Approved by OMB[1]
No. 3150-0183
Expires 5/31/07

INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

QUESTIONNAIRE

Oregon

Reporting Period: August 31, 2002 to August 25, 2006

Note: If there has been no change in the response to a specific question since the last IMPEP questionnaire, the State or Region may copy the previous answer if appropriate.

A. COMMON PERFORMANCE INDICATORS

I. Technical Staffing and Training

1. Please provide the following organization charts, including names and positions:

   (a) A chart showing positions from Governor down to Radiation Control Program Director; ***(See Attachment 1)***

   (b) A chart showing positions of current radiation control program including management; ***(See Attachment 2)*** and

   (c) Equivalent charts for sealed source and device, (N/A - Oregon turned back to NRC) low level radioactive waste and uranium recovery programs, ***(Under jurisdiction of the Oregon Department of Energy)***

2. Please provide a staffing plan, or complete a listing using the suggested format below, of the professional (technical) person-years of effort applied to the agreement or radioactive material program by individual. Include the name, position, and, for Agreement States, the fraction of time spent in the following areas: administration, materials licensing & compliance, emergency response, LLW, U-mills, other. If these regulatory responsibilities are divided between offices, the table should be consolidated to include all personnel contributing to the radioactive materials program. Include all vacancies and identify all senior personnel assigned to monitor work of junior personnel. If consultants were used to carry out the program's radioactive materials responsibilities, include their efforts. The table heading should be:

Name	Position	Area of Effort	FTE%

   (See Attachment 3)

[1] Estimated burden per response to comply with this voluntary collection request: 53 hours. Forward comments regarding burden estimate to the Records Management Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (3150-0183), Office of Management and Budget, Washington, DC 20503. If an information collection does not display a currently valid OMB control number, NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

3. Please provide a listing of all new professional personnel hired since the last review, indicate the degree(s) they received, if applicable, and additional training and years of experience in health physics, or other disciplines, if appropriate.
N/A - All staff listed in Attachment 3 were hired prior to last review.

4. Please list all professional staff who have not yet met the qualification requirements of license reviewer/materials inspection staff (for NRC, Inspection Manual Chapter (IMC) 1246; for Agreement States, please enclose a copy of your qualification and training procedure. If you do not have a written procedure please describe your qualifications requirements for materials license reviewers and inspectors). For each, list the courses or equivalent training/experience they need to attend and a tentative schedule for completion of these requirements.
(See Attachment 4)

5. Please identify the technical staff who left the Agreement State/Regional DNMS program during this period.
None

6. List the vacant positions in each program, the length of time each position has been vacant, and a brief summary of efforts to fill the vacancy.
Two vacancies in RPS Section:
One vacancy in the X-ray program staffing authorization - May require fee changes before authorization to fill position will be granted.
One vacancy for RPS Section Manager's Administrative Assistant - May require fee changes before authorization to fill position will be granted.

7. Does the Agreement State program have an oversight board or committee which provides direction to the program and is composed of licensees and other members of the public? If so, please describe the procedures used to avoid a conflict of interest.
Yes. ORS 453.645 authorizes a Radiation Advisory Committee made up of 8 members representative of licensed users of radiation sources in Oregon. Current members include the following: One Nuclear Medicine Physician, one Dental Radiology instructor (Dentist), two medical physicists, one university RSO, one broad scope industrial RSO, one Tanning industry member, one Nuclear Engineering instructor
(See Attachment 5)

II. Status of Materials Inspection Program

8. Please identify individual licensees or categories of licensees the State/Region is inspecting more or less frequently than called for in IMC 2800 and state the reason for the difference.

Medical licensees are inspected at a three year maximum with the exception of cardiac imaging at 4 years. Priority 1 and 2 medical licensees remain at 1 and 2 years respectively.

9. Please provide for the review period, the number of Priority 1, 2, and 3 inspections as identified in IMC 2800 that were completed and the number of initial inspections that were completed.

