

U.S. Department of Homeland Security Federal Emergency Management Agency, Region V Radiological Emergency Preparedness Program											
Annual Letter of Certification (ALC) Review Guide State of Minnesota - Calendar Year 2021											
Purpose	To provide guidance for review/evaluation of the ALC submitted by the state.										CAP=Corrective Action Plan
Scope	The ALC is reviewed to determine whether all information/documentation is included pursuant to laws and regulations and the FEMA REP Program Manual (RPM) guidance. Information contained in the ALC is compared with the offsite response organization's (ORO's) plans/procedures and the alert and notification system (ANS) evaluation report for consistency and accuracy. The ALC submission for states that only have ingestion exposure pathway responsibilities need only address the sections denoted by asterisks (**).										
				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
I.	Update of plans/procedures and letters of agreement (LOAs) <i>(NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion A.4)</i>	1.	A statement that ORO plans/procedures and LOAs have been reviewed for accuracy and completeness of information, and appropriate changes have been made. Updated LOAs and plan/procedure amendments must be submitted if not received previously.	**	a.	That ORO plans/procedures and LOAs have been reviewed for accuracy and completeness of information, and appropriate changes have been made.	X				<u>ALC - Update of Plans, pg. 16:</u>  • Updated State of Minnesota Emergency Management Operations Plan (MEOP). Signed on July 1, 2021. County Plans were also updated (Sherburne, Wright, Goodhue, and Dakota). Submitted to FEMA on Decemeber 20, 2021. • Copies of all current SOGs and SOPs were provided with the ALC submission. State and County Radiological Emergency Preparedness (REP) plans/procedures, contracts, letters of agreement (LOA) and memoranda of understanding (MOU) have been reviewed for accuracy and completeness of information, and appropriate changes were February 8, 2022.
II.	Public Education and Information <i>(NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion G.1, G.5)</i>	1.	A statement that annual dissemination of information to the public was performed, and that the information includes how the public will be notified and what their actions should be in an emergency. Public information materials may take various forms, including but not necessarily limited to, brochures, utility bill inserts, or calendars; all of these materials may be distributed in hardcopy and/or through electronic means (e.g., text message, email, websites, etc.).	**	a.	Dates of dissemination	X				<u>ALC - Public Information pg. 1:</u>  • Monticello 10-mile EPZ: 30,310 copies were mailed to permanent residents, schools, government facilities, businesses, and post office boxes that have postal addresses within the 10-mile EPZ in December 2021. • Prairie Island 10-mile EPZ: 10,862 copies were mailed to permanent residents, schools, government facilities, businesses, and post office boxes that have postal addresses within the 10-mile EPZ in December 2021.
				**	b.	Means of dissemination	X				<u>ALC - Public Information pg. 2:</u>  • “Emergency planning guides were mailed to permanent residents, schools, government facilities, businesses, and post office boxes that have postal addresses within the 10-mile EPZ.” • “Extra planning guides were made available to the State of Minnesota and local governments in both EPZs.” • “The Emergency planning guides are also available on the Xcel and HSEM websites.”
				**	c.	Identification of recipients	X				<u>ALC - Public Information pg. 1:</u>  • “Emergency planning guides were mailed to permanent residents, schools, government facilities, businesses, and post office boxes that have postal addresses within the 10-mile EPZ.”

