

January 25, 2001

Dr. Robert U. Mulder, Director  
University of Virginia Reactor Facility  
Environmental Health and Safety  
P.O. Box 400322  
Charlottesville, VA 22904-4322

SUBJECT: NRC INSPECTION REPORT NO. 50-62/2001-201 AND  
NOTICE OF VIOLATION

Dear Dr. Mulder:

This refers to the inspection conducted on January 8-10, 2001, at the University of Virginia Research Reactor (UVAR). The enclosed report presents the results of that inspection.

Areas examined during the inspection are identified in the report. Within these areas, the inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations of activities in progress.

Based on the results of this inspection, the NRC has identified a violation of NRC requirements. The violation is cited in the enclosed Notice of Violation (Notice). The circumstances surrounding it are described in detail in the subject inspection report.

You are required to respond to this letter and should follow the instructions specified in the enclosed Notice when preparing your response. The NRC will use your response in accordance with its policies to determine whether further enforcement action is necessary to ensure compliance with regulatory requirements.

In accordance with 10 CFR 2.790 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at (the Public Electronic Reading Room) <http://www.nrc.gov/NRC/ADAMS/index.html>.

Should you have any questions concerning this inspection, please contact Craig Bassett at (404) 562-4712.

Sincerely,

*/RA/*

Ledyard B. Marsh, Chief  
Events Assessment, Generic Communications  
and Non-Power Reactors Branch  
Division of Regulatory Improvement Programs  
Office of Nuclear Reactor Regulation

Docket No. 50-62  
License No. R-66

Enclosures: 1. Notice of Violation  
2. NRC Inspection Report No. 50-62/2001-201

cc w/enclosure: Please see next page

University of Virginia

Docket Nos. 50-62/396

cc:

Department of Environmental Quality  
Office of Grants  
Management/Intergovernmental Affairs  
629 East Main Street, Sixth Floor  
Richmond, VA 23219

Dr. William Vernetson  
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Department of Nuclear Engineering  
Sciences  
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Office of the Attorney General  
900 East Main Street  
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Radiological Health Program  
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Richmond, VA 23218

Dr. Ralph O. Allen, Chairman  
Reactor Decommissioning Committee  
University of Virginia  
Environmental Health and Safety  
P.O. Box 3425  
Charlottesville, VA 22904

Mr. Paul E. Benneche, Supervisor  
Nuclear Reactor Facility  
Environmental Health and Safety  
University of Virginia  
P.O. Box 400322  
Charlottesville, VA 22904-4322

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NOTICE OF VIOLATION

University of Virginia  
University of Virginia Research Reactor

Docket No.: 50-62  
License No.: R-66

During an NRC inspection conducted on January 8-10, 2001, a violation of NRC requirements was identified. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," NUREG-1600, the violation is listed below:

Section 6.3.1(4) of the Technical Specifications requires that the licensee have written and approved procedures for emergency conditions involving potential or actual release of radioactivity, including provisions for evacuation, re-entry, recovery, and medical support.

Section 8.6 of the Emergency Plan requires that equipment and supplies will be inventoried every six months.

Emergency Equipment Surveillance procedure issued June 1994 requires: 1) an annual check of the auxiliary lighting in the Front Office, 2) a semi-annual inspection of the windsock to check its condition and movement, 3) a quarterly check of the eyewash and shower to verify they are functional and a check of the fire extinguishers, and 4) a quarterly check of various items of equipment located in the emergency lockers in the facility.

Contrary to the above, during the year 2000, no checks of facilities, supplies, instrumentation and equipment were completed as required. The most recent checks were done on January 8, 2001, and the previous checks had been completed on September 29, 1999.

This is a Severity Level IV violation (Supplement IV).

