the TSC as conditions dictate.
7. Prepare for 24 hour coverage as necessary.
8. Determine if persons with special radiological exposure limits need to be evacuated (e.g. declared pregnant women, people with radio-pharmaceutical limitations).

OFFSITE DOSE ASSESSOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

_____ **SIGN** in on the TSC staffing board and put on position badge.

_____ **SIGN** the TSC roster.

_____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

_____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

_____ **ESTABLISH** a log of activities.

_____ **TURN ON** dose assessment and data acquisition computers and acquire necessary information. If data acquisition programs are unavailable, information may be obtained from SDS or the Control Room (EMF and Met data).

_____ **OBTAIN** copies of the following procedures:

- RO/0/A/5700/000 (Classification Of Event)
- SH/0/B/2005/001 (Emergency Response Offsite Dose Projections).

OFFSITE DOSE ASSESSOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **UPON** declaration of a General Emergency, **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Offsite Dose Assessor, Enclosure 4.4, page 5 of 6, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

OR

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

NOTE: Be aware of the effects of loss of power on critical EMFs.

_____ **VERIFY** operability and validity of EMFs through the Shift Lab.

_____ **VERIFY** effluent discharge alignment with Shift Lab, RPM, or RP Support as necessary.

OFFSITE DOSE ASSESSOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **VERIFY** the status of on-shift Dose Assessment with the shift lab and accept the responsibility for dose assessment.

IF the TSC is not activated and the EC has not received turnover from the Control Room, **THEN**:

_____ Establish contact with and inform the OSM that the Duty dose Assessors in the TSC have assumed responsibility for Dose Assessment.

AND

_____ Provide off-site dose calculations and resultant protective action recommendations for radioactive material release to the OSM until the TSC is activated.

_____ **ESTABLISH** communications with dose assessment personnel at the EOF. Compare information, projections and strategies with the EOF. Turn over dose assessment for offsite communication purposes to EOF Dose Assessors as soon as the EOF becomes officially activated.

_____ **CHECK** operability of the HPN telephone by listening for a dial tone. If no dial tone is heard, notify the IAE Communications Specialist to persue repairs. {PIP-M-99-3800}.

_____ **RETAIN** all computer printouts or manually calculated enclosures.

_____ **TURN ON** the EMFs (54A and 54B) in the TSC from the OAC computer room by pressing the start button on each EMF control.

_____ **ENSURE** EMF22 (TSC Area Monitor) is functional.

NOTE: If a safety injection has occurred, the TSC air intakes sampled by EMF-54A and 54B will open and the filter train is placed in service. One of the air intakes must be reopened if both EMFs are in trip 2. {PIP 0-M97-4278}

_____ **IF** EMF54A and 54B exceed the trip 2 setpoint, **THEN** raise the trip 2 setpoint on the lowest reading EMF to reopen the air intake.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OFFSITE DOSE ASSESSOR
Protective Action Zones Determination

For Containment Radiation Levels Exceeding GAP Activity		
Wind Direction (deg from N) Chart Recorder 1EEBCR9100 Point # 8 Average Upper Wind Direction {PIP 0-M98-3522}	**Evacuate** 5 Mile Radius-10 Mile Downwind	**Shelter**
0 – 22.5	L,B,M,C,N,A,D,O,R,E,S,F	G,H,I,J,K,P,Q
22.6 - 45.0	L,B,M,C,N,A,D,O,R,E,Q,S	F,G,H,I,J,K,P
45.1 - 67.5	L,B,M,C,N,A,D,O,R,E,Q,S	F,G,H,I,J,K,P
67.6 - 90.0	L,B,M,C,N,A,D,O,R,P,Q,S	E,F,G,H,I,J,K
90.1 – 112.5	L,B,M,C,N,A,D,O,R,K,P,Q,S	E,F,G,H,I,J
112.6 – 135.0	L,B,M,C,N,A,D,O,R,I,K,P,Q,S	E,F,G,H,J
135.1 – 157.5	L,B,M,C,N,A,D,O,R,I,K,P,Q	E,F,G,H,J,S
157.6 – 180.0	L,B,M,C,N,A,D,O,R,I,J,K,P	E,F,G,H,Q,S
180.1 – 202.5	L,B,M,C,N,A,D,O,R,G,H,I,J,K,P	E,F,Q,S
202.6 – 225.0	L,B,M,C,N,A,D,O,R,G,H,I,J,K,P	E,F,Q,S
225.1 – 247.5	L,B,M,C,N,A,D,O,R,F,G,H,I,J	E,K,P,Q,S
247.6 – 270.0	L,B,M,C,N,A,D,O,R,F,G,H,I,J	E,K,P,Q,S
270.1 – 292.5	L,B,M,C,N,A,D,O,R,E,F,G,H,J	I,K,P,Q,S
292.6 – 315.0	L,B,M,C,N,A,D,O,R,E,F,G	H,I,J,K,P,Q,S
315.1 – 337.5	L,B,M,C,N,A,D,O,R,E,F,G	H,I,J,K,P,Q,S
337.6 – 359.9	L,B,M,C,N,A,D,O,R,E,F,S	G,H,I,J,K,P,Q

Wind Speed Greater than 5 Miles per Hour		
Wind Direction (deg from N) Chart Recorder 1EEBCR9100 Point # 8 Average Upper Wind Direction{PIP 0-M98-3522}	**Evacuate** 2 Mile Radius-5 Mile Downwind	**Shelter**
0 – 22.5	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
22.6 - 45.0	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
45.1 - 67.5	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
67.6 - 90.0	L,B,M,C,D,O,R,N	A,E,F,G,H,I,J,K,P,Q,S
90.1 – 112.5	L,B,M,C,O,R,N	A,D,E,F,G,H,I,J,K,P,Q,S
112.6 – 135.0	L,B,M,C,O,N,R,A	D,E,F,G,H,I,J,K,P,Q,S
135.1 – 157.5	L,B,M,C,O,A,N	D,E,F,G,H,I,J,K,P,Q,R,S
157.6 – 180.0	L,B,M,C,A,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
180.1 – 202.5	L,B,M,C,A,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
202.6 – 225.0	L,B,M,C,A,N,D	E,F,G,H,I,J,K,O,P,Q,R,S
225.1 – 247.5	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
247.6 – 270.0	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
270.1 – 292.5	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
292.6 – 315.0	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
315.1 – 337.5	L,B,M,C,D,R	A,E,F,G,H,I,J,K,N,O,P,Q,S
337.6 – 359.9	L,B,M,C,D,R	A,E,F,G,H,I,J,K,N,O,P,Q,S

OFFSITE DOSE ASSESSOR
GUIDANCE FOR OFFSITE PROTECTIVE ACTIONS

GUIDANCE FOR DETERMINATION OF GAP ACTIVITY

INITIAL

NOTE: Fission product inventory inside containment is greater than gap activity if the containment radiation level exceeds the levels in the table below.

——— If the OAC is available, call up the following computer points based on need

Unit 1 OAC		Unit 2 OAC	
M1A0829	1EMF51A	M2A0829	2EMF51A
M1A0835	1EMF51B	M2A0835	2EMF51B

Time Shutdown (Hours)	Containment Monitor Reading (R/HR) EMF51A or 51B
0	2,340
0-2	864
2-4	624
4-8	450
> 8	265

OFFSITE DOSE ASSESSOR
OPERATIONAL RESPONSIBILITIES

1. Provide technical expertise to the OSM, the Emergency Coordinator, and other members of the TSC as required.

2. Provide initial offsite dose calculations and resultant protective action recommendations for releases of radioactive material until assumed by the EOF.

3. Perform offsite dose projections and determine protective action recommendations. Dose projections shall be run at least every 30 minutes or as directed by the RPM.

4. Evaluate dose projections and protective action recommendations. Make recommendations to the RPM and/or Emergency Coordinator.

5. Provide emergency communication personnel with dose assessment and other pertinent technical data through the preparation of the Emergency Notification Form and other offsite communications.

6. Obtain all pertinent information including plant status, emergency classification, meteorological data, and release potential.

OFFSITE AGENCY COMMUNICATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

_____ **SIGN** in on the TSC staffing board and put on position badge.

_____ **SIGN** the TSC roster.

_____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

_____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

_____ **ESTABLISH** a log of activities.

NOTE:	**ANY** information sent to the EOF other than **ENF FORMS** (TSC/EOF Turnover Sheet, SAMG Strategy Sheets, etc) should be faxed to Fax Machine in EOF Director Area. Fax number 382 - 1825. {PIP 0-M98-2065}

_____ **OBTAIN** a copy of RP/0/A/5700/018, (Notifications to the State and Counties from the Technical Support Center), from the procedures cabinet.

_____ **EXECUTE** RP/0/A/5700/018, (Notifications to the State and Counties from the Technical Support Center).

_____ **PROVIDE** copies of all notifications to Offsite Agencies (NRC, State, Counties, etc.) to the following:{PIP-0-M-99-0911}

- NRC Communicator
- Emergency Coordinator
- Emergency Planner
- Site Evacuation Coordinator.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of emergency facility.

OFFSITE AGENCY COMMUNICATOR OPERATIONAL RESPONSIBILITIES

1. Establish communications with State and Local authorities at County Warning Points or Emergency Operation Centers.
2. Maintain line of communications with these agencies to ensure they are informed of plant emergency conditions at all times.
3. Inform Emergency Coordinator of status of offsite communications (e.g., next message due).
4. Prepare for 24 hour coverage as necessary.
5. Assure offsite agency communicators in the EOF are aware of information affecting offsite agencies even after turnover has occurred (e.g. fire in the motor control center has been put out.)

NRC COMMUNICATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **OBTAIN** a copy of the current classification procedure from the procedure cabinet:
-Notification Of Unusual Event, RP/0/A/5700/001
-Alert, RP/0/A/5700/002
-Site Area Emergency, RP/0/A/5700/003
-General Emergency, RP/0/A/5700/004.

NOTE:
- The only turnover from the Control Room the TSC NRC Communicator takes is responsibility for communications to the NRC.{PIP 0-M94-1496}
- For drills use the plant phone system to call the simulator at ext. 5597.

——— **CONTACT** Control Room of arrival and determine if initial (1 hr.) NRC communication has been completed.

——— **PERFORM** (if necessary) initial (1 hr.) NRC notification using the Emergency Notification System (ENS).

NRC COMMUNICATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **ESTABLISH** continuous communications upon request by the NRC using the cell phone by dialing 9-1-301-816-5100.

_____ **INFORM** NRC of TSC/EOF activations and plant status as requested.

_____ **PROVIDE** for 24 hour coverage as necessary.

_____ **INFORM** the NRC when the TSC is deactivated. This requires an additional call using ENS when the NRC does not require continuous communications be maintained.

_____ **CONTACT** Regulatory Compliance Duty Person if the NRC is going to arrive on site.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

REACTOR ENGINEER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

_____ **OBTAIN** a copy of RP/0/A/5700/019 (Core Damage Assessment) from the procedure cabinet.

_____ **OBTAIN** a copy of affected Unit(s) Data Book. {PIP 0-M98-3522}

REACTOR ENGINEER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **MONITOR** core conditions as appropriate using either APD, SDS or the OAC Critical Points and Steam Tables as follows:

NOTE:	If the OAC is not available, core conditions may need to be obtained from the Operations Manager in the TSC who is in contact with the Control Room.

1. Core Subcooling.
2. Reactor Vessel Water Level (RVLIS).
3. Power level if Reactor not tripped.
4. Ask the Operations Liaison to verify all rods at bottom on Reactor Tripped.
5. Source Range Trends following Reactor Trip.
6. Compare each loop T-hot, T-cold and T-avg.
7. What is the most recent boron concentration, and has there been any safety injection.
8. Reactor coolant pumps On/Off Natural or Forced circulation.
9. Pressurizer Level.
10. Containment EMFs.
11. Injection flow and letdown flow (NC inventory).
12. Containment Pressure.
13. Current burnup and previous 2 cycles EFPD.
14. The number of failed rods and DEI prior to transient.
15. Fuel Pool Temperature (Phase A or Phase B Isolation).

REACTOR ENGINEER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **REVIEW** the above parameters with an immediate focus on the trends of the following:

1. State of criticality and shutdown margin.
2. Core voiding.
3. Core uncovery.
4. Challenge to the fuel pellet fission product barrier.
5. Challenge to the cladding fission product barrier.
6. Challenge to the NCS pressure boundary.
7. NC cooldown rate.
8. Fuel Pool Heatup.

On a Safety Injection Signal the Auxiliary Building KC cooled loads are isolated by a phase A containment isolation signal. This includes KC cooling of the KF heat exchangers. A conservative estimate of the time for the spent fuel pool to reach saturation without forced cooling is approximately 10 hours. Within approximately 6 hours following a loss of forced cooling of the spent fuel pool, contact Accident Assessment (Nuclear Engineering General Office) in the EOF for a recommendation regarding initiating KC cooling to KF or alternate means of supplying fuel pool cooling.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

REACTOR ENGINEER
OPERATIONAL RESPONSIBILITIES

1. Provide System Engineering Manager and/or Operations Superintendent with information concerning any abnormal core conditions.

2. Prepare for 24-hour staffing as necessary.

3. Assist Operations Procedure Support as an Evaluator upon entry into Severe Accident Management Guidelines (SAMG).

OPERATIONS MANAGER IN THE TSC
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ESTABLISH** communications with the Control Room, OSC and EOF using the cell phone by dialing 4500 (let it ring until you hear a beep).

