UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
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March 31, 2000

Mr. J. V. Parrish
Chief Executive Officer
Energy Northwest (Mail Drop 1023)
P.O. Box 968
Richland, Washington 99352-0968

SUBJECT: NRC INSPECTION REPORT NO. 50-397/00-05

Dear Mr. Parrish:

This refers to the inspection conducted on February 28 through March 2, 2000, at the Washington Nuclear Project-2 facility. The purpose of this inspection was to evaluate the overall readiness and implementation of the WNP-2 emergency preparedness program. The enclosed report presents the results of this inspection. Followup discussions were held on March 20 and 29, 2000, between NRC Region IV and Messrs. P. Inserra, S. Boynton, T. Messersmith and staff to discuss the characterization of the audit frequency issue.

Based on the results of this inspection, the NRC has determined that a Severity Level IV violation of NRC requirements occurred in that annual drills that tested the capability of onsite medical personnel were not performed. This violation is being treated as a noncited Violation (NCV), consistent with Section VII.B.1.a of the Enforcement Policy. The NCV is described in the subject inspection report. If you contest the violation or severity level of this NCV, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington DC 20555-0001, with copies to the Regional Administrator, U.S. Nuclear Regulatory Commission, Region IV, 611 Ryan Plaza Drive, Suite 400, Arlington, Texas 76011, the Director, Office of Enforcement, United States Nuclear Regulatory Commission, Washington, DC 20555-0001; and the NRC Resident Inspector at the Washington Nuclear Project-2 facility.

In accordance with 10 CFR 2.790 of the NRC's "Rules of Practice," a copy of this letter, its enclosure(s), and your response, if requested, will be placed in the NRC Public Document Room (PDR).

Should you have any questions concerning this inspection, we will be pleased to discuss them with you.

Sincerely,

/RA/

Gail M. Good, Chief
Plant Support Branch
Division of Reactor Safety

Docket No.: 50-397
License No.: NPF-21

Enclosure:
NRC Inspection Report No.
50-397/00-05

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ENCLOSURE

U.S. NUCLEAR REGULATORY COMMISSION
REGION IV

Docket No.:	50-397
License No.:	NPF-21
Report No.:	50-397/00-05
Licensee:	Energy Northwest
Facility:	Washington Nuclear Project-2
Location:	Route 4S Richland, Washington
Dates:	February 28 through March 2, 2000
Inspector(s):	Paul J. Elkmann, Emergency Preparedness Analyst
Approved By:	Gail M. Good, Chief, Plant Support Branch Division of Reactor Safety
Attachment:	Supplemental Information

EXECUTIVE SUMMARY

Washington Nuclear Project-2
NRC Inspection Report No. 50-397/00-05

A routine, announced inspection of the operational status of the licensee's emergency preparedness program was conducted. The inspection included the following areas: emergency response facilities, emergency plan and implementing procedures, training, emergency planning organization, audits, and effectiveness of licensee controls.

Plant Support

- All events were properly classified. Operations and emergency preparedness follow-up to an actual event was appropriate and thorough (Section P1).

- The emergency response facilities were in good material condition and were operationally maintained. Supplies were adequate, most instruments were calibrated and operable, computers and communication circuits were operable, and ventilation systems were appropriately maintained (Section P2).

- Emergency plan implementing procedures lacked guidance for the relocation of emergency operations facility staff. The bases for determining that emergency plan revisions did not decrease the plan's effectiveness were not fully supported by documentation. The licensee's emergency plan contained several examples of outdated information. The licensee assigned additional duties to a position in the emergency response organization that were not incorporated in the emergency plan (Section P3).

- During an evaluated simulator walkthrough scenario, crews demonstrated the ability to promptly recognize plant events and to respond appropriately. Shift managers demonstrated a thorough knowledge of the requirements of the emergency director position. All emergency events were properly classified except for one general emergency. The licensee's critique process identified the missed classification, ensured that the event was entered into the corrective action system, and appropriately addressed performance problems (Section P4).

- Required radiological and environmental monitoring drills were performed as part of integrated drills; however, the integrated drill reports did not clearly document evaluations of radiological drills. A violation of 50.54(q) and Appendix E to Part 50 was identified for failure to perform annual drills that tested the capability of onsite medical personnel. This Severity Level IV violation is being treated as a noncited violation, consistent with Section VII.B.1.a of the Enforcement Policy. The licensee has entered the issue into its corrective action program as Problem Event Report 200-0407 (Section P5).

