INL/EXT-15-36569
Revision 0

Idaho National Laboratory Emergency Readiness Assurance Plan — Fiscal Year 2015

September 2015

The INL is a U.S. Department of Energy National Laboratory
operated by Battelle Energy Alliance

INL/EXT-15-36569
Revision 0

Idaho National Laboratory Emergency Readiness Assurance Plan — Fiscal Year 2015

September 2015

Idaho National Laboratory
Idaho Falls, Idaho 83415

This page intentionally left blank.

ABSTRACT

Battelle Energy Alliance, LLC, the prime contractor for Idaho National Laboratory (INL), provides this Emergency Readiness Assurance Plan (ERAP) for Fiscal Year 2015 in accordance with DOE O 151.1C, "Comprehensive Emergency Management System." The ERAP documents the readiness of the INL Emergency Management Program using emergency response planning and preparedness activities as the basis. It describes emergency response planning and preparedness activities, and where applicable, summarizes and/or provides supporting information in tabular form for easy access to data. The ERAP also provides budget, personnel, and planning forecasts for Fiscal Year 2016.

Specifically, the ERAP assures the Department of Energy Idaho Operations Office that stated emergency capabilities at INL are sufficient to implement PLN-114, "INL Emergency Plan/RCRA Contingency Plan."

This page intentionally left blank.

CONTENTS

TABLES

This page intentionally left blank.

ACRONYMS

ATR	Advanced Test Reactor
BEA	Battelle Energy Alliance, LLC
CFA	Central Facilities Area
DOE	Department of Energy
EM	emergency management
EPHA	emergency planning hazards assessment
EPHS	emergency planning hazards survey
ERAP	Emergency Readiness Assurance Plan
ERO	emergency response organization
FY	Fiscal Year
GE	general emergency
ICS	Incident Command System
INL	Idaho National Laboratory
MFC	Materials and Fuels Complex
N/A	not applicable
OE	operational emergency
OEI	operating experience information
REC	Research and Education Campus
SAE	site area emergency
SMC	Specific Manufacturing Capability

This page intentionally left blank.

Idaho National Laboratory Emergency Readiness Assurance Plan — Fiscal Year 2015

1. PROGRAM DESCRIPTION

Battelle Energy Alliance, LLC (BEA), the prime contractor for Idaho National Laboratory (INL), provides this Emergency Readiness Assurance Plan (ERAP) for Fiscal Year (FY) 2015 in accordance with DOE O 151.1C, "Comprehensive Emergency Management System." The ERAP documents the readiness of the INL Emergency Management Program and assures the Department of Energy (DOE) Idaho Operations Office that stated emergency capabilities at INL are sufficient to implement PLN-114, "INL Emergency Plan/RCRA Contingency Plan." The ERAP was developed following the format and content guidance of DOE G 151.1-3, "Programmatic Elements."

The INL Emergency Management Program is fully matured as a hazardous material program as defined by DOE O 151.1C and continues to be an effective response program. DOE O 151.1C was added to the Prime Contract between the DOE Idaho Operations Office and BEA, Contract No. DE-AC07-05ID14517, "Management and Operation of the Idaho National Laboratory (INL)," in July 2006. All programmatic milestones were met during FY-2015. The National Incident Management System Implementation Plan is fully implemented and being maintained in compliance with DOE O 151.1C.

INL consists of the INL Site, which is an 888-square-mile desert area 45 miles west of Idaho Falls, Idaho, and multiple facilities at the Research and Education Campus (REC) in Idaho Falls. The ERAP covers only those INL facilities operated by BEA. It does not cover facilities operated by CH2M-WG Idaho, LLC; the Naval Reactors Facility operated by the DOE Pittsburgh Naval Reactors Office; or the Advanced Mixed Waste Treatment Project operated by the Idaho Treatment Group, LLC.

A. Hazards Surveys/Assessments

Based on the results of INL emergency planning hazards surveys (EPHSs) and emergency planning hazards assessments (EPHAs), INL has established an operational emergency (OE) hazardous material program as defined by DOE O 151.1C.

INL Emergency Management develops and maintains EPHS/EPHA documents for INL facilities operated by BEA. All INL EPHSs and EPHAs are DOE O 151.1C compliant. The review cycles and DOE O 151.1C compliance status for all EPHSs and EPHAs are indicated in Tables 1-1 and 1-2, respectively.