NOTE:	If a Security event occurs while the TSC is activated, the OPS Manager in the TSC will serve as the focal point for the coordination of activities between the OSC, TSC and Security. The information and actions decided upon should be handled through the normal communication channels with the TSC Emergency Coordinator.

——— **IF** a Security event occurs (i.e. bomb threat, sabotage, etc.) or additional communications are needed with Security personnel, have the OSC Security Officer request the SAS Security Officer to dial into the OPS bridge line (4500).

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

OPERATIONS MANAGER IN THE TSC
OPERATIONAL RESPONSIBILITIES

1. Provide main communication link between the TSC and Control Room.
2. Provide accurate and current status information to Emergency Coordinator and during time-outs.
3. Assist in making decisions on emergency classifications, mitigation strategies, and contingency plans.
4. Support Control Room personnel by providing resources and consultation as required.
5. Evaluate and prioritize requests for information from the TSC staff, EOF staff, NRC and others.
6. Evaluate and consult with Control Room personnel on suggested mitigation strategies.
7. Coordinates with the Operations Liaison requested priorities of activities in the plant.
8. Has the authority to override normal controls on activities directed by the OSC.
9. Assist Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

OPERATIONS PROCEDURE SUPPORT
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site ssembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **OBTAIN** a copy of RP/0/A/5700/000 (Classification of Emergency), from the procedures cabinet.

——— **OBTAIN** a copy of the current classification procedure from the procedure cabinet.:

-Notification Of Unusual Event, RP/0/A/5700/001
-Alert, RP/0/A/5700/002
-Site Area Emergency, RP/0/A/5700/003
-General Emergency, RP/0/A/5700/004.

_____ **OBTAIN** a copy of RP/0/A/5700/026 [Operations/Engineering Technical Evaluations In The Technical Support Center (TSC)] from the procedure cabinet and begin system/plant parameter evaluation.

NOTE:	The following step provides a listen only connection - leave headset switch in the mute position (position is taped).

_____ **ESTABLISH** communications with OPS bridge line using the cell phone by dialing 4500. (Let it ring until you hear a beep.)

——— **PROVIDE** completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

OPERATIONS PROCEDURE SUPPORT
OPERATIONAL RESPONSIBILITIES

1. Provide emergency organization with broad oversight of current conditions and direction.
2. Ensure correct emergency classifications are made by following the current plant status and procedures in use.
3. Provide back-up service to Control Room personnel ensuring the correct procedural flowpath is followed.
4. Advise Emergency Coordinator on the anticipated course of the event.
5. Prepare Control Room personnel of possible difficult points in the procedures by a look ahead.
6. Consult the EOF for possible solutions if procedural adequacy becomes a concern.
7. Provide information to Offsite Agency Communicator and the NRC Communicator as requested regarding changes in plant conditions.
8. Prepare for 24 hour coverage as necessary.
9. Serve as Lead Evaluator upon entry into Severe Accident Management Guidelines (SAMG). This duty shall include providing leadership and guidance to the other available SAMG Evaluators specifically concerning what they should be doing. {PIP-M-00-5381}.

SYSTEM ENGINEERING MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ENSURE** PC is on and displaying plant status.

——— **ESTABLISH** communications with the following and provide the SEM phone number:

- TSC Engineering Support, Ext. 4917
- EOF Accident Assessment, 382-0762
- OSC Equipment Engineering, Ext. 4971.

NOTE:	The following step provides a listen only connection. Leave head set switch in the "mute" position.

_____ **ESTABLISH** communication with the OPS bridge line, using the cell phone by dialing 4500. (Let it ring until you hear a beep.)

——— **OBTAIN** a copy of RP/0/A/5700/026 [Operations/Engineering Technical Evaluations In The Technical Support Center (TSC)] from the procedure cabinet and begin system/plant parameter evaluation.

——— **VERIFY** Engineering Support Group is connected to the Operations headset network (listen only) after the Operations Manager in the TSC ties in the OSC and EOF.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

SYSTEM ENGINEERING MANAGER
OPERATIONAL RESPONSIBILITIES

1. Coordinate accident mitigation strategy and engineering support through effective communications with the Engineering Support Group, Accident Assessment in the EOF, and the OSC.

2. Contact the on-duty EP Support Leader and request appropriate duty personnel from M/NS, ESE, and MCE when outside of normal hours.

3. Continually communicate with TSC personnel, identifying areas needing Engineering support.

4. Report all accident mitigation strategies to the Emergency Coordinator.

5. Assist Operations Procedure Support as an Evaluator upon entry into Severe Accident Management Guidelines (SAMG).

EMERGENCY PLANNER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

____ **SIGN** in on the TSC staffing board and put on position badge.

____ **SIGN** the TSC roster.

____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

____ **ESTABLISH** a log of activities.

____ **OBTAIN** time out forms from the procedure cabinet.

____ **ASSIST** the Emergency Coordinator as required to achieve a timely turnover to the EOF.{PIP 0-M98-3522}

____ **ESTABLISH** communications with EOF Emergency Planner using the cell phone by dialing 831-4010, or another available bridge line.

____ **APPRISE** Emergency Coordinator of TSC/OSC announcements.

____ **IF** Emergency Planning support is needed in the OSC, **THEN** contact additional Emergency Planning personnel and request they respond to the OSC.

____ **SUPPORT** Emergency Coordinator activity (e.g., keep in procedure).

____ **PROVIDE** support for the activation and operation of the TSC.

____ **PROVIDE** necessary NRC/State/County interface.

____ **ASSIST** Off-site Agency Communicators in preparation of emergency notifications as needed.

____ **SHARE** copy of NRC Notification forms, and Emergency Notification forms with the Status Coordinator. {PIP-0-M-99-0911}

____ **PROVIDE** support to other members of the TSC as requested.

EMERGENCY PLANNER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **PREPARE** for 24 hour coverage as necessary.

_____ **COLLECT** all completed paperwork upon deactivation of the emergency facility.

_____ **PERFORM** Enclosure 13.1 of PT/0/A/4600/091 (TSC/OSC Inventory and TSC Manuals) at the completion of the drill or event

Enclosure 4.12

STATUS COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

{PIP 0-M94-1491}

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **OBTAIN** the remote control for the overhead projector from the TSC supply cabinet.

NOTE:	The overhead projector takes several minutes to warm up

——— **TURN** main switch of remote control to **ON** position (located on right side of remote).

——— **POINT** remote to overhead projector and depress power on button.

——— **TURN** on Status Coordinator computer monitor.

——— **LOG** on using your user ID.

——— **DOUBLE CLICK** on Plant Status.doc.

——— **SAVE** as current date activation.doc (e.g. 22498 activation.doc).

STATUS COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

——— **INPUT** classification information on the electronic message board using the remote control as follows:

1. To turn "**ON**": Press **Shift and Program**.
2. To select programmed messages:
   a. **Unusual Event** Press **Program** then **Run** then **"1"** then **RUN**.
   b. **Alert** Press **Program** then **Run** then "**2**" then **RUN**.
   c. **Site Area Emergency** Press **Program** then **Run** then "**3**" then **RUN**.
   d. **General Emergency** Press **Program** then **Run** then "**4**" then **RUN**.
3. To Turn "OFF": Press **Shift and Program**.

——— **ENTER** plant/equipment status as appropriate on electronic document.

——— **PRINT** the current display prior to announced time outs.

NOTE:	The Emergency Planner is provided copies of all NRC Notification forms and Emergency Notification forms. These may be useful in maintaining the TSC log. {PIP-0-M-99-0911}

——— **ESTABLISH** a log of all activities to ensure the following:

- Record the time of entry
- List entries in chronological order and include enough detail to reconstruct event series at a later date.

——— **LOG** entries should include but are not limited to the following examples:

- Emergency Coordinator and any change in Emergency Coordinator
- Time at which the TSC is operational
- Present emergency classification, changes in classification, time of declaration

STATUS COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

- Plant Conditions (Unit 1 and 2):

  - Core Cooling information (i.e., Time To Boiling, etc.)
  - Safety Systems Degraded:
  - Power Supply Status:
  - Fission Product Barrier Degradation
  - Radiation Releases

- Procedures in effect and any transition to another procedure.

- Actions taken that are not a part of an approved procedure.

- Any abnormal or unexpected plant response.

- Major equipment manipulations.

- Major mitigation actions taken.

- Site assembly or evacuation of all or any part of the plant.

- Personnel Injuries

- Recovery Action(s) in Progress

- Expected time of next Time-Out.

——— **ENSURE** the status board is maintained with current information:

3 or 4 highest priority "recovery actions" set by the Emergency Coordinator.

relevant plant status information captured under "General Information."

——— **TRACK** established priorities.

——— **PREPARE** for 24-hour coverage.

——— **PROVIDE** all completed paperwork (Activation checklist and status board printouts) to Emergency Planning upon deactivation of the emergency facility.

——— **SHUTDOWN** computer, monitor and remote control.

——— **RETURN** remote control to supply cabinet.

IAE COMMUNICATIONS
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ENSURE** all necessary equipment needed to support the TSC is operable.

- Video Conferencing
- Phones
- Faxes
- Headsets
- Page System.

——— **IF** IAE Communications support is needed in the OSC, **THEN** contact additional IAE Communications personnel and request they respond to the OSC.

——— **PREPARE** for 24 hour coverage as necessary.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OPERATIONS MANAGER IN THE CONTROL ROOM
INITIAL TSC ACTIVATION CHECKLIST

Initial

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **RECEIVE** a verbal report from the OSM detailing plant status, emergency class, and shift staffing level.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ESTABLISH** communications with the TSC, OSC and EOF using the cell phone by dialing 4500. (Let it ring until you hear a beep.) (Each time a party connects, a beep will be heard.)

——— **IF** time critical tasks are designated by the OSM, **THEN** request the OSC OPS Liaison immediately make available an operator/team for prompt dispatch by the OSM via hand-held radio. {PIP 0-M96-1576}

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facilities.

OPERATIONS MANAGER IN THE CONTROL ROOM OPERATIONAL RESPONSIBILITIES

1. Provide main communication link from the Control Room or Simulator to the TSC, OSC and EOF.
2. Provide accurate and current task status information to the OSM as needed for non-time critical tasks.
3. Assist in making decisions on emergency classifications, mitigation strategies and contingency plans.
4. Support Control Room personnel by directing resources and providing consultation as required.
5. Expedite time critical tasks for the OSM by clear communication to the OSC via the OPS Liaison. The OSM is responsible for designating time critical tasks originating from the Control Room. Once a task originating from the Control Room is designated time critical, the OSM, or designee, shall direct the OPS Manager in the Control Room to request the OSC OPS Liaison to immediately make available an operator (or team) from the OSC contingent for prompt dispatch into the plant via hand held radio. Completion of OSC Task Work Sheet paperwork shall not delay time critical task dispatches. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. Time critical task dispatches originating from the Control Room shall remain under direct control of the Control Room crew until the subject task is complete and the person (or team) has returned to the OSC and completed debriefing. {PIP 0-M96-1576} {PIP 0-M98-3522}
6. Evaluate and prioritize for the Control Room requests for information from TSC, OSC, EOF, NRC and others.
7. Evaluate and consult with Control Room personnel on suggested mitigation strategies.
8. Coordinate with the Operations Liaison requested priorities of activities in the plant.
9. Has the authority to override normal controls on activities directed by the OSC as necessary.
10. After the shift NLOs have been dispatched to the OSC, inform the OSM of your responsibility to make NLOs available to the Control Room for time critical tasks as needed.
11. Notify the TSC OPS Procedure Support position of all Emergency Procedure transitions. {PIP 0-M97-4112}

DATA COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ACCESS** SDS in the TSC.

NOTE: **ERDS is not activated for drills unless directed to do so by Emergency Planning. {PIP-M-00-561}.**

ERDS can only be activated / deactivated from designated computer terminals with SDS access. These are located in the Shift Work Manager's Office, the Data Coordinators' room in the TSC and all within the Control Room horse shoe area.

ERDS is **NOT** activated for a Notification of Unusual Event. {PIP-0-M-99-2929}

——— **IF** the Emergency Response Data System (ERDS) is not activated, **THEN** activate ERDS as follows:

——— Ensure SDS is running on the selected terminal.

——— Click on MAIN.

——— Click on GENERAL.

——— Click on ERDS.

——— Click on ACTIVATE.

——— Record the date and time ERDS was activated in the log section of the Data Coordinator notebook located at the OAC terminals in the TSC.

DATA COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ Inform the OSM that ERDS was activated.

_____ **IF** ERDS failed to activate after five (5) attempts, **THEN** have the NRC Communicator notify the NRC via ENS or other available means. {PIP-M-99-5381}.

TERMINATE ERDS once the event is over by performing the following:

_____ Click on Terminate.

_____ **ENSURE** facility clocks are synchronized as follows:

_____ Using a network connected PC, enter "NETTIME\\MNSF1" at a command prompt. The time returned should match the PC's time.

