May 20, 2009

Mr. Jim Craig, Director
Office of Health Protection
Mississippi State Department
of Health
570 East Woodrow Wilson
P.O. Box 1700
Jackson, MS 39215-1700

Dear Mr. Craig:

The U.S. Nuclear Regulatory Commission (NRC) uses the Integrated Materials Performance Evaluation Program (IMPEP) in the evaluation of Agreement State programs. Enclosed for your review is the draft IMPEP report that documents the results of the Agreement State review held in Mississippi on April 20-24, 2009. I was the team leader for the review. The review team's preliminary findings were discussed with you and Art Sharpe, Director, Emergency Planning & Response; on the last day of the review. The review team's proposed recommendations are that the Mississippi Agreement State Program be found adequate to protect public health and safety and compatible with NRC's program.

NRC conducts periodic reviews of Agreement State programs to ensure that public health and safety are adequately protected from the potential hazards associated with the use of radioactive materials and that Agreement State programs are compatible with NRC's program. The process, titled IMPEP, employs a team of NRC and Agreement State staff to assess Agreement State and NRC Regional radioactive materials programs. All reviews use common criteria in the assessment and place primary emphasis on performance. Three additional areas applicable to your program have been identified as non-common performance indicators and are also addressed in the assessment. The final determination of adequacy and compatibility of each program, based on the review team's report, is made by a Management Review Board (MRB) composed of NRC managers and an Agreement State program manager, who serves as a liaison to the MRB.

In accordance with procedures for implementation of IMPEP, we are providing you with a copy of the review team's draft report for your review and comment prior to submitting the report to the MRB. Comments are requested within 4 weeks from your receipt of this letter. This schedule will permit the issuance of the final report in a timely manner that will be responsive to your needs.

The team will review your response, make any necessary changes to the report, and issue it to the MRB as a proposed final report. Coordinating with your staff, I scheduled the Mississippi MRB meeting for July 13, 2009, from 2:00-3:30 p.m. EDT. NRC will provide invitational travel for you or your designee to attend the MRB meeting at NRC Headquarters in Rockville, Maryland. NRC has video conferencing capability if it is more convenient for the State to participate through this medium. Please contact me if you desire to establish a video conference for the meeting.

If you have any questions regarding the enclosed report, please contact me at (630) 829-9650.

Thank you for your cooperation.

Sincerely,

/RA/

Aaron T. McCraw
IMPEP Project Manager
Division of Materials Safety and State Agreements
Office of Federal and State Materials
and Environmental Management Programs

Enclosure:
Draft Mississippi IMPEP Report

cc w/encl: Art Sharpe, Director
Emergency Planning & Response

B.J. Smith, Director
Division of Radiological Health

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United States Nuclear Regulatory Commission

Protecting People and the Environment

INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

REVIEW OF THE MISSISSIPPI AGREEMENT STATE PROGRAM

April 20-24, 2009

DRAFT REPORT

Enclosure

1.0 INTRODUCTION

This report presents the results of the review of the Mississippi Agreement State Program. The review was conducted during the period of April 20-24, 2009, by a review team comprised of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the State of Florida. Team members are identified in Appendix A. The review was conducted in accordance with the "Implementation of the Integrated Materials Performance Evaluation Program and Rescission of Final General Statement of Policy," published in the *Federal Register* on October 16, 1997, and NRC Management Directive 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)," dated February 26, 2004. Preliminary results of the review, which covered the period of May 17, 2005, to April 24, 2009, were discussed with Mississippi managers on the last day of the review.

[A paragraph on the results of the Management Review Board (MRB) meeting will be included in the final report.]

The Mississippi Agreement State Program is administered by the Division of Radiological Health (the Division). The Division is part of the Office of Health Protection under the Department of Health (the Department). Organization charts for the State, the Department, and the Division are included as Appendix B.

At the time of the review, the Mississippi Agreement State Program regulated 333 specific licenses authorizing byproduct, source, and certain special nuclear materials. The review focused on the radioactive materials program as it is carried out under the Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between NRC and the State of Mississippi.

In preparation for the review, a questionnaire addressing the common and applicable non-common performance indicators was sent to the Division on December 29, 2008. The Division provided its response to the questionnaire on April 1, 2009. A copy of the questionnaire response can be found in NRC's Agencywide Documents Access and Management System (ADAMS) using the Accession Number ML091260125.

The review team's general approach for conduct of this review consisted of: (1) examination of the Division's response to the questionnaire; (2) review of applicable Mississippi statutes and regulations; (3) analysis of quantitative information from the Branch's databases; (4) technical review of selected regulatory actions; (5) field accompaniments of two inspectors; and (6) interviews with staff and managers. The review team evaluated the information gathered against the established criteria for each common and applicable non-common performance indicator and made a preliminary assessment of the Mississippi Agreement State Program's performance.

Section 2.0 of this report covers the State's actions in response to open recommendations made during previous reviews. Results of the current review of the common performance indicators are presented in Section 3.0. Section 4.0 details the results of the review of the applicable non-common performance indicators, and Section 5.0 summarizes the review team's findings and recommendations. The review team's recommendations are comments that relate

directly to program performance by the State. A response is requested from the State to all recommendations in the final report.

2.0 STATUS OF ITEMS IDENTIFIED IN PREVIOUS REVIEWS

During the previous IMPEP review, covering the period of May 26, 2001, to May 20, 2005, the review team made two recommendations regarding to program performance. The current status of the recommendations is as follows:

1. The review team recommends that the State take additional actions, such as increasing salary and benefits, to stabilize staffing and ensure continued successful program implementation. (Section 3.1 of the 2005 IMPEP Report)

   Current status: Since the 2005 review, the Division had one salary increase, a $1,500 incentive given to all State employees. This increase only affected those individuals that were with the State at the time; therefore, the increase did not alter the starting salary structure for new hires. Because of this, the staff retention issue that was identified during previous reviews continues to plague the Division, as discussed in greater detail in Section 3.1 of this report. The current review team found little evidence of upper management action to address this issue. This recommendation remains open.

2. The review team recommends that the State ensure that individuals who make allegations are informed of the resolution of their concerns. (Section 3.5 of the 2005 IMPEP Report)

   Current status: During the 2005 review, the Division revised its allegation procedure to require notification to the alleger of the resolution of the concerns. The review team's evaluation of allegation casework revealed that, when the alleger's identity was known, the alleger was appropriately notified of the resolution of their concern(s). This recommendation is closed.

3.0 COMMON PERFORMANCE INDICATORS

Five common performance indicators are used to review NRC Regional and Agreement State radioactive materials programs. These indicators are: (1) Technical Staffing and Training, (2) Status of Materials Inspection Program, (3) Technical Quality of Inspections, (4) Technical Quality of Licensing Actions, and (5) Technical Quality of Incident and Allegation Activities.

3.1 Technical Staffing and Training

Issues central to the evaluation of this indicator include the program's staffing level and staff turnover, as well as the technical qualifications and training histories of the staff. To evaluate these issues, the review team examined the Division's questionnaire response relative to this indicator, interviewed Division and Branch managers and staff, reviewed job descriptions and training records, and considered any possible workload backlogs.

The Division, which administers the Agreement State program, is headed by the Division Director and is comprised of three branches: the Radioactive Materials Branch (the Branch), the X-Ray Branch, and the Environmental Branch. Each branch has a director that reports to the Division Director.