Table 1-1. Emergency planning hazards survey status.

Building/ Facility[1]	Last Review Date	Next Review Date	EPHA Required	DOE O 151.1C Compliance Schedule (Updated When Hazards Change or Every Three Years)
ATR Complex	October 2014	October 2017	Yes	Issue October 2017
CFA	July 2015	July 2018	Yes	Issue July 2018
MFC	July 2014	July 2017	Yes	Issue July 2017
REC	May 2015	May 2018	Yes	Issue May 2018

Table 1-1. (continued).

Building/ Facility[1]	Last Review Date	Next Review Date	EPHA Required	DOE O 151.1C Compliance Schedule (Updated When Hazards Change or Every Three Years)
SMC	October 2012	October 2015	Yes	Issue October 2015

[1] ATR = Advanced Test Reactor MFC = Materials and Fuels Complex
CFA = Central Facilities Area SMC = Specific Manufacturing Capability

Table 1-2. Emergency planning hazards assessment status.

Building/ Facility	Last Review Date	Next Review Date	Hazardous Material Program Required	DOE O 151.1C Compliance Schedule (Updated When Hazards Change or Every Three Years)
ATR Complex	March 2013	March 2016	Yes	Issue March 2016
CFA (includes transportation)	July 2015	August 2018	Yes	Issue August 2018
MFC	July 2013	September 2015	Yes	Issue September 2018
REC	September 2012	September 2015	Yes	Issue September 2015

As indicated in the EPHSs, the OEs that could affect INL facilities are the result of radiological and hazardous material releases. The dominant hazards at INL in terms of the most severe consequences (i.e., general emergency [GE], site area emergency [SAE], or alert; biological release OEs) from potential OEs are indicated in Table 1-3.

Table 1-3. Dominant potential operational emergencies at Idaho National Laboratory.

	Emergency Classification				Radioactive/Chemical/Biological Material		
Facility	GE	SAE	Alert	OE Unclassified	Radioactive	Chemical	Biological
ATR Complex	X	X	X	X	GE, SAE, alert	SAE, OE	Not applicable (N/A)
CFA (includes transportation)	X	X	X	X	GE, SAE, alert	Alert, OE	N/A
MFC	X	X	X		GE, SAE, alert	SAE, alert	N/A
SMC		X	X	X	OE	SAE, alert, OE	N/A
REC				X	OE	OE	N/A

B. Emergency Plan and Implementing Procedures

PLN-114 and numerous emergency plan implementing procedures are fully mature and in a maintenance mode of operation. Annual review of PLN-114 was completed on schedule. Emergency plan implementing procedures are on schedule for completion of an annual review.

C. Exemptions

As specified in Table 1-4, BEA has no exemptions with DOE O 151.1C, Attachment 2, Contractor Requirements Document.

Table 1-4. Exemptions with DOE O 151.1C, Attachment 2.

Exemption	Reason	Date of Submission	Approval Date	Duration
No exemptions requested	N/A	N/A	N/A	N/A

This page intentionally left blank.

2. PROGRAM APPLICATION

A. Program Weaknesses

Table 2-1 identifies the INL Emergency Management (EM) Program weaknesses that are indicated through observations, actual events, self-assessments, independent assessments, and drills that can be grouped generally as follows:

- Emergency response organization (ERO) proficiency
- Training program
- Technology
- Incident Command System (ICS).

BEA is addressing training issues to increase ERO member competency, as well as awareness and familiarization of procedures and requirements. Qualification processes have been evaluated, training courses are being revised, and training has been provided to appropriate ERO members to address identified weaknesses in the short term.

In the long term, BEA has initiated three major initiatives to address long-term fixes for identified issues/opportunities for improvement from the above-mentioned sources. The three initiatives are the EM training program, EM technology, and ICS.

Procedures/processes continue to be reviewed for ease of implementation and effectiveness and are revised when opportunities for improvement continue to be identified.

There are no issues that are reported in the DOE Corrective Action System.

B. Lessons Learned

Lessons learned are an integral part of the feedback and improvement process and a key component of the effort to achieve operational excellence. Through the lessons learned process, internal and external operating experience information (OEI) is used to capture and share noteworthy practices or innovative approaches to promote repeat application, or adverse work practices or experiences to avoid recurrence. Continuous improvement is a result of systematic evaluation and implementation of OEI.

