

December 6, 2010

MEMORANDUM TO: Michael F. Weber
Deputy Executive Director for Materials, Waste,
Research, State, Tribal, and Compliance Programs
Office of the Executive Director for Operations

Trip Rothschild
Associate General Counsel for Licensing and Regulation
Office of the General Counsel

Charles L. Miller, Director
Office of Federal and State Materials
and Environmental Management Programs

Steve Reynolds, Director
Division of Nuclear Materials Safety
Region III

FROM: Karen N. Meyer, IMPEP Administrative Coordinator */RA/*
Division of Materials Safety and State Agreements
Office of Federal and State Materials
and Environmental Management Programs

SUBJECT: TRANSCRIPT: November 29, 2010 OKLAHOMA
MANAGEMENT REVIEW BOARD (MRB) MEETING

Enclosed is the transcript of the MRB meeting held on November 29, 2010. If you have comments or questions, please contact me at (301) 415-0113.

Enclosure: Cover Page and Transcript of the
Management Review Board Meeting

cc w/encl.: Mike Broderick, Program Manager
Oklahoma Radiation Management Section

Isabelle Busenitz, Kansas
Organization of Agreement States
Liaison to the MRB

Management Review Board Members

Distribution: DCD (SP01)

MSSA RF

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MSSA_Technical_Asst Resource

BJones, OGC

JBiggins, OGC

JOlmstead, OGC

JLynch, RIII

MArribas, FSME

RBrowder, RIV

DTuberville, AL

DWhite, FSME

MOrendi, FSME/MSSA

MBeardsley, FSME/MSSA

JKatanic, FSME/MSSA

TConely, KS

JWeil, OCA

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| DATE | 12/06/10 | | | |

OFFICIAL RECORD COPY

TRANSCRIPT: MANAGEMENT REVIEW BOARD MEETING OF November 29, 2010

The attendees were as follows:

In person at U.S. Nuclear Regulatory Commission (NRC) Headquarters in Rockville, Maryland:

Michael Weber, MRB Chair, DEDMRT
James Biggins, MRB Member, OGC
James Lynch, Team Leader, Region III
Robert Lewis, FSME
Duncan White, FSME
Joan Olmstead, OGC

Charles Miller, MRB Member, FSME
Steve Reynolds, MRB Member, Region III
Mike Broderick, OK
Monica Orendi, FSME
Karen Meyer, FSME

By videoconference:

Maria Arribas, Team Member, FSME

Rachel Browder, Team Member, Region IV

By telephone:

Isabelle Busenitz, MRB Member, KS
Michelle Beardsley, FSME
Thomas Conely, KS

David Tuberville, Team Member, AL
Janine Katanic, FSME

1. **Convention.** Ms. Monica Orendi convened the meeting at 2:00 p.m. (ET). She noted that this Management Review Board (MRB) meeting was open to the public; and one member (Mr. Conley) introduced himself. Ms. Orendi then transferred the lead to Mr. Michael Weber, Chair of the MRB. Introductions of the attendees were conducted.
2. **MRB Consultation/Comments on Issuance of Report.** A full transcript of the MRB meeting minutes is attached. The MRB found the Oklahoma Agreement State Program “adequate to protect public health and safety” and “compatible with NRC’s program.” The MRB also agreed with the four recommendations made by the review team:
 1. The review team recommends that the Section take appropriate measures to conduct their inspection program in a sustainable manner by continuing to implement their corrective action program. (Section 3.2)
 2. The review team recommends that the Program retrain its staff to gain increased familiarity with the regulations under 10 CFR Part 35 and the appropriate NRC guidance documents for medical use authorizations. (Section 3.4)
 3. The review team recommends that the State take measures to ensure proper documentation and appropriate response, review, enforcement, and follow up of all radioactive materials incidents. (From the 2006 IMPEP report) (Section 3.5)

Enclosure

4. The review team recommends that the State take measures to ensure proper documentation and appropriate tracking and closure of all allegations involving radioactive material. (From the 2006 IMPEP report) (Section 3.5)
3. Based on the results of the current IMPEP review, the MRB agreed that the next IMPEP review of the Oklahoma Agreement State Program should take place in approximately 4 years.

Public Participation. 1) Thomas Conely, KS

3. **Precedents/Lessons Learned.** The MRB established no new precedents during this meeting.
4. **Adjournment.** The meeting was adjourned at approximately 4:25 p.m. (ET).

