

April 27, 2005

Dr. William G. Vernetson  
Director of Nuclear Facilities  
Department of Nuclear and  
Radiological Engineering  
P. O. Box 11830  
University of Florida  
Gainesville, FL 32611

SUBJECT: NRC INSPECTION REPORT NO. 50-083/2005-201

Dear Dr. Vernetson:

This letter refers to the inspection conducted on March 28-31, 2005, at your University of Florida Test Reactor facility. The enclosed report presents the results of that inspection.

Various aspects of your reactor operations and security programs were inspected, including selective examinations of procedures and representative records, interviews with personnel, and observations of the facility. Based on the results of this inspection, no safety concern or noncompliance with Nuclear Regulatory Commission (NRC) requirements was identified. No response to this letter is required.

In accordance with 10 CFR 2.390 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/reading-rm/adams.html>.

Should you have any questions concerning this inspection, please contact Craig Bassett at 404-562-4712 or Kevin Witt at 301-415-4075.

Sincerely,

**/RA/**

Patrick M. Madden, Section Chief  
Research and Test Reactors Section  
New, Research and Test Reactors Program  
Division of Regulatory Improvement Programs  
Office of Nuclear Reactor Regulation

Docket No. 50-083  
License No. R-56

Enclosure: NRC Inspection Report No. 50-083/2005-201  
cc w/enclosure: Please see next page

University of Florida

Docket No. 50-083

cc:

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University of Florida  
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Gainesville, FL 32611

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

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

Docket No: 50-083

Report No: 50-083/2005-201

Licensee: University of Florida

Facility: University of Florida Training Reactor

Location: University of Florida  
Gainesville, FL

Dates: March 28-31, 2005

Inspectors: Craig Bassett  
Kevin Witt

Accompanied by: Lopchai Siripirom, Nuclear Engineer  
Bureau of Nuclear Safety Regulation  
Office of Atoms for Peace  
Bangkok, Thailand

Approved by: Patrick M. Madden, Section Chief  
Research and Test Reactors Section  
New, Research and Test Reactors Program  
Division of Regulatory Improvement Programs  
Office of Nuclear Reactor Regulation

## EXECUTIVE SUMMARY

University of Florida  
University of Florida Training Reactor  
Inspection Report No.: 50-083/2005-201

This routine, announced inspection involved onsite review of selected programs and activities since the last NRC inspection including: Organizational Structure and Staffing, Review and Audit Functions, Operations, Experiments, Fuel Handling, Procedures, Maintenance and Surveillance, Design Control, Operator Requalification, Emergency Preparedness.

### Organizational Structure and Staffing

- The operations organizational structure and functions were consistent with Technical Specifications Section 6.2. Shift staffing met the minimum requirements for current operations.

### Review and Audit Functions

- The review and audit program was being conducted acceptably by the Reactor Safety Review Subcommittee as stipulated in Technical Specifications Section 6.2.5.

### Operations

- Based on the logs, procedures, and associated records reviewed and the observations made during the inspection, reactor operations and log maintenance were acceptable and in accordance with License, Technical Specifications, and procedural requirements.

### Experiments

- Based on the records reviewed, the conduct and control of experiments were acceptable and in accordance with procedural and Technical Specification Sections 3.5, 4.2.4 and 6.4 requirements.

### Fuel Handling

- Fuel handling activities and the documentation thereof were acceptable and in accordance with procedural and Technical Specification requirements.

### Procedures

- The procedural change, control, and implementation program was acceptably maintained as required by the Technical Specifications and the applicable procedures.

#### Maintenance and Surveillance

- Maintenance logs, records, performance, and reviews satisfied Technical Specification and procedure requirements.
- The program for tracking and completing surveillance checks and verifications satisfied Technical Specification requirements.

#### Design Control

- Based on the records reviewed, the licensee's design change program was being implemented as required.