- The licensee's emergency preparedness staff was sufficient to implement the program and included appropriate technical expertise. Staffing of the emergency response organization was sufficient and had been improved by adding another team to function as drill controllers and replacements for the duty teams. The staffing of maintenance personnel in the operations support center was clarified by the licensee by assigning duty maintenance work teams to the facility (Section P6).

- The licensee conducted numerous self-assessments and audits. The audit reports were independent, structured, comprehensive, and appropriately critical. Self-assessments were frequent, critical, and covered a wide variety of program elements. The licensee selected emergency preparedness program performance indicators and appropriately concluded that the program audit frequency could be extended in accordance with 50.54(t). The licensee's review for determining audit frequency lacked definition to ensure that consistent decisions were made (Section P7.1).

- Problem evaluation reports were appropriately screened, and reviews were performed in a timely manner. Corrective actions were assigned that were reasonable and timely (Section P7.2).

Report Details

IV. Plant Support

P1 Conduct of Emergency Preparedness Activities

a. Inspection Scope (93702)

The inspector reviewed licensee event reports and emergency notifications made between July 24, 1998, and March 2, 2000, to determine if events were properly classified. The inspector also reviewed the after-action report for the June 17, 1998, notification of unusual event, which was completed September 24, 1998.

b. Observations and Findings

There were no declared emergency events since the previous inspection. All events were properly evaluated for classification. The after-action report on the June 17, 1998, notification of unusual event included a thorough characterization of most emergency preparedness functions, along with a very detailed event timeline. All risk significant activities were performed correctly and in a timely manner. The report contained an extensive and clear discussion of the emergency action levels and classification options that were considered by the emergency director.

c. Conclusions

All events were properly classified. Operations and emergency preparedness follow-up to an actual event was appropriate and thorough.

P2 Status of Emergency Preparedness Facilities, Equipment, and Resources

a. Inspection Scope (82701-2.02)

The inspector toured the technical support center, the operations support center, and the emergency operations facility to determine operational readiness. The inspector checked these facilities for adequate supplies, calibrated and operable radiation monitoring equipment, and operable computers and communication circuits. The inspector also reviewed a sample of communication circuit tests completed since July 24, 1998. The inspector walked down the ventilation system in the technical support center to determine its material condition.

b. Observations and Findings

The emergency response facilities inspected were dedicated to emergency response, except for the operations support center which was also used as a lunch area. Proper housekeeping practices were observed in all facilities. The facilities were maintained with adequate supplies and equipment, and they were ready for use. Dedicated equipment cabinets in the operations support center were sealed to prevent tampering. All communication circuits and computers checked were operational. Radiation

monitoring equipment calibrations were current, and source checks of selected instruments showed measurable instrument responses. Potassium iodide tablets were readily available and within their expiration dates. Instrumentation on the technical support center ventilation system was calibrated, and the system was in good material condition and capable of performing its function. Emergency preparedness staff was knowledgeable about the status of work orders related to emergency response facilities, and work was completed in a timely manner.

Responsibility for communication testing in the emergency response facilities was split between the licensee's emergency preparedness staff and the telecommunications group. Plant tracking methods were effective in ensuring that all communication tests were completed as required.

Three battery-powered portable air samplers were located in the operations support center to provide a means to detect airborne radioactive materials. These samplers were observed to be operational and within their calibration period. However, when run with appropriate sampling media, air flow was below the calibrated level. Because the licensee indicated that the calibration method used was only valid for the single indicated calibration point, the actual flow through the sampler could not be determined from the rotometer. The inspector expressed concerns about the effects on emergency workers in an airborne radioactivity environment as a result of the air sampler performance. Emergency preparedness staff acknowledged the concerns, immediately removed the air samplers from service, and replaced them with operational air samplers. The licensee entered this event into its corrective action program as Problem Event Report 200-0406.

c. Conclusions

The emergency response facilities were in good material condition and were operationally maintained. Supplies were adequate, most instruments were calibrated and operable, computers and communication circuits were operable, and ventilation systems were appropriately maintained.