- Verify that the time appears accurate.
- Use the returned time to sync the clocks with the large red digits mounted on the walls of the TSC.
- Synchronize the wall clocks of the OSC with the wall clocks of the TSC.
- Contact the EOF Data Coordinator to ensure the EOF clocks match the TSC/OSC clocks. {PIP-0-M-99-0911, PIP-0-M-99-2301}

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

DATA COORDINATOR
OPERATIONAL RESPONSIBILITIES

1. Provide support in the area of Computer Services and data acquisition.
2. Provide computer support for both software and hardware applications of data review in the TSC and the transfer of data to offsite locations.
3. Terminate ERDS when the event is terminated.
4. Prepare for 24-hour coverage as necessary.

SITE ASSEMBLY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **GET** TLD and pocket dosimetry.

——— **COMPLETE** dose card

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the badge reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point, report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ESTABLISH** and maintain communications with the SAS by calling Ext. 2191 to obtain status of the site assembly.

NOTE:	Extension 4458 and 4977 are forwarded to Security at 4550 when the TSC is not activated.

——— **CLEAR** the forward feature from extension 4458 and 4977 (located in the Site Assembly Coordinator office) by following the instructions located on the desk..

——— **RECORD** site assembly start time _____ (announced from Control Room or available through the Operations Manager in the TSC.)

NOTE:	Approximately 20 minutes into the site assembly, the assembly locations will contact the Site Assembly Coordinator with names and badge numbers of personnel who were unable to swipe at the assembly locations.

——— **WHEN** Security provides a printout of unaccounted personnel, **THEN CHECK OFF** personnel who could not swipe at their assembly point (request this from security about 20 to 25 minutes into the site assembly).

SITE ASSEMBLY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	During Drills, the number of personnel at each assembly point should be determined if time permits. This information is necessary in the event of an evacuation.

_____ **CONTACT** the various assembly points to determine the approximate number of personnel at each location.

_____ **RECORD** the approximate number of personnel at each assembly point on the board located in the Site Assembly Coordinators office.

NOTE:	During a TSC "time out" a Site Assembly or Evacuation Coordinator **SHALL** report to the designated location at the Emergency Coordinator's Table to provide status/updates. {PIP-0-M98-2065}

RECORD site assembly completion time _____.

_____ **REQUEST** the OPS Manager in the TSC have the Control Room to STOP site assembly alarms and announcements.

_____ **DISCUSS** standing down from site assembly with the Emergency Coordinator. If okay to stand down, **REQUEST** Ops Manager in the TSC have the Control Room to give the stand down from site assembly. If **NOT** okay to stand down from site assembly, Site Evacuation coordinator will make announcements as directed by Enclosure 4.20.

NOTE:	The following message will be communicated to the site at the conclusion of site assembly by the control room.

_____ **IF** requested to do so by the control room, **ANNOUNCE** the stand down message below:

Drill Message for standing down from Site Assembly: Dial 710; at the beep, dial 80, begin speaking

"Attention all station personnel. This is a drill message. This is a drill message. You have been assembled as part of an emergency exercise. If this were an actual emergency, you would be asked to remain assembled waiting on further information, or given instructions to leave the site in accordance with our site evacuation plan. You may now return to your normal work assignments. Thank you for your participation.

SITE ASSEMBLY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **AFTER** the drill message for standing down from site assembly is announced, **EVALUATE** the need to initiate search and rescue of missing personnel and discuss with Emergency Coordinator.

_____ **POST** periodic site assembly updates on site assembly/evacuation board as needed.

_____ **PROVIDE** periodic updates to the Emergency Coordinator, as needed and during time outs, concerning site assembly status.

_____ **PREPARE** for 24-hour coverage for your position as necessary.

NOTE:	If the Site Assembly portion of the Emergency / Drill is complete. The Site Assembly Coordinator should assist the Site Evacuation Coordinator with Emergency/ Drill message updates and evacuation coordination.

_____ **WHEN** the TSC is deactivated, then **FORWARD** extension 4458 and 4977 to Security at extension 4550.

_____ **REPLACE** the signs on the extension 4458 and 4977 warning personnel about using the two extensions.

_____ **PROVIDE** all completed paperwork to the Emergency Planner upon deactivation of the emergency facility.

SITE PAGING SYSTEM
INDIVIDUAL PAGING NUMBERS

NOTE:	710 covers all of these areas.

711, then speak	MOC
712 , then speak	Garage
713 , then speak	Medical
714 , then speak	NAB
715 , then speak	MTF
718 , then speak	Cowans Ford
719 , then speak	Plant
720 , then speak	Island Training Center
721 , then speak	Island Environmental Center
722 , then speak	Island Tech Services Center
723 , then speak	Island Energy Explorium

Enclosure 4.17

Emergency Coordinator/Emergency Operations Facility Director Turnover Checklist

PLANT CONDITIONS

Time_____ Date_____ Plant and Unit(s) Affected_____

Status of Unaffected Unit_____

Reactor Power Level (or Operating Mode if shutdown) Unit 1_____ Unit 2_____

Emergency Classification_____

List the problems ongoing at this time_____

_____

_____

Status of off-site and onsite power supplies (including diesels):

D/G A_____ SATA_____ BUSS Line A_____

D/G B_____ SATB_____ BUSS Line B_____

RADIOLOGICAL STATUS

Onsite and off-site radiological status_____

_____

_____

Site Assembly conducted: Yes _____ No _____

Site Evacuation: Yes_____No _____ Time of Evacuation_____

Evacuation Location_____

Number of field monitoring teams assembled_____

Number of field monitoring teams deployed_____

Protective Action Recommendations provided to state/counties_____

- Evacuate_____
- Shelter_____

OFF-SITE COMMUNICATIONS

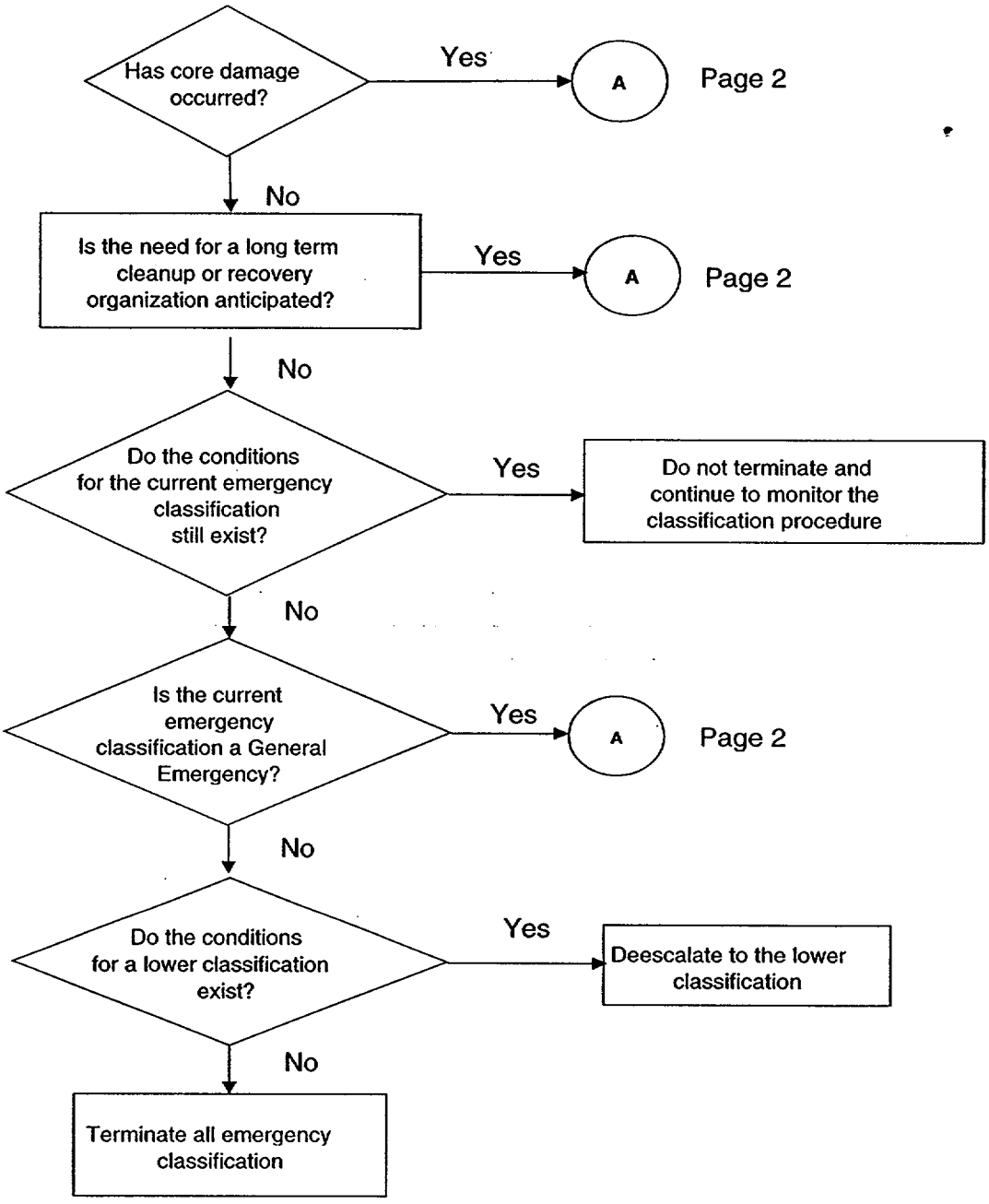
Off-Site Communicators' next Emergency Notification Form Due_____
(Time)

Communications checks complete and ready for turnover (Yes/No)_____

TSC Activation Time/Date: _____/_____

Enclosure 4.18

Emergency Classification Termination Criteria



Enclosure 4.18

Emergency Classification Termination Criteria

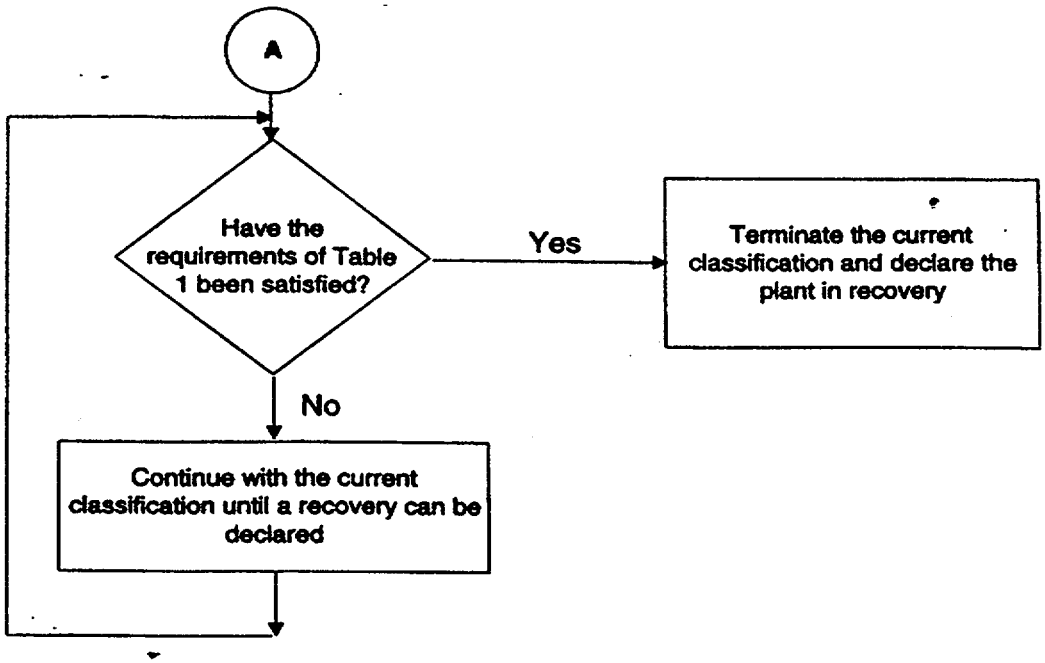


Table 1

Recovery Conditions
_____No new evacuation or sheltering protective actions are anticipated
_____Containment pressure is less than design pressure
_____Decay heat rejection to the ultimate heat sink has been established and either: • Injection and heat removal have redundancy available (2 trains of injection/DHR or a train of DHR and S/G cooling) **OR** • No additional fission product release or fission product barrier challenges would be expected for at least 2 hours following interruption of injection. {PIP 0-M96-1645}
_____The risks from recriticality are acceptably low
_____Radiation Protection is monitoring access to radiologically hazardous areas
_____Offsite conditions do not limit plant access
_____The News Manager, NRC officials, and State representatives have been consulted to determine the effects of termination on their activities
_____The recovery organization is ready to assume control of recovery operations Go to RP/0/A/5700/024, (Recovery and Reentry)

Enclosure 4.19

Fitness for Duty Questionnaire

Print Name: _____ Employee ID #: _____

Sign Name: _____ ERO Position: _____

HAVE YOU CONSUMED ALCOHOL IN THE LAST FIVE (5) HOURS?

MARK THE APPROPRIATE BOX

No ☐

If No, stop here and fold this form and drop it in the box provided.

YES ☐

If your answer is Yes, take this form to a member of management for observation.

OBSERVATION DETERMINATION

What did you have? _____

How much did you have? _____

Can you perform your function unimpaired? YES ☐ NO ☐

In my opinion, observation of this individual indicates the individual is capable of performing his/her ERO function.

_____ _____

Signature of Management Observer Date

Fold the form and drop it in the box provided.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **GET** TLD and pocket dosimetry.