#### Operator Requalification

- The requirements of the Operator Requalification Plan were being met and the plan was being acceptably implemented.

#### Emergency Preparedness

- The emergency response program was conducted in accordance with the requirements stipulated in the Emergency Preparedness Plan.

## REPORT DETAILS

### **Summary of Plant Status**

The licensee's one hundred kilowatt modified Argonaut-UTR type research and test reactor continued to be operated in support of education, operator training, surveillance, contract or service work, and experiments. During the inspection, the reactor was not operated.

### **1. Organizational Structure and Staffing**

#### a. Inspection Scope (Inspection Procedure [IP] 69001)

The inspectors reviewed selected aspects of the following regarding the licensee's organization and staffing to ensure that the requirements of Sections 6.2.1 - 6.2.4 of Technical Specifications (TS), Amendment No. 24, dated January 3, 2005, were being met:

- organizational structure for the University of Florida Training Reactor (UFTR)
- current staff qualifications
- management responsibilities as outlined in the TS
- selected portions of the operations log for the past year through the present
- the most recently available Annual Reports

#### b. Observations and Findings

The operations organizational structure had not functionally changed since the last inspection (refer to NRC Inspection Report 50-083/2004-201). One of the senior reactor operators has resigned from the facility as of March 2005, and the licensee is currently trying to find a replacement. The operations staff was comprised of one Senior Reactor Operator (SRO), who is the Facility Director and Reactor Manager, and one person in training to become a licensed SRO. There are also several part-time student technicians available to support reactor operations. TS Section 6.2.4 specifies that the training and qualification criteria contained in the ANSI/ANS (American National Standards Institute) Standard 15.4-1977, "Standards for Selection and Training of Personnel for Research Reactors," are required to be met by UFTR personnel. The inspectors verified that the education, training, and experience of the operations staff met ANSI/ANS 15.4-1977 requirements.

#### c. Conclusions

The operations organizational structure and functions were consistent with TS Section 6.2. Shift staffing met the minimum requirements for current operations.

## 2. Review and Audit Functions

### a. Inspection Scope (IP 69001)

In order to verify that the licensee had established and conducted reviews and audits as required in TS Section 6.2.5, the inspectors reviewed selected aspects of:

- Reactor Safety Review Subcommittee (RSRS) meeting minutes from September 2003 through March 2005
- Annual Calendar Year (2003) Audit of UFTR, letter from W. G. Vernetson to the Reactor Safety Review Subcommittee, dated July 13, 2004
- Annual Calendar Year (2002) Audit of UFTR, letter from W. G. Vernetson to the Reactor Safety Review Subcommittee, dated August 5, 2003
- UFTR Standard Operating Procedure (SOP)-0.1, "Operating Document Controls," Revision (Rev) 3, dated September, 2003

### b. Observations and Findings

The RSRS committee met eight times during the period from September 2003 to September 2004 and three times during the period from October 2004 to March 2005. At least one meeting was held each quarter at intervals not to exceed four months as required by TS Section 6.2.5(2). The membership also satisfied the charter requirements stipulated in TS Section 6.2.5(2). Review of the minutes indicated that the committee provided guidance and direction to ensure suitable oversight of reactor operations and that the minutes provided a record of this safety oversight. The RSRS committee minutes and audit records also showed that safety reviews and individual audits had been completed at the required frequency and submitted to the Dean of the College of Engineering within three months of completion for the functional areas specified by TS Section 6.2.5(4). Even though the TSs allow for the audits of the retraining and requalification programs, as well as the facility emergency plan, to be completed every two years, the audits were completed annually for the past two years. The audits appeared to be comprehensive and well documented. The inspectors noted that there were no significant issues discovered and that the licensee took appropriate corrective actions in response to the audit findings. Committee records documented that procedure changes were reviewed as required by TS Section 6.2.5(3).