P3 Emergency Preparedness Procedures and Documentation

a. Inspection Scope (82701-2.01)

The inspector reviewed the licensee's process for making revisions to the emergency plan and implementing procedures to determine if the changes were made in accordance with NRC regulations. The inspector reviewed selected sections of the implementing procedures for agreement with the emergency plan. The inspector also checked procedures in place at the onsite emergency response facilities to determine if current procedures were present.

b. Observations and Findings

The inspector discussed the conditions under which the primary emergency operations facility could be considered uninhabitable with emergency preparedness staff. The

licensee stated that implementing procedures for the emergency operations facility did not specify conditions under which the facility would be expected to relocate.

The inspector reviewed 50.54(q) documentation for emergency plan Revisions 20 through 24. The bases/evaluations for determining that emergency plan revisions did not decrease the plan's effectiveness were not fully documented. These evaluations consisted of a point-by-point restatement of the change summary and a statement that the described change did not constitute a decrease in effectiveness. However, the text of the evaluation did not provide evidence that the changes preserved requirements, functions, or commitments. Evaluations did not effectively link statements about particular changes to the conclusion that these changes did not decrease the plan's effectiveness and continued to meet the applicable requirements (50.47(b) and Appendix E).

The inspector noted two instances of outdated information in the emergency plan. The emergency plan described siren testing requirements that applied to electro-mechanical sirens (e.g., biweekly growl tests) while current licensee sirens contained only solid-state electronics. Also, the emergency plan contained a requirement for annual communications tests with all local agencies within the 50-mile emergency planning zone rather than with local agencies in the 10-mile emergency planning zone. The licensee entered the siren issue into its corrective action system as Problem Event Report 200-0389 and entered the unintended 50-mile versus 10-mile emergency planning zone into its corrective action system as Problem Event Report 200-0404. The licensee planned to address these issues in a future emergency plan revision.

The inspector reviewed Problem Event Report 299-0100 dated January 18, 1999, that described corrective actions for the inability to dispatch teams from the operations support center during drills. The apparent cause of the problem was that the operations support center director had too many assigned duties because he could not adequately both direct the facility and brief and dispatch teams. Corrective actions included the permanent assignment of a senior reactor operator to the operations support center to take over responsibility for team briefing and dispatch. Licensee emergency preparedness staff stated that the senior reactor operator position had been implemented in every drill since January 1999 and that team dispatch was no longer a problem.

The inspector reviewed Section 2.3 of the emergency plan to determine how the operations support center was staffed; however, the plan did not describe a senior reactor operator position in the operations support center. Licensee emergency preparedness staff stated that their current practice was to assign a senior reactor operator to a position described in the emergency plan (operations support center communicator). The inspector determined that the licensee had assigned new duties to an emergency response organization position as corrective action for PER 299-0100, but had not captured the new duties in the emergency plan. The licensee planned to revise Section 2.4.4.4 of the emergency plan to clearly separate facility management duties carried out by the operations support facility manager, and team briefing and dispatch duties carried out by the designated communicator.

c. Conclusions

Emergency plan implementing procedures lacked guidance for the relocation of emergency operations facility staff. The bases for determining that emergency plan revisions did not decrease the plan's effectiveness were not fully supported by documentation. The licensee's emergency plan contained several examples of outdated information. The licensee assigned additional duties to a position in the emergency response organization that were not incorporated in the emergency plan.

P4 Staff Knowledge and Performance in Emergency Preparedness

a. Inspection Scope (82701-2.04)

The inspector evaluated the emergency preparedness functions of two control room crews during simulator walkthroughs conducted on the plant-specific control room simulator using a dynamic scenario. Licensee evaluators also observed and evaluated each crew. The inspector evaluated each crew's performance and its capability to:

- Classify emergency events
- Notify offsite authorities
- Perform dose assessments
- Prepare appropriate protective action recommendations
- Notify offsite agencies about protective action recommendations

The scenario consisted of a series of events requiring the declaration and escalation of emergency classifications and the need to issue protective action recommendations. The scenario consisted of an operational basis earthquake with loss of boron injection capability, followed by an aftershock and an anticipated transient without scram event. The feed and condensate systems were lost after a loss of offsite power event that resulted in reactor core uncovery. A failure of containment isolation caused a release to the environment through the reactor building. Each walkthrough scenario lasted about 2 hours and was followed by a licensee critique.

b. Observations and Findings

Both operating crews performed well during the walkthrough scenarios. The crews: (1) recognized plant events and responded appropriately, (2) properly implemented the emergency operating procedures, and (3) mitigated the postulated accident. Crew communications were effective during both scenarios. The shift managers demonstrated a thorough knowledge of their emergency manager duties and were aware of protective action guides for offsite evacuation. The shift managers correctly classified emergency conditions, except for the general emergency during the second scenario. All offsite notifications were accurate and made within required times. The shift technical advisors were familiar with the dose assessment system and correctly determined protective action recommendations. Shift managers and shift technical advisers evaluated dose assessment results to determine whether protective action recommendations were required beyond the 10-mile emergency planning zone.