——— **COMPLETE** dose card

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point, report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

_____ **ESTABLISH** a log of activities.

——— **DISCUSS** with the Site Assembly Coordinator the status of the site assembly in preparation for emergency/drill message updates and possible site evacuation.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

NOTE:	If the Site Assembly portion of the Emergency / Drill is complete. The Site Assembly Coordinator should assist the Site Evacuation Coordinator with Emergency/ Drill message updates and evacuation coordination.

_____ **IF** site assembly is still in progress **ANNOUNCE** the following Initial communication over the P.A. for the appropriate situation by dialing 710, at the beep, dial 80 and begin speaking:

For an Actual Emergency: "Attention all site personnel. This is an emergency message. This is an emergency message. At the present time, we have a _____"(emergency classification). *(Report general information of the event/information of importance. Obtain this information from the Offsite agency communicator).* _____

_____

_____

_____

All personnel inside the protected area shall remain at your site assembly location. All personnel outside of the protected area shall remain in your work area until you receive further instructions. Information will be provided to you as conditions change."

For a Drill: "Attention all site personnel. This is a drill message. This is a drill message. At the present time, we have a _____"(emergency classification). *(Report general information of the event/information of importance. Obtain this information from the Offsite Agency Communicator.):*

_____

_____

_____

_____

All personnel inside the protected area shall remain at your site assembly location. All personnel outside of the protected area may continue normal work activity. If this were an actual emergency, personnel outside the protected area would be instructed to remain at your work location."

_____ **RECORD** time of announcement _____.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

NOTE: An additional worksheet for Emergency/Drill Message Updates is on page 6 of 6.

—— **OBTAIN** off site notification information from the Off-site Agency Communicator *each time* an off-site notification is made and prepare an Emergency/ Drill Message Update as follows:

NOTE: If it is determined that an announcement should be made to the plant outside of the normal offsite agency communication, get the Emergency/ Assistant Emergency Coordinator's approval prior to the announcement. Use the message format as follows. After the notification is made, provide a copy of the announcement to the Offsite Agency Communicators.

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

—— "Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

_____
_____
_____
_____

—— **RECORD** time of announcement _____.

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

_____
_____
_____
_____

—— **RECORD** time of announcement _____.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

——— **EVALUATE** with the Radiation Protection Manager, the Emergency Coordinator and other TSC personnel the need to conduct a site evacuation or relocation of on-site personnel based on the following Event Classification criteria:

Alert- determine by actual plant conditions.

Site Area Emergency- consider evacuation/relocation of non-essential personnel.

General Emergency- evacuate all non-essential personnel.

NOTE: The following information may be provided to the EOF via the Offsite Agency Communicators. {PIP-0-M-99-0911}

_____ **NOTIFY** EOF anytime personnel are relocated onsite or evacuated from the premises.

NOTE: Evacuations planned inside the Protected Area should be made by contacting Security in the OSC with instructions. Evacuations outside the protected area should be made by contacting Security in the OSC and instructing them to coordinate activities with C&F representatives in the OSC. **When giving evacuation instructions be sure to identify the area for evacuees to relocate to** (using best judgement, advice from RP, etc.).

——— **EVALUATE** with the Radiation Protection Manager, Emergency Planner and Emergency Coordinator the following:

Recommendations on the need, path and transportation options for relocation of on-site personnel.

Recommendations on need, path and transportation options for evacuation of non-essential personnel off-site (Training Center lobby / Cowans Ford Dam or offsite / home.)

Recommendations on need to restrict vehicle (site transportation shuttle, etc.) movement on site. {PIP 0-M97-2871}

NOTE:	During a TSC "time out" a Site Assembly or Evacuation Coordinator **SHALL** report to the designated location at the Emergency Coordinator's Table to provide status/updates. {PIP-0-M98-2065}

_____ **PROVIDE** periodic updates to Emergency Coordinator as needed and during time outs on site evacuation or on site relocation of personnel.

_____ **IF** the decision is made to evacuate personnel from the site, **THEN INFORM** Off-site Agency Communicators to notify appropriate offsite agencies.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

NOTE:	Security may need to notify the Mecklenburg Police (911) requesting them to assist in traffic control, if deemed necessary by the Emergency Coordinator or Security Shift Supervisor.

_____ **IF** the decision is made to evacuate, **NOTIFY** Security to assist with traffic control as needed.

_____ **IF** evacuation of non-essential personnel is planned, **REQUEST** Managers, during a time out, to identify and inform their own essential personnel to remain, as all others will be evacuated.

_____ **IF** the decision is made to evacuate, **NOTIFY** the chosen Evacuation-Relocation site of the expected arrival of personnel.

_____ Technical Training Center - 379-3210 This is a cellular telephone carried by an industrial security guard who roams the site seven days a week, 24 hours a day,

_____ Powerhouse at Cowans Ford Dam. This phone rings throughout the dam site. This location is staffed Monday through Friday, 10 hours per day. The assess code to the Cowans Ford Dam is 3308.

NOTE:	Inform Control Room that you have already contacted Security and the Evacuation site with information about the evacuation of personnel.

_____ **IF** the decision is made to evacuate, **DIRECT** the Control Room to evacuate the site per (RP/0/A/5700/011) by calling the Control Room SRO at extension 4138 (then select option 3) and giving the following evacuation route information for non-essential personnel:

Non-essential personnel should:

A. Proceed to _____
(Training Center lobby / Cowans Ford Dam / Home / Other)

_____ **RECORD** the time the site evacuation begins_____ Ends_____

_____ **PREPARE** for 24 hour coverage for your position as necessary.

_____ **POST** updates to the site assembly / evacuation board located in the Site Assembly Coordinators office as needed.

_____ **PROVIDE** completed paperwork to the Emergency Planner upon deactivation of the emergency facility.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

ADDITIONAL WORKSHEET FOR EMERGENCY/DRILL MESSAGE UPDATES

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

____
____
____
____

RECORD time of announcement ______________. Initial____________

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

____
____
____
____

RECORD time of announcement ______________. Initial____________

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

____
____
____
____

RECORD time of announcement ______________. Initial____________

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1) ID No. RP/0/A/5700/012
Revision No. 017

PREPARATION

(2) Station **McGuire Nuclear Station**

(3) Procedure Title Activation of the Technical Support Center (TSC)

(4) Prepared By _____ Date 2/28/00

(5) Requires 10CFR50.59 evaluation?

- [x] Yes (New procedure or revision with major changes)
- [ ] No (Revision with minor changes)
- [ ] No (To incorporate previously approved changes)

(6) Reviewed By Alan L. Beaver (QR) Date 3/2/00

Cross-Disciplinary Review By _____ (QR) NA AHB Date 3/2/00

Reactivity Mgmt. Review By _____ (QR) NA AHB Date 3/2/00

(7) Additional Reviews

Reviewed By _____ Date _____

Reviewed By _____ Date _____

(8) Temporary Approval *(if necessary)*

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) Approved By _____ Date 3/6/2000

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

(10) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(11) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- ☐ Yes ☐ N/A Check lists and/or blanks initialed, signed, dated or filled in NA, as appropriate?
- ☐ Yes ☐ N/A Listed enclosures attached?
- ☐ Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐ Yes ☐ N/A Charts, graphs, etc. attached, dated, identified, and marked?
- ☐ Yes ☐ N/A Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company McGuire Nuclear Station **Activation of the Technical Support Center (TSC)** **Multiple Use**	Procedure No. **RP/0/A/5700/012** Revision No. 017 Electronic Reference No. MC0048MF

Activation of the Technical Support Center (TSC)

1. Symptoms

Conditions exist where events are in progress or have occurred which indicate a potential degradation of the level of safety of the plant and activation of the Emergency Response Organization (ERO) has been initiated.

2. Immediate Actions

None

3. Subsequent Actions

NOTE:	This procedure is not intended to be followed in a step-by step sequence. Sections of the procedure are to be implemented as the applicable action becomes necessary.

3.1 The TSC is required to be activated for an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. It may also be activated for an UNUSUAL EVENT if deemed necessary by the Operations Shift Manager/Emergency Coordinator.

3.2 The TSC must be activated within ONE (1)HOUR AND 15 MINUTES (75 MINUTES) of an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. This time frame must be met anytime it is deemed necessary to activate the TSC.

3.3 Upon notification to activate, the station manager or designee shall report and notify Operations Shift Manager in the Control Room of arrival.

3.3.1 Personnel in the Emergency Response Organization (ERO) assigned to the TSC shall report to the facility upon notification to activate.

3.3.2 The initial responders shall be responsible for the completion of their appropriate group enclosures and having Operational Responsibilities reviewed.

3.4 Each represented group is responsible for ensuring their appropriate initial checklist is completed.

3.5 The following definitions are applicable to the Emergency Notification Form for "Plant Condition": {PIP 0-M97-4210 NRC-1}

- **Improving**: Emergency conditions are improving in the direction of a lower classification or termination of the event.
- **Stable:** The emergency situation is under control. Emergency core cooling systems, equipment, plant, etc., are operating as designed.
- **Degrading**: Given current and projected plant conditions/equipment status, recovery efforts are not expected to prevent entry into a higher emergency classification or the need to upgrade offsite Protective Action Recommendations.

3.6 Upon termination of the drill/emergency, the Emergency Coordinator/designee shall assume responsibility for ensuring the proper resolutions to all completed copies of the McGuire Operations Configuration Control Card(s) prior to the TSC/OSC being deactivated. The Emergency Coordinator/designee shall have overall responsibility for ensuring all cards are properly resolved or items logged prior to plant turn-over to the Operations Shift Manager. Once the items/cards have been properly resolved, the TSC/OSC may be deactivated. All completed cards shall be filed by Emergency Planning with other drill/emergency paperwork.

4. Enclosures

4.1 Emergency Coordinator Initial TSC Activation Checklist/Operational Responsibilities

4.2 Assistant Emergency Coordinator Initial TSC Activation Checklist/Operational Responsibilities

4.3 Radiation Protection Manager Initial TSC Activation Checklist/Operational Responsibilities

4.4 Offsite Dose Assessor Initial TSC Activation Checklist/Operational Responsibilities

4.5 Offsite Agency Communicator Initial TSC Activation Checklist/Operational Responsibilities

4.6 NRC Communicator Initial TSC Activation Checklist/Operational Responsibilities

4.7 Reactor Engineer Initial TSC Activation Checklist/Operational Responsibilities

4.8 Operations Manager in the TSC Initial TSC Activation Checklist/Operational Responsibilities

4.9 Operations Procedure Support Initial TSC Activation Checklist/Operational Responsibilities

4.10 System Engineering Manager Initial TSC Activation Checklist/Operational Responsibilities

4.11 Emergency Planner Initial TSC Activation Checklist

4.12 Status Coordinator Initial TSC Activation Checklist

4.13 IAE Communications Initial TSC Activation Checklist

4.14 Operations Manager in the Control Room Activation Checklist/Operational Responsibilities

4.15 Data Coordinator Initial TSC Activation Checklist/Operational Responsibilities

4.16 Site Assembly Coordinator Initial TSC Activation Checklist

4.17 Emergency Coordinator / Emergency Operations Facility Director Turnover Checklist

4.18 Emergency Classification Termination Criteria

4.19 Fitness For Duty Questionnaire

4.20 Site Evacuation Coordinator Initial TSC Activation Checklist

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **ESTABLISH** a log of activities.

——— **NOTIFY** the Operations Shift Manager in the Control Room of arrival.

——— **RECEIVE** turnover from the Control Room as soon as practical utilizing Enclosure 4.17.

——— **ASSURE** the following TSC positions as a minimum are filled and prepared to assume their function prior to declaring the TSC activated:

-Emergency Coordinator
-Offsite Dose Assessor
-Offsite Agency Communicator
-NRC Communicator
-Reactor Engineer

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **CONDUCT** a Time Out prior to activating the TSC.

——— **DECLARE** the TSC activated and announce the following via the TSC/OSC public address system: "This is _____. I am the Emergency Coordinator. The TSC is officially activated as of _____. The plant status is as follows:

_____.

OR

"This is _____. I am the Emergency Coordinator. The TSC is officially activated as of _____. I will give an update in ____ minutes.

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

____ **ANNOUNCE** over the TSC/OSC public address system the following:

"Anyone who is reporting to this facility outside of your normal work hours and has consumed alcohol within the past five (5) hours, notify either the Emergency Coordinator in the TSC or the OSC Coordinator in the OSC."

____ **ENSURE** the Data Coordinator has synchronized the clocks in the TSC. {PIP 0-M98-3522}

NOTE: The following step should be repeated following each shift turnover.

____ **ANNOUNCE** to TSC a reminder to complete a "Work Hour Extension Form" if applicable. {PIP 0-M98-2099}.

____ **TURN OFF** the plant page volume in TSC.

____ **DISCUSS** with the Radiation Protection Manager any radiological release or offsite radiological concerns.

____ **ANNOUNCE** over the TSC/OSC Public Address System the following if a release has occurred:

-Assume areas are contaminated until surveyed by RP.

-No eating or drinking until the TSC and OSC are cleared by RP.

____ **EVALUATE** with TSC personnel and the Radiation Protection Manager the need to conduct evacuation at this time based on the following criteria.

- Alert- determine by actual plant conditions
- Site Area Emergency- consider evacuation/relocation of non-essential personnel.
- General Emergency- evacuate all non-essential personnel
- Notify EOF anytime personnel are relocated onsite or evacuated from the premises.