During the review of the RSRS meeting minutes, the inspectors noted that the RSRS had been informed that the licensee had not submitted the Annual Reports to the NRC for September 1, 2001 - August 31, 2002, September 1, 2002 - August 31, 2003 and for September 1, 2003 - August 31, 2004 within six months following the end of each prescribed year as required by TS 6.6.1. The licensee stated that the reports are in the process of being completed and that additional staff resources are needed to finish the reports. The licensee made a commitment to issue the 2001-2002 report by April 20, 2005, the 2002-2003 report by May 31, 2005 and the 2003-2004 report by June 30, 2005. This issue will be considered by the NRC as an Inspector Follow-up Item (IFI) and will be reviewed during the next inspection at the facility (IFI 50-083/2005-201-01).

c. Conclusions

The review and audit program was being conducted acceptably by the Reactor Safety Review Subcommittee as stipulated in Technical Specifications Section 6.2.5.

**3. Operations**

a. Inspection Scope (IP 69001)

To verify compliance with License Condition 2.C.2 and related procedural requirements, the inspectors reviewed selected aspects of:

- operational logs and records for 2003 to 2004
- staffing during periods of reactor operations
- UFTR SOP-A.1, "Pre-operational Checks," Rev 16, dated February 1997, latest TCN dated September 2003
- UFTR SOP-A.2, "Reactor Start-up," Rev 12, dated May 1987, latest TCN dated June 2003
- UFTR SOP-A.3, "Reactor Operation at Power," Rev 12, dated November 1994, latest TCN dated September 2003
- UFTR SOP-A.4, "Reactor Shutdown," Rev 11, dated October 1989, latest TCN dated September 2003
- UFTR SOP-0.6, "Reactor Trip and Unscheduled Shutdown Review and Evaluation," Rev 1, dated April 2002

b. Observations and Findings

The inspectors reviewed selected daily operations log pages that were recorded since January 2003. Reactor operations were carried out in accordance with written procedures as required by TS Section 6.3. Information on the operational status of the facility was recorded clearly and concisely in log book and/or on checklists as required by UFTR SOP-A.3. Scrams were identified in the log and associated records, and were reported and resolved as required before the resumption of operations. Logs and records also showed that operational conditions and parameters were consistent with license and TS requirements and that TS operational limits had not been exceeded.

The inspectors conducted observations of the reactor staff on March 30, 2005, and reviewed Reactor Operations Log Books and associated records and logs. The inspectors noted that the licensed reactor operator and trainee were knowledgeable and competent. Observation of operational activities also confirmed that reactor operations were carried out in accordance with written procedures and TS requirements.

c. Conclusions

Based on the logs, procedures, and associated records reviewed and the observations made during the inspection, the inspectors determined that reactor operations and log maintenance were acceptable and in accordance with License, TS, and procedural requirements.

**4. Experiments**

a. Inspection Scope (IP 69001)

The inspectors reviewed selected aspects of the following to assure compliance with TS Sections 3.5 and 6.4:

- experiment logs and records for the year 2004
- approved reactor experiments for the year 2004
- RSRS meeting minutes for 2003 through 2005
- UFTR SOP-A.5, "Experiments," Rev 4, dated December 1988, latest TCN dated September 2003
- UFTR Form SOP-A.5A, "Request for UFTR Operation (Run Request Form)," Rev 4, dated December 1988

b. Observations and Findings

Experiments at the UFTR were categorized as Class I through Class IV based on their potential hazard and need for review and approval. Class I experiments were those that were required to be approved by the Reactor Manager. Class II experiments were experiments that were required to be reviewed and approved by the Reactor Manager and the Radiation Control Officer. Class III experiments were required to be reviewed and approved by the Reactor Manager and Radiation Control Officer after review and approval by the RSRS. Class IV experiments were those experiments that were required to be reviewed and approved by the Reactor Manager and Radiation Control Officer after review and approval by the RSRS and have specific emergency operating instructions for conducting the experiments.