During the second scenario, the shift manager failed to recognize a general emergency classification based on the failure of two fission product barriers and a challenge to the third. Approximately 30 minutes later, a general emergency was declared based on dose projection results. Licensee evaluators properly identified and discussed the failure to make the general emergency classification during the post-scenario critique. The licensee captured this event in its corrective action system as Problem Event Report 200-0397 and proposed remedial activities for the personnel involved. The inspector determined that the licensee actions were appropriate.

c. Conclusions

During an evaluated simulator walkthrough scenario, crews demonstrated the ability to promptly recognize plant events and to respond appropriately. Shift managers demonstrated a thorough knowledge of the requirements of the emergency director position. All emergency events were properly classified except for one general emergency. The licensee's critique process identified the missed classification, ensured that the event was entered into the corrective action system, and appropriately addressed performance problems.

P5 Staff Training and Qualification in Emergency Preparedness

a. Inspection Scope (82701-2.04)

The inspector discussed the licensee's training program with emergency preparedness staff and reviewed the training records for selected members of the licensee's emergency response organization. Licensee records were reviewed to determine whether the following drills were conducted as required:

- In-plant health physics
- Environmental radiological monitoring
- Post-accident sampling system
- Medical
- Communications
- Integrated functional drills

b. Observations and Findings

The emergency response organization training program was consistent with emergency preparedness and training department procedures. All emergency preparedness staff met training department requirements for qualification as classroom instructors, and their qualifications were current. Training records indicated that all reviewed emergency response organization members had completed training requirements for their positions.

Drill requirements in Procedure 13.14.8, Revision 15, Drill and Exercise Program, were consistent with Section 8.7 of the emergency plan. The inspector reviewed reports for drills conducted during the last 2 years and discussed the conduct of radiological health physics, environmental monitoring, and medical drills with licensee emergency preparedness staff.

Four integrated team drills were conducted each year, one for each designated emergency response team, and in-plant and environmental monitoring drills were components in each team drill. The licensee stated that scenario elements were incorporated into integrated team drills to allow evaluation of in-plant and environmental monitoring; however, the inspector determined that the drill scope described in the integrated drill reports did not clearly describe any radiological monitoring drill components and that drill reports did not explicitly evaluate radiological monitoring performance.

The inspector concluded that documentation for the in-plant radiological and environmental monitoring drills was not sufficiently detailed to clearly establish that emergency plan commitments were being met and that all NUREG-0654, Revision 1, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants," Planning Standard N elements, were completed. Licensee staff stated that each integrated team drill met the requirements for in-plant and environmental monitoring drills. The licensee entered the issue of documenting annual performance of radiological drills into its corrective action system as Problem Event Report 200-0408.

The licensee conducted medical drills with each of three area hospitals over a 2-year period, two drills one year and one drill the following year. The licensee's drills started from an offsite event to which only offsite agencies responded. The licensee provided radiation protection staff directly to the hospital to support treatment of the contaminated injured victim. The licensee's implementation of this requirement did not drill the onsite staff who would respond to a medical emergency, including transportation from the site to a hospital. 10 CFR 50.54(q) requires that licensees follow and maintain an emergency plan that meets the planning standards of 50.47(b) and the requirements of Appendix E. Appendix E, Sections IV.F.1(b)(vi) and IV.F.1(b)(vii) require that first-aid teams, rescue teams, and medical support personnel participate in training and drills. The failure to perform annual drills that tested the capability of onsite medical personnel was identified as a violation of 50.54(q). This Severity Level IV violation is being treated as a noncited violation, consistent with Section VII.B.1.a of the Enforcement Policy. The licensee has entered this issue into its corrective action system as Problem Event Report 200-0407.

c. Conclusions

Required radiological and environmental monitoring drills were performed as part of integrated drills; however, the integrated drill reports did not clearly document evaluations of radiological drills. A violation of 50.54(q) and Appendix E to Part 50 was identified for failure to perform annual drills that tested the capability of onsite medical personnel. This Severity Level IV violation is being treated as a noncited violation, consistent with Section VII.B.1.a of the Enforcement Policy. The licensee has entered the issue into its corrective action program as Problem Event Report 200-0407.

