

November 23, 2001

Dr. T. Tehan, Director
Rhode Island Nuclear Science Center
Rhode Island Atomic Energy Commission
Reactor Road
Narragansett, RI 02882-1197

SUBJECT: NRC INSPECTION REPORT NO. 50-193/2001-202 AND NOTICE OF VIOLATION

Dear Dr. Tehan:

This letter refers to the inspection conducted on November 5-8, 2001, at your Rhode Island Nuclear Science Center (RINSC) Research Reactor facility. The inspection included a review of activities authorized for your facility. The enclosed report presents the results of that inspection.

Various aspects of your safety and security programs were inspected including selective examinations of procedures and representative records, interviews with personnel, and observation 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. The violation is of concern because it should have been prevented by implementation of the surveillance program you initiated for testing the facility alarms.

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/

Eugene V. Imbro, Acting Chief
Operational Experience and
Non-Power Reactors Branch
Division of Regulatory Improvement Programs
Office of Nuclear Reactor Regulation

Docket No.: 50-193
License No.: R-95

Enclosures: 1) Notice of Violation
2) NRC Inspection Report No. 50-193/2001-202

cc w/enclosures: Please see next page

Rhode Island Atomic Energy Commission

Docket No. 50-193

cc:

Dr. Vincent C. Rose, Chairman, RIAEC
University of Rhode Island
Chemical Engineering Department
118 Crawford Hall
Kingston, RI 02881

Dr. Harry Knickle, Chairman
Nuclear and Radiation Safety Committee
University of Rhode Island
College of Engineering
102 Bliss Hall
Kingston, RI 02881

Mr. Charles McMahon
Supervisor, Radiation Control Specialist
Rhode Island Department of Health
Division of Occupational and
Radiological Health
3 Capitol Hill Cannon
Providence, RI 02808-5097

Test, Research, and Training
Reactor Newsletter
University of Florida
202 Nuclear Sciences Center
Gainesville, FL 32611

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NOTICE OF VIOLATION

Rhode Island Atomic Energy Commission
Rhode Island Nuclear Science Center

Docket No.: 50-193
License No.: R-95

During an NRC inspection conducted on November 5-8, 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:

License Condition 3.e, "Physical Security Plan," in part, states: "The licensee shall maintain and fully implement all provisions of the Commission's approved physical security plan, including amendments and changes made pursuant to the authority of 10 CFR 50.54(p)."

The Rhode Island Nuclear Science Center Security Plan, dated August 1994, revised July 26, 2000, in the Section entitled Testing, states that the alarm detection system shall be tested quarterly in agreement with the vendor providing the service.

Contrary to the above, from August 30, 1999, when this requirement was implemented, until the present, the testing of the alarm detection system exceeded the quarterly requirement.

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

Pursuant to the provisions of 10 CFR 2.201, the Rhode Island Nuclear Science Center 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 23rd day of November, 2001.

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

Docket Nos: 50-193

License Nos: R-95

Report Nos: 50-193/2001-202

Licensee: Rhode Island Atomic Energy Commission

Facility: Rhode Island Nuclear Science Center
University of Rhode Island (URI)

Location: Reactor Road
Narragansett, Rhode Island

Dates: November 5-8, 2001

Inspector: Craig Bassett

Approved by: Eugene V. Imbro, Acting Chief
Operational Experience and
Non-Power Reactors Branch
Division of Regulatory Improvement Programs
Office of Nuclear Reactor Regulation

EXECUTIVE SUMMARY

Rhode Island Nuclear Science Center
Rhode Island Atomic Energy Commission
Report No.: 50-193/2001-202

This routine, announced inspection included onsite review of various aspects of the licensee's programs concerning operations and emergency preparedness as they relate to the licensee's two megawatt (2 MW) Class 1 non-power research reactor. The licensee's programs were directed toward the protection of public health and safety and were in compliance with NRC requirements. No safety concerns or violations of regulatory requirements were identified.