The Request for Operation forms that had been completed for conducting experiments during 2004 contained the appropriate information, hazards analyses as applicable, and had been reviewed and approved as required by TS and procedure. The experiments were then installed, performed, and removed as outlined in the approved experiment authorizations. In reviewing the records of irradiations, the inspectors observed that Table A.5A (UFTR Record of Irradiation) was not being filled out for experiments conducted in the reactor. The licensee indicated that the form was not necessary since sample irradiations are tracked in the daily log sheets. The inspectors recommended to the licensee that the procedural requirement to fill out the table either be modified or deleted to reflect what is currently being practiced at the facility. There were 39 experiments utilizing the reactor in 2003 and 40 experiments in 2004, of which a majority were conducted for the purpose of neutron activation analysis.

c. Conclusions

Based on the records reviewed, the inspectors determined that the conduct and control of experiments were acceptable and in accordance with procedural and TS Sections 3.5, 4.2.4 and 6.4 requirements.

**5. Fuel Handling**

a. Inspection Scope (IP 69001)

To verify compliance with TS Sections 3.7 and 5.8, the inspectors reviewed selected aspects of:

- fuel handling equipment and instrumentation
- fuel handling and examination records
- UFTR SOP-C.1, "Irradiated Fuel Handling," Rev 4, dated February 1985
- UFTR SOP-C.2, "Fuel Loading," Rev 5, dated October 1999

b. Observations and Findings

Following a review of the fuel handling documentation, the inspectors determined that fuel movement, inspection, log keeping, and data recording was being completed as required by procedure and met TS Sections 3.7 and 5.8 requirements. Inspection of the incore reactor fuel elements was previously scheduled to occur in June 2004 in accordance with TS 4.2.7(1), but the licensee received Amendment No. 24 to their license which allowed for fuel element inspections to occur every ten years. Fuel element inspection is currently scheduled for completion before June 2009. Data recorded for fuel movement was clear and cross referenced in fuel and operations logs. The inspectors noted that the fuel had not been moved since June 1999.

c. Conclusions

Fuel handling activities and the documentation thereof were acceptable and in accordance with procedural and TS requirements.

**6. Procedures**

a. Inspection Scope (IP 69001)

The inspectors reviewed selected aspects of the following to ensure that the requirements of TS Section 6.3 were met:

- administrative controls for changing procedures
- records of changes and temporary changes
- Reactor Safety Review Subcommittee (RSRS) meeting minutes from September 2003 through March 2005
- UFTR SOP-0.1, "Operating Document Controls," Rev 3, dated September 2003

- UFTR SOP-0.5, "UFTR Quality Assurance Program," Rev 3, dated February 2003, latest TCN dated December 2003
- UFTR SOP-0.5, Attachment B-3, "Review of Standard Operating Procedure Manuals For Completeness," Rev 3, dated February 2003

b. Observations and Findings

Operational procedures were available for those tasks and items required by TS Section 6.3. The procedures were adequate to perform reactor and other operations which they covered. The licensee controlled changes and temporary changes to procedures, and the associated review and approval processes, by use of administrative procedures UFTR SOPs-0.1 and -0.5. The inspectors reviewed changes and temporary changes to selected procedures. Temporary deviations from the items in the daily checkouts were allowed so long as the change did not affect TS required systems. The procedures allow for these changes provided the facility director and/or reactor manager is fully cognizant of the deviating condition. The changes and temporary changes had been controlled, and approved and reviewed by the RSRs committee as required. The inspectors reviewed training records and interviewed the staff, and determined that the training of personnel on procedures and subsequent changes to procedures was effective. The inspectors determined that use of and adherence to the procedures was acceptable. Independent reviews of the procedures are conducted on a biennial basis to ensure that all procedures are complete and contain the latest changes.

c. Conclusions

The inspectors determined that the procedural change, control, and implementation program was acceptably maintained as required by TS and the applicable procedures.