P6 Emergency Preparedness Organization and Administration

a. Inspection Scope (82701-2.03)

The inspector reviewed emergency preparedness department staffing and management, emergency response staffing, and agreements for offsite support. Discussions were held with senior station management, emergency preparedness staff, and key directors selected from among the emergency response organization.

b. Observations and Findings

The emergency preparedness staff consisted of five technical positions. All staff members had appropriate technical backgrounds and more than 4 years experience in the group. The staff has been stable since the previous inspection, with the exception of the planned reduction of one emergency planner during 1999. The licensee evaluated the impact of eliminating the planner position as part of the overall station reorganization. The inspector determined that emergency preparedness staffing was sufficient to implement the program.

The emergency response organization staffing was sufficient. Four duty teams were maintained with adequate controls to ensure that staffing was available. The licensee implemented a 5th emergency response team which was used as controllers and evaluators during drills and as a replacement pool for duty team personnel. A duty schedule had also been established to assign maintenance work teams to the operations support center.

c. Conclusions

The licensee's emergency preparedness staff was sufficient to implement the program and included appropriate technical expertise. Staffing of the emergency response organization was sufficient and had been improved by adding another team to function as drill controllers and replacements for the duty teams. The staffing of maintenance personnel in the operations support center was clarified by the licensee by assigning duty maintenance work teams to the facility.

P7 Quality Assurance in Emergency Preparedness Activities

P7.1 Nuclear Assurance Division Audits of Emergency Preparedness Program

a. Inspection Scope (82701-02.05)

The inspector examined emergency preparedness program surveillances for 1998 and 1999 prepared by the quality department to determine compliance with NRC requirements. The inspector also reviewed requirements for reviewing and maintaining emergency preparedness documents.

b. Observations and Findings

The inspector reviewed nine emergency preparedness program audits and self-assessments which were conducted since the previous inspection. Full program audits were conducted by the quality department in 1998 and 1999 that were structured, comprehensive, and critical. The audit was conducted by staff members who were independent of the emergency preparedness organization and had appropriate expertise in the subject. Teams included members from offsite agencies and other utilities. The 1999 audit identified a continuing problem in completing corrective actions for some Problem Event Reports. The numerous self-assessments performed by the licensee were appropriately focused and resulted in corrective actions and recommendations for improvement.

The inspector reviewed Surveillance SR2000-005, "Evaluation of Emergency Preparedness Performance," dated February 3, 2000, and discussed the contents with emergency preparedness and quality department staff. The licensee performed this surveillance in accordance with the revised 10 CFR 50.54(t) and concluded that a full program audit was not necessary for calendar year 2000. The surveillance identified seven performance indicators that the licensee selected to trend program performance; it also discussed other program and performance elements that were considered in reaching the licensee's conclusion that an annual audit was not required. The inspector determined that the licensee's conclusion was appropriate. However, the inspector determined that the licensee did not clearly define evaluation criteria for its internal program performance indicators that would be used to determine that an audit was required. The inspector expressed a concern that the need for a necessary program audit could go unrecognized, due to the lack of predetermined evaluation criteria. The licensee acknowledged the inspectors concerns and entered the issue into its corrective action program at Problem Event Report 200-0426.

c. Conclusions

The licensee conducted numerous self-assessments and audits. The audit reports were independent, structured, comprehensive, and appropriately critical. Self-assessments were frequent, critical, and covered a wide variety of program elements. The licensee selected emergency preparedness program performance indicators and appropriately concluded that the program audit frequency could be extended in accordance with 50.54(t). The licensee's review for determining audit frequency lacked definition to ensure that consistent decisions were made.

P7.2 Effectiveness of Licensee Controls

a. Inspection Scope (82701-02.06)

The inspector reviewed entries in the problem evaluation report (plant corrective action) system that were assigned to the emergency preparedness department since July 24, 1998. Eight of the 55 problem evaluation reports were selected for detailed review.

b. Observations and Findings

The inspector reviewed the most risk-significant problem evaluation reports assigned to emergency preparedness, some of which were currently open and others which were completed. The problem evaluation reports received a proper level of screening and causes were appropriately determined. Problem evaluation report reviews and corrective actions were timely and reasonable.

c. Conclusions

Problem evaluation reports were appropriately screened, and reviews were performed in a timely manner. Corrective actions were assigned that were reasonable and timely.