The Branch is responsible for the day-to-day operations of the Agreement State program, such as licensing, inspecting, and responding to radioactive materials incidents. The Branch is authorized for five positions to perform its duties: the Branch Director position and four Health Physicist positions.

Each of the Health Physicist positions may be filled at the Health Physicist Trainee, the Health Physicist, or the Health Physicist Senior level, depending on the candidate's education and experience. Candidates for technical positions are required to have a Bachelor's degree in science for the Health Physicist Trainee level and a Master's degree and/or additional radiation-related work experience for positions beyond the Health Physicist Trainee level. A Health Physicist Trainee can be promoted to a Health Physicist and then to a Health Physicist Senior within 3 years, with satisfactory performance.

During the review period, four technical staff members left the program. One staff member transferred to another branch within the Division, and the other three left the Branch for other career opportunities. Of the three that left the Division, two were Health Physicist Seniors that took a considerable number of years of experience with them, and the other was a Health Physicist Trainee that left the Branch after just 4 months of employment.

Also during the review period, the former Division Director retired. In addition to maintaining his own duties and responsibilities, the former Branch Director assumed the responsibilities of the Division Director position until the position was filled. The Division Director position remained vacant for approximately a year before the former Branch Director was officially promoted to the Division Director position in 2008. In turn, the Division Director continued to execute the responsibilities of his former position until that position was filled almost a year later. In February 2009, a Health Physicist Senior was promoted to the Branch Director position.

The staff departures during this review period constituted a high degree of staff turnover relative to the size of the program. The Division Director and the Branch Director are the only individuals in the program that were with the program at the time of the last review. Previous review teams also noted a high degree of staff turnover in the program. Attributing the high turnover rate to the State's low salaries, the 2005 review team made a recommendation to the State to address the high turnover rate by increasing salaries or offering other incentives. As indicated in Section 2.0, the State had a one-time salary increase for existing employees during the review period. The increase did not affect the State's starting salary structure, and therefore, the State's starting salaries remained comparatively low to neighboring Agreement State programs and private industry. Based on information obtained from the State's website, the review team found that the salaries for the Branch's inspectors are also comparatively low to inspectors in other units within the State government. Until the Branch's salary issue is addressed, the review team believes that the Branch will continue to struggle to retain a full complement of qualified individuals. Thus, the review team kept the recommendation to address staff turnover from the 2005 review open.

The high level of turnover limited the availability of resources to address the Branch's workload. For the past year, the Division Director and the Branch Director were the only qualified inspectors and license reviewers in the program and were performing all of the technical work in the Branch. At the time of the review, the Division Director was spending approximately 75 percent of his time performing work for the Branch, including inspections and licensing reviews. Because of the efforts of these two individuals, there was no backlog of any high-priority regulatory actions at the time of the review. As discussed in Section 3.2 of this report, the review team identified evidence of a backlog of low-priority inspections; however, the review team concluded that the Branch is appropriately prioritizing its work given its limited resources. The review team also recognized that, primarily because of the efforts of these two individuals, the Branch was able to address a number of federally mandated security initiatives that were implemented during the review period and complete all of the required actions in a timely manner. The Branch also used the services of a contractor, the former Division Director, to address the regulation amendment workload, as discussed in Section 4.1.2 of this report. The review team ultimately concluded that the Branch's staffing level will be adequate for its workload when fully staffed and qualified.

Despite the State's low starting salary structure, the Branch has not experienced difficulty in recruiting competent individuals for the Health Physicist positions. At the time of the review, two of the four Health Physicist positions were filled by a Health Physicist Senior and a Health Physicist Trainee. The Health Physicist Senior transferred to the Branch from the Environmental Branch around April 2007, and the Health Physicist Trainee was hired in March 2009. At the time of the review, there were also two vacancies in the Branch. The vacancies have been open since February 1, 2009, when the Branch Director received his promotion; and March 6, 2009, when a Health Physicist Trainee tendered her resignation. At the time of the review, the Branch was in the process of filling both vacancies. Subsequent to the review, the Division Director notified the review team that one of the vacancies was filled and that the Branch Director was conducting interviews for the other vacancy. During the review, the review team cautioned State and Division managers to be wary of the ease of recruiting competent individuals during the nation's economic downturn, as it may not be indicative of the program's ability to recruit competent individuals in the future. To ensure the long-term health of the program and to promote stability in the Branch, the State needs to take action to address the staff turnover issue.

The Branch has a documented training plan for technical staff that is consistent with the requirements in the NRC/Organization of Agreement States Training Working Group Report and NRC's Inspection Manual Chapter (IMC) 1246, "Formal Qualification Programs in the Nuclear Material Safety and Safeguards Program Area." The Branch uses on-the-job training to supplement formal coursework. As part of the Branch's qualification process, new staff members are assigned increasingly complex licensing and inspection duties under the direction of the Division Director, the Branch Director, or senior staff. After demonstrating proficiency in an area, the Division Director or the Branch Director provides oral authorization for the individual to independently perform regulatory actions. The review team interviewed technical staff members about the Branch's qualification process and found the staff to be cognizant of the required training courses and expectations. The review team examined the staff training files and found that there were records of the training courses and accompaniments that each individual had completed toward their qualification in their respective file; however, the qualifications of each individual were difficult to ascertain from the files because there was no

documentation of supervisor approval of the individual's qualifications. The review team discussed with the Division Director the benefits of having a formal qualification journal for the technical staff that would clearly indicate each individual's qualifications and would serve as a written record of the supervisor's endorsement. The Division Director indicated that he will consider the use of a qualification journal for the technical staff. Overall, the staff training files demonstrated the Branch's commitment to training and qualifying technical staff.

Given the high rate of turnover in the Branch, the review team discussed with the Division Director the value of having a knowledge management program. The review team observed that many of the Branch's policies and procedures were outdated and in need of revision. Because of the Branch's focus on completing high-priority regulatory actions, the revision of existing procedures and the development of new procedures had been set aside. Instead, the review team observed that the Branch primarily uses verbal communication to implement new policies and practices. Specific examples of where the Branch relied on verbal communications can be found in Sections 3.3 and 3.4 of this report. This practice can be effective in a small program where there is limited turnover; however, in a program with a high turnover rate, the documentation of policies and practices is very important. The review team determined that the vast majority of the program's knowledge resides in the Division Director and the Branch Director. In the event of one of these individuals leaving the Division, the immediate future of the Mississippi Agreement State Program would be uncertain. Nevertheless, the review team believes that the Branch has appropriately focused its limited resources on the activities that are directly related to ensuring the adequate protection of public health and safety; however, when the Branch becomes fully staffed and qualified, it will need to address this concern to ensure the long-term health of the Agreement State program. The review team recommends that the State update its existing procedures and develop new procedures, if necessary, to memorialize the policies and practices of the Agreement State program and to serve as a knowledge management tool.