The INL Lessons Learned Program is described in PDD-171, “Issues Management Program,” and the instructions and responsibilities for implementing the program are provided in LWP-13850, “Processing Lessons Learned and Operating Experience Information.” The INL Lessons Learned Management System is maintained by the Lessons Learned Office and available to any employee who has access to the BEA intranet. Lessons learned/OEI with applicability to INL Emergency Management is provided by Analysis and Reporting to the INL Emergency Management lessons learned coordinator for review and distribution to applicable personnel. During FY-2015, 4 lessons learned were disseminated to INL Emergency Management personnel.

In addition, in the spring of 2015 BEA rolled out a new Lessoned learned process owned by the Laboratory Assurance organization. Key people have been trained on how the process works and numerous lessons learned are being distributed across the INL as a result of the new process. This new process is captured in LWP-13850, “Processing Lessons Learned and Operating Experiences.”

C. Program Constraints

INL Emergency Management is committed to conducting self-assessments and supporting external assessments conducted by outside organizations. Funding for corrective actions is determined on a case-by-case basis and is sought where existing scope of work will be impacted. While EM is considered mature and meeting all expectations, a significant amount of effort is being put into the three initiative areas knowing they will build a much stronger EM foundation for the future. At this time, EM is meeting all expectations largely with an expert based approach. While this can sustain short-term success, with the aging and retiring workforce, EM is building a much stronger programmatic approach to allow continued success in the future.

Table 2-1. Emergency management program weaknesses.