## 7. Maintenance and Surveillance

a. Inspection Scope (IP 69001)

The inspectors reviewed selected aspects of:

- Maintenance Log Pages for 2003-2005
- surveillance, calibration, and test data sheets and records
- reactor operations, periodic checks, tests, and verifications
- UFTR SOP-0.2, "Control of Maintenance," Rev 5, dated September 2003
- UFTR SOP-0.5, "UFTR Quality Assurance Program," Rev 3, dated February 2003, latest TCN dated December 2003
- UFTR SOP-E.2, "Alterations to Reactor Shielding and Graphite Configuration," Rev 4, dated April 2002
- UFTR SOP-E.4, "UFTR Nuclear Instrumentation Calibration Check," Rev 3, dated March 2001, latest TCN dated March 2004
- UFTR SOP-E.7, "Measurement of Temperature Coefficient of Reactivity," Rev 1, dated October 2003

- UFTR SOP-E.8, "Verification of UFTR Negative Void Coefficient of Reactivity," Rev 1, dated April 2002

b. Observations and Findings

(1) Maintenance

The inspectors reviewed the maintenance records related to 2003, 2004 and 2005 scheduled and unscheduled preventative, corrective, and modification maintenance activities. This review indicated that all maintenance activities were controlled and documented in the maintenance and/or operations log consistent with the procedural requirements. Implementation of any changes to equipment, systems, tests or experiments are required to be reviewed by Level 2 or 3 management and two other reviewers who are SRO's. Prior to the reduction in operations staffing at the facility approximately one month ago, the Facility Director and the other SRO on staff conducted the reviews of changes to equipment, systems, tests or experiments. Due to the other qualified SRO leaving the facility, maintenance reviews are performed by the Facility Director and the SRO trainee, who is well qualified to conduct these reviews due to previous experience. These reviews will be closely monitored to ensure that they are being conducted in accordance with facility procedures by qualified personnel. This issue will be considered by the NRC as an Inspector Follow-up Item (IFI) and will be reviewed during the next inspection at the facility (IFI 50-083/2005-201-02). After the maintenance items were completed, system operational checks were required to be performed to ensure the affected systems functioned before returning them to service.

While the licensee was conducting a daily checkout in preparation for reactor operations, the linear power channel chart recorder pen was discovered to be not operable. The facility director immediately cancelled reactor operations and initiated a maintenance review for the affected system in accordance with procedures. The inspectors observed a portion of the investigation and verified that the facility staff conducted the tests in a safe manner. Facility operations staff later determined that a disable switch had been depressed before the daily checkout thus disabling the linear power channel chart recorder pen.

(2) Surveillance

The inspectors determined that selected daily, monthly, annual, other periodic checks, tests, verifications, and calibrations for TS-required surveillances and LCOs were completed as stipulated. Surveillances, LCOs, and calibration reviews were completed on schedule and performed in accordance with licensee procedures. All the recorded results were within the TS and procedurally prescribed parameters and in close agreement with the previous surveillance results. The records and logs reviewed were accurate, complete, and being maintained as required. All values checked by the inspectors satisfied the limits/parameters listed in the procedure or checklist.

While observing the daily checkout in preparation for reactor operations, the inspectors asked if one of the surveillances was being completed as required by TSs. TS Table 4.1 requires that the licensee test the multiple blade withdrawal inhibit interlock for any two safety blades in automatic mode. The licensee conducts the test for pulling any two or more blades simultaneously in manual mode on the daily checkout. When asked if they conduct the test in automatic mode, the licensee communicated that the circuit design of the control blade manipulations go through one common point for manual and automatic mode. The blade withdrawal interlock is the same for both modes and can be tested in the manual mode to ensure that it will work in automatic mode.

c. Conclusions

Based on the records reviewed, the inspectors determined that: 1) the licensee's maintenance program was being implemented as required, and 2) the licensee's surveillance program and their associated calibrations and verifications satisfied TS requirements.