An important aspect of a knowledge management program is an effective data management system. The Branch has computer-based databases to track licensing and inspection activities; however, the databases have limitations that create inefficiencies in the Branch. The review team observed several lists maintained by the Division Director and the Branch Director, all of which could be automatically generated by an effective data management system. Despite the apparent inefficiencies in the Branch's current data management system, the review team verified that all high-priority regulatory activities were performed in a timely manner. In reviewing information from the Branch's existing databases, the review team identified a number of errors in program codes and inspection due dates. The review team also found that the database is incapable of maintaining historical records, as the records are overwritten upon completion of the inspection and entry of new data. As described in Section 3.2, this limitation caused the review team to evaluate the timeliness of inspections through an inspection casework review. Understanding that this issue may not be addressed until the Branch is fully staffed and qualified, the review team believes that the Branch could gain efficiencies in its data management with a more effective database. The review team recommends that the State implement a reliable and comprehensive licensing and inspection database that serves as an effective planning, tracking, and data management tool.

The review team discussed the appropriate finding for this indicator. The review team considered a finding of unsatisfactory because of the chronic issue of staff turnover and the

apparent lack of upper management action on the issue. In reaching a conclusion on a finding for this indicator, the review team recognized that the actions needed to address the staff turnover issue and to stabilize the Agreement State program are out of the Division's hands. The review team also recognized the efforts of the Division Director and the Branch Director to ensure that public health and safety were adequately protected throughout the review period. The review team did not want to discredit this commendable effort or the Division Director's management of the program, and therefore, believes that a finding of satisfactory, but needs improvement, is the more appropriate finding for this indicator.

Based on the IMPEP evaluation criteria, the review team recommends that Mississippi's performance with respect to the indicator, Technical Staffing and Training, be found satisfactory, but needs improvement.

3.2 Status of Materials Inspection Program

The review team focused on five factors in reviewing this indicator: inspection frequency, overdue inspections, initial inspections of new licenses, timely dispatch of inspection findings to licensees, and performance of reciprocity inspections. The review team's evaluation was based on the Division's questionnaire response relative to this indicator, data gathered from the Branch's databases, an examination of completed inspection casework, and interviews conducted with the Division Director and Branch Director.

The review team compared the Branch's inspection frequencies for various types of licenses to those prescribed by NRC's IMC 2800, "Materials Inspection Program." The Branch's inspection frequencies are generally the same as those prescribed in IMC 2800; however, some categories of licenses are inspected more frequently, including nuclear pharmacy and certain types of medical and academic licenses. In addition, the Branch does not have any inspection intervals longer than 4 years, whereas IMC 2800 prescribes an interval of 5 years for several license types. The Division Director indicated that the reduced inspection intervals were established as a means to put additional emphasis on the protection of public health and safety.

Information regarding inspections conducted during the review period could not be obtained through a review of the Branch's inspection database. The review team attempted to use the database to ascertain the current status of the inspection program; however, the database only contained information related to the most recent inspection performed, because previous inspection information was overwritten each time an inspection was performed and the new information was entered. As a result, the review team reviewed a sample of inspection files to evaluate the timeliness of inspections. Of the 24 high-priority (Priority 1, 2, and 3 licensees and initial) inspections reviewed, 1 inspection was conducted a few days overdue and another was found to be greater than 1 year overdue at the time of the review. For the one that was overdue at the time of the review, the review team noted that the licensee did not have a physical location in Mississippi and had not conducted licensed activities in Mississippi during the inspection interval.

The review team also looked at a small sample of low-priority (Priority 5) inspections. Based on interviews with the Division Director and the Branch Director and a review of a list of low-priority licensees, the review team found sufficient evidence to suggest a growing backlog of low-priority inspections. The Division Director related that this was a management decision to ensure that

high-priority activities were completed in a timely manner. The Division Director was confident that the Health Physicist Trainee can be qualified to perform the low priority inspections in a short timeframe. The Health Physicist Trainee's focus will be addressing the growing backlog once he is qualified.

The review team evaluated the timeliness of the issuance of inspection findings to licensees. Of the 30 inspection findings reviewed, only 1 inspection findings letter was issued to the licensee greater than 30 days after the inspection. In this case, the letter to the licensee did not contain any violations and was issued approximately 2 weeks past the 30-day goal. Most inspection findings were issued very promptly, within a few days of the inspection date.

The Branch also has a database of licensees that filed for reciprocity in Mississippi. Similar to the previously discussed inspection database, the reciprocity database consisted of inspection information that was overwritten with each subsequent inspection. As a result, the database did not have the capability to retrieve the historical information for reciprocity inspections conducted during the review period. The Branch does not identify candidates for inspection based upon the criteria in IMC 1220, "Processing of NRC Form 241 and Inspection of Agreement State Licensees Operating under 10 CFR 150.20." Instead, the Branch attempts to perform as many reciprocity inspections as time and resources allow. Due to the lack of statistical data, the review team could not calculate the percentage of reciprocity inspections of candidate licensees; however, the review team examined inspection casework and inspection schedules and determined that the Branch conducted a considerable number of reciprocity inspections despite being short-staffed at times during the review period.

The review team determined that the Branch did not maintain a list of licensees subject to the Increased Controls. The Branch Director was able to quickly produce a list from memory, based on his knowledge of the licensees. The review team verified this list with the license files. At the time of the review, the Branch had 32 licensees that had been issued the Increased Controls requirements. The Branch did not document a prioritization methodology for performing the initial round of Increased Controls inspections, as requested per All Agreement States Letter STP-05-079, dated November 4, 2005. Instead, the Branch attempted to conduct all inspections when they were due for their routine inspection or as soon as they could possibly be scheduled. Due to the lack of retrievable inspection data, the review team examined all 32 Increased Controls inspection files and found that 28 inspections were completed within 3 years from the date of implementation of the Increased Controls or at the first inspection after issuance of the license. Of the other four files reviewed, one was a new license and its initial Increased Controls inspection was pending, one was an out-of-State licensee that had not performed licensed activities in Mississippi since issuance of the Increased Controls, and two were fixed gauge licensees that do not believe that they meet the criteria for Increased Controls. To date, the Branch has taken the licensees' words that the Increased Controls do not apply. The review team encouraged the Branch to determine whether the Increased Controls are applicable to the two fixed gauge licensees via on-site inspection and verification.

Based on the IMPEP evaluation criteria, the review team recommends that Mississippi's performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

3.3 Technical Quality of Inspections

The review team evaluated inspection reports, enforcement documentation, inspection notes, and interviewed the two qualified inspectors. The review team examined the inspection casework for 19 specific licenses and 4 reciprocity licensees. The casework consisted of inspections performed by the two qualified inspectors and two former inspectors. The casework included inspections of various license types, including: nuclear medicine, high dose-rate remote afterloader, medical broad scope, industrial radiography, well logging, self-shielded irradiator, gamma knife, mobile nuclear medicine, nuclear pharmacy, portable gauge, and fixed gauge licensees. Appendix C lists the inspection casework files reviewed and includes case-specific comments. The review also included an examination of inspection casework for 28 Increased Controls inspections that the Branch performed.

Based on the evaluation of casework, the review team determined that inspections were sufficient in scope to review the licensees' radiation safety and security programs. The review team noted that the inspection records were generally thorough, complete, and of high quality. Inspection records sufficiently documented observations of licensed activities, discussions held with licensees during exit interviews, and the inspector's overall assessment of licensees' radiation safety program, as applicable.