Organization and Staffing

- The organization structure and functions met the requirements specified in Technical Specifications Sections 6.1, 6.2, and 6.3.

Operations

- The operations program satisfied Technical Specification requirements.

Design Control

- The design change program satisfied 10 CFR 50.59 requirements.

Review and Audit Functions

- Review and oversight functions required by Technical Specifications Sections 6.1 and 6.4 were acceptably completed by the Nuclear and Radiation Safety Committee.

Operator Requalification Program

- Operator training and requalification was being conducted in accordance with the revised Operator Requalification Program.

Procedures

- The program governing the control and implementation of facility procedures satisfied Technical Specification requirements.

Fuel Movement and Handling

- The fuel handling and examination program satisfied Technical Specification and licensee procedural requirements.

Maintenance and Surveillance

- The maintenance and surveillance program satisfied Technical Specification requirements.

- One violation was identified for failure to test the alarm detection system quarterly as required by the Security Plan.

Experiments

- The program for experiments satisfied Technical Specification and procedural requirements.

Emergency Preparedness

- The emergency preparedness program was conducted in accordance with the requirements specified in the Emergency Plan.

REPORT DETAILS

Summary of Plant Status

The licensee's two megawatt (2 MW) non-power reactor (NPR) continues to be operated in support of laboratory experiments, reactor operator training, and various types of research. During the inspection, the reactor was started up, operated, and shut down as required to support the irradiation of various tissue samples.

1. Organizational Structure and Functions

a. Inspection Scope (Inspection Procedure (IP) 39745)

To verify that staffing, reporting, and record keeping requirements specified in Technical Specifications (TS) Sections 6.1, 6.2 and 6.3 were being met, the inspector reviewed:

- organization and staffing
- administrative controls
- management responsibilities
- facility annual reports

b. Observations and Findings

The Rhode Island Nuclear Science Center (RINSC) organizational structure had not changed since the last operations inspection (Inspection Report [IR] No. 50-193/2000-201). The inspector noted that one person who had been a qualified Senior Reactor Operator at the facility had resigned his position. There are currently two people with active Senior Reactor Operator (SRO) licenses and one individual with an inactive SRO license. One individual is in training to become a qualified Reactor Operator (RO).

The organizational structure and staffing were as required by Technical Specification and as reported in the Annual Report. Qualifications of the staff met Technical Specification requirements. Review of various records verified that management responsibilities were administered as required by Technical Specifications and applicable procedures.

c. Conclusions

The organization structure and functions met the requirements specified in TS 6.0.

2. Operations

a. Inspection Scope (IP 39745)

The inspector reviewed selected aspects of:

- operational logs and records
- staffing for operations

- selected operational, start-up, and shutdown activities

b. Observations and Findings

The operating logs and records from September 2000 through the present were reviewed and generally provided an indication of operational activities. This included documentation of events and/or problems at the facility and tracking or resolution of the problems. The logs and records indicated that shift staffing, including on-call personnel, was as required by Technical Specifications. Logs and records also showed that operational conditions and parameters were consistent with license and Technical Specification requirements. Observation of operational activities in progress during the inspection further confirmed that these conditions and requirements were satisfied.

During this review, the inspector noted that some of the information required to be listed on the logs and forms documenting reactor operation was redundant. However, space was provided on these records to enter the data. In checking the actual information entered on the logs and forms, the inspector noted some inconsistencies in the records. For example, not all the required information was included on the logs and forms documenting reactor operations and Forms NSC-11 and NSC-18 were generally filled out when there were no reactor operations but, on occasion, these forms were not filled out when there were no reactor operations. The Reactor Supervisor indicated that he was analyzing the procedures requiring documentation of reactor operations and looking at the records and forms required. He was in the process of revising the forms so that the same data was not required to be entered in multiple locations and on various forms. His goal was to eliminate the redundant data entry. The licensee was informed that the issue of procedure and form revision would be tracked by the NRC as an Inspector Follow-up Item (IFI) and would be reviewed during a subsequent inspection (IFI 50-193/2001-202-01).

c. Conclusions

The operations program satisfied Technical Specification requirements.