Pursuant to the provisions of 10 CFR 2.201, the University of Virginia is hereby required to submit a written statement or explanation to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, D.C. 20555 with a copy to the responsible inspector, U.S. Nuclear Regulatory Commission, Region II, 61 Forsyth St. S. W., Suite 23T85, Atlanta, GA 30303, within 30 days of the date of the letter transmitting this Notice of Violation (Notice). This reply should be clearly marked as a "Reply to a Notice of Violation" and should include for each violation: (1) the reason for the violation, or, if contested, the basis for disputing the violation, (2) the corrective steps that have been taken and the results achieved, (3) the corrective steps that will be taken to avoid further violations, and (4) the date when full compliance will be achieved. Your response may reference or include previous docketed correspondence, if the correspondence adequately addresses the required response. If an adequate reply is not received within the time specified in this Notice, an order or Demand for Information may be issued as to why the license should not be modified, suspended, or revoked, or why such other action as may be proper should not be taken. Where good cause is shown, consideration will be given to extending the response time.

If you contest this enforcement action, you should also provide a copy of your response to the Director, Office of Enforcement, United States Nuclear Regulatory Commission, Washington, D.C. 20555-0001.

Because your response will be placed in the NRC Public Document room (PDR), to the extent possible, it should not include any personal privacy, proprietary, or safeguards information so that it can be placed in the PDR without redaction. If personal privacy or proprietary information is necessary to provide an acceptable response, then please provide a bracketed copy of your response that identifies the information that should be protected and a redacted copy of your response that deletes such information. If you request withholding of such material, you must specifically identify the portions of your response that you seek to have withheld and provide in detail the bases for your claim of withholding (e.g., explain why the disclosure or information will create an unwarranted invasion of personal privacy or provide the information required by 10 CFR 2.790(b) to support a request for withholding confidential commercial or financial information). If safeguards information is necessary to provide an acceptable response, please provide the level of protection described in 10 CFR 73.21.

In accordance with 10 CFR 19.11, you may be required to post this Notice within two working days.

Dated at Rockville, Maryland  
this 25<sup>th</sup> day of January 2001.

U. S. NUCLEAR REGULATORY COMMISSION  
OFFICE OF NUCLEAR REACTOR REGULATION

Docket No: 50-62

License No: R-66

Report No: 50-62/2001-201

Licensee: University of Virginia

Facility: University of Virginia Research Reactor (UVAR)

Location: Charlottesville, VA

Dates: January 8-10, 2001

Inspector: Craig Bassett

Approved by: Ledyard B. Marsh, Chief  
Events Assessment, Generic Communications and  
Non-Power Reactors Branch  
Division of Regulatory Improvement Programs  
Office of Nuclear Reactor Regulation

## EXECUTIVE SUMMARY

University of Virginia  
Report No: 50-62/2001-201

This routine, announced inspection included the review of selected aspects of the licensee's organization, facility possession, and maintenance activities; review and audit and design change functions; the operator requalification program; procedures; fuel movement; the surveillance program; experiments; radiation controls and environmental protection; transportation of radioactive materials; the safeguards and security program; the emergency preparedness program; and the material control and accounting program.

### Organization, Facility Possession, and Maintenance Activities

- The staffing level for the facility was being maintained as required and the individuals filling the positions met the qualifications outlined in the Technical Specifications (TS).
- The reactor was permanently shutdown on June 30, 1998, and no further reactor operations were conducted except for surveillance activities required by the TS.
- Maintenance was being performed in accordance with license and TS requirements.

### Review and Audit and Design Change Functions

- The Reactor Safety Committee (RSC) met as required by TS and performed audits of the licensee's overall program. The RSC was disbanded on October 30, 2000.
- The Reactor Decommissioning Committee (RDC) met as required by TS and assumed the functions of the RSC on October 30, 2000.
- RSC audit findings were substantive, although some were late, and the licensee took corrective actions as needed.
- Three 10 CFR 50.59 reviews had been completed since the last inspection.

### Requalification Program

- There are no longer any licensed operators at the facility and the Requalification Program is not currently in use.

### Procedures

- Facility procedures were acceptable and satisfied TS requirements for being revised by the licensee and reviewed and approved by the RSC/RDC.