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
INL: Drills and Exercises	Emergency Management	CO 2014-0505	*Develop a required read for all SMC EAMs to review emphasizing the importance of declaring an operational emergency within 15 minutes of event recognition even if the EAL is no longer met*	SMC	9/1/14	*A required read was developed for all SMC EAMs to review emphasizing the importance of declaring an operational emergency within 15 minutes of event recognition even if the EAL is no longer met. See report July 16, 2014 drill at SMC.*	Closed
INL: Drills and Exercises	Emergency Management	CO 2014-0553	*INL EOC procedure use was limited during the exercise. Five EOC ERO positions were evaluated and only the ERO member filling the assessment specialist position reviewed the procedures during the entire exercise. The ERO members filling the remaining four ERO positions only reviewed the procedures initially and then intermittently thereafter.*	EOC	9/12/14	*INL EOC procedure use was limited during the exercise. Five EOC ERO positions were evaluated and only the ERO member filling the assessment specialist position reviewed the procedures during the entire exercise. The ERO members filling the remaining four ERO positions only reviewed the procedures initially and then intermittently thereafter. This was addressed during the hot wash immediately following the drill and entered for tracking and trending in LabWay.*	Closed
INL: Drills and Exercises	Emergency Management	CO 2014-0555	*Transfer of the categorization/classification function from the MFC EAM to the INL ED did not follow applicable procedures and conduct of operations principles, namely using repeat backs to verify that both parties understood the information that was sent and received.* *Transfer of the notification function from*	MFC	09/12/14	*Include in requalification training or develop a lesson learned using this example on the importance of using repeat backs during communications.* *Include in requalification training*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
			the MFC EAM to the INL ED did not follow applicable procedures and conduct of operations principles, namely using repeat backs to verify that both parties understood the information that was sent and received. *Transfer of the PA function from the MFC EAM to the INL ED did not follow applicable procedures and conduct of operations principles, namely using repeat backs to verify that both parties understood the information that was sent and received.*			*or develop a lesson learned using this example on the importance of using repeat backs during communications.* *Include in requalification training or develop a lesson learned using this example on the importance of using repeat backs during communications.*	
INL: Drills and Exercises	Emergency Management	CO 2014-0591	*The EAM was prompted by controllers on the recovery process. The recovery manager was designated at T+95 and the steps for recovery were reviewed by the EAM with the ED at T+99. EAM had to be coached through the recovery manager process.*	SMC	09/25/14	*SMC Emergency Planner to email this report out to all SMC ERO members as lessons learned and conduct training, if needed. Lessons Learned Summary was sent out as the first page of the overall drill report, highlighting the need for EAMs to be more familiar with the Recovery Process.*	Closed
INL: Drills and Exercises	Emergency Management	CO 2014-0688	*After the ADS pad had been initially assessed and it was determined that there was a propane leak (and so reported), the utility operator left the area. Later, the EAM requested that a person go back on to the ADS pad to see it there was a way to shut the leak off. This was done without a reentry plan.*	SMC	09/17/14	*SMC Emergency Planner emailed this report as a lessons learned, emphasizing this problem area to the EAMs. IAS141737*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
			Performance Deficiency #1: A hazardous situation cannot be reentered without a reentry plan.				
INL: Drills and Exercises	Emergency Management	CO 2014-0790	*Three-way communications protocols when specific directive actions and important/critical information needs to be consistent using verbatim repeat back principles and not allowed to degrade to simple acknowledgement.*	ATR	09/17/14	*Review with or remind ERO personnel of the importance of using three-way communications or repeat backs when communicating directive actions or important and critical information so information is not misunderstood or allowed to degrade to simple acknowledgement or conversation.* *A BDBE lessons learned was issued to all ERO members in February 2015. The requirement for three-way communications was addressed by the following:* *The use of three-way communications protocols is critical when communicating important and critical information to ensure that information is not misunderstood.* *As a reminder, three-way communications is accomplished when the:* *1. Sender communicates information*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
						2. Receiver repeats back information to the sender *3. Sender acknowledges the receiver understands the message, and appropriate feedback is used to verify understanding.*	
INL: Drills and Exercises	Emergency Management	CO 2014-0807	*A method needs to be established to control entry into the ATR ECC and ensure that personnel entering the ATR ECC have been surveyed if the event involves a radiological release.*	ATR	11/26/14	*Evaluate the need for and update if needed the ATR ECC activation procedure (EPI-6) and EPI-112 to address establishing controlled entry and surveying of personnel entering the ECC during radiological release events or conditions.* *Reviewed EPI-6 and EPI-112. The most appropriate place to add establishing access control and survey points is in EPI-112. Submitted a suggested change to add the following to EPI-112 as a task for the planning manager.* *4.3.X Direct the FMT coordinator (FMTC) to establish radiological control boundaries at the ATR Complex ECC entry points for radiological release events.* *4.3.2.1 Establish access survey points for personnel entry* *4.3.2.2 Establish decontamination capabilities to support decon of personnel as needed.*	Closed
INL: Drills and Exercises	Emergency Management	CO	*At ATR, the EAM and the support manager were discussing declaring an*	ATR	11/26/14	*Remind ATR EAMs of the process in declaring operational*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
		2014-0811	*Alert based on canal level before the function and authority of EAM had not formally been transferred by the shift supervisor in the simulator to the ATR EAM in the ECC.*			*emergencies and the importance of waiting until the authority or function has been formally transferred to them by the shift supervisor.* *The 2015 ERO newsletter addressed this topic for all ERO members as a lessons learned. IAS15559.*	
INL: Drills and Exercises	Emergency Management	CO 2014-0813	*The support manager at the ATR ECC did not attach the ATR EAL page to the notification form. This would have provided offsite agencies a hard copy of the recommended actions to take in response to the General Emergency declaration and associated PAs/PARs. The notification procedure and protective action procedure do not provide guidance on how to accomplish addenda pages.*	ATR	11/26/14	*Review the ATR shift supervisor checklist, verify that it provides direction for attaching copies of the EALs to the notification form, and update as necessary.* *The ATR SS checklist (ATR-2) does not contain directions for including attachments to the notification form. This will be revised at next scheduled update to ATR-2. IAS15559*	
INL: Drills and Exercises	Emergency Management	CO 2014-0833	*Evacuation buses departed ATR Complex without a formal transfer of control of the evacuation buses from ATR Complex EAM to CFA EAM per EPI-19, "Request and Control of Evacuation Buses". This could have had accountability implications if the buses left ATR prior to the ATR EAM verifying accountability and them release them through a direct communication with the CFA EAM.*	ATR	11/26/14	*Provide lessons learned/refresher training to applicable ATR and CFA ERO personnel to include EAMs and CFA ECC Bus Operations position personnel on the process for transferring control of evacuation buses per EPI-19.* *The following was included in an ERO Newsletter to all ERO from*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
						the BDBE drill lessons learned. EPI-19, Request and Control of Evacuation Buses was included as a link to review. Some drills we run throughout the year involve personnel evacuating a facility via evacuation buses so EAMs get the chance to go through the process of requesting buses through the CFA ECC and utilizing the EPI-19, "Request and Control of Evacuation Buses" procedure. This was the case during the BBDE drill where the ATR EAM evacuated personnel and requested buses from the CFA ECC. Evacuation buses departed ATR without a formal transfer of control of the evacuation buses from the ATR EAM to the CFA EAM. This could have had accountability implications if the buses left prior to the ATR EAM verifying accountability and then releasing them through a direct communication with the CFA EAM. Be sure to use EPI-19 to assist you through the process of requesting buses during an evacuation. *EPI-19 states the affected-facility EAM should inform the CFA EAM (if the CFA ECC is available to*	