			**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
II.	Public Education and Information (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion G.1, G.5)	1.	A statement that annual dissemination of information to the public was performed, and that the information includes how the public will be notified and what their actions should be in an emergency. Public information materials may take various forms, including but not necessarily limited to, brochures, utility bill inserts, or calendars; all of these materials may be distributed in hardcopy and/or through electronic means (e.g., text message, email, websites, etc.).	**	d.	Copies of all public information materials, or reference to location where all can be viewed	X			<u>ALC - Public Information pg. 2:</u>  • Monticello: Sample copies of 2021 Monticello Emergency Planning Guide and Calendar (attachment 7). • Prairie Island: Sample Copies of the 2021 Prairie Island Emergency Planning Guide and Calendar (attachment 8).
		2.	A statement that emergency information was disseminated to locations frequented by transient populations in the plume exposure pathway emergency planning zone (EPZ), including (if applicable) hotels, motels, gas stations, phone booths, parks, marinas, boats, and other recreational areas. This may be accomplished by, but need not be limited to, decals, posters, or brochures/pamphlets. This statement should include that yearly maintenance and updates on emergency public information signs located along rivers, parks, and other recreational areas were performed, and be updated and redistributed as necessary.		a.	Dates of dissemination	X			<u>ALC - Public Information pg. 3:</u>  • "Xcel Energy supplied each risk county with emergency action plan (transient) brochures for distribution (Attachments 9 and 10). In January 2021 each risk county emergency management agency delivered these brochures to hotels, motels, campgrounds and recreational areas inside the 10-mile EPZ. Emergency action plan brochures and emergency planning guides provide residents and transient population with information about how they will be notified and what actions they should take in the event of a nuclear generating plant emergency."
					b.	Means of dissemination	X			<u>ALC - Public Information pg. 3:</u>  • The guide is delivered by mail or hand delivered to all hotels, motels, campgrounds and recreational areas inside the 10-mile EPZ.
					c.	Identification of where information was distributed or posted	X			<u>ALC - Public Information pgs. 3-4:</u>  • A detailed list of locations and quantities delivered can be found on pages 3-4 in the Minnesota ALC submission. • Sherburne County: Distributed copies to hotels, motels, campgrounds and recreational areas. • Goodhue County: Distributed copies to hotels, motels, campgrounds and recreational areas. • Wright County: Distributed copies to hotels, motels, campgrounds and recreational areas.
					d.	Copies of all public information materials, or reference to location where all can be viewed	X			<u>ALC - Public Information pg. 2 (Documents received FEMA RV/REP):</u>  • Monticello: Sample copies of the 2021 Monticello Emergency Action Plan Transient Brochure (attachment 9). • Prairie Island: Sample Copies of the 2021 Prairie Island Emergency Action Plan Transient Brochure (attachment 10).
					e.	Organizations responsible for distribution	X			<u>ALC - Public Information pg. 2:</u>  • Xcel Energy is responsible for distribution through mass-mailings.
					f.	Identification of organizations responsible for maintenance/updates of public information materials	X			<u>ALC - Public Information pg. 2:</u>  • "There has been no expansion of transient or recreational population areas within the Prairie Island or Monticello EPZs."

				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
II.	Public Education and Information (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion G.1, G.5)	2.	A statement that emergency information was disseminated to locations frequented by transient populations in the plume exposure pathway emergency planning zone (EPZ), including (if applicable) hotels, motels, gas stations, phone booths, parks, marinas, boats, and other recreational areas. This may be accomplished by, but need not be limited to, decals, posters, or brochures/pamphlets. This statement should include that yearly maintenance and updates on emergency public information signs located along rivers, parks, and other recreational areas were performed, and be updated and redistributed as necessary.		g.	Certification that parks and other recreational areas were not expanded, nor were new transient areas added to the plume exposure pathway EPZ. If expansions or additions were made, a statement must be provided that the appropriate additional signs were installed.		X			<u>ALC - Public Information pg. 2:</u>  • "Xcel Energy supplied each risk county with Emergency Action Plan Transient Brochure for distribution (Attachments 9 and 10)."
		3.	A statement the annual media program was conducted to acquaint news media with emergency plans/procedures, information concerning radiation, and points of contact for release of public information during an emergency.		a.	Date(s) held		X			<u>ALC - Annual Media Briefing Materials pg. 3:</u>  • "News media were invited to use the online training modules available on the HSEM website. Media outlets within the 10 mile EPZs also receive a direct mailing of the planning guides."
					b.	Agencies/organizations invited/participated		X			<u>ALC - Annual Media Briefing Materials pg. 3:</u>  • "Public information officers (PIOs) from Xcel Energy, state agencies, and county agencies completed annual PIO training using the REP online training modules available on the HSEM website.." <u>ALC Attachment 6:</u> Media Education Program Packet.
					c.	Organization(s) that sponsored the program		X			<u>ALC - Annual Media Briefing Materials pg. 3:</u>  • Performed by Xcel Energy and The Minnesota Department of Public Safety Office of Communications.
					d.	Description of the program		X			<u>ALC - Annual Media Briefing Materials pg. 3:</u>  • "News media were invited to attend a media training program acquainting them with emergency plans, information concerning radiation and points of contact for the release of public information during a nuclear generating plant emergency."
III.	Radiological Emergency Response Training (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion O.1)	1.	A statement that initial training and annual retraining of personnel who implement radiological emergency response plans/procedures have been accomplished.	**	The statement must include the following for all training conducted:						
				**	a.	All required organizations were offered training pursuant to ORO plans/procedures		X			<u>ALC - Radiological Emergency Response Training pg. 16:</u>  • "Classroom training, as required by the MEOP, Appendix one were cancelled due to the pandemic. All agencies and organizations that are required to complete annual training did so using the on line training modules that are available on the HSEM website www.dps.mn.gov."
				**	b.	Scope and purpose		X			<u>ALC - Radiological Emergency Response Training pg. 16:</u> <u>Attachment 2 – PR-1 Events Data:</u>  • The scope and purpose of training are also discussed in the MEOP. With the exception of field team training, initial training is the same as annual refresher training. • On-line training modules are available on the HSEM website www.dps.mn.gov. • The four primary modules include; 1) History and Overview of the REP Program, 2) Emergency Classification Levels, 3) Basics of Nuclear Power and 4) Basics of Radiation. This training is available to personnel to complete their annual off-year training.