FTS-NUCLEAR REGULATORY COMMISSION

**Moderator: Karen Meyer
November 29, 2010
1:00 pm CT**

Coordinator: Thank you for standing by. I'd like to remind all participants this call is being recorded. If anyone has any objections you may disconnect at this time. Ma'am, you may begin.

Monica Orendi: Thank you. Do we want to wait until (Maria) gets the thing fixed?

Mike Weber: No. She can hear us.

Monica Orendi: Yeah?

Maria: Yes. I called IT (unintelligible).

Woman: Oh, there you are. We have you.

Monica Orendi: We have you now.

Monica Orendi: I can see you now.

Maria: Okay.

Monica Orendi: Okay. All right, well...

Monica Orendi: So we will go ahead and get started. I'd like to welcome everybody to the Oklahoma Management Review Board meeting. I'd like to remind everybody that this is a public meeting. And if we have any members of the public that they please introduce themselves.

Tom Conley: Yes. This is (Tom Conley). I'm listening in.

Monica Orendi: Hi (Tom). Welcome.

Tom Conley: Hi.

Enclosure

Monica Orendi: Anybody else? Okay. Hearing none I will go ahead and turn this meeting over to the Chair of the MRB, Mike Weber.

Mike Weber: Thanks Monica Orendi. Let me add my welcome to all of our participants today. I'm the Deputy Executive Director for Materials, Waste, Research, State Tribal and Compliance Programs at the NRC.

And we are meeting today at the Management Review Board to review the IMPEP or the Integrated Materials Performance Evaluation Program review for the radioactive materials program of the State of Oklahoma. The IMPEP team conducted their review earlier in September 2010.

And the MRB will make an overall assessment of the adequacy and the compatibility of the state's program based on the information provided by the team as well as information provided by the state and the other sources that are available to the Board.

By the end of the meeting the Board will make a determination as well as on the follow up activities. At this point I'd like to introduce the members of the IMPEP MRB or the MRB I should say.

I'll Chair the Board. We also have Jim Biggins from our Office of General Counsel at the NRC; Charlie Miller who is the Director of the Office of Federal State Materials and Environmental Programs; Steve Reynolds, who has joined us from Region III NRC.

He's the Director of the Division of Nuclear Material Safety. And Isabelle Busenitz - I understand you're on from the State of Kansas.

Isabelle Busenitz: That is correct.

Mike Weber: And you are our Organization Agreement State's Liaison Member. So welcome to our Board this afternoon.

Isabelle Busenitz: Thank you.

Mike Weber: I would also like to welcome our Representative from the State of Oklahoma, Mike Broderick.

Mike Broderick: Thank you.

Mike Weber: You serve as the Program Manager for the Oklahoma Radiation Management Section. And I understand that you don't have any other representatives with you today because you are the program. So we'll have the benefit of your knowledge here with us in our board meeting today.

And for our IMPEP team which was chaired by Jim Lynch, Jim do you want to introduce yourself and the members of your team?

Jim Lynch: Thank you Mike. Yeah, my name is Jim Lynch. I was the team leader for this review. I am the State Agreements Officer in Region III Lyle, Illinois. On the team was Maria Arribas. Maria is from FSME but currently detailed to Region I. Also, Rachel Browder who is the State Agreements Officer from our Region IV office in Arlington. And our state member of the team, David Turberville - David is from the State of Alabama.

Mike Weber: Okay. And with that, Jim do you want to start your presentation this afternoon in the IMPEP review for the State of Oklahoma?

Jim Lynch: Thank you Mike. This - as Mike mentioned, this review occurred in September of 2010. This was the normal review. The State of Oklahoma became an agreement state in the year 2000. So we've been through this a couple of times now.

And what we will do is identify each of the indicators that we reviewed. And we will present the MRB with our findings. Overall, the team found the State of Oklahoma to be adequate to protect public health and safety and compatible with the NRC's program.

For each of the program indicators and there will be six that we discuss during this review, we - the team will identify one of three findings - satisfactory; satisfactory but needs improvement; or unsatisfactory. These are the three choices that we will have to present to the MRB.

What I'd like to do first is go out to the team members and have them very briefly describe their findings for the particular indicators that were assigned to them. And we'll start with Maria who reviewed the technical staffing and training indicators. Maria?

Maria Arribas: Yeah. For the technical staffing and training performance indicators that we reviewed (unintelligible) for training (unintelligible) and having to make decisions at that time. We noticed at the second level that they do not detect any performance issues (unintelligible) of the (agreement) state program.

However, (unintelligible) program to remain current of all (unintelligible). To review, one staff left their program and one is hiring at the end of this year. The section has training (unintelligible) consistent with NRC requirements. (Unintelligible).