**8. Design Control**

a. Inspection Scope (IP 69001)

The inspectors reviewed selected aspects of:

- facility design changes and records for the past two years
- facility configuration and associated records
- UFTR SOP-0.1, "Operating Document Controls," Rev 3, dated September 2003
- UFTR SOP-0.2, "Control of Maintenance," Rev 5, dated September 2003
- UFTR SOP-0.3, "Control of Documentation of UFTR Modifications," Rev 1, dated October 1999, TCN dated September 2003
- UFTR SOP-0.4, "10 CFR 50.59 Evaluation and Determination," Rev 2, dated July 2000, TCN dated September 2003
- UFTR Form SOP-0.4A, "10 CFR 50.59 Evaluation and Determination," Rev 3, dated February 2003, latest TCN dated September 2003
- UFTR SOP-0.5, "UFTR Quality Assurance Program," Rev 3, dated February 2003, latest TCN dated December 2003

b. Observations and Findings

Facility design changes were controlled by UFTR SOPs-0.3 and -0.4. The inspectors confirmed that questions posed following a review by the RSRS and replies from the reactor staff were documented and incorporated into the modification packages using the appropriate form, UFTR Form SOP-0.4A.

The inspectors also reviewed the 10 CFR 50.59 evaluations and corresponding design change packages for various changes. From these reviews, the inspectors determined that the facility design change evaluations had adequate supporting documentation and information. Additionally, the inspectors found that the

10 CFR 50.59 reviews and approvals conducted by the RSRS were focused on safety and met TS and UFTR procedure requirements. Post installation verification testing of the systems was thorough and adequately documented when completed. Procedure and drawing changes were included in the change packages and were consistent with TS and UFTR requirements for facility changes.

c. Conclusions

Based on the records reviewed, the inspectors determined that the licensee's design change program was being implemented as required.

**9. Operator Requalification**

a. Inspection Scope (IP 69001)

To verify that the licensee was complying with the requirements of the operator requalification program, the inspectors reviewed selected aspects of:

- UFTR Operator Requalification Plan submitted June 6, 2003
- the effective dates of current operator licenses
- operator training records
- physical examination records
- operator competence evaluation and written examination records
- operator active duty status
- UFTR SOP-0.8, "Control and Documentation of Operator Licensing Requalification Training and Examination," Rev 2, dated September 2003

b. Observations and Findings

The only currently licensed Senior Reactor Operator is the Facility Director who was successfully completing the training, reactivity manipulations, and supervisory responsibilities as required by the NRC-approved requalification plan. Other licensed individuals who were in the requalification program during this inspection period also completed all of the required components. The licensee was conducting training in the specified areas and completed seven out of the nine topics required to be covered from June 2003 - June 2005. Individual training records, the Requalification Schedule, and operator active duty status records contained the documentation required by the program. Review of records indicated that operator performance and competence evaluations had been given in the form of annual operations/walk-through examinations and biennial written examinations.

c. Conclusions

The requirements of the Operator Requalification Plan were being met and the plan was being acceptably implemented.

## 10. Emergency Preparedness

### a. Inspection Scope (IP 69001)

The inspectors reviewed selected aspects of:

- Emergency Preparedness Plan for the UFTR
- emergency response facilities, supplies, equipment and instrumentation
- training records for licensee staff and support personnel
- offsite support as documented in Letters of Agreement
- emergency drills and exercises for the past two years
- Radiological Emergency Evacuation Drill - Recommendations Tracking Record for 2003-2005
- UFTR SOP-0.5 Attachment Q-3, "Radiological Emergency Evacuation Drill," Rev 3, dated February 2003
- UFTR SOP-B.1, "Radiological Emergency," Rev 5, dated January 1995
- UFTR SOP-B.2, "Emergency Procedure - Fire," Rev 9, dated January 1995
- UFTR SOP-D.1, Appendix III, Table 2, "Emergency Support Center Equipment Inventory," Rev 5, dated December 1993

### b. Observations and Findings

The Emergency Plan (E-Plan) in use at the UFTR facility was the same as the version most recently approved by the NRC, Rev 12, dated February 11, 2002. The E-Plan was audited and reviewed biennially as required. Implementing procedures were reviewed and revised as needed to effectively implement the E-Plan. Emergency facilities, instrumentation, and equipment were being maintained and controlled, and supplies were being inventoried quarterly as required in the E-Plan.