PRIORITY	COMPLETE	FIELD	INITIAL	SECURITY
1	41	5	3	1
2	36	0	9	1
3	70	6	5	0

10. Please submit a table, or a computer printout, that identifies inspections of Priority 1, 2, and 3 licensees, and initial inspections that are presently overdue or which were conducted at intervals that exceed the IMC 2800 frequencies over the course of the entire review period. (See STP Procedure SA-101, *Reviewing the Common Performance Indicator, Status of Materials Inspection Program*, for detailed guidance in preparing this information).

At a minimum, the list should include the following information for each inspection that is overdue or conducted overdue during the review period:

(1) Licensee Name
(2) License Number
(3) Priority
(4) Last inspection date or license issued date if initial inspection
(5) Date Due
(6) Date Performed
(7) Amount of Time Overdue
(8) Date inspection findings issued

LIC_NBR	ACTION	INSP_DT	INSP INTL	PRIORITY	PREVIOUS_DT	TOTAL DAYS	RATIO	LICENSEE
90509	Complete	23-Mar-05	JIS	1	07-Aug-03	594	1.63	Cardinal Health
90001	Complete	04-Dec-02	KHS	2	31-May-00	917	1.26	TDY Industries, Inc.

Inspection findings are issued at the inspection close-out meeting using Form 591.

11. If you have any overdue inspections, do you have an action plan for completing them? If so, please describe the plan or provide a written copy with your response to this questionnaire.

There are currently no inspections greater than 125% of their inspection frequency.

12. Please provide the number of reciprocity licensees that were candidates for inspection per year as described in NRC IMC 1220 and the number of candidate reciprocity inspections that were completed each year during the review period.

YEAR	ENTRIES	INSPECTIONS
2002	**11**	**4**
2003	**20**	**16**
2004	**15**	**13**
2005	**23**	**16**
2006	**20**	**15**

III. Technical Quality of Inspections

13. What, if any, changes were made to your written inspection procedures during the reporting period?

We use guidance in the NRC Inspection Manual. **Inspection procedures for the Industrial Radiography and Portable Gauge Inspections have been modified to utilize Performance based inspection criteria. An onsite Inspecting for Performance course was held in Portland, OR for our staff.**

14. Prepare a table showing the number and types of supervisory accompaniments made during the review period. Include:

Inspector performance is reviewed with the Radioactive Materials Licensing Manager after inspections. This is accomplished using an Inspector Debrief Form.

Inspector	Supervisor	License Category	Date
Justin Spence	***Edwin L. Wright***	***Broad Scope A***	***3/18/06***
Kevin Siebert	***Ray Jester***	***Portable Gauge***	***12/01/05***

15. Describe internal procedures for conducting supervisory accompaniments of inspectors in the field.

Reviews are primarily conducted using the Inspector Debrief Forms. Occasional field accompaniments are made as schedules permit.

16. Describe or provide an update on your instrumentation, methods of calibration and laboratory capabilities. Are all instruments properly calibrated at the present time? Were there sufficient calibrated instruments available through the review period?

Instrumentation is calibrated at Oregon State University. We calibrate instruments annually with one fourth of them done each quarter. See Attachment 6.

IV. Technical Quality of Licensing Actions

17. How many specific radioactive material licenses does the Program regulate at this time?

We have 334 active Specific Licensees, 8 In-Vitro, 76 General Licensees and 54 active Reciprocity Licensees for a total of 472 GL and Specific licensees.

18. Please identify any major, unusual, or complex licenses which were issued, received a major amendment, were terminated, decommissioned, submitted a bankruptcy notification or renewed in this period. Also identify any new or amended licenses that now require emergency plans.

The only difficult license issued during this reporting period was Teledyne Wah-Chang (primarily due to insufficient financial assurance).

19. Discuss any variances in licensing policies and procedures or exemptions from the regulations granted during the review period.

We authorized Oregon Health Sciences University to calibrate laboratory survey meters, used for end of day surveys, at two year intervals. These instruments are constancy checked on a routine basis by their HP staff.

Occasionally we authorize portable gauge reciprocity licensees to remain in the state for greater than 30 days. They must provide information on storage and security measures implemented to protect the devices.

20. What, if any, changes were made in your written licensing procedures (new procedures, updates, policy memoranda, etc.) during the reporting period?