The Division has detailed checklists/inspection forms for inspections of various license types. Following the inspection, these checklists/inspection forms are retained in the license file as the inspection record. The review team determined that the inspectors' use of the checklists aided in performing thorough performance-based inspections. The Branch also has a written inspection procedure for general conduct of inspections, as well as supplemental guidance for inspections of various license types. Both the Division Director and the Branch Director noted that the procedure and supplemental guidance are not consistent with the Branch's current inspection practices and need to be revised. This relates to the recommendation made in Section 3.1 of this report regarding knowledge management.

The Branch requires licensees to respond within 10 days of the date of issuance of the violation. Through the casework evaluations, the review team identified eight inspections where the inspection findings were dated prior to the date of management review. The review team found that the inspectors date the letters before providing them to management for review. This practice gives the appearance that the inspection findings, including the issuance of violations, were being issued to licensees prior to the management review. The practice also appears to give the licensee fewer than 10 days to respond to any violations. This matter was discussed with the Division Director, who assured the review team that the inspection findings are not dispatched without management review. Based on the review team's observation, the Division Director stated that the Branch may revisit its process for dating, reviewing, and issuing inspection findings.

The review team noted that violations of health and safety requirements were well documented, with sufficient information to support the violations and provide for appropriate followup during the next inspection; however, violations of the Increased Controls were often not well documented. Sufficient information to support security violations was not documented in the letter to the licensee, the issued violation, or in the inspector's written notes. The documentation in the inspection file did not provide either general or specific information as to

how the violation occurred, what caused the violation, how long the violation existed, or other relevant information; however, when interviewed, the inspector could relate the full details of why the violation was issued and the specifics of the violation.

The lack of documentation can make it difficult for future inspectors to follow up and review the adequacy of the licensee's corrective actions during the next inspection. The review team identified one violation, a complete failure to implement the Increased Controls, that appeared not to receive the appropriate level of followup based on the documentation in the inspection file. The review team found the licensee's response to the violation inadequate relative to the significance of the violation. The Branch's records indicated that the followup inspection did not take place until 2 years later. When interviewed, the Division Director indicated that there were several phone calls with the licensee to follow up on their efforts to comply; however, these conversations were not documented in the inspection file.

As discussed in Section 3.1 of this report, a knowledge management program is critical for a program with a high level of turnover. The proper documentation of inspection findings is necessary to ensure that licensees fully understand any identified violations and that inspectors can appropriately follow up on the violations at a future inspection, particularly those violations related to the Increased Controls. The review team determined that the historical knowledge of violations and followup has not routinely been captured in the inspection file. Instead, the Branch relied on undocumented verbal interactions between managers and inspectors. Due to the lack of documentation, the Branch Director had to contact former staff members for information regarding licensees and previous inspection findings. Lack of previous inspection documentation may result in critical items not being reviewed for followup during the next inspection. Efforts to more thoroughly document the information necessary to support violations and corrective actions taken by the licensees can facilitate consistency among the inspection staff and can aid in the development of new or lesser experienced staff members. The review team recommends that the State implement a process to ensure that violations are adequately documented, licensee corrective actions are reviewed for adequacy and documented, and sufficient followup of violations is performed and documented consistent with the safety or security significance.

The Branch maintains two separate files for licensees subject to the Increased Controls: one that contains the routine licensing and inspection information and a second file that pertains to the inspection of the licensee's implementation of the Increased Controls. The Branch implemented this policy for better control of potential security-related information, as the second file is stored in a locked file cabinet. During the evaluation of inspection casework, the review team noted that some information regarding the licensee's implementation of the Increased Controls or other security-related requirements was incorrectly filed in the uncontrolled file. The review team also observed this during the evaluation of licensing casework. Discussions with the Division Director and the Branch Director revealed that the Division does not have a written procedure for the control of sensitive or security-related information. The review team did not discover any evidence that indicated there was any inadvertent release of sensitive or security-related information, but recognized the potential for an inadvertent release of this information due to the lack of a documented policy. The review team recommends that the State develop and implement a procedure for the control of sensitive or security-related information that provides guidance to identify, mark, handle, and protect such information.

The review team found that the Division maintained an adequate supply of appropriately calibrated radiation detection and measurement instrumentation to support the inspection program, as well as for response to radioactive materials incidents and emergencies. The Branch also has access to the Division's analytical laboratory for additional support, including alpha/beta spectroscopy, radiochemical analysis, and liquid scintillation counting.

The Branch has a policy of supervisory accompaniments of all qualified inspectors annually. The review team verified that all non-supervisory inspectors were accompanied annually during each year of the review period. During the review period, the accompaniments of the Branch Director and non-supervisory inspectors were completed by the Division Director. The accompaniments covered a variety of license types, including Increased Controls inspections. The review team found that the Division Director's performance in the field was not reviewed during the review period, despite performing a considerable number of inspections. The Division Director's written documents are routinely reviewed by the Branch Director.

A member of the review team accompanied the Branch's two qualified radioactive materials inspectors on inspections during the week of March 23, 2009. The licensees inspected were a nuclear pharmacy, an industrial radiography jobsite, and a well logging field office. Appendix C lists the inspector accompaniments and includes the review team's observations. The inspectors demonstrated performance-based inspection techniques and knowledge of the regulations. The inspectors were well trained, prepared for the inspections, and thorough in their audits of the licensees' radiation safety and security programs. The inspectors conducted interviews with appropriate personnel, observed licensed operations, conducted confirmatory measurements, and utilized good health physics practices. The inspectors held entrance and exit meetings with the appropriate level of licensee management. When appropriate, the inspectors telephonically informed the licensees' corporate radiation safety officers of the results of the inspection. The review team determined that the inspections were adequate to assess radiological health, safety, and security at the licensed facilities.

The review team discussed the appropriate finding for this indicator. The review team considered a finding of satisfactory, but needs improvement, because of the lack of documentation to support cited violations and corrective actions, especially those of the Increased Controls, and the lack of followup related to violations of the Increased Controls. In reaching a conclusion on a finding for this indicator, the review team recognized that the lack of documentation is not necessarily indicative of an inspection of poor quality, but more of a complacent mindset that there is effective communication within a small program. After discussing the benefits of documentation with the Division Director and the Branch Director, the review team is confident that there will be a more conscious effort to ensure that all inspection findings are adequately documented in the inspection records. The review team, recognizing the overall high quality of the Branch's inspections, believes that a finding of satisfactory is more appropriate.

Based on the IMPEP evaluation criteria, the review team recommends that Mississippi's performance with respect to the indicator, Technical Quality of Inspections, be found satisfactory.

3.4 Technical Quality of Licensing Actions

The review team examined completed licensing casework and interviewed license reviewers for 28 licensing actions involving 25 specific licenses. Licensing actions were reviewed for completeness, consistency, proper radioisotopes and quantities, qualifications of authorized users, adequacy of facilities and equipment, adherence to good health physics practices, financial assurance, operating and emergency procedures, appropriateness of license conditions, and overall technical quality. The casework was also reviewed for timeliness, use of appropriate correspondence, reference to appropriate regulations, supporting documentation, consideration of enforcement history, pre-licensing visits, peer or supervisory review, and proper signatures.

The licensing casework was selected to provide a representative sample of licensing actions completed during the review period. Licensing actions selected for evaluation included 4 new licenses, 16 amendments, 6 renewals, and 2 license terminations. Files reviewed included a cross-section of license types, including: medical diagnostic and therapy, brachytherapy, gamma knife, nuclear pharmacies, academic and medical broad scope, research and development, industrial radiography, and well logging. A listing of the licensing casework reviewed, with case-specific comments, can be found in Appendix D.