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
III.	Radiological Emergency Response Training (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion O.1)	1.	A statement that initial training and annual retraining of personnel who implement radiological emergency response plans/procedures have been accomplished.	**	c.	Dates training were held	X			<u>ALC - Radiological Emergency Response Training pg. 16: Attachment 2 – PR-1 Events Data:</u>  • Spreadsheets for each utility EPZ report the total number of training sessions conducted and total number of students for the listed OROs in each EPZ. Training dates are provided for the listed OROs in each EPZ.
				**	d.	Number of participants	X			<u>ALC - Radiological Emergency Response Training Attachment 2 – PR-1 Events Data:</u>  • Spreadsheets for each utility EPZ report the total number of training sessions conducted and total number of students for the listed OROs in each EPZ. Training dates are provided for the listed OROs in each EPZ.
				**	e.	Agencies/organizations represented	X			<u>ALC - Radiological Emergency Response Training pg. 16: Attachment 2 – PR-1 Events Data:</u>  • "All agencies and organizations that were invited to attend the training did so. A summary of these training events, scope and purpose, dates held, number of participants, agencies involved and sponsoring agency is included in Attachment 2."
				**	f.	Agencies/organizations invited, but who did not attend	X			<u>ALC - Radiological Emergency Response Training pg. 18: Attachment 2 – PR-1 Events Data:</u>  • "All agencies and organizations that were invited to attend the training did so. A summary of these training events, scope and purpose, dates held, number of participants, agencies involved and sponsoring agency is included in Attachment 2."
				**	g.	Organization(s) that sponsored the training	X			<u>ALC - Radiological Emergency Response Training pg. 16: Attachment 2 – PR-1 Events Data:</u>  • Training provided, class dates, and organization providing the training are listed.
IV.	Drills (Note: Only non-evaluated drills need to be reported in the ALC) (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion N.1.b, N.4.b, c, d, e, f)	1.	A statement that communication drills were conducted.	The statement must include:						
					a.	Monthly between the state and OROs within the plume exposure pathway EPZ	X			<u>ALC – Communications Drills (Type A) pg. 13:</u>  • NSPM facility testing for the backup EOF is done on the first Monday of each month. Monticello tests on the second to last Wednesday of each month. Prairie Island tests every 28 days. • Sherburne (Jan – Dec) • Wright (Jan – Dec) • Goodhue (Jan – Dec) • Dakota (Jan – Dec) • State of Minnesota (Jan – Dec) <u>ALC - Attachment 2 – PR-1 Events Data:</u>  • 2021 REP Communications Drills