We follow guidance in NUREG 1556 Volume 20 for medical licenses

21. Identify by licensee name, license number and type, any renewal applications that have been pending for one year or more. Please indicate why these reviews have been delayed.

Two renewal applications were greater than one year during this reporting period:
***1. Teledyne Wah-Chang, License number ORE-90001. (This renewal was held up awaiting an adequate decomissioning review and financial assurance commitment.*) **This license has been issued.**
2. PSI, License number ORE 90056 (currently under review).

V. Responses to Incidents and Allegations

22. For Agreement States, please provide a list of any reportable incidents not previously submitted to NRC (See STP Procedure SA-300, Reporting Material Events for additional guidance, OMB clearance number 3150-0178). The list should be in the following format:

Licensee Name License # Date of Incident/Report Type of Incident

NONE

23. During this review period, did any incidents occur that involved equipment or source failure or approved operating procedures that were deficient? If so, how and when were

other State/NRC licensees who might be affected notified? For States, was timely notification made to NRC? For Regions, was an appropriate and timely PN generated? For Agreement States, was information on the incident provided to the agency responsible for evaluation of the device for an assessment of possible generic design deficiency? Please provide details for each case.

NMED Item Number 040324 reported a problem with a Novoste intravascular brachytherapy device. Although procedures had not been properly implemented, a contributing factor was a poor catheter design.

24. Identify any changes to your procedures for handling allegations that occurred during the period of this review.

We follow NRC guidance on allegations.

VI. General

25. Please prepare a summary of the status of the State's or Region's actions taken in response to the comments and recommendations following the last review. Provide the results of any program audits (including self audits) completed during the review period.

Self audits were not completed in a timely manner due to multiple assignments and rulemaking efforts to maintain NRC Compatibility. The RPS Section was also moved from the 2nd to the 6th floor over a six month transition period during the past year with a 40 year records review and archiving project completed prior to the move.

26. Provide a brief description of your program's strengths and weaknesses. These strengths and weaknesses should be supported by examples of successes, new initiatives, problems or difficulties which occurred during this review period.

Program Strengths: The Oregon RML Program has an excellent trained staff with multi-faceted backgrounds to compliment the varied nature of the radioactive materials regulatory oversight requirements. Staff backgrounds include radiochemistry, health physics, industrial radiography and well-logging experience, High technology and extensive computer systems knowledge. The current staff is well qualified to handle all licensing and inspection requirements as well as incident response on a daily basis.

Program Weaknesses: Loss of assigned IT staff member has significantly hampered development of an interactive computerized management system. The current RPS computer data bases reside on two different software systems and will be forced into yet another system in the future. We have lost the flexibility to rapidly provide meaningful data reports with assured accuracy and are now dependent upon externally controlled data systems without dedicated IT staff assigned to RPS management control. Security control of radioactive materials data is also extremely vulnerable under the current centralized data system with no RPS management oversight to prevent misuse of data contained in these systems.

Sustained funding support is also critical to long term program viability. A recent fee increase was approved by the Radiation Advisory Committee and Department of Administrative Services and is now subject to legislative review and required support to maintain current funding levels. Without legislative verification of this

fee change, fees will revert to former levels in 2007-2008. However, during public hearings on this fee change request there was no contrary testimony provided by licensees or organizations.

B. NON-COMMON PERFORMANCE INDICATORS

I. Legislation and Program Elements Required for Compatibility

27. Please list all currently effective legislation that affects the radiation control program.
Legislative Concept PH-10 Requests fee increases for Tanning and X-ray program registration fees.
SB 333 fee bill requires legislative review of all fee changes.

28. Are your regulations subject to a "Sunset" or equivalent law? If so, explain and include the next expiration date for your regulations.
No. However, we will 'open' our statutory authority for the above fee increase requests for Tanning and X-Ray registration fees next session.

29. Please review and verify that the information in the State Regulation Status sheet found at http://www.hsrd.ornl.gov/nrc/special/regs/OR_SRSchart.pdf is correct. For those regulations that have not been adopted by the State, explain why they were not adopted, and discuss actions being taken to adopt them.