Overall, the review team found that the licensing actions were thorough, complete, consistent, of high quality, and properly addressed health and safety issues. The staff followed appropriate licensing guides during the review process to ensure that licensees submit information necessary to support their request. Deficiency correspondence was used, as appropriate, to obtain additional information from the applicant or licensee. The Branch uses license templates, which promotes consistency between reviewers. There were no licensing backlogs identified during the review period.

The Branch initially issues licenses for a period of 1 year as a mechanism to help ensure that the initial inspection is performed in a timely manner. Thereafter, high-priority licenses are issued for periods that match the associated inspection frequency for (i.e., Priority 1 industrial radiography licenses expire annually), with a full review every 5 years. Licenses with lower priorities are issued for a period of 5 years. Inspectors review the license for accuracy during each inspection. The Division Director related that this process enabled the Branch to be more knowledgeable concerning the licensee's operations.

At the time of the review, the Division Director and Branch Director were performing all of the Branch's licensing actions and reviewing each other's work. When fully staffed, licensing actions receive peer reviews from other staff members before being reviewed by the Branch and then the Division Director. All licenses are signed by the Division Director. This process serves as a valuable learning tool for the junior staff members. The review team determined that the peer and supervisory reviews contributed to the consistency between reviewers and the high quality of licensing documents.

The review team found that actions terminating licenses were well documented, and included the appropriate material survey records. All files reviewed contained documentation of proper disposal or transfer.

The Branch has an undocumented method for determining when and how to perform pre-licensing visits of new applicants or licensees requesting radioactive material possession limits in quantities of concern. The Branch's method incorporates the essential elements of the NRC's pre-licensing guidance. The review team evaluated the casework file for the only pre-licensing visit of a new applicant performed during the review period and found that the visit was appropriately performed and well documented. Consistent with the recommendation from Section 3.1 regarding knowledge management, the Branch's policies and practices for conducting pre-licensing visits should be documented for future reference.

The review team examined the Branch's licensing practices in regard to the Increased Controls, Fingerprinting Orders, and the National Source Tracking System. The review team noted that the Branch added legally binding license conditions to the licenses that met the criteria for implementing these requirements in a timely manner with a few exceptions. The review team discussed the files that did not have the appropriate license conditions with the Division Director and the Branch Director. They indicated that the majority of the cases were an oversight on their part and would be corrected immediately. The Branch has a method to ensure that new license applications and license amendments are evaluated to determine the applicability of enhanced security requirements.

Based on the IMPEP evaluation criteria, the review team recommends that Mississippi's performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

3.5 Technical Quality of Incident and Allegation Activities

In evaluating the effectiveness of the Branch's actions in responding to incidents and allegations, the review team examined the Division's response to the questionnaire relative to this indicator, evaluated all of the incidents reported for Mississippi in NRC's Nuclear Material Events Database (NMED) against those contained in the Branch's files, and evaluated the casework for 22 radioactive material incidents. A listing of the incident casework examined can be found in Appendix E. The review team also evaluated the Branch's response to four allegations involving radioactive material received during the review period.

The Branch had 45 radioactive materials incidents reported to them during the review period, 14 of which were required to be reported to NRC's Headquarters Operations Center. The review team evaluated the casework for all 14 incidents that required reporting, plus 8 additional incidents that did not require reporting. The incidents selected for review included medical events; lost, stolen, and recovered radioactive material; damaged equipment; and transportation events.

Based on the casework evaluations, the review team determined that the Branch dispatched inspectors for on-site investigations in appropriate situations and took suitable enforcement and followup actions, when necessary. The review team determined that the response to incidents was complete and comprehensive. Initial responses were prompt and well coordinated, and the level of effort was always commensurate with the health and safety significance of the incident.

The review team also evaluated the Branch's timeliness in reporting incidents to NRC's Headquarters Operations Center, and determined that, following notification from the licensee,

the Branch reported all incidents within the required time frame. During the review period, the Branch lost the one employee that was trained to use the software to enter event information into NMED directly. The Branch now relies on NRC's Headquarters Operations Center to relay the appropriate event information to NRC's contractor responsible for maintaining NMED. The Branch uses an event form to help ensure that inspectors have all the necessary information for a complete NMED record. The review team noted a number of NMED entries for Mississippi that were not closed, although the investigation had concluded. The review team discussed the process for closing event entries with the Division Director and the Branch Director. The Branch Director transmitted a request to NRC's contractor responsible for maintaining NMED to close the event entries while the review team was still on site.

In evaluating the effectiveness of the Branch's response to allegations, the review team examined the casework for four allegations involving radioactive material. The Branch received all four of the allegations directly from concerned individuals or licensees. The review team determined that the Branch took prompt and appropriate action in response to all concerns. As noted in Section 2.0, the review team found that allegers were appropriately notified of the outcome of the Branch's investigations.

Based on the IMPEP evaluation criteria, the review team recommends that Mississippi's performance with respect to the indicator, Technical Quality of Incident and Allegation Activities, be found satisfactory.

4.0 NON-COMMON PERFORMANCE INDICATORS

Four non-common performance indicators are used to review Agreement State programs: (1) Compatibility Requirements, (2) Sealed Source and Device Evaluation Program, (3) Low-Level Radioactive Waste Disposal Program, and (4) Uranium Recovery Program. NRC's Agreement with the State of Mississippi does not relinquish the authority for a uranium recovery program; therefore, only the first three non-common performance indicators were applicable to this review.

4.1 Compatibility Requirements

4.1.1 Legislation

Mississippi became an Agreement State on July 1, 1963. The Mississippi Radiation Protection Law of 1976 designates the Department as the radiation control agency for the State. This act gives the Department specific powers and duties, including the authority to promulgate regulations, issue licenses, perform inspections, and collect fees. The review team noted that the only legislation affecting the Branch that was passed during the review period was a radiological fee increase.

4.1.2 Program Elements Required for Compatibility

Mississippi's regulations pertaining to radiation control apply to all ionizing radiation, whether emitted from radionuclides or devices. Mississippi requires a license for possession and use of all radioactive materials.

The review team examined the State's regulatory process and found that the process takes 6 to 12 months. The Division is responsible for drafting and revising the State's regulations pertaining to radiation control. After preparation of a package of draft regulations, the Division obtains approval from the Radiation Advisory Council and then the Board of Health. Draft regulation packages are classified as "intent to adopt" and are mailed to registered interested parties, such as licensees and NRC, with an opportunity for comment. After addressing any comments, the Division submits the regulations to the Board of Health for final approval. Once approved, the final regulations are sent to the Secretary of State for adoption. Mississippi's rules and regulations are not subject to sunset laws. The Division also has the authority to issue alternate legally binding requirements, such as license conditions, in lieu of regulations.

The review team evaluated the Division's response to the questionnaire relative to this indicator, reviewed the status of regulations required to be adopted by the State under the Commission's adequacy and compatibility policy, and verified the adoption of regulations with data obtained from the State Regulation Status sheet that NRC Office of Federal and State Materials and Environmental Management Programs (FSME) maintains.