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **REQUEST** all TSC and OSC Managers to have **FAXED** to the **OSC** the name, social security number and RP badge number of any person(s) who may be left onsite after evacuation of non-essential personnel but are located in an area other than the OSC.

_____ **UPON** declaration of a General Emergency the Emergency Coordinator shall **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Offsite Dose Assessor, Enclosure 4.4, page 5 of 6, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

OR

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **DIRECT** the Assistant Emergency Coordinator to FAX the turnover checklist (Enclosure 4.17) to the EOF Director (if time and situation permit). {PIP-0-M97-4112}

——— **CONDUCT** turnover to the EOF Director (EOFD) utilizing Enclosure 4.17.

NOTE:	Provide periodic updates to the EOFD concerning plant status and request EOFD to provide assessment and field monitoring data on a periodic basis.

——— **REQUEST** the NRC Communicator to notify the NRC the EOF is activated.

——— **ANNOUNCE** to the TSC and OSC the EOF is activated.

——— **REVIEW** Operational Responsibilities (Enclosure 4.1, page 7 of 7).

——— **ENSURE** ALL completed copies of the McGuire Operations Configuration Control Cards are properly resolved prior to deactivation of the TSC/OSC.

IF the TSC becomes environmentally uninhabitable due to radiological or other conditions and the Control Room remains secure (habitable), **THEN:**

——— **SELECT** individuals to move inside the Control Room.

——— **INSTRUCT** all other TSC personnel to go to the EOF.

——— **IF** the Control Room also becomes uninhabitable due to radiological or other conditions, **THEN INSTRUCT** TSC personnel to report to the Simulator at the Training and Technology Center or EOF.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility

EMERGENCY COORDINATOR
OPERATIONAL RESPONSIBILITIES

1. Assure the TSC is maintained in a professional manner. Remind all groups to minimize noise and congestion.

2. Approximately every thirty (30) minutes, conduct a "Time-out" with the TSC staff to obtain current plant status. Ensure the OSC is aware of when "Time-outs" will take place.

3. Ensure all unnecessary communications are put on hold during "Time-outs".{PIP 0-M95-0160}

4. Establish priorities.

5. Following time out, announce to the TSC and OSC the emergency classification, plant status, and priorities via the TSC/OSC public address system.

6. Institute procedures necessary to allow the Control Room to maintain control of the emergency condition.

7. Establish communications with the EOF Director at the Emergency Operations Facility.

8. Establish communications with Federal, State and Local authorities at county warning points or Emergency Operations Centers.

9. Maintain line of communications with these agencies to ensure they are informed of plant emergency conditions at all times.

10. Make decisions concerning all aspects of the emergency situation including alternate strategies (outside of procedures) as plant conditions necessitate.

11. Periodically assess the need for 24 hour staffing and have the managers prepare as needed.

12. Establish a Recovery Organization **PER** (RP/0/A/5700/024, Recovery and Reentry Procedure) once the Emergency has been terminated. Applicable primarily for Site Area Emergency and General Emergency classifications. Refer to Enclosure 4.18 for Termination Criteria.

13. Make decisions on emergency classifications, mitigation strategies, contingency plans and protective actions for plant personnel and the general public.

14. Serve as Lead Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

ASSISTANT EMERGENCY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ASSIST** the Emergency Coordinator in gathering information to facilitate the activation of the Technical Support Center.

——— **FAX** turnover checklist (Enclosure 4.17) to the EOF Director when directed by the Emergency Coordinator. {PIP-0-M97-4112}

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

ASSISTANT EMERGENCY COORDINATOR OPERATIONAL RESPONSIBILITIES

1. Assist the Emergency Coordinator in all aspects of Emergency Response.
2. Act as a receiver of information when the Emergency Coordinator is unavailable and relay the information to the Emergency Coordinator in a timely manner.
3. Proactively seek information when the Emergency Coordinator is in a reactive mode.
4. Make face-to-face confirmation of information provided when the Emergency Coordinator is unavailable.
5. Serve as the Emergency Coordinator when needed.
6. Assist in making decisions on emergency classifications, mitigation strategies, contingency plans and protective actions for plant personnel and the general public.
7. Assist Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster and **ENSURE** all Radiation Protection personnel reporting to the TSC also sign the roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

_____ **ESTABLISH** communications with RP personnel in the OSC, Shift Lab and EOF using the cell phone, dial 4980. (Let it ring until you hear a beep. This connects you to the bridge line.).

_____ **COMMUNICATE** through Emergency Coordinator that dosimetry is required and a dose card shall be filled out if necessary (drill SRWP is 33).{PIP 0-M94-1495}

——— **DISCUSS** the following with Emergency Coordinator:

1) Any release in progress including dose rates (especially at the site boundary)
2) Field Team status/data
3) Onsite radiological concerns

_____ **ESTABLISH** contamination control in the TSC, OSC and Control Room as necessary.

1. **COMMUNICATE** through the Emergency Coordinator that frisking of hands and feet is required prior to entry.{PIP 0-M94-1495}

2. **ESTABLISH** smear survey frequency with OSC RP Supervisor (i.e., every 30 minutes).

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **EVALUATE** the need to administer Potassium Iodide to emergency workers on site and to Field Monitoring teams in accordance with HP/0/B/1009/016. Make a log entry describing the evaluation and subsequent decisions. {PIP M-99-5031}.

_____ **EVALUATE** with the Emergency Coordinator the need to:

1) Move any Assembly Points in the release path
2) Conduct site and/or area evacuation
3) Recommend protective actions for emergency workers
4) Recommend protective actions for the public.

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **UPON** declaration of a General Emergency the Emergency Coordinator shall **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Offsite Dose Assessor, Enclosure 4.4, page 5 of 6, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4,page 4 of 6 using wind direction.

OR

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

RADIATION PROTECTION MANAGER
INITIAL TSC ACTIVATION CHECKLIST

_____ **IF** SAMGs are implemented **AND** offsite releases approach, or exceed, 1Rem TEDE or 5 Rem Thyroid CDE, **THEN** notify the TSC Lead SAMG Evaluator. {PIP-M-99-5381}.

_____ **IF** a situation, which is immediately hazardous to life or valuable property, exists, **THEN** evaluate potential dose rates by one of the following methods:

1. Contact RP shift at Ext. 4282
2. Assess area monitors

AND

Ensure a Request for Emergency Exposure is completed in the OSC prior to dispatch of emergency workers.

_____ **REVIEW** RP/0/A/5700/000 criteria (EMFs, offsite dose, etc.) for emergency classification changes and discuss with OPS Procedure Support position.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

RADIATION PROTECTION MANAGER OPERATIONAL RESPONSIBILITIES

1. Provide and coordinate Radiation Protection resources as necessary.
2. Assure RP responders complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting outside their normal working hours.
3. Ensure all TSC personnel are wearing dosimetry and using dose cards (SRWP 33).
4. Ensure all necessary precautions of the Radiation Protection Manual Emergency Procedures are adhered to (i.e. administer Potassium Iodine tablets as required.)
5. Discuss with Operations Support Manager information regarding plant conditions such as power failures, valve closures as necessary.
6. Ensure responders are aware of the need for frisking prior to entry into the TSC as conditions dictate.
7. Prepare for 24 hour coverage as necessary.
8. Determine if persons with special radiological exposure limits need to be evacuated (e.g. declared pregnant women, people with radio-pharmaceutical limitations).

OFFSITE DOSE ASSESSOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

_____ **ESTABLISH** a log of activities.

_____ **TURN ON** dose assessment and data acquisition computers and acquire necessary information. If data acquisition programs are unavailable, information may be obtained from SDS or the Control Room (EMF and Met data).

_____ **OBTAIN** copies of the following procedures:

- RO/0/A/5700/000 (Classification Of Event)
- SH/0/B/2005/001 (Emergency Response Offsite Dose Projections).

OFFSITE DOSE ASSESSOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **UPON** declaration of a General Emergency, **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Offsite Dose Assessor, Enclosure 4.4, page 5 of 6, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

OR

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind

AND

_____ Shelter remaining zones as shown on Offsite Dose Assessor, Enclosure 4.4, page 4 of 6 using wind direction.

NOTE: Be aware of the effects of loss of power on critical EMFs.

_____ **VERIFY** operability and validity of EMFs through the Shift Lab.

_____ **VERIFY** effluent discharge alignment with Shift Lab, RPM, or RP Support as necessary.

OFFSITE DOSE ASSESSOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **VERIFY** the status of on-shift Dose Assessment with the shift lab and accept the responsibility for dose assessment.

IF the TSC is not activated and the EC has not received turnover from the Control Room, **THEN**:

_____ Establish contact with and inform the OSM that the Duty dose Assessors in the TSC have assumed responsibility for Dose Assessment.

AND

_____ Provide off-site dose calculations and resultant protective action recommendations for radioactive material release to the OSM until the TSC is activated.

_____ **ESTABLISH** communications with dose assessment personnel at the EOF. Compare information, projections and strategies with the EOF. Turn over dose assessment for offsite communication purposes to EOF Dose Assessors as soon as the EOF becomes officially activated.

_____ **CHECK** operability of the HPN telephone by listening for a dial tone. If no dial tone is heard, notify the IAE Communications Specialist to persue repairs. {PIP-M-99-3800}.

_____ **RETAIN** all computer printouts or manually calculated enclosures.

_____ **TURN ON** the EMFs (54A and 54B) in the TSC from the OAC computer room by pressing the start button on each EMF control.

_____ **ENSURE** EMF22 (TSC Area Monitor) is functional.

NOTE: If a safety injection has occurred, the TSC air intakes sampled by EMF-54A and 54B will open and the filter train is placed in service. One of the air intakes must be reopened if both EMFs are in trip 2. {PIP 0-M97-4278}

_____ **IF** EMF54A and 54B exceed the trip 2 setpoint, **THEN** raise the trip 2 setpoint on the lowest reading EMF to reopen the air intake.

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OFFSITE DOSE ASSESSOR
Protective Action Zones Determination

For Containment Radiation Levels Exceeding GAP Activity		
Wind Direction (deg from N) Chart Recorder 1EEBCR9100 Point # 8 Average Upper Wind Direction {PIP 0-M98-3522}	**Evacuate** 5 Mile Radius-10 Mile Downwind	**Shelter**
0 – 22.5	L,B,M,C,N,A,D,O,R,E,S,F	G,H,I,J,K,P,Q
22.6 - 45.0	L,B,M,C,N,A,D,O,R,E,Q,S	F,G,H,I,J,K,P
45.1 - 67.5	L,B,M,C,N,A,D,O,R,E,Q,S	F,G,H,I,J,K,P
67.6 - 90.0	L,B,M,C,N,A,D,O,R,P,Q,S	E,F,G,H,I,J,K
90.1 – 112.5	L,B,M,C,N,A,D,O,R,K,P,Q,S	E,F,G,H,I,J
112.6 – 135.0	L,B,M,C,N,A,D,O,R,I,K,P,Q,S	E,F,G,H,J
135.1 – 157.5	L,B,M,C,N,A,D,O,R,I,K,P,Q	E,F,G,H,J,S
157.6 – 180.0	L,B,M,C,N,A,D,O,R,I,J,K,P	E,F,G,H,Q,S
180.1 – 202.5	L,B,M,C,N,A,D,O,R,G,H,I,J,K,P	E,F,Q,S
202.6 – 225.0	L,B,M,C,N,A,D,O,R,G,H,I,J,K,P	E,F,Q,S
225.1 – 247.5	L,B,M,C,N,A,D,O,R,F,G,H,I,J	E,K,P,Q,S
247.6 – 270.0	L,B,M,C,N,A,D,O,R,F,G,H,I,J	E,K,P,Q,S
270.1 – 292.5	L,B,M,C,N,A,D,O,R,E,F,G,H,J	I,K,P,Q,S
292.6 – 315.0	L,B,M,C,N,A,D,O,R,E,F,G	H,I,J,K,P,Q,S
315.1 – 337.5	L,B,M,C,N,A,D,O,R,E,F,G	H,I,J,K,P,Q,S
337.6 – 359.9	L,B,M,C,N,A,D,O,R,E,F,S	G,H,I,J,K,P,Q

Wind Speed Greater than 5 Miles per Hour		
Wind Direction (deg from N) Chart Recorder 1EEBCR9100 Point # 8 Average Upper Wind Direction{PIP 0-M98-3522}	**Evacuate** 2 Mile Radius-5 Mile Downwind	**Shelter**
0 – 22.5	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
22.6 - 45.0	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
45.1 - 67.5	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
67.6 - 90.0	L,B,M,C,D,O,R,N	A,E,F,G,H,I,J,K,P,Q,S
90.1 – 112.5	L,B,M,C,O,R,N	A,D,E,F,G,H,I,J,K,P,Q,S
112.6 – 135.0	L,B,M,C,O,N,R,A	D,E,F,G,H,I,J,K,P,Q,S
135.1 – 157.5	L,B,M,C,O,A,N	D,E,F,G,H,I,J,K,P,Q,R,S
157.6 – 180.0	L,B,M,C,A,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
180.1 – 202.5	L,B,M,C,A,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
202.6 – 225.0	L,B,M,C,A,N,D	E,F,G,H,I,J,K,O,P,Q,R,S
225.1 – 247.5	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
247.6 – 270.0	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
270.1 – 292.5	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
292.6 – 315.0	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
315.1 – 337.5	L,B,M,C,D,R	A,E,F,G,H,I,J,K,N,O,P,Q,S
337.6 – 359.9	L,B,M,C,D,R	A,E,F,G,H,I,J,K,N,O,P,Q,S

OFFSITE DOSE ASSESSOR
GUIDANCE FOR OFFSITE PROTECTIVE ACTIONS

GUIDANCE FOR DETERMINATION OF GAP ACTIVITY

INITIAL

NOTE:	Fission product inventory inside containment is greater than gap activity if the containment radiation level exceeds the levels in the table below.