				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
IV.	Drills (Note: Only non-evaluated drills need to be reported in the ALC) (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion N.1.b, N.4.b, c, d, e, f)	1.	A statement that communication drills were conducted.	**	b.	Quarterly between state and Federal emergency response organizations, and states within the ingestion exposure pathway EPZ	X				<u>ALC – Communications Drills (Type B) pg. 13-14:</u>  • Communications checks with FEMA, Wisconsin, and within the ingestion pathway were conducted monthly. “Quarterly state to federal and risk county EOC communications testing is done concurrently with the monthly tests listed above.” • Wisconsin (Jan – Dec) • FEMA (Jan – Dec) <u>ALC - Attachment 2 – PR-1 Events Data:</u>  • 2021 REP Communications Drills
					c.	Annually between the nuclear power plant (NPP), state, and local emergency operations centers, and radiological field monitoring teams	X				<u>ALC – Communications Drills (Type C) pg. 9:</u>  • Communications between the nuclear power plant, the State of Minnesota, and the counties were conducted on a monthly basis. • Monticello (Jan – Dec) • Prairie Island (Jan – Dec) <u>ALC - Attachment 2 – PR-1 Events Data:</u>  <u>• 2021 REP Communications Drills</u>
				**	d.	Dates of communication drills	X				<u>ALC – Radiological Monitoring Drills pg. 15:</u> • Two radiological monitoring drills were conducted in 2021. On June 24, 2021 both a morning and evening drill was conducted. Maple Grove FD and Plymouth FD participated in field team monitoring drills. A virtual table top radiological monitoring drill was conducted with field team members in preparation for the FEMA evaluated virtual exercise on July 29, 2021. The drills consisted of plume tracking and field sampling. <u>ALC - Attachment 2 – PR-1 Events Data:</u>  • Drill Dates
				**	e.	Participating organizations	X				<u>ALC - Attachment 2 – PR-1 Events Data:</u>  • Drill dates and Attendees
		2.	A statement that environmental monitoring drills, which include direct radiation measurements in the environment, collection and analysis of all sample media (e.g., water, vegetation, soil, and air), and provisions for record keeping, that were performed during the period of this ALC. (Note: Environmental monitoring drills must involve personnel and resources for dose assessment.)	**	The statement must include the following for all training conducted:						
				**	a.	Date(s) held	X				<u>ALC – Radiological Monitoring Drills pg. 15:</u>  • On June 23, 2021 the Minnesota Department of Health hosted a virtual Planning and Assessment refresher class. Participants included staff from HSEM, Minnesota Department of Health and the University of Minnesota. This class focused on how to best demonstrate RASCAL and other assessment methods in a virtual environment. A full scale plume phase Health Physics drill was conducted on June 29, 2021 to practice these methods. <u>ALC - Attachment 2 – PR-1 Events Data:</u>  • Drill Dates
				**	b.	Organizations that participated	X				<u>ALC - Attachment 2 – PR-1 Events Data:</u>  • Drill dates and Attendees



				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
IV.	Drills (Note: Only non-evaluated drills need to be reported in the ALC) (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion N.1.b, N.4.b, c, d, e, f)	3.	A statement that lab drills were conducted, including an equipment list, calibrations, daily quality assurance/quality control (QA/QC).	**	The statement must include:						
				**	a.	Date(s) held		X			<u>ALC – Emergency Facilities and Equip pgs. 5-14:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2021 List of equipment checks, inventories and calibrations) supports this policy.”
				**	b.	Organizations that participated		X			<u>ALC – Emergency Facilities and Equip pgs. 5-12:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2021 List of equipment checks, inventories and calibrations) supports this policy.”
				**	c.	Equipment list		X			<u>ALC – Emergency Facilities and Equip pgs. 5-14:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2021 List of equipment checks, inventories and calibrations) supports this policy.”
				**	d.	Calibrations		X			<u>ALC – Emergency Facilities and Equip pgs. 5-12:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2021 List of equipment checks, inventories and calibrations) supports this policy.”

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
IV.	Drills (Note: Only non-evaluated drills need to be reported in the ALC) (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion N.1.b, N.4.b, c, d, e, f)	3.	A statement that lab drills were conducted, including an equipment list, calibrations, daily quality assurance/quality control (QA/QC).	**	e.	Daily QA/QC was conducted			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
		4.	<u>A statement that non-evaluated medical services drills are conducted annually at each medical facility in the emergency plan.</u>		The statement must include:					Answers found in - Enclosure 17 - Question 11
					a.	Date(s) held	X			Two medical drills were conducted in 2021. North Memorial Health Hospital conducted a virtual medical tabletop drill on July 22, 2021 and CentraCare – St Cloud Hospital conducted a virtual medical tabletop drill on July 29, 2021. These drills were conducted virtually to prepare for the FEMA evaluated virtual exercises.
					b.	Facilities that participated	X			Two medical drills were conducted in 2021. North Memorial Health Hospital conducted a virtual medical tabletop drill on July 22, 2021 and CentraCare – St Cloud Hospital conducted a virtual medical tabletop drill on July 29, 2021. These drills were conducted virtually to prepare for the FEMA evaluated virtual exercises.
					c.	Contamination control measures utilized			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
					d.	Dosimetry			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
		5.	A statement that ingestion pathway and post-plume phase drills are conducted biennially.	**	The statement must include:					
				**	a.	Date(s) held			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	b.	Organizations that participated			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	c.	Sample plan development			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	d.	Analysis of lab results from samples			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	e.	Assessment of the impact on foodstuffs and agricultural products			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	f.	Protective decisions for reentry, relocation, return, and reoccupancy			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	g.	Foodstuffs/crop embargo			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	h.	Dissemination of ingestion exposure pathway EPZ information to pre-determined individuals and business			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	i.	Assessment of emergency worker knowledge of ingestion exposure pathway EPZ procedures			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	j.	Identification of the individual authorized to make decisions in the ingestion exposure pathway EPZ			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
		6.	A statement outlining the results and corrective actions from exercises and/or drills that were implemented and/or completed.	**	The statement must include:					
				**	a.	Date(s) held			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
				**	b.	A description of the process for tracking identified findings and any associated corrective actions from identification through resolution.			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.