Current NRC policy requires that Agreement States adopt certain equivalent regulations or legally binding requirements no later than 3 years after the effective date of NRC's regulations. During the review period, the State addressed 14 amendments via rulemaking or adopting alternate legally binding requirements. Ten of the amendments were addressed in a rulemaking package that became effective on May 8, 2009, six of which were adopted beyond the 3-year Agreement State adoption period. With this package, the State is up to date on all amendments that are required through November 2010. The Division Director was cognizant of the amendments that were adopted overdue. Given the staff turnover in the Branch, the Division Director had to focus his efforts on other aspects of the program. Despite the lack of focus on rulemaking for a portion of the review period, the Division was able to address the high-priority regulation amendments; such as the Increased Controls, the fingerprinting requirements, and the National Source Tracking System requirements; in a timely manner. To bring the regulations up to date, the former Division Director came back under contract to push the rulemaking package through the process.

The review team identified the following NRC amendment that the State will need to address in the future through rulemakings or adoption of alternate legally binding requirements:

- "Requirements for Expanded Definition of Byproduct Material," 10 CFR Parts 20, 30, 31, 32, 33, 35, 61, and 150 amendment (72 FR 55864), that is due for Agreement State adoption by November 30, 2010.

When considering a finding for this indicator, the review team recognized the level of effort that went into ensuring that high priority amendments were addressed in a timely manner and that all regulations were up to date shortly after the time of the on-site review. The review team originally considered a finding of satisfactory, but needs improvement; however, after recognizing the effort expended for rulemaking in light of all the other actions completed during the review period, the review team decided a finding of satisfactory was more appropriate.

Based on the IMPEP evaluation criteria, the review team recommends that Mississippi's performance with respect to the indicator, Compatibility Requirements, be found satisfactory.

4.2 Sealed Source and Device Evaluation Program

Since becoming an Agreement State in 1963, Mississippi has not performed any sealed source and device evaluations; therefore, the review team did not review this indicator.

4.3 Low-Level Radioactive Waste Disposal Program

In 1981, NRC amended its Policy Statement "Criteria for Guidance of States and NRC in Discontinuance of NRC Regulatory Authority and Assumption Thereof by States Through Agreement" to allow a State to seek an amendment for the regulation of low-level radioactive waste (LLRW) as a separate category. Those States with Agreements prior to 1981 were determined to have continued LLRW disposal authority without the need of an amendment. Although the Mississippi Agreement State Program has LLRW disposal authority, NRC has not required States to have a program for licensing a LLRW disposal facility until such time as the State has been designated as a host State for a LLRW disposal facility. When an Agreement State has been notified or becomes aware of the need to regulate a LLRW disposal facility, it is expected to put in place a regulatory program that will meet the criteria for an adequate and compatible LLRW disposal program. At this time, there are no plans for a commercial LLRW disposal facility in Mississippi. Accordingly, the review team did not evaluate this indicator.

5.0 SUMMARY

As noted in Sections 3.0 and 4.0, the review team found Mississippi's performance to be satisfactory, but needs improvement, for the performance indicator, Technical Staffing and Training, and satisfactory for all other performance indicators reviewed. The review team kept open one recommendation from the 2005 review and made four new recommendations regarding program performance. Overall, the review team recommends that the Mississippi Agreement State Program be found adequate to protect public health and safety and compatible with NRC's program. The review team also recommends that a periodic meeting take place in approximately 1 year to assess the State's progress in addressing the review team's recommendations, with an emphasis on the actions taken to counteract staff turnover.

Below are the recommendations, as mentioned earlier in the report, for evaluation and implementation, as appropriate, by the State.

1. The review team recommends that the State take additional actions, such as increasing salary and benefits, to stabilize staffing and ensure continued successful program implementation. (Section 3.1 of the 2005 IMPEP Report)

2. The review team recommends that the State update its existing procedures and develop new procedures, if necessary, to memorialize the policies and practices of the Agreement State program and to serve as a knowledge management tool. (Section 3.1)

3. The review team recommends that the State implement a reliable and comprehensive licensing and inspection database that serves as an effective planning, tracking and data management tool. (Section 3.1)

4. The review team recommends that the State implement a process to ensure that violations are adequately documented, licensee corrective actions are reviewed for adequacy and documented, and sufficient followup of violations is performed and documented consistent with the safety or security significance. (Section 3.3)

5. The review team recommends that the State develop and implement a procedure for the control of sensitive or security-related information that provides guidance to identify, mark, handle, and protect such information. (Section 3.3)

LIST OF APPENDIXES

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Appendix B	Mississippi Organization Charts
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Appendix D	License Casework Reviews
Appendix E	Incident Casework Reviews
Appendix F	Sealed Source & Device Casework Reviews

APPENDIX A

IMPEP REVIEW TEAM MEMBERS

Name	**Area of Responsibility**
Aaron McCraw, FSME	Team Leader Technical Staffing and Training Compatibility Requirements
Janine Katanic, FSME	Status of Materials Inspection Program Technical Quality of Inspections Inspector Accompaniments
Charlie Hamilton, FL	Technical Quality of Licensing Actions
Linda McLean, Region IV	Technical Quality of Incident and Allegation Activities

APPENDIX B

MISSISSIPPI ORGANIZATION CHARTS

ADAMS ACCESSION NO.: ML091260142

APPENDIX C

INSPECTION CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1
Licensee: GE Inspection Services License No.: 863-01
Inspection Type: Routine, Unannounced Priority: 1
Inspection Date: 6/8/06 Inspectors: JE, JM

Comment:
Inspection was overdue at the time of the review, because the licensee does not have a physical location in Mississippi and has not recently performed work in the State.

File No.: 2
Licensee: St. Dominic-Jackson Memorial Hospital License No.: 039-01
Inspection Type: Routine, Announced Priority: 3
Inspection Dates: 7/12/06, 12/9/08 Inspector: JM

File No.: 3
Licensee: Baptist Cancer Institute License No.: 942-01
Inspection Type: Routine, Announced Priority: 2
Inspection Dates: 7/25/06, 8/1/08 Inspector: BS

File No.: 4
Licensee: Northrup Grumman Litton Ingalls Shipbuilding License No.: 246-01
Inspection Type: Routine/Special, Announced Priority: 1
Inspection Dates: 2/14/07 Inspector: BS

Comment:
The inspector's notes and other documentation did not provide sufficient information to support the validity of the violation issued.

File No.: 5
Licensee: Mississippi Baptist Medical Center License No.: 023-05
Inspection Type: Routine, Announced Priority: 3
Inspection Date: 1/22/09 Inspector: JM

File No.: 6
Licensee: American Diagnostic Technologies, LLC License No.: 927-01
Inspection Type: Routine, Unannounced Priority: 3
Inspection Date: 8/10/05 Inspector: JA

File No.: 7
Licensee: King's Daughters Hospital License No.: 270-01
Inspection Type: Routine, Announced Priority: 3
Inspection Date: 2/25/09 Inspector: JM

File No.: 8
Licensee: United Blood Services License No.: 869-01
Inspection Type: Routine/Special, Announced Priority: 5
Inspection Date: 4/3/08 Inspector: BS

File No.: 9
Licensee: Entergy Operations, Inc. License No.: 681-01
Inspection Type: Routine, Announced Priority: 5
Inspection Date: 6/14/06 Inspector: JE

File No.: 10
Licensee: Entergy Operations, Inc. License No.: 681-02
Inspection Type: Routine/Special, Announced Priority: 2
Inspection Dates: 3/21/07, 4/16/08 Inspectors: JA, JM, JM

File No.: 11
Licensee: Entergy Operations, Inc. License No.: 681-03
Inspection Type: Initial, Announced Priority: 5
Inspection Date: 6/14/06 Inspector: JE

File No.: 12
Licensee: Central Mississippi Medical Center License No.: 722-05
Inspection Type: Initial/Special, Announced Priority: 2
Inspection Date: 2/13/08 Inspector: BS

Comments:
a) The inspector's notes and supporting information did not provide sufficient information to support the validity of the violation issued.
b) The inspection file did not indicate the licensee's proposed corrective actions or the anticipated date when full compliance would be achieved.