### Fuel Movement

- All remaining fuel was shipped offsite on June 13, 2000. The fuel had been handled, moved, and shipped as stipulated by procedure and the facility TS.

### Surveillance Program

- Following shutdown of the reactor, various changes to the TS were submitted to and approved by the NRC to alleviate the necessity to complete those surveillances that could no longer be completed and/or were not needed.
- The licensee continued to complete the surveillances required by TS.

### Experiments

- No experiments have been conducted following shutdown of the reactor in June 1998.

### Environmental Protection

- Effluent monitoring satisfied license and regulatory requirements.

### Radiation Protection

- Surveys were completed and documented acceptably to permit evaluation of the radiation hazards that might exist.
- Postings satisfied regulatory requirements.
- Personnel dosimetry was being worn as required and doses were well within the licensee's specified procedural action levels and regulatory limits.
- Radiation monitoring equipment was being maintained and calibrated as required.
- The Radiation Protection Program and ALARA Program satisfied regulatory requirements.

### Transportation

- The program for transportation of radioactive materials satisfied NRC requirements.

### Safeguards and Security

- The NRC-approved security program at the facility was acceptably implemented.

### Emergency Preparedness

- One violation was identified dealing with failure to complete the required annual, semi-annual, and quarterly checks and/or inventories of various emergency-related items and equipment.

### Material Control and Accountability

- No deficiencies were identified in the licensee's Material Control and Accounting program.

## REPORT DETAILS

### Summary of Plant Status

Following a decision by the University of Virginia to permanently shutdown the reactor and decommission the facility, the two-megawatt (2MW) light-water cooled, moderated, and shielded type research reactor ceased operations on June 30, 1998, and has not been operated since. Fuel was removed from the reactor core and all irradiated and unirradiated fuel was shipped off site. The licensee currently has a possession-only license amendment for the reactor. The licensee submitted various amendments to the facility Technical Specifications to eliminate those required surveillances and other license requirements that were no longer needed or necessary because of the reactor shutdown.

#### 1. ORGANIZATION, OPERATION, AND MAINTENANCE ACTIVITIES (40755)

##### a. Inspection Scope

To verify compliance with the requirements specified in the facility Technical Specifications (TS) 6.1 and approved procedures, the inspector reviewed:

- current staffing level at the facility
- 1999 Annual Report
- operations log books
- maintenance records

##### b. Observation and Findings

The inspector noted that the licensee's 1999 Annual Report for the facility indicated that the operations staff numbered three people. The current staff continues to consist of the Reactor Director, the Reactor Supervisor, and the Reactor Facility Secretary. The inspector determined that this was adequate for the current level of activity at the facility.

A review of the facility operations log book showed that the reactor had been shutdown and operations stopped on June 30, 1998. This was done following a decision by University of Virginia officials to discontinue the research reactor program. (The licensee continued to keep a log book for the reactor to document fuel movement and disposition.) The irradiated reactor fuel was shipped off site in April and June of 1999. The unirradiated fuel was subsequently shipped off site on June 13, 2000. The Cobalt-60 pins or sources, that had been stored in the reactor pool, were also removed from the pool, placed in a storage cask, and transferred to the licensee's hot cell on August 30, 1999.

A review of the maintenance records for the facility showed that no maintenance was being completed for some of the equipment related to the reactor because none was required with the reactor shutdown. Maintenance was performed through the middle of 2000 as required by the TS until all the fuel was shipped off site and the Cobalt-60 pins were removed from the reactor pool. Maintenance continues to be completed for the radiation and airborne radioactivity monitoring equipment at the facility.

c. Conclusions

The licensee was maintaining the staffing level as required and the individuals filling the positions met the qualifications outlined in the TS. No operations were being conducted because the reactor had been permanently shutdown. Maintenance was being performed in accordance with license and TS requirements.