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
						provide support) when buses are loaded and ready to depart the affected facility. At this point, the ATR EAM should verbally transfer responsibility for evacuees to the CFA EAM. If the CFA ECC is not available to provide support, the affected-facility EAM should: ● *Coordinate with CFA Bus Operations to dispatch the buses to the relocation destination(s)* ● *Verify the buses have departed from the affected facility and* ● *Report the status of the relocated employees to the ED and CFA EAM when the information becomes available*	
INL: Drills and Exercises	Emergency Management	CO 2014-0836	*When it was determined to evacuate ECCs at the INL, it was unclear on where to relocate ERO personnel. CFA-609 is the primary relocation center but during the BDBE, this ECC was evacuated also. The area in WCB once designated as the alternate EOCC has been changed with the alternate EOC now at CFA-609. All associated WCB assigned room identification has been removed as if it is not intended to be used.*	Sitewide	11/26/14	*Review EPI-85, "Emergency Control Center/Emergency Operations Center Relocation" an determine if WCB room 120D and associated rooms will still be used as the second alternate for INL site ECC relocation or if other facilities are to be used. Update EPI-85 as needed. If it is determined that WCB room 120D and associated rooms will be used, 1-provide room identification if needed to assist personnel in locating their assigned area. 2- Determine if the*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
						needed documentation is available and provide as necessary. *EPI-85 was reviewed to determine if the use of WCB Room 120D was still documented for a second alternate INL site ECC relocation. It was determined the procedure identifies the alternate location for an affected-facility ECC is at CFA-609. Additionally, the procedure identifies the use of WCB Room 120D in the event that CFA 609 is evacuated. This area is designated for all affected-facility ECCs so the use of signage to identified assigned rooms is not necessary or required. Location of specific positions will be determined at the time of the relocation based on the event circumstances. The procedure also states that the affected-facility EAM is required to ensure the appropriate equipment, procedures, and supplies, such as cellular/satellite telephones, portable radios, laptop computers, and facility documentation and reference materials needed at the alternate location have been gathered.*	
INL: Drills and Exercises	Emergency Management	CO 2015-0103	*The ATR shift supervisor did not meet the 15-minute limit to cat and class the event.*	ATR	01/27/15	*This is being entered into Lab Protection LabWay for tracking*	Closed

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
			The action for having him go through another drill is being tracked in the ATR LabWay database. This is being entered into Lab Protection LabWay for tracking and trending.			*and trending.*	
INL: Drills and Exercises	Emergency Management	CO 2015-0462	*Initial notifications were not completed on time. This occurred as a result of the CFA EAM dealing with protective actions (PAs) and determining accountability, while simultaneously reviewing EALs. Implementing PAs in this instance is a more lengthy process than just activating a siren or making a voice announcement in that a field worker notification has to be sent out electronically and a phone call back to report accountability is required for a response. While the EAM was verifying that initial PAs were adequate and personnel accounted for, he identified the correct EAL. When determining the time for declaring the event an operational emergency (OE), he used the time of "event recognition" as his time of declaration. This action reduced the time available to complete the notification by 10 to 11 minutes. The process of reviewing EALs, recognizing an OE, and making the "official declaration" was reviewed with the EAM.*	CFA	5/11/15	*Review with all EAMs and support managers the timing process for notifications and the declaring the ECC operational vs. declaring an operational emergency.* *On May 5th and 19th meetings were held with the CFA EAM's, support manager, and planning managers to discuss issues related to the last drill. One of the issues was time requirements relating to declaration of OE's and when time so called clock starts in relation to notifications as 15 minutes from the time you recognize you have a emergency and then also either 15 minutes for Alerts, SAE, or Generals, or 30 for operational emergencies, and the difference of declaring the ECC operational, and declaring an EAL.*	Closed
INL: Drills and Exercises	Emergency Management	CO 2015-0499	*ATR Complex ERO personnel did not recognize the need to question the adequacy of the initial event categorization/classification or to*	ATR	5/20/15	*Review EPI-15 with the ATR facility Operations Manager, Planning Manager, and Support Manager to validate the accuracy*	Open Due 11/16/15