				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
<b>V.</b>	<b>24-hour Staffing</b> <i>(NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion A.5)</i>	1.	A statement that sufficient trained and capable staff are available to maintain 24-hour capability for protracted activation.	**	The statement must include:						
				**	a.	That sufficient trained and capable staff are available for 24-hour protracted activation		<b>X</b>			<u>ALC – 24-Hour Staffing pg. 1:</u>  • “The state of Minnesota has a sufficient quantity of trained and capable personnel to provide 24-hour 24-hour coverage of key staff positions for communications, direction and control of operations, notification and warning, accident assessment, information for the public and the media, radiological monitoring, protective response, medical, and public health support. The state of Minnesota and Risk Counties (Goodhue and Dakota) received actual incident credit their response to the COVID-19 pandemic.”
<b>VI.</b>	<b>Emergency Facilities and Equipment</b> <i>(NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)</i>	1.	Identification of facilities that are new or have had substantial changes in structure or mission since initial evaluation. A substantial change is one that affects or has a direct impact on the emergency response operations performed in those facilities.	**	The statement must include:						
				**	a.	Verification that the facility has been evaluated or the expected date of the evaluation		<b>X</b>			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • “There are no significant changes to the other onsite or offsite facilities (Control Room, TSC, EOF, or backup EOF).”
		2.	Certification that no substantial changes in structure or mission of previously reported facilities have occurred since initial evaluation.		The statement must include:						
					a.	There are no other new emergency response facilities or congregate care centers		<b>X</b>			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • “There are no significant changes to the other onsite or offsite facilities (Control Room, TSC, EOF, or backup EOF).”
					b.	None of the other current facilities or congregate care centers in the plans/procedures have undergone substantial changes		<b>X</b>			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • “There are no significant changes to the other onsite or offsite facilities (Control Room, TSC, EOF, or backup EOF).”
		3.	A statement that inspection, inventory, and operational checks were made of survey instruments used for radiological monitoring (evacuee and emergency worker) and environmental monitoring and analysis (radiological field monitoring teams and radiological laboratory) per national standards or the manufacturer's instructions, whichever is more frequent.		The statement must include:						
					a.	Type of equipment		<b>X</b>			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • Ludlum Model 26 Survey Meters • Ludlum 2241 Response Kit • Direct Reading Dosimeters • Direct Reading Dosimeters • Electronic Dosimeters • Dosimeter Chargers • TLDs • Portal Monitors (TPM 903B) <u>ALC Attachment 1- PR-1 Equipment:</u>  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored



				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	3.	A statement that inspection, inventory, and operational checks were made of survey instruments used for radiological monitoring (evacuee and emergency worker) and environmental monitoring and analysis (radiological field monitoring teams and radiological laboratory) per national standards or the manufacturer's instructions, whichever is more frequent.		b.	Quantity of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • Ludlum Model 26 Survey Meters • Ludlum 2241 Response Kit • Direct Reading Dosimeters • Direct Reading Dosimeters • Electronic Dosimeters • Dosimeter Chargers • TLDs • Portal Monitors (TPM 903B) <u>ALC Attachment 1- PR-1 Equipment:</u>  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored
					c.	Location of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 7-14:</u>  • Ludlum Model 26 Survey Meters • Ludlum 2241 Response Kit • Direct Reading Dosimeters • Direct Reading Dosimeters • Electronic Dosimeters • Dosimeter Chargers • TLDs • Portal Monitors (TPM 903B) <u>ALC Attachment 1- PR-1 Equipment:</u>  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored
					d.	Calibration frequency	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • Ludlum Model 26 Survey Meters • Ludlum 2241 Response Kit • Direct Reading Dosimeters • Direct Reading Dosimeters • Electronic Dosimeters • Dosimeter Chargers • TLDs • Portal Monitors (TPM 903B) <u>ALC Attachment 1- PR-1 Equipment:</u>  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly)