Through records review and through interviews with licensee personnel, emergency responders were determined to be knowledgeable of the proper actions to take in case of an emergency. Agreements with outside response organizations, such as the City of Gainesville Fire Rescue, had been updated biennially and maintained as necessary. Communications capabilities were acceptable with these support groups and had been tested weekly and monthly as stipulated in the E-Plan. Off-site support for the facility was verified to be in accordance with the E-Plan.

Emergency drills had been conducted quarterly as required by the E-Plan. Critiques were written following the drills to document the strengths and weaknesses identified during the exercises and to develop possible solutions to any problems noted. On an annual basis, one large scale emergency evacuation drill is conducted in which an emergency scenario is simulated to test the emergency preparedness of the UFTR facility staff, and to the extent practicable, the response of the campus emergency staff. Emergency preparedness and response training for reactor staff and the fire department was being completed and documented.

The inspectors visited the Shands Hospital and observed the supplies and equipment at this support site that would be available in case of an emergency. There appeared to be a good working relationship between the licensee and this support organization.

c. Conclusions

The emergency response program was conducted in accordance with the requirements stipulated in the Emergency Preparedness Plan.

**11. Exit Meeting Summary**

The inspectors reviewed the inspection results with members of licensee management at the conclusion of the inspection on March 31, 2005. The licensee acknowledged the findings presented and did not identify as proprietary any of the material provided to or reviewed by the inspectors during the inspection.

## PARTIAL LIST OF PERSONS CONTACTED

### Licensee Personnel

M. Berglund            Reactor Operator Trainee  
W. Vernetson         Facility Director

### Other Personnel

J. Lovvorn             Lieutenant, Gainesville Fire Rescue, City of Gainesville  
D. Muerer             MD, Emergency Room Hazardous Materials Physician, Shands Hospital,  
                                 University of Florida  
D. Munroe             University of Florida Radiation Control Officer  
G. Snyder             Assistant University of Florida Radiation Control Officer

## INSPECTION PROCEDURE (IP) USED

IP 69001        Class II Research and Test Reactors

## ITEMS OPENED, CLOSED, AND DISCUSSED

### Opened

50-083/2005-201-01    IFI        Follow-up to verify that the licensee issued the 2001-2002  
Annual Report by April 30, 2005, the 2002-2003 Annual Report  
by May 31, 2005, and the 2003-2004 Annual Report by  
June 30, 2005

50-083/2005-201-02    IFI        Follow-up to closely monitor reviews of any changes to  
equipment, systems, tests or experiments that are required to  
be reviewed by Level 2 or 3 management and two other  
reviewers who are SRO's

### Closed

None

## LIST OF ACRONYMS USED

CFR            Code of Federal Regulations  
E-Plan        Emergency Plan  
IFI            Inspector Follow-up Item  
IP             Inspection Procedure  
LCO           Limiting Conditions for Operation  
MD            Medical Doctor  
NRC           Nuclear Regulatory Commission  
Rev.          Revision/Revised  
RSRS         Reactor Safety Review Subcommittee  
RTR           Research and Test Reactor  
SNM           Special Nuclear Material  
SOP           Standard Operating Procedure  
SRO           Senior Reactor Operator  
TCN           Temporary Change Notice  
TS            Technical Specifications  
UFTR         University of Florida Training Reactor