File No.: 13
Licensee: SABIC Innovative Plastics US, LLC License No.: 689-01
Inspection Type: Routine, Announced Priority: 5
Inspection Date: 6/30/05 Inspector: JE

File No.: 14
Licensee: University of Mississippi Medical Center License No.: MBL-01
Inspection Type: Routine, Announced Priority: 2
Inspection Dates: 2/16-20/09 Inspector: JM

File No.: 15
Licensee: University of Mississippi Medical Center License Nos.: 683-01
Inspection Type: Routine/Special, Announced Priority: 5
Inspection Dates: 8/7-11/06, 2/17/09 Inspectors: JE, JM

Comments:
a) The inspector's notes and supporting documentation did not contain sufficient information to support the violation issued.
b) Licensee's written response to the violation did not adequately address the violation. Subsequent information obtained from the licensee was not documented in the file.

File No.: 16
Licensee: University of Mississippi Medical Center License Nos.: 683-02
Inspection Type: Routine/Special, Announced Priority: 5
Inspection Dates: 8/7-11/06, 2/17/09 Inspectors: JE, JM

Comments:
a) The inspector's notes and supporting documentation did not contain sufficient information to support the violation issued.
b) Licensee's written response to the violation did not adequately address the violation. Subsequent information obtained from the licensee was not documented in the file.

File No.: 17
Licensee: NuMedRx Pharmacy Solutions License No.: 1006-01
Inspection Type: Routine, Announced Priority: 2
Inspection Dates: 11/27/07, 3/24/09 Inspectors: BS, BS

File No.: 18
Licensee: Schlumberger Technology Corporation License No.: 463-01
Inspection Type: Routine/Special, Announced Priority: 3
Inspection Dates: 2/17/07, 3/9/07, 3/23/09 Inspectors: JA, JA, JM

File No.: 19
Licensee: Welding Testing X-ray Inc. License No.: 666-01
Inspection Type: Routine/Special, Unannounced Priority: 1
Inspection Date: 10/30/08, 3/24/09 Inspectors: JM, JM

File No.: 20
Licensee: Alpha Omega Services, Inc. License No.: CA 3925-19
Inspection Type: Reciprocity, Unannounced Priority: 5
Inspection Date: 8/24/07 Inspectors: JA, JM

File No.: 21
Licensee: Varian Medical Systems License No.: NRC 45-30957-01
Inspection Type: Reciprocity, Unannounced Priority: 5
Inspection Date: 3/31/06 Inspectors: JA, JE

File No.: 22
Licensee: Ewer Testing & Inspection, Inc. License No.: ND 33-32610-01
Inspection Type: Reciprocity, Unannounced Priority: 1
Inspection Date: 10/18/05 Inspector: JE

File No.: 23
Licensee: Coastal Wireline Services, Inc. License No.: TX L04239
Inspection Type: Reciprocity, Unannounced Priority: 3
Inspection Date: 12/13/07 Inspectors: JA, JE

INSPECTOR ACCOMPANIMENTS

The following inspector accompaniments were performed prior to the on-site IMPEP review:

Accompaniment No.: 1
Licensee: Schlumberger Technology Corporation License No.: 463-01
Inspection Type: Routine/Special, Announced Priority: 3
Inspection Date: 3/23/09 Inspector: JM

Comment:
The inspector could have benefited from asking additional followup questions related to the licensee's implementation of certain requirements.

Accompaniment No.: 2
Licensee: NuMedRx Pharmacy Solutions License No.: 1006-01
Inspection Type: Routine, Announced Priority: 2
Inspection Date: 3/24/09 Inspector: BS

Accompaniment No.: 3
Licensee: Welding Testing X-Ray Inc. License No.: 666-01
Inspection Type: Routine/Special, Unannounced Priority: 1
Inspection Date: 3/24/09 Inspector: JM

APPENDIX D

LICENSE CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1
Licensee: Central Mississippi Medical Center — License No.: 722-05
Types of Action: New, Amendment — Amendment Nos.: 0, 1
Dates Issued: 6/6/07, 10/4/07 — License Reviewers: BS, BS

Comment:
License did not include two required license conditions.

File No.: 2
Licensee: Mississippi State University — License No.: ELB-02
Type of Action: Amendment — Amendment No.: 60
Date Issued: 5/30/08 — License Reviewer: BS

Comment:
License did not include a required license condition.

File No.: 3
Licensee: Jacobs Technology, Inc. — License No.: 1020-01
Types of Action: New, Amendment — Amendment Nos.: 0, 3
Dates Issued: 9/14/07, 10/30/08 — License Reviewers: JA, JM

File No.: 4
Licensee: Acuren Inspection, Inc. — License No.: 784-01
Type of Action: Amendment — Amendment No.: 37
Dates Issued: 1/26/09 — License Reviewer: JM

File No.: 5
Licensee: Gray Wireline Service, Inc. — License No.: 1031-01
Type of Action: New — Amendment No.: 0
Date Issued: 2/6/09 — License Reviewer: BS

File No.: 6
Licensee: Liberty Heart Center — License No.: 935-01
Type of Action: Amendment — Amendment No.: 4
Date Issued: 12/20/07 — License Reviewer: BS

File No.: 7
Licensee: SABIC Innovative Plastics US — License No.: 689-01
Type of Action: Renewal — Amendment No.: 18
Date Issued: 9/12/06 — License Reviewer: JM

Comment:
License did not include a required license condition.

File No.: 8
Licensee: Baptist Cancer Institute License No.: 942-01
Type of Action: Amendment Amendment No.: 4
Date Issued: 1/10/06 License Reviewer: BS

File No.: 9
Licensee: Pritchard Engineering, Inc. License No.: 865-01
Type of Action: Amendment Amendment No.: 7
Date Issued: 10/14/05 License Reviewer: BS

File No.: 10
Licensee: Triad Isotopes, Inc. License No.: 794-01
Type of Action: Amendment Amendment No.: 28
Date Issued: 6/6/08 License Reviewer: BS

File No.: 11
Licensee: King's Daughters Hospital License No.: 270-01
Type of Action: Renewal Amendment No.: 41
Date Issued: 7/18/07 License Reviewer: JA

File No.: 12
Licensee: American Diagnostic Technologies License No.: 927-01
Type of Action: Amendment Amendment No.: 23
Date Issued: 12/19/07 License Reviewer: JA

File No.: 13
Licensee: Hall, Blake and Associates, Inc. License No.: 965-01
Type of Action: Renewal Amendment No.: 5
Date Issued: 3/18/09 License Reviewer: JM

File No.: 14
Licensee: Turner Specialty Services, LLC License No.: 950-01
Type of Action: Amendment Amendment No.: 5
Date Issued: 5/26/06 License Reviewer: BS

Comment:
A required license condition was not issued in timely manner.