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	3.	A statement that inspection, inventory, and operational checks were made of survey instruments used for radiological monitoring (evacuee and emergency worker) and environmental monitoring and analysis (radiological field monitoring teams and radiological laboratory) per national standards or the manufacturer's instructions, whichever is more frequent.		e.	Dates of inspection/inventory check	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • Ludlum Model 26 Survey Meters • Ludlum 2241 Response Kit • Direct Reading Dosimeters • Direct Reading Dosimeters • Electronic Dosimeters • Dosimeter Chargers • TLDs • Portal Monitors (TPM 903B) <u>ALC Attachment 1- PR-1 Equipment:</u>  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored
		4.	A statement that survey instruments used for measuring radiation during environmental monitoring and analysis (field teams and radiological laboratories) were calibrated per national standards or the manufacturer's instructions, whichever is more frequent.		If calibration occurred, the statement must include:		X			Enclosure 18
					a.	Type of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2021 List of equipment checks, inventories and calibrations) supports this policy.” <u>ALC Attachment 1- PR-1 Equipment:</u> <u>Attachment 1-PR-1 Equipment includes:</u> • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	4.	A statement that survey instruments used for measuring radiation during environmental monitoring and analysis (field teams and radiological laboratories) were calibrated per national standards or the manufacturer's instructions, whichever is more frequent.		b.	Quantity of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2019 List of equipment checks, inventories and calibrations) supports this policy.” ALC Attachment 1- PR-1 Equipment:  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored
					c.	Location of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 5-14:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2019 List of equipment checks, inventories and calibrations) supports this policy.” ALC Attachment 1- PR-1 Equipment:  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	4.	A statement that survey instruments used for measuring radiation during environmental monitoring and analysis (field teams and radiological laboratories) were calibrated per national standards or the manufacturer's instructions, whichever is more frequent.		d.	Dates of calibration	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • “The Minnesota Department of Health Public Health Laboratory Division maintains their laboratory analysis equipment per manufacturer’s recommendations and in accordance with their Environmental Protection Agency (EPA) certification.” • “It is the policy of the Minnesota REP program to regularly maintain, inspect, inventory and check the operation of survey instruments used for radiological/environmental monitoring and analysis. Instruments are also inspected before and after each use. The report in Attachment 1 (2019 List of equipment checks, inventories and calibrations) supports this policy.” ALC Attachment 1- PR-1 Equipment:  <u>Attachment 1-PR-1 Equipment includes:</u> • The type of equipment by agency • Detection Range • Quantity on hand • Calibration (Quarterly) • Where the equipment is used at • Where the equipment is stored
					The statement must include:					
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	5.	A statement that direct reading dosimetry has been tested and maintained and inspected for electrical leakage per the national standards or manufacturer’s instructions, whichever is more frequent. Statement should include information regarding the recharging and replacement of dosimetry as necessary.							
					a.	Type of equipment	X			<u>ALC – Emergency Facilities and Equip pg. 5:</u>  • “Adequate supplies of thermo-luminescent dosimeters (TLDs) have been maintained throughout 2020. TLDs are not read unless radiation exposure from an actual event has taken place.” • “The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks.” <u>ALC Attachment 1- PR-1 Equipment:</u>  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.
					b.	Quantity of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 8-13:</u>  • Arrow Tech DRD 0-200 mR: 640 (HSEM) • Arrow Tech DRD 0-20 R: 640 (HSEM) • Arrow Tech DRD 0-200 mR: 240 (Wright County) • Arrow Tech DRD 0-20 R: 240 (Wright County) • Arrow Tech DRD 0-200 mR: 640 (Goodhue County) • Arrow Tech DRD 0-20 R: 640 (Goodhue County) • Arrow Tech DRD 0-200 mR: 140 (Sherburne Cty.) • Arrow Tech DRD 0-20 R: 140 (Sherburne Cty.) • Arrow Tech DRD 0-200 mR: 140 (Dakota County) • Arrow Tech DRD 0-20 R: 140 (Dakota County) <u>ALC Attachment 1- PR-1 Equipment:</u> • The provided DRD attachment contains the quantity, inventory by type, and calibration certificates for the dosimeters from the manufacture.