3. **Design Control**

a. Inspection Scope (IP 40745)

The inspector reviewed selected aspects of:

- facility design changes and records
- facility configuration
- Nuclear and Radiation Safety Committee meeting minutes

b. Observations and Findings

Design change records and observations of changes that have been made showed that no changes at the facility had been submitted for committee review since the

previous NRC inspection in this area (IR No. 50-193/2000-201). The inspector noted that previous changes had been acceptably documented in accordance with 10 CFR 50.59 and applicable licensee requirements. The changes had been reviewed and approved by the Nuclear and Radiation Safety Committee (NRSC) as required. None of the changes constituted a safety question or required a change to the facility Technical Specifications.

c. Conclusions

The design change program satisfied 10 CFR 50.59 requirements.

4. Review and Audit Functions

a. Inspection Scope (IP 40745)

In order to verify that the licensee had established and conducted reviews and audits as required in TS Sections 6.1 and 6.4, the inspector reviewed:

- Nuclear and Radiation Safety Full Committee meeting minutes
- Nuclear and Radiation Safety Subcommittee meeting minutes
- safety reviews and audits

b. Observations and Findings

Minutes of the Nuclear and Radiation Safety Committee (NRSC) from March 2000 through the present showed that the committee met at the required frequency and that a quorum was present. The topics considered during the meetings were consistent with TS requirements to provide guidance, direction, and oversight, and to ensure acceptable use of the reactor.

A subcommittee of the NRSC generally met quarterly and conducted audits and reviews as required and the full NRSC reviewed the results. Problems noted during these audits were discussed and recommendations for improvements were made. The licensee implemented the improvements as necessary.

c. Conclusions

Review and oversight functions required by TS Sections 6.1 and 6.4 were acceptably completed by the NRSC.

5. Operator Requalification Program

a. Inspection Scope (IP 69003)

The inspector reviewed the revised Requalification Program as well as:

- current operator licenses
- operator physical examination records

- operations logs and records

b. Observations and Findings

Since the last inspection of this area, the Requalification Program had been revised and updated. The revision had been submitted to the NRC for review and is currently in the review and approval process. The inspector found that the revised Requalification Program was being maintained up to date. Operators' licenses were also current. Physical examinations of the operators were conducted biennially as required. Records showed that written and operating examinations of the operators were being completed as stipulated in the program. Logs showed that operators maintained active duty status as required.

c. Conclusions

Operator training and requalification was being conducted in accordance with the revised Operator Requalification Program.

6. Procedures

a. Inspection Scope (IP 42745)

To verify that facility procedures were being maintained and implemented as required, the inspector reviewed selected aspects of:

- RINSC Operating Procedures
- RINSC Abnormal Procedures
- procedural implementation
- associated logs, records, and checklists

b. Observations and Findings

Administrative controls of changes and temporary changes to procedures, and the associated review and approval processes were as required. Training of personnel on procedures and changes was acceptable. Through observation of various activities at the facility, the inspector determined that licensee personnel conducted activities in accordance with applicable procedures. Records showed that procedures for potential malfunctions (e.g., radioactive releases and contaminations, and reactor equipment problems) were implemented as required.

c. Conclusions

The procedural control and implementation program satisfied TS requirements.

7. Fuel Movement and Handling

a. Inspection Scope (IP 60745)

The inspector reviewed selected aspects of:

- core loading procedures
- fuel handling equipment and instrumentation
- fuel examination records
- operations logs and records

b. Observations and Findings

Core loading procedures provided a prescribed method to move and handle fuel consistent with the provisions of the TS 4.9 and the licensee safety analyses. Fuel movement and fuel examination records showed that the fuel was moved and examined annually as required. Records also showed that fuel-handling and monitoring equipment were operable prior to use. Personnel were knowledgeable of the procedural and equipment requirements for criticality control and assurance of fuel integrity.

c. Conclusions

The fuel handling and examination program satisfied TS and licensee procedural requirements.