The status sheet has not been up-dated to reflect current rule filings. A current copy of the rules will be filed with the NRC before August 31, 2006. All issues identified by the NRC in the recent review of our proposed rules have been addressed with the exception of regulations for generally licensed devices still under review for increased compatibility. Additionally, Radiation Protection Services currently cannot assess fines or civil penalties under the current Oregon Revised Statutes. A legislative proposal for that authorization has been presented for the next legislative session beginning in January 2007.

Under Oregon's medical privacy procedures and freedom of information policy, Radiation Protection Services no longer maintains patient names or other patient information in our files. Therefore, we cannot maintain that information for medical events in the same format required in NRC regulations. We do have the ability to contact the licensee at any time if that information is required for regulatory purposes.

If legally binding requirements were used in lieu of regulations, please describe their use.

30. If you have not adopted all amendments within three years from the date of NRC rule promulgation, briefly describe your State's procedures for amending regulations in order to maintain compatibility with the NRC, showing the normal length of time anticipated to complete each step.

RATS ID 2001-1 has not been completely implemented. Most of the requirements in 10 CFR Part 32 are less restrictive than our current rules. Based on historical information, reducing the current requirements to meet the proposed regulations in 10 CFR Part 32 is not consistent with good health and safety practices for the workers, the public or the environment.

II. Sealed Source and Device Program

31. Prepare a table listing new and amended (including transfers to inactive status) SS&D registrations of sealed sources and devices issued during the review period.

NONE. Authorization to perform SS&D evaluations was rescinded to the NRC.

The table heading should be:

SS&D Registry Number	Manufacturer, Distributor or Custom User	Product Type or Use	Date Issued	Type of Action

32. What guides, standards and procedures are used to evaluate registry applications?

N/A

33. Please include information on the following questions in Section A, as they apply to the Sealed Source and Device Program:

N/A

Technical Staffing and Training - Questions 1-7
Technical Quality of Licensing Actions - Questions 17-21
Responses to Incidents and Allegations - Questions 22-24

III. Low-Level Radioactive Waste Disposal Program

34. Please include information on the following questions in Section A, as they apply to the Low-Level Radioactive Waste Disposal Program:

N/A

Technical Staffing and Training - Questions 1-7
Status of Materials Inspection Program - Questions 8-11
Technical Quality of Inspections - Questions 13-16
Technical Quality of Licensing Actions - Questions 17-21
Responses to Incidents and Allegations - Questions 22-24

IV. Uranium Recovery Program

35. Please include information on the following questions in Section A, as they apply to the Uranium Recovery Program:

Technical Staffing and Training - Questions 1-7
Status of Materials Inspection Program - Questions 8-11
Technical Quality of Inspections - Questions 13-16
Technical Quality of Licensing Actions - Questions 17-21
Responses to Incidents and Allegations - Questions 22-24

MATERIALS REQUESTED TO BE AVAILABLE FOR
THE ONSITE PORTION OF AN IMPEP REVIEW

Please have the following information available for use by the IMPEP review team when they arrive at your office:

- ☐ List of open license cases, with date of original request, and dates of follow up actions
- ☐ List of licenses terminated during review period.
- ☐ Copy of current log or other document used to track licensing actions
- ☐ Copy of current log or other document used to track inspections
- ☐ List of Inspection frequency by license type
- ☐ List of all allegations occurring during the review period. Show whether the allegation is open or closed and whether it was referred by NRC

ALSO, PLEASE HAVE THE FOLLOWING DOCUMENTS AVAILABLE:

- ☐ All State regulations
- ☐ Statutes affecting the regulatory authority of the state program
- ☐ Standard license conditions
- ☐ Technical procedures for licensing, model licenses, review guides
- ☐ SS&D review procedures
- ☐ Instrument calibration records
- ☐ Inspection procedures and guides
- ☐ Inspection report forms
- ☐ Records of results of supervisory accompaniments of inspectors
- ☐ Emergency plan and communications list
- ☐ Procedures for investigating allegations
- ☐ Procedures for investigating incidents
- ☐ Enforcement procedures, including procedures for escalated enforcement, severity levels, civil penalties (as applicable)
- ☐ Job descriptions