2. REVIEW AND AUDIT AND DESIGN CHANGE FUNCTIONS (40755)

a. Inspection Scope

To verify compliance with the requirements detailed in TS 6.2, 10 CFR 50.59, and licensee procedures, the inspector reviewed:

- minutes of recent Reactor Safety Committee (RSC) meetings
- minutes of recent Reactor Decommissioning Committee (RDC) meetings
- the results of recent RSC audits
- the responses of the licensee to the RSC audits
- 10 CFR 50.59 reviews completed by the licensee

b. Observations and Findings

Minutes of the RSC meetings for 1999 and 2000 were reviewed. It was determined that the RSC met semi-annually as required by TS and that a quorum was present during the meetings. The issues reviewed were consistent with the topics required to be reviewed as outlined in TS 6.2.B and procedure changes were discussed and approved as required. It was noted that the RSC generally completed audits of the overall program as stipulated by the TS and that the findings addressed substantive issues. The licensee responded to the findings and took corrective actions as needed.

The inspector noted that the RSC was dissolved effective October 30, 2000, and the Reactor Decommissioning Committee assumed the functions of the RSC in accordance with the facility technical specifications.

Minutes of the RDC meetings for 1998 through the present were reviewed. It was determined that the RDC met more often than the quarterly meetings required by TS. The issues reviewed were consistent with the topics required to be reviewed as outlined in TS 6.2.C.2. It was noted that two audits were late but the RDC was aware of the problem and was taking action to have the audits completed. The completion and review of the audits will be followed by the NRC as an Inspector Follow-up Item (IFI) and will be reviewed during a future inspection (IFI 50-62/2001-201-01).

Through discussions with licensee representatives, it was determined that the licensee had conducted three 10 CFR 50.59 reviews since the last inspection. The reviews had been completed and reviewed as stipulated by procedure.

c. Conclusions

The Reactor Safety Committee (RSC) met as required by TS and performed audits of the licensee's overall program. The RSC was disbanded on October 30, 2000. The Reactor Decommissioning Committee (RDC) met as required by TS and assumed the functions of the RSC on October 30, 2000. RSC audit findings were substantive, although some were late, and the licensee took corrective actions as needed. Three 10 CFR 50.59 reviews had been completed since the last inspection

3. OPERATOR REQUALIFICATION PROGRAM (40755)

a. Inspection Scope

To verify compliance with the requirements in 10 CFR 55.59 and the NRC-approved requalification program, the inspector reviewed the licensee's requalification training program and records.

b. Observations and Findings

In reviewing the requalification program, the inspector noted that the last biennial training cycle had been completed in June 1998. Since then, requalification training had been limited to the training given to all personnel at the facility at the beginning of the school year and training concerning the shipment of nuclear fuel. As noted previously, all the remaining fuel was shipped off site in June of 2000. Because there is no more fuel on site, the remaining Senior Reactor Operator chose not to have his license renewed and there are currently no licensed operators on site. This was acceptable because of the current status of the facility and the university's decision to decommission the reactor.

c. Conclusions

There are no longer any licensed operators at the facility and the Requalification Program is not currently in use.

4. PROCEDURES (40755)

a. Inspection Scope

To verify compliance with the requirements in TS 6.3, the inspector reviewed:

- selected operating procedures
- selected safety procedures
- the process used to revise, review, and approve all facility procedures

b. Observations and Findings

The inspector discussed the various procedures used at the facility with licensee representatives. It was noted that many of the procedures were no longer in use because the reactor was not operating.

The inspector reviewed selected safety procedures that were still being used at the facility. The procedures provided acceptable guidance in the areas they covered and procedural changes had been reviewed and approved by the RSC following the guidance in TS 6.3 and the licensee's administrative procedures. A review of the records that the licensee had to generate by complying with the procedures showed that implementation of and adherence to the procedures were acceptable.

It was noted that, in two instances, references were made to the requirements that were in effect when the reactor was operational. When the licensee was made aware of this, a procedure was immediately prepared to reflect the current conditions and requirements. This change will be reviewed and approved by the Facility Director and the RDC prior to implementation.

c. Conclusions

Facility procedures were acceptable and satisfied TS requirements for being revised by the licensee and reviewed and approved by the RSC/RDC.