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
			upgrade the emergency classification to a Site Area Emergency when evacuation distance information extended several hundred meters beyond the ATR Complex fence line.			*and adequacy of the initial event categorization/classification and any subsequent changes that may be needed based on event condition changes.* *Recommended Corrective Action: Review EPI-15 with the ATR facility operations manager, planning manager, and support manager to validate the accuracy and adequacy of the initial event categorization/classification and any subsequent changes that may be needed based on event condition changes.*	
INL: Drills and Exercises	Emergency Management	CO 2015-1521	*Initial event categorization and/or classification did not occur in a timely and accurate manner.*	ATR	7/14/15	*Review the EAL initiating event/condition description applicable to ATR SNF shipments to determine if they should be written in a more descriptive format or with an explanation of "Watts" means.*	Open Due 1/31/16
INL: Drills and Exercises	Emergency Management	CO 2015-1537	*CFA personnel were slow in establishing communication channels between the CFA ECC and IC.*	CFA	7/14/15	*Provide lessons learned training emphasizing the importance of quickly establishing communications channels with the IC and what alternate routes can be used if the initial attempts fail.*	Open Due 11/30/15
	Emergency Management	CO 2015-1524	*During the annual exercise, event information regarding protective action should have been provided to potentially impacted facilities in a timelier manner.*	Sitewide	7/14/15	*Provide lessons learned training to reinforce the importance of providing event information emphasizing PAs and PARs to*	Open Due 11/25/15

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
						other facilities that might be impacted by the event.	
INL: Drills and Exercises	Emergency Management	CO 2015-1529	*CFA RCTs did not have the equipment readily available to allow them to respond to rad events in a timely manner.*	CFA	7/14/15	*Identify the needed equipment for RCT response, determine funding options, and acquire the equipment.*	Open Due 12/15/15
INL: Drills and Exercises	Emergency Management	CO 2015-1545	*There are numerous examples of coaching or prompting by the CFA ECC controller during the exercise and too much talking or interaction between controllers and observers in the EOC. It appeared that this was done to keep the drill advancing such as when the ERO struggled when reentry planning was initiated.*	CFA	7/14/15	*Evaluate and recommend alternate methods for using the facility planner as a controller in an area other than their facility ECC or allowing them to participate as a player during some evaluated drills and/or exercises.*	Open Due 12/16/15
INL: Drills and Exercises	Emergency Management	CO 2015-1518	*During the event response, effective command and control was not demonstrated within the CFA ECC. Some ERO personnel, including the CFA EAM, were not very proactive in gathering event information nor did the CFA EAM provide direction to ERO personnel to use alternate methods to gather the information. When he was notified that there was a rad aspect to the event, he was slow in requesting additional resources for the ECC. As mentioned previously, event information was slow in coming in but after the first few initial attempts to establish communications with IC, the sense of urgency seemed to falter and an attitude of "let them contact us" began to creep through the ERO team. It is recognized this lack of urgency could*	CFA	7/14/15	*Provide lessons learned training to include information regarding command and control activities and drillsmanship.*	Open Due 12/01/15

Table 2-1. (continued).

Evaluation Method	Conducting Organization	Laboratory Protection LabWay No.	Identified Weakness (Taken Verbatim From LabWay)	Facility Specific or Sitewide	Date of Evaluation	Corrective Action(s)	
						Description (Taken Verbatim From LabWay)	Status
			have been an issue of drillsmanship but the appearance was more of a lack of familiarity with this type of an event. On a positive note, on his own initiative, the CFA planning manager, did contact the FAC to get some information and requested that FAC contact the IC and request that they contact the ECC.				
INL: Drills and Exercises	Emergency Management	CO 2015-1630	*The EAM and his assistant allowed the IC to remain well within the 100-meter evacuation distance. Both were aware where the IC was setting up from their initial survey of the event, prior to activating the ERO. Neither thought to recommend that the IC relocate once the protective action distance was established formally. In addition, the EAM and his assistant talked twice about the ECC being within the 100-meter evacuation distance, but yet let the ECC operation continue without voicing the reason for a decision to do so. The first stated rationale for maintaining the ECC staffing came during the first Command Bridge call. Additionally they evacuated other facility personnel from buildings into the Cafeteria/ECC building.*	SMC	7/14/15	*SMC emergency planner reviewed with SMC EAMs that when protective action criteria change a discussion must occur to reconsider the appropriate PAs must be instituted for all personnel within the evacuation zone, or there must be a good explanation for an exception to the zone's boundaries. Lessons learned will be developed and issued on the EM lessons learned home page.*	Open Due 10/15/15