_____ If the OAC is available, call up the following computer points based on need

Unit 1 OAC		Unit 2 OAC	
M1A0829	1EMF51A	M2A0829	2EMF51A
M1A0835	1EMF51B	M2A0835	2EMF51B

Time Shutdown (Hours)	Containment Monitor Reading (R/HR) EMF51A or 51B
0	2,340
0-2	864
2-4	624
4-8	450
> 8	265

OFFSITE DOSE ASSESSOR
OPERATIONAL RESPONSIBILITIES

1. Provide technical expertise to the OSM, the Emergency Coordinator, and other members of the TSC as required.

2. Provide initial offsite dose calculations and resultant protective action recommendations for releases of radioactive material until assumed by the EOF.

3. Perform offsite dose projections and determine protective action recommendations. Dose projections shall be run at least every 30 minutes or as directed by the RPM.

4. Evaluate dose projections and protective action recommendations. Make recommendations to the RPM and/or Emergency Coordinator.

5. Provide emergency communication personnel with dose assessment and other pertinent technical data through the preparation of the Emergency Notification Form and other offsite communications.

6. Obtain all pertinent information including plant status, emergency classification, meteorological data, and release potential.

OFFSITE AGENCY COMMUNICATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

____ **SIGN** in on the TSC staffing board and put on position badge.

____ **SIGN** the TSC roster.

____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

____ **ESTABLISH** a log of activities.

NOTE: **ANY** information sent to the EOF other than **ENF FORMS** (TSC/EOF Turnover Sheet, SAMG Strategy Sheets, etc) should be faxed to Fax Machine in EOF Director Area. Fax number 382 - 1825. {PIP 0-M98-2065}

____ **OBTAIN** a copy of RP/0/A/5700/018, (Notifications to the State and Counties from the Technical Support Center), from the procedures cabinet.

____ **EXECUTE** RP/0/A/5700/018, (Notifications to the State and Counties from the Technical Support Center).

____ **PROVIDE** copies of all notifications to Offsite Agencies (NRC, State, Counties, etc.) to the following:{PIP-0-M-99-0911}

- NRC Communicator
- Emergency Coordinator
- Emergency Planner
- Site Evacuation Coordinator.

____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of emergency facility.

OFFSITE AGENCY COMMUNICATOR OPERATIONAL RESPONSIBILITIES

1. Establish communications with State and Local authorities at County Warning Points or Emergency Operation Centers.

2. Maintain line of communications with these agencies to ensure they are informed of plant emergency conditions at all times.

3. Inform Emergency Coordinator of status of offsite communications (e.g., next message due).

4. Prepare for 24 hour coverage as necessary.

5. Assure offsite agency communicators in the EOF are aware of information affecting offsite agencies even after turnover has occurred (e.g. fire in the motor control center has been put out.)

NRC COMMUNICATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **OBTAIN** a copy of the current classification procedure from the procedure cabinet:
-Notification Of Unusual Event, RP/0/A/5700/001
-Alert, RP/0/A/5700/002
-Site Area Emergency, RP/0/A/5700/003
-General Emergency, RP/0/A/5700/004.

NOTE:
- The only turnover from the Control Room the TSC NRC Communicator takes is responsibility for communications to the NRC.{PIP 0-M94-1496}
- For drills use the plant phone system to call the simulator at ext. 5597.

——— **CONTACT** Control Room of arrival and determine if initial (1 hr.) NRC communication has been completed.

——— **PERFORM** (if necessary) initial (1 hr.) NRC notification using the Emergency Notification System (ENS).

NRC COMMUNICATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

____ **ESTABLISH** continuous communications upon request by the NRC using the cell phone by dialing 9-1-301-816-5100.

____ **INFORM** NRC of TSC/EOF activations and plant status as requested.

____ **PROVIDE** for 24 hour coverage as necessary.

____ **INFORM** the NRC when the TSC is deactivated. This requires an additional call using ENS when the NRC does not require continuous communications be maintained.

____ **CONTACT** Regulatory Compliance Duty Person if the NRC is going to arrive on site.

____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

REACTOR ENGINEER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

_____ **OBTAIN** a copy of RP/0/A/5700/019 (Core Damage Assessment) from the procedure cabinet.

_____ **OBTAIN** a copy of affected Unit(s) Data Book. {PIP 0-M98-3522}

REACTOR ENGINEER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **MONITOR** core conditions as appropriate using either APD, SDS or the OAC Critical Points and Steam Tables as follows:

NOTE:	If the OAC is not available, core conditions may need to be obtained from the Operations Manager in the TSC who is in contact with the Control Room.

1. Core Subcooling.
2. Reactor Vessel Water Level (RVLIS).
3. Power level if Reactor not tripped.
4. Ask the Operations Liaison to verify all rods at bottom on Reactor Tripped.
5. Source Range Trends following Reactor Trip.
6. Compare each loop T-hot, T-cold and T-avg.
7. What is the most recent boron concentration, and has there been any safety injection.
8. Reactor coolant pumps On/Off Natural or Forced circulation.
9. Pressurizer Level.
10. Containment EMFs.
11. Injection flow and letdown flow (NC inventory).
12. Containment Pressure.
13. Current burnup and previous 2 cycles EFPD.
14. The number of failed rods and DEI prior to transient.
15. Fuel Pool Temperature (Phase A or Phase B Isolation).

REACTOR ENGINEER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

——— **REVIEW** the above parameters with an immediate focus on the trends of the following:

1. State of criticality and shutdown margin.
2. Core voiding.
3. Core uncovery.
4. Challenge to the fuel pellet fission product barrier.
5. Challenge to the cladding fission product barrier.
6. Challenge to the NCS pressure boundary.
7. NC cooldown rate.
8. Fuel Pool Heatup.

On a Safety Injection Signal the Auxiliary Building KC cooled loads are isolated by a phase A containment isolation signal. This includes KC cooling of the KF heat exchangers. A conservative estimate of the time for the spent fuel pool to reach saturation without forced cooling is approximately 10 hours. Within approximately 6 hours following a loss of forced cooling of the spent fuel pool, contact Accident Assessment (Nuclear Engineering General Office) in the EOF for a recommendation regarding initiating KC cooling to KF or alternate means of supplying fuel pool cooling.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

REACTOR ENGINEER
OPERATIONAL RESPONSIBILITIES

1. Provide System Engineering Manager and/or Operations Superintendent with information concerning any abnormal core conditions.

2. Prepare for 24-hour staffing as necessary.

3. Assist Operations Procedure Support as an Evaluator upon entry into Severe Accident Management Guidelines (SAMG).

OPERATIONS MANAGER IN THE TSC
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ESTABLISH** communications with the Control Room, OSC and EOF using the cell phone by dialing 4500 (let it ring until you hear a beep).

NOTE:	If a Security event occurs while the TSC is activated, the OPS Manager in the TSC will serve as the focal point for the coordination of activities between the OSC, TSC and Security. The information and actions decided upon should be handled through the normal communication channels with the TSC Emergency Coordinator.

——— **IF** a Security event occurs (i.e. bomb threat, sabotage, etc.) or additional communications are needed with Security personnel, have the OSC Security Officer request the SAS Security Officer to dial into the OPS bridge line (4500).

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

OPERATIONS MANAGER IN THE TSC
OPERATIONAL RESPONSIBILITIES

1. Provide main communication link between the TSC and Control Room.
2. Provide accurate and current status information to Emergency Coordinator and during time-outs.
3. Assist in making decisions on emergency classifications, mitigation strategies, and contingency plans.
4. Support Control Room personnel by providing resources and consultation as required.
5. Evaluate and prioritize requests for information from the TSC staff, EOF staff, NRC and others.
6. Evaluate and consult with Control Room personnel on suggested mitigation strategies.
7. Coordinates with the Operations Liaison requested priorities of activities in the plant.
8. Has the authority to override normal controls on activities directed by the OSC.
9. Assist Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

OPERATIONS PROCEDURE SUPPORT
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site ssembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **OBTAIN** a copy of RP/0/A/5700/000 (Classification of Emergency), from the procedures cabinet.

——— **OBTAIN** a copy of the current classification procedure from the procedure cabinet.:

-Notification Of Unusual Event, RP/0/A/5700/001
-Alert, RP/0/A/5700/002
-Site Area Emergency, RP/0/A/5700/003
-General Emergency, RP/0/A/5700/004.

_____ **OBTAIN** a copy of RP/0/A/5700/026 [Operations/Engineering Technical Evaluations In The Technical Support Center (TSC)] from the procedure cabinet and begin system/plant parameter evaluation.

NOTE:	The following step provides a listen only connection - leave headset switch in the mute position (position is taped).

_____ **ESTABLISH** communications with OPS bridge line using the cell phone by dialing 4500. (Let it ring until you hear a beep.)

——— **PROVIDE** completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

OPERATIONS PROCEDURE SUPPORT
OPERATIONAL RESPONSIBILITIES

1. Provide emergency organization with broad oversight of current conditions and direction.
2. Ensure correct emergency classifications are made by following the current plant status and procedures in use.
3. Provide back-up service to Control Room personnel ensuring the correct procedural flowpath is followed.
4. Advise Emergency Coordinator on the anticipated course of the event.
5. Prepare Control Room personnel of possible difficult points in the procedures by a look ahead.
6. Consult the EOF for possible solutions if procedural adequacy becomes a concern.
7. Provide information to Offsite Agency Communicator and the NRC Communicator as requested regarding changes in plant conditions.
8. Prepare for 24 hour coverage as necessary.
9. Serve as Lead Evaluator upon entry into Severe Accident Management Guidelines (SAMG). This duty shall include providing leadership and guidance to the other available SAMG Evaluators specifically concerning what they should be doing. {PIP-M-00-5381}.

SYSTEM ENGINEERING MANAGER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ENSURE** PC is on and displaying plant status.

——— **ESTABLISH** communications with the following and provide the SEM phone number:

- TSC Engineering Support, Ext. 4917
- EOF Accident Assessment, 382-0762
- OSC Equipment Engineering, Ext. 4971.

NOTE:	The following step provides a listen only connection. Leave head set switch in the "mute" position.

_____ **ESTABLISH** communication with the OPS bridge line, using the cell phone by dialing 4500. (Let it ring until you hear a beep.)

——— **OBTAIN** a copy of RP/0/A/5700/026 [Operations/Engineering Technical Evaluations In The Technical Support Center (TSC)] from the procedure cabinet and begin system/plant parameter evaluation.

——— **VERIFY** Engineering Support Group is connected to the Operations headset network (listen only) after the Operations Manager in the TSC ties in the OSC and EOF.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

SYSTEM ENGINEERING MANAGER
OPERATIONAL RESPONSIBILITIES

1. Coordinate accident mitigation strategy and engineering support through effective communications with the Engineering Support Group, Accident Assessment in the EOF, and the OSC.

2. Contact the on-duty EP Support Leader and request appropriate duty personnel from M/NS, ESE, and MCE when outside of normal hours.

3. Continually communicate with TSC personnel, identifying areas needing Engineering support.

4. Report all accident mitigation strategies to the Emergency Coordinator.

5. Assist Operations Procedure Support as an Evaluator upon entry into Severe Accident Management Guidelines (SAMG).

EMERGENCY PLANNER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

____ **SIGN** in on the TSC staffing board and put on position badge.

____ **SIGN** the TSC roster.

____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

____ **ESTABLISH** a log of activities.

____ **OBTAIN** time out forms from the procedure cabinet.

____ **ASSIST** the Emergency Coordinator as required to achieve a timely turnover to the EOF.{PIP 0-M98-3522}

____ **ESTABLISH** communications with EOF Emergency Planner using the cell phone by dialing 831-4010, or another available bridge line.

____ **APPRISE** Emergency Coordinator of TSC/OSC announcements.

____ **IF** Emergency Planning support is needed in the OSC, **THEN** contact additional Emergency Planning personnel and request they respond to the OSC.

____ **SUPPORT** Emergency Coordinator activity (e.g., keep in procedure).

____ **PROVIDE** support for the activation and operation of the TSC.

____ **PROVIDE** necessary NRC/State/County interface.

____ **ASSIST** Off-site Agency Communicators in preparation of emergency notifications as needed.

____ **SHARE** copy of NRC Notification forms, and Emergency Notification forms with the Status Coordinator. {PIP-0-M-99-0911}

____ **PROVIDE** support to other members of the TSC as requested.

EMERGENCY PLANNER
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **PREPARE** for 24 hour coverage as necessary.

_____ **COLLECT** all completed paperwork upon deactivation of the emergency facility.

_____ **PERFORM** Enclosure 13.1 of PT/0/A/4600/091 (TSC/OSC Inventory and TSC Manuals) at the completion of the drill or event

Enclosure 4.12

STATUS COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

{PIP 0-M94-1491}

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **OBTAIN** the remote control for the overhead projector from the TSC supply cabinet.