5. FUEL MOVEMENT (40755)

a. Inspection Scope

To verify compliance with TS 5.3, the inspector reviewed:

- selected fuel handling procedures
- operations log books
- records of fuel movements

b. Observations and Findings

Following shutdown of the reactor in June of 1998, the licensee had removed all the fuel from the reactor core. All irradiated fuel was shipped off site by June 1999 and the unirradiated fuel elements were shipped off site on June 13, 2000. The inspector reviewed the fuel handling and verified that it had been completed in accordance with the applicable procedures and the TS.

c. Conclusions

All remaining fuel was shipped offsite on June 13, 2000. The fuel had been handled, moved, and shipped as stipulated by procedure and the facility TS.

6. SURVEILLANCE (40755)

a. Inspection Scope

To determine that surveillances and Limiting Conditions for Operations verifications were being completed as required by TS 3.0 and 4.0, the inspector reviewed:

- selected surveillance records
- various data sheets
- applicable check lists

b. Observations and Findings

After shutdown of the reactor in June of 1998, the licensee submitted a revision of the TS to the NRC in order to relieve the reactor staff from surveillances and other license requirements which were no longer possible or necessary. The NRC reviewed and approved the submission on February 9, 2000. The inspector verified that the licensee continued to perform the various surveillances as required.

c. Conclusions

Following shutdown of the reactor, various changes to the TS were submitted to the NRC to alleviate the necessity to complete those surveillances that could no longer be completed and/or were not needed. The licensee continued to complete the various surveillances as required.

7. EXPERIMENTS (40755)

a. Inspection Scope

To verify compliance with the requirements in TS 3.6 and 6.4 and related procedures, the inspector reviewed the licensee's program to control and conduct experiments in the reactor.

b. Observations and Findings

The inspector verified that no experiments had been conducted following shutdown of the reactor in June of 1998.

c. Conclusions

No experiments were conducted at the facility.

8. EFFLUENT AND ENVIRONMENTAL MONITORING (40755)

a. Inspection Scope

To verify compliance with the requirements of 10 CFR Part 20 and TS 3.4 and 6.7, the inspector reviewed:

- environmental monitoring program
- annual reports
- release records
- counting and analysis records

b. Observation and Findings

Because the reactor ceased operation in 1998, no gaseous releases have occurred since that time. Liquid releases, however, have continued. These were approved by the Reactor Health Physicist (RHP) and reviewed by the campus Radiation Safety Officer (RSO). The inspector reviewed the liquid release records and determined that they were properly documented. It was also noted that the results were within the annual limits and concentration constraints stipulated in TS 3.4 and in 10 CFR 20.2003 and Appendix B of Part 20.

c. Conclusion

Effluent monitoring satisfied license and regulatory requirements.

9. RADIATION PROTECTION (40755)

a. Inspection Scope

To verify compliance with 10 CFR Part 20 and the applicable licensee procedures, the inspector reviewed:

- health physics (HP) and reactor surveillance/survey records
- radiological signs and posting
- dosimetry records
- calibration records for radiation monitoring instruments
- the Radiation Protection Program
- the ALARA Program

b. Observations and Findings

Weekly and monthly contamination and radiation surveys were completed by the HP staff as required by TS and licensee procedures. Results were evaluated and corrective actions taken when readings or results exceeded set action levels.

Postings at the entrances to the controlled areas and the reactor room were acceptable for the hazards present. The facility's radioactive material storage areas were properly posted. No unmarked radioactive material was noted. Copies of NRC Form-3 were posted in acceptable areas of the facility as were current notices to workers required by 10 CFR Part 19.

The licensee used a National Voluntary Laboratory Accreditation Program (NVLAP)-accredited vendor to process personnel film badges and thermoluminescent dosimetry. An examination of the records for the past two years through the date of the inspection showed that all exposures were well within NRC limits and licensee action levels. Most of the records indicated no exposure above background.