8. **Maintenance and Surveillance**

a. Inspection Scope (IP 61745)

The inspector reviewed selected aspects of the following to verify that the licensee's maintenance and surveillance program was being acceptably implemented:

- operational logs and records
- equipment maintenance records
- surveillance and calibration procedures
- surveillance, calibration, and test data sheets and records

b. Observations and Findings

Logs indicated that corrective maintenance activities and problems were addressed as required by appendices to the operating procedures. Records showed that routine maintenance activities were conducted at the required frequency and in accordance with the applicable procedure appendix or equipment manual. Maintenance activities ensured that equipment remained consistent with the Safety Analysis Report and Technical Specification requirements.

Surveillance, test, and limiting conditions for operation (LCO) verifications and calibrations for selected systems or components were reviewed and found to be completed on schedule and in accordance with the TS and procedures. One exception is noted below. All the recorded results were within the prescribed parameters. Associated records and logs were complete and were being maintained as required.

License Condition 3.e, "Physical Security Plan," requires that the licensee maintain and fully implement all provisions of the Commission's approved, revised physical security plan.

The Rhode Island Nuclear Science Center Security Plan, dated August 1994, revised July 26, 2000, in the Section entitled Testing, states that the alarm detection system shall be tested quarterly in agreement with the vendor providing the service.

The Rhode Island Nuclear Science Center Technical Specifications, Revision 1, Amendment 28, dated July 2, 2001, Section 1.38.5 stipulates that the maximum allowable interval shall not exceed four months for a quarterly surveillance.

The inspector reviewed the records documenting completion of tests of the alarm detection system. Prior to August 1999, the tests had been required to be conducted each month. On August 30, 1999, this requirement was revised and the testing frequency was changed to quarterly. A review of the records indicated that the tests were completed on November 22, 1999, April 3, 2000, August 11, 2000, January 2, 2001, April 18, 2001, and September 25, 2001. During that time frame, the alarms had not been tested quarterly. The licensee was informed that failure to test the alarm detection system quarterly was a violation of the Security Plan (VIO 50-193/2001-202-02).

c. Conclusions

The maintenance and surveillance program generally satisfied TS requirements. One violation was identified for failure to test the alarm detection system quarterly as required by the Security Plan.

9. Experiments

a. Inspection Scope (IP 69005)

The inspector reviewed selected aspects of:

- experimental program requirements
- procedures, logs, and records
- experimental administrative controls and precautions

b. Observations and Findings

The experiments conducted at the facility were typically routine procedures that have been in place for several years. Since the last inspection in this area in September 2000, the experiments that have been conducted have been completed using approved methods and with the cognizance of the Reactor Supervisor and/or the SRO operating the reactor in accordance with Technical Specification requirements (e.g., reactivity limitations). The results of the experiments were documented in the operations log as required. Engineering and radiation protection controls were implemented as required to limit exposure to radiation.

c. Conclusions

The program for experiments satisfied TS and procedural requirements

10. **Emergency Preparedness**

a. Inspection Scope (IP 82745)

The inspector reviewed selected aspects of:

- RINSC Emergency Plan, revised March 2001
- Emergency Plan Implementing Procedures, Revision 2, dated March 2001
- emergency response supplies, equipment and instrumentation
- training records
- offsite support and support agreements
- emergency drills and exercises

b. Observations and Findings

The Emergency Plan (E-Plan) in use at the research reactor 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 execute the E-Plan effectively.

Supplies, instrumentation and equipment, generally stored cabinets in the basement, were being maintained, controlled, and inventoried as required in the E-Plan. Through drill scenario and records review, emergency responders were determined to be knowledgeable of the proper actions to take in case of an emergency. Agreements with outside response organizations had been updated and maintained as necessary. Communications capabilities were acceptable with these support groups and had been tested.