P8 Miscellaneous Emergency Preparedness Issues

P8.1 (Closed) IFI 50-397/98014-02: Failure to recognize the need for protective action recommendations beyond 10 miles. Shift managers and shift technical advisors recognized the potential for extended protective actions and appropriately discussed whether dose projections indicated a need for protective action recommendations beyond 10 miles during simulator walkthrough scenarios.

V. Management Meetings

X1 Exit Meeting Summary

The inspector presented the inspection results to members of licensee management at the conclusion of the inspection on March 2, 2000. The licensee acknowledged the findings presented. No proprietary information was identified.

Followup discussions were held on March 20 and 29, 2000, between NRC Region IV and Messrs. P. Inserra, S. Boynton, T. Messersmith and staff to discuss the characterization of the audit frequency issue.

ATTACHMENT

SUPPLEMENTAL INFORMATION

PARTIAL LIST OF PERSONS CONTACTED

Licensee

S. Boynton, Manager, Quality
D. Coleman, Manager, Regulatory Affairs
J. Dabney, Outage Manager
K. Engbarth, Quality Lead Auditor
G. Hendrick, Manager, Operations Support
J. Hunter, Health Physics Staff Advisor
P. Inserra, Manager, Licensing
R. Jorgensen, Onsite Emergency Preparedness Lead
J. Kittler, Shift Manager
A. Langdon, Assistant Manager, Technical Services
T. Messersmith, Manager, Emergency Preparedness, Safety and Health
W. Shaeffer, Training Manager
R. Sherman, Licensing Engineer
G. Smith, Vice President Generation, Plant General Manager
R. Torres, Manager, Technical Services
R. Webring, Vice President, Operations Support

NRC

G. Replogle, Senior Resident Inspector
J. Rodriguez, Resident Inspector

INSPECTION PROCEDURES USED

IP 82701:	Operational Status of the Emergency Preparedness Program
IP 92904:	Follow Up - Plant Support
IP 93702:	Prompt Onsite Responses to Events at Operating Power Reactors

ITEMS OPENED AND CLOSED

Opened and Closed

00-05-01	NCV	Licensee did not perform annual drills that tested the capability of onsite medical personnel (Section P5).

Closed

98014-02	IFI	Failure to recognize the need for protective action recommendations beyond 10 miles (Section P8.1).

LIST OF DOCUMENTS REVIEWED

Plant Procedures:

1.3.43	Licensing Basis Impact Determinations	Revision 15
1.4.5	Processing of Licensing Document Changes	Revision 16
13.11.1	EOF Managers Duties	Revision 21
13.11.7	Radiological Emergency Managers Duties	Revision 19
13.14.8	Drill and Exercise Program	Revision 15
SWP PRO-02	Preparation, Review, Approval, and Distribution of Procedures	Revision 6

Other Documents:
FAAR32, Final After-Action Report, June 17, 1998, Unusual Event, September 24, 1998
1998 Quarterly Training Drill Cycle Drill Report, June 29, 1998
1999 Team D Training Drill Report, February 1, 2000
1999 Mini-Drill Scenario for PASS Drill, October 28, 1999

WNP2 Emergency Preparedness Status Reports: 2nd Quarter 1998 through 4th Quarter 1999

Audit Report AU298-008, Emergency Preparedness Program, April 10, 1998
Audit Report AU298-037, Corrective Action Program, July 22, 1998
Audit Report AU299-007, WNP2 Emergency Preparedness Program, April 15, 1999
1999 Emergency Preparedness Self Assessment Report, June 15, 1999
Self Assessment of the Alert & Notification System, August 11, 1999
Emergency Preparedness Self Assessment Closure Documentation for PTL160257, September 24, 1999
Self Assessment: Emergency Action Level Revision Review, December 14, 1999
Surveillance SR2000-005, Evaluation of Emergency Preparedness Performance, February 3, 2000
PTL160482/SARPT: Emergency Preparedness Record Retention Self Assessment, February 23, 2000

Licensing Evaluation LE98-07
Licensing Evaluation LE99-04

Emergency Phone Directory, Revision 44, December 28, 1999

Problem Evaluation Requests:

200-0389	299-0100
200-0397	299-0966
200-0404	299-1593
200-0406	299-1623
200-0407	299-1829
200-0408	299-2017
200-0426	299-2653
297-0205	