NOTE:	The overhead projector takes several minutes to warm up

——— **TURN** main switch of remote control to **ON** position (located on right side of remote).

——— **POINT** remote to overhead projector and depress power on button.

——— **TURN** on Status Coordinator computer monitor.

——— **LOG** on using your user ID.

——— **DOUBLE CLICK** on Plant Status.doc.

——— **SAVE** as current date activation.doc (e.g. 22498 activation.doc).

STATUS COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

——— **INPUT** classification information on the electronic message board using the remote control as follows:

1. To turn "**ON**": Press **Shift and Program.**
2. To select programmed messages:
   a. **Unusual Event** Press **Program** then **Run** then **"1"** then **RUN.**
   b. **Alert** Press **Program** then **Run** then "2" then **RUN.**
   c. **Site Area Emergency** Press **Program** then **Run** then "3" then **RUN.**
   d. **General Emergency** Press **Program** then **Run** then "4" then **RUN.**
3. To Turn "OFF": Press **Shift and Program.**

——— **ENTER** plant/equipment status as appropriate on electronic document.

——— **PRINT** the current display prior to announced time outs.

NOTE: The Emergency Planner is provided copies of all NRC Notification forms and Emergency Notification forms. These may be useful in maintaining the TSC log. {PIP-0-M-99-0911}

——— **ESTABLISH** a log of all activities to ensure the following:

- Record the time of entry
- List entries in chronological order and include enough detail to reconstruct event series at a later date.

——— **LOG** entries should include but are not limited to the following examples:

- Emergency Coordinator and any change in Emergency Coordinator
- Time at which the TSC is operational
- Present emergency classification, changes in classification, time of declaration

STATUS COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

- Plant Conditions (Unit 1 and 2):

  - Core Cooling information (i.e., Time To Boiling, etc.)
  - Safety Systems Degraded:
  - Power Supply Status:
  - Fission Product Barrier Degradation
  - Radiation Releases

- Procedures in effect and any transition to another procedure.

- Actions taken that are not a part of an approved procedure.

- Any abnormal or unexpected plant response.

- Major equipment manipulations.

- Major mitigation actions taken.

- Site assembly or evacuation of all or any part of the plant.

- Personnel Injuries

- Recovery Action(s) in Progress

- Expected time of next Time-Out.

——— **ENSURE** the status board is maintained with current information:

3 or 4 highest priority "recovery actions" set by the Emergency Coordinator.

relevant plant status information captured under "General Information."

——— **TRACK** established priorities.

——— **PREPARE** for 24-hour coverage.

——— **PROVIDE** all completed paperwork (Activation checklist and status board printouts) to Emergency Planning upon deactivation of the emergency facility.

——— **SHUTDOWN** computer, monitor and remote control.

——— **RETURN** remote control to supply cabinet.

IAE COMMUNICATIONS
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ENSURE** all necessary equipment needed to support the TSC is operable.

- Video Conferencing
- Phones
- Faxes
- Headsets
- Page System.

——— **IF** IAE Communications support is needed in the OSC, **THEN** contact additional IAE Communications personnel and request they respond to the OSC.

——— **PREPARE** for 24 hour coverage as necessary.

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OPERATIONS MANAGER IN THE CONTROL ROOM
INITIAL TSC ACTIVATION CHECKLIST

Initial

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **RECEIVE** a verbal report from the OSM detailing plant status, emergency class, and shift staffing level.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ESTABLISH** communications with the TSC, OSC and EOF using the cell phone by dialing 4500. (Let it ring until you hear a beep.) (Each time a party connects, a beep will be heard.)

——— **IF** time critical tasks are designated by the OSM, **THEN** request the OSC OPS Liaison immediately make available an operator/team for prompt dispatch by the OSM via hand-held radio. {PIP 0-M96-1576}

——— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facilities.

OPERATIONS MANAGER IN THE CONTROL ROOM
OPERATIONAL RESPONSIBILITIES

1. Provide main communication link from the Control Room or Simulator to the TSC, OSC and EOF.

2. Provide accurate and current task status information to the OSM as needed for non-time critical tasks.

3. Assist in making decisions on emergency classifications, mitigation strategies and contingency plans.

4. Support Control Room personnel by directing resources and providing consultation as required.

5. Expedite time critical tasks for the OSM by clear communication to the OSC via the OPS Liaison. The OSM is responsible for designating time critical tasks originating from the Control Room. Once a task originating from the Control Room is designated time critical, the OSM, or designee, shall direct the OPS Manager in the Control Room to request the OSC OPS Liaison to immediately make available an operator (or team) from the OSC contingent for prompt dispatch into the plant via hand held radio. Completion of OSC Task Work Sheet paperwork shall not delay time critical task dispatches. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. Time critical task dispatches originating from the Control Room shall remain under direct control of the Control Room crew until the subject task is complete and the person (or team) has returned to the OSC and completed debriefing. {PIP 0-M96-1576} {PIP 0-M98-3522}

6. Evaluate and prioritize for the Control Room requests for information from TSC, OSC, EOF, NRC and others.

7. Evaluate and consult with Control Room personnel on suggested mitigation strategies.

8. Coordinate with the Operations Liaison requested priorities of activities in the plant.

9. Has the authority to override normal controls on activities directed by the OSC as necessary.

10. After the shift NLOs have been dispatched to the OSC, inform the OSM of your responsibility to make NLOs available to the Control Room for time critical tasks as needed.

11. Notify the TSC OPS Procedure Support position of all Emergency Procedure transitions. {PIP 0-M97-4112}

DATA COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ACCESS** SDS in the TSC.

NOTE: **ERDS is not activated for drills unless directed to do so by Emergency Planning. {PIP-M-00-561}.**

ERDS can only be activated / deactivated from designated computer terminals with SDS access. These are located in the Shift Work Manager's Office, the Data Coordinators' room in the TSC and all within the Control Room horse shoe area.

ERDS is **NOT** activated for a Notification of Unusual Event. {PIP-0-M-99-2929}

——— **IF** the Emergency Response Data System (ERDS) is not activated, **THEN** activate ERDS as follows:

——— Ensure SDS is running on the selected terminal.

——— Click on MAIN.

——— Click on GENERAL.

——— Click on ERDS.

——— Click on ACTIVATE.

——— Record the date and time ERDS was activated in the log section of the Data Coordinator notebook located at the OAC terminals in the TSC.

DATA COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ Inform the OSM that ERDS was activated.

_____ **IF** ERDS failed to activate after five (5) attempts, **THEN** have the NRC Communicator notify the NRC via ENS or other available means. {PIP-M-99-5381}.

TERMINATE ERDS once the event is over by performing the following:

_____ Click on Terminate.

_____ **ENSURE** facility clocks are synchronized as follows:

_____ Using a network connected PC, enter "NETTIME\\MNSF1" at a command prompt. The time returned should match the PC's time.

- Verify that the time appears accurate.
- Use the returned time to sync the clocks with the large red digits mounted on the walls of the TSC.
- Synchronize the wall clocks of the OSC with the wall clocks of the TSC.
- Contact the EOF Data Coordinator to ensure the EOF clocks match the TSC/OSC clocks. {PIP-0-M-99-0911, PIP-0-M-99-2301}

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

DATA COORDINATOR
OPERATIONAL RESPONSIBILITIES

1. Provide support in the area of Computer Services and data acquisition.
2. Provide computer support for both software and hardware applications of data review in the TSC and the transfer of data to offsite locations.
3. Terminate ERDS when the event is terminated.
4. Prepare for 24-hour coverage as necessary.

SITE ASSEMBLY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **GET** TLD and pocket dosimetry.

——— **COMPLETE** dose card

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the badge reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point, report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

——— **ESTABLISH** a log of activities.

——— **ESTABLISH** and maintain communications with the SAS by calling Ext. 2191 to obtain status of the site assembly.

NOTE:	Extension 4458 and 4977 are forwarded to Security at 4550 when the TSC is not activated.

——— **CLEAR** the forward feature from extension 4458 and 4977 (located in the Site Assembly Coordinator office) by following the instructions located on the desk..

——— **RECORD** site assembly start time _____ (announced from Control Room or available through the Operations Manager in the TSC.)

NOTE:	Approximately 20 minutes into the site assembly, the assembly locations will contact the Site Assembly Coordinator with names and badge numbers of personnel who were unable to swipe at the assembly locations.

——— **WHEN** Security provides a printout of unaccounted personnel, **THEN CHECK OFF** personnel who could not swipe at their assembly point (request this from security about 20 to 25 minutes into the site assembly).

SITE ASSEMBLY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE:	During Drills, the number of personnel at each assembly point should be determined if time permits. This information is necessary in the event of an evacuation.

_____ **CONTACT** the various assembly points to determine the approximate number of personnel at each location.

_____ **RECORD** the approximate number of personnel at each assembly point on the board located in the Site Assembly Coordinators office.

NOTE:	During a TSC "time out" a Site Assembly or Evacuation Coordinator **SHALL** report to the designated location at the Emergency Coordinator's Table to provide status/updates. {PIP-0-M98-2065}

RECORD site assembly completion time _____.

_____ **REQUEST** the OPS Manager in the TSC have the Control Room to STOP site assembly alarms and announcements.

_____ **DISCUSS** standing down from site assembly with the Emergency Coordinator. If okay to stand down, **REQUEST** Ops Manager in the TSC have the Control Room to give the stand down from site assembly. If **NOT** okay to stand down from site assembly, Site Evacuation coordinator will make announcements as directed by Enclosure 4.20.

NOTE:	The following message will be communicated to the site at the conclusion of site assembly by the control room.

_____ **IF** requested to do so by the control room, **ANNOUNCE** the stand down message below:

Drill Message for standing down from Site Assembly: Dial 710; at the beep, dial 80, begin speaking

"Attention all station personnel. This is a drill message. This is a drill message. You have been assembled as part of an emergency exercise. If this were an actual emergency, you would be asked to remain assembled waiting on further information, or given instructions to leave the site in accordance with our site evacuation plan. You may now return to your normal work assignments. Thank you for your participation.

SITE ASSEMBLY COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

_____ **AFTER** the drill message for standing down from site assembly is announced, **EVALUATE** the need to initiate search and rescue of missing personnel and discuss with Emergency Coordinator.

_____ **POST** periodic site assembly updates on site assembly/evacuation board as needed.

_____ **PROVIDE** periodic updates to the Emergency Coordinator, as needed and during time outs, concerning site assembly status.

_____ **PREPARE** for 24-hour coverage for your position as necessary.

NOTE:	If the Site Assembly portion of the Emergency / Drill is complete. The Site Assembly Coordinator should assist the Site Evacuation Coordinator with Emergency/ Drill message updates and evacuation coordination.

_____ **WHEN** the TSC is deactivated, then **FORWARD** extension 4458 and 4977 to Security at extension 4550.

_____ **REPLACE** the signs on the extension 4458 and 4977 warning personnel about using the two extensions.

_____ **PROVIDE** all completed paperwork to the Emergency Planner upon deactivation of the emergency facility.

SITE PAGING SYSTEM
INDIVIDUAL PAGING NUMBERS

NOTE:	710 covers all of these areas.

711, then speak	MOC
712 , then speak	Garage
713 , then speak	Medical
714 , then speak	NAB
715 , then speak	MTF
718 , then speak	Cowans Ford
719 , then speak	Plant
720 , then speak	Island Training Center
721 , then speak	Island Environmental Center
722 , then speak	Island Tech Services Center
723 , then speak	Island Energy Explorium

Enclosure 4.17

Emergency Coordinator/Emergency Operations Facility Director Turnover Checklist

PLANT CONDITIONS

Time_____ Date_____ Plant and Unit(s) Affected_____

Status of Unaffected Unit_____

Reactor Power Level (or Operating Mode if shutdown) Unit 1_____ Unit 2_____

Emergency Classification_____

List the problems ongoing at this time_____

_____

_____

Status of off-site and onsite power supplies (including diesels):