The inspector visited the Narragansett City Fire Department and verified that the supplies and equipment at this support site were operational. There appeared to be a good working relationship between the licensee and this support organization.

Documentation of the drills for the past three years were reviewed. Emergency drills had been conducted as required by the E-Plan. Critiques were written following the drills to document the strengths and weaknesses identified during the exercise and to outline possible solutions to any problems identified. Emergency preparedness and response training was being completed typically just prior to the drills.

c. Conclusions

The emergency preparedness program was conducted in accordance with the Emergency Plan.

11. Follow-up on Previous Open Items

a. Inspection Scope

The inspector reviewed the licensee's actions taken in response to previously identified Inspector Follow-up Items (IFIs) and violations (VIOs).

b. Observation and Findings

(1) (Closed) IFI 50-193/99-201-01 - Follow-up on the licensee's efforts to revise and upgrade the facility health physics procedures. During a previous inspection (IR No. 50-193/99-201-01), the licensee had acknowledged that the health physics (HP) procedures needed to be reviewed and upgraded. The project was in progress during that inspection. During this inspection, the inspector reviewed the progress made by the licensee. Procedures outlining the HP program and providing guidance for such tasks as conducting surveys, handling waste, and calibration of instruments had been completed. Also, a procedure had been developed for writing other procedures as needed. These procedures appeared to be adequate. This item is considered closed.

(2) (Open) IFI 50-193/2000-202-01 - The inspector discussed with the licensee the subject of who conducts the audits and the methods used to ensure that all areas are reviewed. During a previous inspection in September 2000 (IR No. 50-193/2000-202-01), the licensee had stated that, with respect to the radiation protection program, an audit procedure and a matrix of areas/items to be audited had been developed and was being reviewed. The licensee had agreed to evaluate the feasibility of developing an audit procedure and a matrix that would be applicable to the entire facility and encompass all operations and safety programs. The licensee also indicated that a previous practice of having staff members from another NPR facility come and audit the RINSC facility would be reviewed and reinitiated as soon as it was possible to coordinate schedules. During this inspection, the inspector reviewed the status of this issue. No progress had been made and this item remains open.

(3) (Closed) IFI 50-193-2000-202-02 - During the inspection in September 2000 (IR No. 50-193/2000-202-01), an issue was noted concerning reactor operator training. Because of the training that had taken place that year for two SROs, it was noted that the qualification program was functioning. However, during the inspection, the inspector determined that the records documenting the training were not as complete as they should be. During this inspection, the inspector determined that the program for tracking and documenting the training and other required aspects of the Operator Requalification Program had been simplified and was being completed as required. This allowed for rapid verification that activities required by the program had been completed and for easy documentation of the data. This item is considered closed.

(4) (Closed) IFI 50-193/2000-202-03 - Also during the inspection in September 2000 (IR No. 50-193/2000-202-01), an issue was noted concerning a few minor

discrepancies between what the E-Plan and the Implementing Procedures stated compared to what the actual practice and/or condition was at the facility. The E-Plan stipulated that the various Memoranda of Agreement with offsite support agencies were maintained as an appendix to the Implementing Procedures. The Memoranda were maintained in a separate notebook but not as an appendix to the Implementing Procedures. One Appendix to the implementing procedures needed to be revised because it required that specific instruments be kept in the cabinet. Two of the instruments specified were neither kept in the cabinet nor maintained on site. These issues were acknowledged by the licensee. During this inspection, the inspector reviewed this issued and verified that the licensee had revised the E-Plan and the Implementing Procedures to reflect current practices and/or conditions. This issue is considered closed.