File No.: 15
Licensee: Team Industrial Services, Inc. License No.: 515-01
Type of Action: Renewal Amendment No.: 30
Date Issued: 6/20/05 License Reviewer: BS

File No.: 16
Licensee: Gulf Cities Testing Laboratories, Inc. License No.: 948-01
Type of Action: Amendment Amendment No.: 9
Date Issued: 1/11/07 License Reviewer: JM

File No.: 17
Licensee: Baptist Memorial Hospital License No.: 543-01
Type of Action: Amendment Amendment No.: 37
Date Issued: 5/5/08 License Reviewer: BS

File No.: 18
Licensee: Land Shaper, Inc. License No.: 921-01
Type of Action: Termination Amendment No.: 7
Date Issued: 7/26/06 License Reviewer: BS

File No.: 19
Licensee: Team Inspection Services License No.: 949-01
Type of Action: Termination Amendment No.: 3
Date Issued: 6/28/05 License Reviewer: RG

File No.: 20
Licensee: NuMedRx Pharmacy Solutions License No.: 1006-01
Types of Action: New, Amendment Amendment Nos.: 0, 2
Dates Issued: 12/7/06, 3/3/08 License Reviewers: BS, JA

File No.: 21
Licensee: Mississippi Tank Company, Inc. License No.: 064-01
Type of Action: Amendment Amendment No.: 57
Date Issued: 10/20/06 License Reviewer: BS

File No.: 22
Licensee: University of Mississippi License No.: MBL-01
Type of Action: Renewal Amendment No.: 49
Date Issued: 6/2/08 License Reviewer: BS

File No.: 23
Licensee: The Heart Care Center License No.: 917-01
Type of Action: Renewal Amendment No.: 9
Date Issued: 7/3/08 License Reviewer: JE

File No.: 24
Licensee: USM Department of Marine Science License No.: 976-01
Type of Action: Amendment Amendment No.: 2
Date Issued: 6/23/08 License Reviewer: JM

File No.: 25
Licensee: Mississippi Emergency Management Agency License No.: 033-01
Type of Action: Amendment Amendment No.: 87
Date Issued: 11/23/06 License Reviewer: DY

APPENDIX E

INCIDENT CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1
Licensee: Baptist Desoto Hospital
Date of Incident: 10/30/08
Investigation Date: 10/30/08
License No: 675-01
Event No.: 08013
Type of Incident: Medical event
Type of Investigation: Site

File No.: 2
Licensee: Wal-Mart
Date of Incident: 10/21/08
Investigation Date: N/A
License No: GL
Event No.: 08011
Type of Incident: Lost material
Type of Investigation: N/A

File No.: 3
Licensee: University of Mississippi Medical Center
Date of Incident: 10/9/08
Investigation Date: None
License No: MBL-01
Event No.: 08010
Type of Incident: Material spill
Type of Investigation: None

File No.: 4
Licensee: W.G. Yates & Sons Construction Co.
Date of Incident: 7/14/08
Investigation Date: 7/14/08
License No: 656-01
Event No.: 08008
Type of Incident: Equipment damage
Type of Investigation: Site

File No.: 5
Licensee: N/A
Date of Incident: 5/28/08
Investigation Date: 5/28/08
License No: N/A
Event No.: 08007
Type of Incident: Transportation
Type of Investigation: Site

File No.: 6
Licensee: N/A
Date of Incident: 5/23/08
Investigation Date: 5/23/08
License No: N/A
Event No.: 08006
Type of Incident: Recovered material
Type of Investigation: Site

File No.: 7
Licensee: Acuren Inspection
Date of Incident: 3/23/09
Investigation Date: 4/2/09
License No: 789-01
Event No.: 09004
Type of Incident: Equipment failure
Type of Investigation: Written report

File No.: 8
Licensee: JANX
Date of Incident: 1/15/09
Investigation Date: 1/15/09
License No: NRC 21-16560-01
Event No.: 09001
Type of Incident: Transportation
Type of Investigation: Site

File No.: 9
Licensee: NuMedRx
Date of Incident: 10/25/07
Investigation Date: 10/25/07
License No: 106-01
Event No.: 07007
Type of Incident: Transportation
Type of Investigation: Site

File No.: 10
Licensee: Biloxi Regional Medical Center
Date of Incident: 8/29/06
Investigation Date: 9/20/06
License No: 198-02
Event No.: 06012
Type of Incident: Medical event
Type of Investigation: Site

File No.: 11
Licensee: University of Mississippi Medical Center
Date of Incident: 12/11/07
Investigation Date: 4/4/08
License No: MBL-01
Event No.: 08004
Type of Incident: Medical event
Type of Investigation: Site

File No.: 12
Licensee: Dunn Road Builders
Date of Incident: 2/3/09
Investigation Date: 2/3/09
License No: 870-01
Event No.: 09002
Type of Incident: Equipment damage
Type of Investigation: Site

File No.: 13
Licensee: Burns Colley Dennis, Inc.
Date of Incident: 7/9/06
Investigation Date: 7/9/06
License No: 619-01
Event No.: 06008
Type of Incident: Equipment damage
Type of Investigation: Site

File No.: 14
Licensee: N/A
Date of Incident: 2/21/06
Investigation Date: 2/21/06
License No: N/A
Event No.: 06005
Type of Incident: Recovered material
Type of Investigation: Site

File No.: 15
Licensee: Newcomb Engineering
Date of Incident: 2/14/06
Investigation Date: 2/14/06
License No: 967-01
Event No.: 06003
Type of Incident: Equipment damage
Type of Investigation: Site

File No.: 16
Licensee: Cardinal Health
Date of Incident: 2/20/06
Investigation Date: None
License No: 493-01
Event No.: 06004
Type of Incident: Transportation
Type of Investigation: None

File No.: 17
Licensee: Metal Processors, Inc.
Date of Incident: 8/7/06
Investigation Date: None
License No: GL-384
Event No.: 06010
Type of Incident: Equipment damage
Type of Investigation: None

File No.: 18
Licensee: Cardinal Health
Date of Incident: 9/22/06
Investigation Date: 9/22/06
License No: 493-01
Event No.: 06011
Type of Incident: Transportation
Type of Investigation: Site

File No.: 19
Licensee: Cardinal Health
Date of Incident: 11/7/06
Investigation Date: None
License No: 493-01
Event No.: 06014
Type of Incident: Stolen material
Type of Investigation: None

File No.: 20
Licensee: Building & Earth Sciences
Date of Incident: 12/20/07
Investigation Date: 12/21/07
License No: AL-1266
Event No.: 07010
Type of Incident: Recovered material
Type of Investigation: Site

File No.: 21
Licensee: Pepsi Bottling Group
Date of Incident: 8/15/07
Investigation Date: 8/15/07
License No: WI-R0831
Event No.: 07004
Type of Incident: Wrong transfer of RAM
Type of Investigation: Site

File No.: 22
Licensee: Aquaterra Engineering
Date of Incident: 1/27/07
Investigation Date: 2/5/07
License No: 724-01
Event No.: 07001
Type of Incident: Stolen material
Type of Investigation: Site