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	5.	A statement that direct reading dosimetry has been tested and maintained and inspected for electrical leakage per the national standards or manufacturer's instructions, whichever is more frequent. Statement should include information regarding the recharging and replacement of dosimetry as necessary.		c.	Location of equipment	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • MN HSEM • MN Department of Health • Wright County EOC • Sherburne County EOC • Goodhue County EOC • Dakota County EOC • Maple Grove Fire Department • Plymouth Fire Department • MN Department of Ag • MN Department of Natural Resources • MN Department of Human Services (various loc.) • Fairview Northland Hospital • North Memorial Medical • Regions Hospital • St. Cloud Hospital • St. Elizabeth's Medical Center <u>ALC Attachment 1- PR-1 Equipment:</u>  Attachment 1-PR-1 Equipment includes: • The type of equipment by agency • Detection Range
					d.	Dates of calibration	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • "The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks." <u>ALC Attachment 1- PR-1 Equipment:</u>  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.
					e.	Recharging of dosimetry	X			ALC – Emergency Facilities and Equip pg. 6:  • "The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks." ALC Attachment 1- PR-1 Equipment:  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.



				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	5.	A statement that direct reading dosimetry has been tested and maintained and inspected for electrical leakage per the national standards or manufacturer's instructions, whichever is more frequent. Statement should include information regarding the recharging and replacement of dosimetry as necessary.		f.	Replacement of dosimetry		X			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • “The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks.” ALC Attachment 1- PR-1 Equipment:  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.
					g.	Dates of annual DRD electrical leakage testing		X			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • “The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks.” ALC Attachment 1- PR-1 Equipment:  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.
					h.	Dates of quarterly CDV-138 electrical leakage testing		X			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • “The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks.” ALC Attachment 1- PR-1 Equipment:  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.

				**	The statement must include:	Yes	No	N/A	ALC Reference / Comments
VI.	Emergency Facilities and Equipment (NUREG-0654/FEMA-REP-1, evaluation criteria G.2, H.6, J.11.d, J.13, K.4)	6.	A statement that sufficient quantities of potassium iodide (KI) are available for emergency worker, institutionalized individuals, and if the plan calls for it, the general public.		If quantities of KI were not verified by FEMA during the most recent biennial exercise, the statement must include:				
					a. Amounts of KI available	X			<u>ALC – Emergency Facilities and Equip pg. 4:</u>  • "The appropriate offsite response agencies stockpile and inventory high and low range (0-20R and 0-200mR) self-reading dosimeters for emergency worker exposure control. HSEM sends self-reading dosimeters to a calibration facility for an electrical leak check and radiation response check on an annual basis. This is also done for risk counties and other state agencies. There are no CDV-138 dosimeters used in the program that require quarterly leak checks." ALC Attachment 1- PR-1 Equipment:  • The provided DRD attachment contains the quantity, inventory by type and calibration certificates for the dosimeters from the manufacture.
					b. Storage locations	X			<u>ALC – Emergency Facilities and Equip pgs. 4-12:</u>  • MN HSEM • MN Department of Health • Wright County EOC • Sherburne County EOC • Goodhue County EOC • Dakota County EOC • Maple Grove Fire Department • Plymouth Fire Department
					c. Expiration date(s)	X			<u>ALC – Emergency Facilities and Equip pg. 5:</u>  • "Sufficient quantities of KI are pre-positioned and available for emergency workers, schools, and institutionalized individuals. The locations of pre-positioned KI are described in Attachment 1. The MDH Warehouse has 38,400 boxes (384,000 adult doses) of KI available for distribution. All pre-positioned KI expires in March 2025."
VII.	Responsibility for the Planning Effort (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion P.4)	1.	A statement indicating that an annual review has been conducted.	**	The statement must include:				
				**	a. Date(s) the review occurred	X			<u>ALC – Update of plans/ procedures and Letters of Agreement pg. 16:</u>  • The Minnesota Emergency Operations Plan (MEOP) was updated and signed on December 3, 2021. All other state, county and local plans, along with letters of agreement, were reviewed and updated as necessary. These plans were submitted to FEMA Region V on December 21, 2021. ALC - Attachment 12– Letters of Certification from REP Program risk counties and supporting agencies.