Radiation monitoring equipment observed by the inspector was maintained and had the acceptable up-to-date calibration sticker attached. The calibration of portable survey meters was performed in-house by licensee personnel.

Calibration frequency met procedural requirements and records were maintained as required.

The licensee's Radiation Protection Program was established in the "University of Virginia Radiation Safety Guide," dated May 29, 1996. It had been reviewed, approved, and signed by the current campus Radiation Safety Officer and by the Chair of the Radiation Safety Committee. The program included requirements that all personnel who had unescorted access to the UVAR facility receive training in radiation protection, policies, procedures, requirements, and facilities.

The ALARA Program was also outlined and established in the licensee's "Health Physics Suggested Method Manual," signed by the Radiation Safety Committee Chair. ALARA limits were specified in the "UVA Radiation Safety Guide." The ALARA program provided guidance for keeping doses as low as reasonably achievable and was consistent with the guidance in 10 CFR Part 20.

The licensee had no Respiratory Protection Program.

c. Conclusions

Surveys were completed and documented acceptably to permit evaluation of the radiation hazards that might exist. Postings satisfied regulatory requirements. Personnel dosimetry was being worn as required and doses were well within specified procedural action levels and regulatory limits. Radiation monitoring equipment was being maintained and calibrated as required. The Radiation Protection Program and the ALARA Program satisfied regulatory requirements.

10. TRANSPORTATION (40755)

a. Inspection Scope

To verify compliance with the requirements of 10 CFR 71.5 for shipments of licensed material, the inspector interviewed licensee personnel and reviewed various records of shipments of radioactive material.

b. Observations and Findings

Records showed that the radioisotope type and quantities were calculated and dose rates were measured. These records also showed that transportation of the radioactive materials were in accordance with DOT and NRC requirements.

c. Conclusions

The program for transportation of radioactive materials satisfied NRC requirements.

11. PHYSICAL SECURITY (40755)

a. Inspection Scope

To verify compliance with the licensee's NRC-approved Physical Security Plan (PSP) and to assure that changes, if any, to the plan had not reduced its overall effectiveness, the inspector reviewed:

- logs, records, and reports
- key control
- intruder detection and physical barriers
- access controls

b. Observations and Findings

The inspector determined that the licensee's physical protection program conformed to NRC requirements and the licensee's PSP and implementing procedures. It was noted that revisions to the PSP had been submitted by the licensee through letters to the NRC dated February 22, 1996 and March 19, 1996. However, because of the shutdown of the reactor, these submissions had been withdrawn by letter dated July 15, 1998.

c. Conclusion

The NRC-approved security program at the facility was acceptably implemented.

12. EMERGENCY PREPAREDNESS (40755)

a. Scope

The inspector reviewed selected aspects of:

- the Emergency Plan
- implementing procedures
- emergency response facilities, supplies, equipment and instrumentation
- training records
- offsite support
- emergency drills and exercises

b. Observations and Findings

The Emergency Plan (E-Plan) in use at the reactor and emergency facilities was the same as the version most recently approved by the NRC. The E-Plan was audited and reviewed as required. Implementing procedures were reviewed and revised as needed to employ the E-Plan effectively. The emergency drill for the year 1999 was timely but the drill for 2000 had been completed six months late. (The licensee planned to hold another emergency drill in early 2001 as soon as the decommissioning plan is approved and the contractors are on site to participate.) Off-site support organization participation during the drills was as required by the E-Plan. Critiques were held following the drills to discuss the strengths and weaknesses identified during the exercise and to develop possible

solutions to any problems identified. The results of these critiques were documented and filed.

Emergency preparedness and response training was generally being completed as required. Training for off-site and reactor staff personnel had been conducted in a timely manner in the past but was currently three months late. The licensee was in the process of completing the required training at the time of the inspection.

Agreements with outside response organizations had been updated and maintained as necessary in the past but written copies of the current agreements were not available for review during the inspection. The licensee was aware that it was time to renew the agreements again.