D/G A_____ SATA_____ BUSS Line A_____

D/G B_____ SATB_____ BUSS Line B_____

RADIOLOGICAL STATUS

Onsite and off-site radiological status_____

_____

_____

Site Assembly conducted: Yes _____ No _____

Site Evacuation: Yes_____No _____ Time of Evacuation_____

Evacuation Location_____

Number of field monitoring teams assembled_____

Number of field monitoring teams deployed_____

Protective Action Recommendations provided to state/counties_____

- Evacuate_____
- Shelter_____

OFF-SITE COMMUNICATIONS

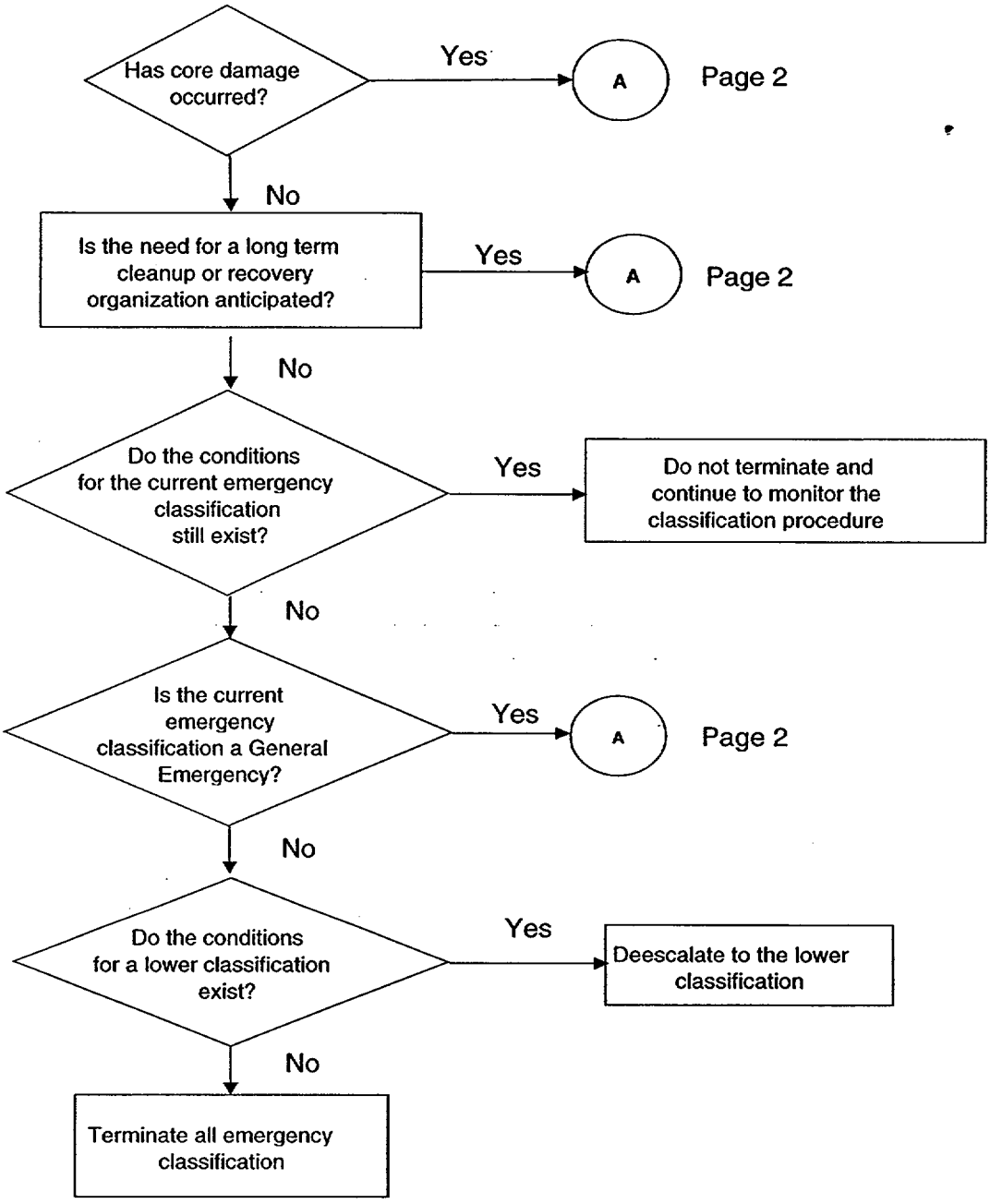
Off-Site Communicators' next Emergency Notification Form Due_____
(Time)

Communications checks complete and ready for turnover (Yes/No)_____

TSC Activation Time/Date: _____/_____

Enclosure 4.18

Emergency Classification Termination Criteria



Enclosure 4.18

Emergency Classification Termination Criteria

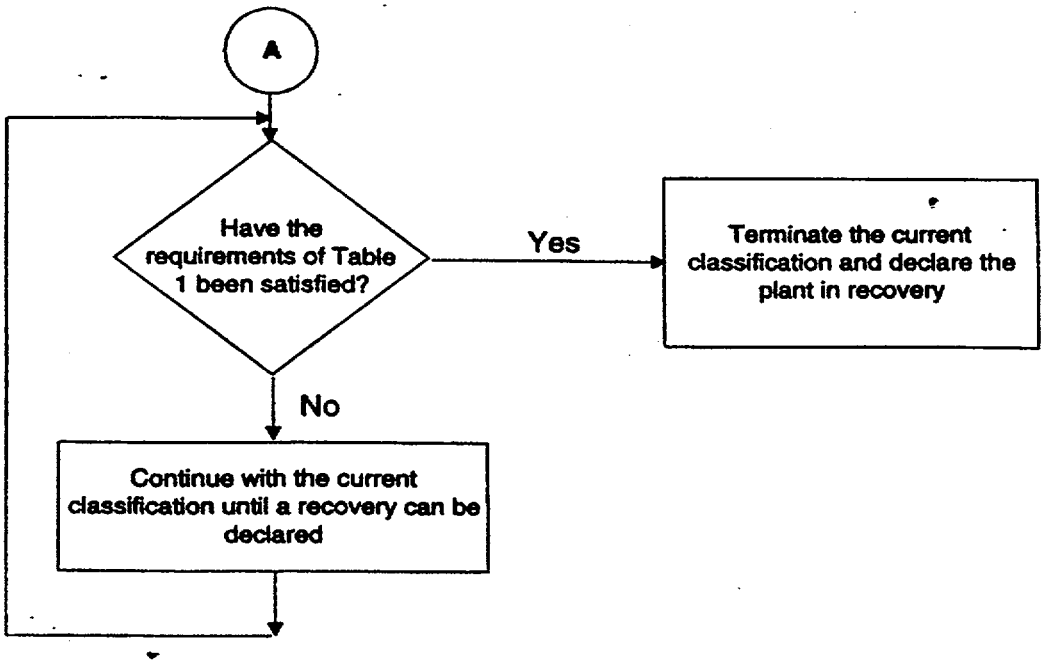


Table 1

Recovery Conditions

_____No new evacuation or sheltering protective actions are anticipated

_____Containment pressure is less than design pressure

_____Decay heat rejection to the ultimate heat sink has been established and either:

- Injection and heat removal have redundancy available (2 trains of injection/DHR or a train of DHR and S/G cooling)

OR

- No additional fission product release or fission product barrier challenges would be expected for at least 2 hours following interruption of injection. {PIP 0-M96-1645}

_____The risks from recriticality are acceptably low

_____Radiation Protection is monitoring access to radiologically hazardous areas

_____Offsite conditions do not limit plant access

_____The News Manager, NRC officials, and State representatives have been consulted to determine the effects of termination on their activities

_____The recovery organization is ready to assume control of recovery operations Go to RP/0/A/5700/024, (Recovery and Reentry)

Enclosure 4.19

Fitness for Duty Questionnaire

Print Name: _____ Employee ID #: _____

Sign Name: _____ ERO Position: _____

HAVE YOU CONSUMED ALCOHOL IN THE LAST FIVE (5) HOURS?

MARK THE APPROPRIATE BOX

No ☐

If No, stop here and fold this form and drop it in the box provided.

YES ☐

If your answer is Yes, take this form to a member of management for observation.

OBSERVATION DETERMINATION

What did you have? _____

How much did you have? _____

Can you perform your function unimpaired? YES ☐ NO ☐

In my opinion, observation of this individual indicates the individual is capable of performing his/her ERO function.

_____ _____

Signature of Management Observer Date

Fold the form and drop it in the box provided.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are <u>only</u> required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

——— **GET** TLD and pocket dosimetry.

——— **COMPLETE** dose card

——— **SIGN** in on the TSC staffing board and put on position badge.

——— **SIGN** the TSC roster.

——— **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the TSC for personnel accountability.

——— **CONTACT** your site assembly point, report your location upon activation of the site assembly alarm.{PIP 0-M96-1869}

_____ **ESTABLISH** a log of activities.

——— **DISCUSS** with the Site Assembly Coordinator the status of the site assembly in preparation for emergency/drill message updates and possible site evacuation.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

NOTE:	If the Site Assembly portion of the Emergency / Drill is complete. The Site Assembly Coordinator should assist the Site Evacuation Coordinator with Emergency/ Drill message updates and evacuation coordination.

_____ **IF** site assembly is still in progress **ANNOUNCE** the following Initial communication over the P.A. for the appropriate situation by dialing 710, at the beep, dial 80 and begin speaking:

For an Actual Emergency: "Attention all site personnel. This is an emergency message. This is an emergency message. At the present time, we have a _____"(emergency classification). (*Report general information of the event/information of importance. Obtain this information from the Offsite agency communicator).* _____

_____

_____

_____

All personnel inside the protected area shall remain at your site assembly location. All personnel outside of the protected area shall remain in your work area until you receive further instructions. Information will be provided to you as conditions change."

For a Drill: "Attention all site personnel. This is a drill message. This is a drill message. At the present time, we have a _____"(emergency classification). *(Report general information of the event/information of importance. Obtain this information from the Offsite Agency Communicator.):*

_____

_____

_____

_____

All personnel inside the protected area shall remain at your site assembly location. All personnel outside of the protected area may continue normal work activity. If this were an actual emergency, personnel outside the protected area would be instructed to remain at your work location."

_____ **RECORD** time of announcement _____.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

NOTE: An additional worksheet for Emergency/Drill Message Updates is on page 6 of 6.

——— **OBTAIN** off site notification information from the Off-site Agency Communicator *each time* an off-site notification is made and prepare an Emergency/ Drill Message Update as follows:

NOTE: If it is determined that an announcement should be made to the plant outside of the normal offsite agency communication, get the Emergency/ Assistant Emergency Coordinator's approval prior to the announcement. Use the message format as follows. After the notification is made, provide a copy of the announcement to the Offsite Agency Communicators.

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

——— "Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

_____
_____
_____
_____

——— **RECORD** time of announcement _____.

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

_____
_____
_____
_____

——— **RECORD** time of announcement _____.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

—— **EVALUATE** with the Radiation Protection Manager, the Emergency Coordinator and other TSC personnel the need to conduct a site evacuation or relocation of on-site personnel based on the following Event Classification criteria:

Alert- determine by actual plant conditions.

Site Area Emergency- consider evacuation/relocation of non-essential personnel.

General Emergency- evacuate all non-essential personnel.

NOTE:	The following information may be provided to the EOF via the Offsite Agency Communicators. {PIP-0-M-99-0911}

_____ **NOTIFY** EOF anytime personnel are relocated onsite or evacuated from the premises.

NOTE:	Evacuations planned inside the Protected Area should be made by contacting Security in the OSC with instructions. Evacuations outside the protected area should be made by contacting Security in the OSC and instructing them to coordinate activities with C&F representatives in the OSC. **When giving evacuation instructions be sure to identify the area for evacuees to relocate to** (using best judgement, advice from RP, etc.).

—— **EVALUATE** with the Radiation Protection Manager, Emergency Planner and Emergency Coordinator the following:

Recommendations on the need, path and transportation options for relocation of on-site personnel.

Recommendations on need, path and transportation options for evacuation of non-essential personnel off-site (Training Center lobby / Cowans Ford Dam or offsite / home.)

Recommendations on need to restrict vehicle (site transportation shuttle, etc.) movement on site. {PIP 0-M97-2871}

NOTE:	During a TSC "time out" a Site Assembly or Evacuation Coordinator **SHALL** report to the designated location at the Emergency Coordinator's Table to provide status/updates. {PIP-0-M98-2065}

_____ **PROVIDE** periodic updates to Emergency Coordinator as needed and during time outs on site evacuation or on site relocation of personnel.

_____ **IF** the decision is made to evacuate personnel from the site, **THEN INFORM** Off-site Agency Communicators to notify appropriate offsite agencies.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

NOTE:	Security may need to notify the Mecklenburg Police (911) requesting them to assist in traffic control, if deemed necessary by the Emergency Coordinator or Security Shift Supervisor.

_____ **IF** the decision is made to evacuate, **NOTIFY** Security to assist with traffic control as needed.

_____ **IF** evacuation of non-essential personnel is planned, **REQUEST** Managers, during a time out, to identify and inform their own essential personnel to remain, as all others will be evacuated.

_____ **IF** the decision is made to evacuate, **NOTIFY** the chosen Evacuation-Relocation site of the expected arrival of personnel.

_____ Technical Training Center - 379-3210 This is a cellular telephone carried by an industrial security guard who roams the site seven days a week, 24 hours a day,

_____ Powerhouse at Cowans Ford Dam. This phone rings throughout the dam site. This location is staffed Monday through Friday, 10 hours per day. The assess code to the Cowans Ford Dam is 3308.

NOTE:	Inform Control Room that you have already contacted Security and the Evacuation site with information about the evacuation of personnel.

_____ **IF** the decision is made to evacuate, **DIRECT** the Control Room to evacuate the site per (RP/0/A/5700/011) by calling the Control Room SRO at extension 4138 (then select option 3) and giving the following evacuation route information for non-essential personnel:

Non-essential personnel should:

A. Proceed to _____
(Training Center lobby / Cowans Ford Dam / Home / Other)

_____ **RECORD** the time the site evacuation begins_____ Ends_____

_____ **PREPARE** for 24 hour coverage for your position as necessary.

_____ **POST** updates to the site assembly / evacuation board located in the Site Assembly Coordinators office as needed.

_____ **PROVIDE** completed paperwork to the Emergency Planner upon deactivation of the emergency facility.

SITE EVACUATION COORDINATOR
INITIAL TSC ACTIVATION CHECKLIST

ADDITIONAL WORKSHEET FOR EMERGENCY/DRILL MESSAGE UPDATES

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

____
____
____
____

RECORD time of announcement ____________. Initial__________

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

____
____
____
____

RECORD time of announcement ____________. Initial__________

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

"Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message." (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

____
____
____
____

RECORD time of announcement ____________. Initial__________