(5) (Closed) VIO 50-193/2001-201-01 - During an inspection in March 2001 (IR No. 50-193/2001-201-01), the inspector noted that a set of instructions was written giving guidance on performing contamination surveys. The instructions required that smear surveys be taken daily in certain specified locations and that another set of smears be taken in other locations on a weekly basis. The set of instructions was never submitted to nor approved by the Nuclear Radiation Safety Committee as a radiological control procedure. Section 6.5.6 of the Technical Specifications requires that the licensee have written Radiological Control procedures that have been approved by the Nuclear and Radiation Safety Committee. During this inspection, the inspector reviewed the new procedures that had been developed by the licensee in the area of health physics. The new procedures provided a good basis for the HP program and the procedure written to provide guidance on conducting contamination surveys was determined to be adequate. The procedures had all been reviewed and approved by the NRSC prior to implementation as required. This item is considered closed.

12. Exit Interview

The inspection scope and results were summarized on November 8, 2001, with members of licensee management. The inspector described the areas inspected and discussed in detail the inspection findings. No dissenting comments were received from the licensee. Although proprietary information was reviewed during the inspection, no such material is included in this report.

PARTIAL LIST OF PERSONS CONTACTED

Licensee

H. Bicehouse, Radiation Protection Officer and Assistant Director for Reactor Safety
J. Davis, Reactor Supervisor
D. Johnson, Health Physicist
W. Simoneau, Assistant Director for Reactor Operations
T. Tehan, Director, Rhode Island Nuclear Science Center

Other Personnel

V. Rose, Chairman, Rhode Island Atomic Energy Commission

INSPECTION PROCEDURES USED

IP 39745: Class 1 Non-Power Reactors Organization, Operations, and Maintenance Activities
IP 40745: Class 1 Non-Power Reactors Review and Audit and Design Change Functions
IP 42745: Class 1 Non-Power Reactor Procedures
IP 60745: Class 1 Non-Power Reactors Fuel Handling
IP 61745: Class 1 Non-Power Reactors Surveillance
IP 69005: Class 1 Non-Power Reactors Experiments
IP 82745: Class 1 Non-Power Reactors Emergency Preparedness
IP 69003: Class 1 Non-Power Reactor operator licenses, requalification, and medical activities.

ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

50-193/2001-202-01	IFI	Follow-up on the issue of revising the various forms and logs used to document reactor operation to eliminate redundancy of the data entered.
50-193/2001-202-02	VIO	Failure to test the alarm detection system quarterly as required by the Security Plan.

Closed

50-193/1999-201-01	IFI	Follow-up on the licensee's efforts to revise and upgrade the facility health physics procedures.
50-193/2000-202-02	IFI	Follow-up on the licensee's efforts to properly track and document the training and the other specified requirements of the Operator Requalification Program.

50-193/2000-202-03	IFI	Follow-up on the issue of revising the Emergency Plan and the Implementing Procedures to reflect current practices and/or conditions at the facility.
50-193/2001-201-01	VIO	Failure to have a reviewed and approved procedure in place giving guidance on conducting surveys.

Discussed

50-193/2000-202-01	IFI	Follow-up on the issues of: 1) developing an audit procedure and matrix covering all aspects of the operations and safety programs at the facility and 2) having audits conducted by people outside the University of Rhode Island system.
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LIST OF ACRONYMS USED

ADAMS	Agencywide Documents Access and Management System
CFR	Code of Federal Regulations
E-Plan	Emergency Plan
HP	Health physics
IFI	Inspector Follow-up Item
IP	Inspection Procedure
LCO	Limiting Conditions for Operation
MW	Megawatt
NPR	Non-Power Reactor
NRC	Nuclear Regulatory Commission
NRSC	Nuclear and Radiation Safety Committee
PAR	Publicly Available Records
RIAEC	Rhode Island Atomic Energy Commission
RINSC	Rhode Island Nuclear Science Center
RO	Reactor Operator
SRO	Senior Reactor Operator
TS	Technical Specification
URI	University of Rhode Island
VIO	Violation