Section 6.3.1(4) of the licensee's Technical Specifications requires that the licensee have written and approved procedures for emergency conditions involving potential or actual release of radioactivity, including provisions for evacuation, re-entry, recovery, and medical support.

Section 8.6 of the licensee's Emergency Plan requires that equipment and supplies will be inventoried every six months.

The licensee's Emergency Equipment Surveillance procedure issued June 1994 requires: 1) an annual check of the auxiliary lighting in the Front Office, 2) a semi-annual inspection of the windsock to check its condition and movement, 3) a quarterly check of the eyewash and shower to verify they are functional and a check of the fire extinguishers, and 4) quarterly check of various items of equipment located in the emergency lockers in the facility.

The inspector noted that, during the year 2000, no checks of facilities, supplies, instrumentation and equipment were completed as required in the surveillance procedure and the E-Plan. The most recent checks were done on January 8, 2001, and the previous checks had been completed on September 29, 1999. The licensee was informed that failure to complete the required checks of the emergency equipment was a violation of TS 6.3.1(4) and the Emergency Plan Section 8.6 (VIO 50-62/2001-201-02).

c. Conclusions

One violation was noted for failure to conduct the various checks of the emergency equipment as required by the Emergency Plan.

13. MATERIAL CONTROL AND ACCOUNTING (40755)

a. Inspection Scope

To verify compliance with 10 CFR Part 70, the inspector reviewed:

- storage areas
- procedures for tracking the quantity, identity, and location of Special Nuclear Material (SNM)

- assignment of responsibilities
- shipment records
- associated records and reports

b. Observations and Findings

The design of storage areas ensured that physical and administrative control of SNM would be maintained. Licensee procedures for tracking SNM were acceptably implemented. Written statements of responsibility and authority were established for positions with responsibility for SNM.

Material Status Reports (DOE/NRC Form 742) submitted by the licensee from October 1, 1998, through September 30, 2000, satisfied requirements specified in 10 CFR 70.53.

c. Conclusions

No deficiencies were identified in the licensee's Material Control and Accounting program.

14. Exit Meeting Summary

The inspection scope and results were summarized on January 10, 2001, with licensee representatives. The inspector discussed the findings for each area reviewed.

No dissenting comments were received from the licensee. The licensee did not identify as proprietary any of the material provided to or reviewed by the inspector except for the Physical Security Plan.

## **PARTIAL LIST OF PERSONS CONTACTED**

R. Allen, Reactor Decommissioning Committee Chairman and Director, Environmental Health and Safety (EHS) Department  
P. Benneche, Reactor Supervisor  
D. Steva, Reactor Health Physicist, EHS

## **INSPECTION PROCEDURES USED**

IP 40755 Non-Power Reactor Class III Operations

## **ITEMS OPENED, CLOSED, AND DISCUSSED**

### Opened

<u>Item Number</u>	<u>Type</u>	<u>Description and Reference</u>
50-62/2001-201-01	IFI	Follow-up Item on the completion of audits involving a review of operations records and a review of the HP procedures, Security Plan, and the Emergency Plan.
50-62/2001-201-02	VIO	Failure to complete various checks of the emergency equipment as required by the Emergency Plan.

### Closed

None

## **LIST OF ACRONYMS USED**

ALARA	As Low As Reasonably Achievable
CFR	Code of Federal Regulations
EHS	Environmental Health and Safety
HP	Health Physics
IFI	Inspector Follow-up Item
MW	megawatt
No.	Number
NRC	Nuclear Regulatory Commission
NVLAP	National Voluntary Laboratory Accreditation Program
PDR	Public Document Room
PSP	Physical Security Plan
Rev.	Revision
RHP	Reactor Health Physicist
RDC	Reactor Decommissioning Committee
RSC	Reactor Safety Committee
RSO	Radiation Safety Officer
TS	Technical Specifications
UVA	University of Virginia
UVAR	University of Virginia Research Reactor
VIO	Violation