				**	The statement must include:			Yes	No	N/A	ALC Reference / Comments
VII.	Responsibility for the Planning Effort (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion P.4)	1.	A statement indicating that an annual review has been conducted.	**	b.	Signature page		X			<u>ALC – Update of plans/ procedures and Letters of Agreement pg. 16:</u>  • The Minnesota Emergency Operations Plan (MEOP) was updated and signed on December 3, 2021. All other state, county and local plans, along with letters of agreement, were reviewed and updated as necessary. These plans were submitted to FEMA Region V on December 21, 2021. ALC - Attachment 12– Letters of Certification from REP Program risk counties and supporting agencies.
				**	c.	Plans/procedures, maps, charts, and agreements were reviewed at least annually to verify accuracy and completeness		X			<u>ALC – Update of plans/ procedures and Letters of Agreement pg. 16:</u>  • The Minnesota Emergency Operations Plan (MEOP) was updated and signed on December 3, 2021. All other state, county and local plans, along with letters of agreement, were reviewed and updated as necessary. These plans were submitted to FEMA Region V on December 21, 2021. ALC - Attachment 12– Letters of Certification from REP Program risk counties and supporting agencies.
VIII.	Alert and Notification (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion F.3 and RPM Part V: REP Program Alert and Notification System Guidance)	1.	A statement that a routine testing program was completed pursuant to the ANS evaluation report.	The statement must include:							
					a.	Types of tests conducted in accordance with the established schedule		X			<u>ALC – Alert and Notification pgs. 16-17:</u>  • Monthly summaries by Utility • Details reported in ALC Attachment 3 and 4. <u>ALC - Attachment 3 – Monticello Siren Test Report:</u>  • Siren Report Data <u>ALC - Attachment 4 – Prairie Island Siren Test Report:</u>  • Siren Report Data
					b.	Dates of tests		X			<u>ALC – Alert and Notification pgs. 16-17:</u>  Various dates reported in separate attachments by Utility: • Monticello (Sirens are tested on the first Wednesday of each month). • Prairie Island (Sirens are tested on the first Wednesday of each month). <u>ALC - Attachment 3 – Monticello Siren Test Report:</u>  • Siren Report Data <u>ALC - Attachment 4 – Prairie Island Siren Test Report:</u>  • Siren Report Data

				**	The statement must include:		Yes	No	N/A	ALC Reference / Comments
VIII.	Alert and Notification (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion F.3 and RPM Part V: REP Program Alert and Notification System Guidance)	2.	A statement that the availability/reliability of the system is maintained pursuant to the ANS evaluation report.		The statement must include:					
					a.	Description of any failures that were detected and how they were mitigated, tracked, trended.	X			<u>ALC – Alert and Notification pgs. 16-17:</u>  Details reported in ALC Attachment 3 and 4:  • Monticello (Full test Sirens are tested on the first Wednesday of each month /99.31%) • Prairie Island (Full test Sirens are tested on the first Wednesday of each month /99.6%) <u>ALC - Attachment 3 – Monticello Siren Test Report:</u>  • Siren Report Data <u>ALC - Attachment 4 – Prairie Island Siren Test Report:</u>  • Siren Report Data
		3.	A statement that the maintenance of the system is being conducted pursuant to the ANS evaluation report.		The statement must include:					
					a.	Description of any corrective maintenance that was conducted.			X	Not required under 2019 Checklist. CAP: required to be completed during the review of CY22 ALC.
		4.	When applicable, a statement that the verification process, as described in the ANS evaluation report, validates that the system or approach meets the design objectives.				X			Routine siren testing program was completed pursuant to the design reports for each of the NPPs.
		5.	A statement (if applicable) for exception areas requiring alert and notification methods (e.g., aircraft and/or mobile route alerting and notification) that routes, alerting methods, and resources remain unchanged. If changes did occur, the ANS evaluation report must be updated to reflect the modifications.				X			<u>ALC – Alert and Notification pg. 16:</u>  • Addressed in the ALC Submission by the statement “No permanent population has relocated into areas not covered by sirens.”
										<u>ALC – Alert and Notification pg. 16:</u>  • “In areas that siren pressure is less than 70 decibels the population levels remain below 2,000 people per square mile as stated in the initial design report.” • No permanent population has relocated into areas not previously covered by the ANS as identified by the 2020 Census. There has been no development of any areas not covered by the ANS systems, which would encourage any transient population to frequent these areas.
VIII.	Alert and Notification (NUREG-0654/FEMA-REP-1, Rev. 2, evaluation criterion F.3 and RPM Part V: REP Program Alert and Notification System Guidance)	6.	A statement that the system continues to meet the needs of population it was designed to alert/notify (i.e., the characterization of the population and the demographics that is described in the ANS evaluation report).				X			