This page intentionally left blank.

3. PROGRAM ACHIEVEMENTS

Table 3-1 compares actual INL Emergency Management Program achievements accomplished during FY-2015 to projected goals, milestones, and objectives.

Table 3-1. Emergency management program achievements (goals, milestones, objectives, and status) for Fiscal Year 2015.

Goal	Milestones	Objective
Conduct annual FY-2015 sitewide exercise	Exercise final plan approved — at least 30 days prior to exercise Exercise conducted — date undetermined Exercise report submitted — within 45 days following exercise	Successfully accomplish exercise objectives and submit report
Conduct annual review of EPHSs, and revise, if necessary		Review EPHSs and revise, if necessary, by end of CY-2015
Conduct annual review of EPHAs, and revise, if necessary		Review EPHAs and revise, if necessary, by end of CY-2015
Complete annual review of PLN-114 and revise, if necessary		Review PLN-114 and revise, if necessary, by end of FY-2015
Conduct initial training for new ERO members	Classes conducted, as needed	Conduct initial training for all new ERO members
Conduct annual ERO requalification training for CY-2015		Complete annual ERO requalification training for CY-2015
Complete ERAP for FY-2015		Complete FY-2015 ERAP
Conduct annual facility evaluated drills		Successfully conduct facility evaluated drills

This page intentionally left blank.

4. PROGRAM GOALS

Table 4-1 describes the INL Emergency Management Program projected goals, milestones, and objectives for FY-2016.

Table 4-1. Emergency management program projections (goals, milestones, objectives) for Fiscal Year 2016.

Goal	Milestones	Objective
Conduct annual FY-2016 sitewide exercise	Exercise final plan approved — at least 30 days prior to exercise Exercise conducted — date undetermined Exercise report submitted — within 45 days following exercise	Successfully accomplish exercise objectives and submit report
Conduct annual review of EPHSs, and revise, if necessary		Review EPHSs and revise, if necessary, by end of CY-2016
Conduct annual review of EPHAs, and revise, if necessary		Review EPHAs and revise, if necessary, by end of CY-2016
Complete annual review of PLN-114 and revise, if necessary		Review PLN-114 and revise, if necessary, by end of FY-2016
Conduct initial training for new ERO members	Classes conducted, as needed	Conduct initial training for all new ERO members
Conduct annual ERO requalification training for CY-2016		Complete annual ERO requalification training for CY-2016
Complete ERAP for FY-2016		Complete FY-2016 ERAP
Conduct annual facility evaluated drills		Successfully conduct facility evaluated drills
EM Technology improvement initiative		
EM Training program initiative		
EM ICS implementation initiative		

This page intentionally left blank.

5. OTHER

BEA is responsible for compliance with DOE O 151.1C, Attachment 2, and the flow down of those requirements.

A. Emergency Management Personnel

Table 5-1 provides the total number of full-/part-time Site/facility personnel required for FY-2015 and estimated for FY-2016 for federal and contractor staff.

Table 5-1. Emergency Management personnel — full-time equivalents.

Organization	FY-2015	FY-2016
Federal		
Contractor	18	18.5
Justification: N/A		

B. Emergency Management Operational Budget

INL Emergency Management is fully funded. Table 5-2 summarizes the INL Emergency Management Program operational budget.

Table 5-2. Emergency Management operational budget.

Organization	FY-2015	FY-2016
Federal		
Contractor	$2,367K	$2,489

C. Equipment Requirements

Table 5-3 lists equipment requirements that are not included in the operational budget.

Table 5-3. Equipment requirements.

Item	FY-2015	FY-2016
None identified	0	0
Justification:		