The team noticed that Oklahoma management strongly supports the section training program. The IMPEP team is recommending for technical staffing and training performance indicators be found satisfactory.

- Mike Weber: Thank you Maria. Charlie - questions.
- Charlie Miller: Yes. Either for the team or for Mike. I just want to make sure I get an accurate representation. Your program covers broader than NRC activity...
- Mike Broderick: That's right.
- Charlie Miller: ...including X-ray and radon. And the report says about 4.8 FTU (devoted) program - agreement state program. But that isn't dedicated people. They work on both, right?
- Mike Broderick: All of our people work on both. Yeah.
- Jim Lynch: Some people in agreement and some on not agreement.
- Charlie Miller: So you lost a couple of people. What's your current standing on the - I'm hearing about seven? Does that reflect the two it lost?
- Jim Lynch: It's now six people and we have one more person who's going to be - Mohammed Idrissa has announced his intention to retire and that'll put us down to five. I have approval to hire two more people.
- Charlie Miller: Oh, you do? Okay.
- Jim Lynch: The interviews are scheduled in fact for next week. And naturally with money the way it is and so forth I won't be totally happy until they're actually onboard. But we expect to get them on about the beginning of the year.
- I get them into the two week training course that they're substituting for the five week courses. One of those is January 31 and I want to try and get them into that so that the beginning of the year is really important to me.
- Charlie Miller: I want to put a thought out and maybe we can discuss it at the end. It's something that we will sometimes offer. And that is - we're always willing to do that. A recent example was we did that for Arkansas. We've recently been notified that it was a huge success at least for their program.
- So I'd like to get your thoughts about that at the end.
- Jim Lynch: Good.
- Charlie Miller: Okay.
- Mike Broderick: Charlie I just had one comment about the staffing level. You look at a five FTE program - it's not a large program - 200 and something licenses, less than 300 which sounds like a fairly large staffing level or at least not a weak

level of staffing.

But Oklahoma in that it's a very industrial state with a lot of well logging and a lot of radiography which require frequent inspections, they have a need for more staffing than your average program that say has a lot of medical programs that would require maybe a three year inspection or something like that.

So if you're looking at these numbers, comparing them to other states, it doesn't equate exactly. And I just wanted to point that out.

Charlie Miller: I guess I was looking at it from the perspective of programs that have been viewed satisfactory over the last 40 years. Given the losses how is that going to project itself in the future? And I've been interested in Mike's program manager and how he sees that if he can't fill his roster for any period of time.

Mike Broderick: Yeah. Yeah. It's very important. And he'll hire two positions at entry level I take it, right? We're losing a lot of experience there.

Jim Lynch: Mohammed in particular - we'll lose a lot of experience. He's a very valuable employee.

Charlie Miller: He came on just after the agreement was signed?

Mike Broderick: He came on almost at the time we became an agreement state but he had a lot of previous experience. We usually are not able to hire to be honest experience to help businesses. We have to grow our own.

But he had worked as a civilian for the Department of the Navy for many years as a radioactive materials inspector. And he also was formally a certified nuclear med tech in between those two. He was really valuable experience. So I hate to lose him although it's predictable.

I've been telling my management and staff - he's 67 so it's time for him to move onto other things.

Mike Weber: Steve questions?

Steve Reynolds: No questions.

Mike Weber: Jim, any questions?

Jim Biggins: Yeah. My question would be that the staff primarily seems to be relying on the loss of staff members for your program to reach its conclusion rating. And in your response it didn't seem that you disagreed with their findings on that - in that regard but you did ask that a different rating be assessed.

And so to me it was an indicator - pardon me, in different indicator. I'm using our terminology. Different indicator be assessed in that it doesn't seem I'm disagreeing necessarily what the impact review team found.

You focused more in your response on what your program's response would be in order to insure that you improve, you know, with the hiring of two additional people and that kind of thing.

Was there an - so my question is was there an aspect of the review team's determination or finding on that indicator that you did disagree with? Is there anything that you in particular disagreed with?

Mike Weber: Are you asking with respect to staff training and staffing?

Steve Reynolds: Right. With respect to staff training and staffing, because your response seemed to agree with what the impact review team...

Mike Weber: For this indicator.

Mike Broderick: For this indicator - just on this indicator I have more to say on the materials inspection label.

Steve Reynolds: Right.

Mike Broderick: For this business indicator I'm in agreement with what you said. I think we're holding on - well at least at the time of impact we were holding on and weren't really in trouble but we could have been in trouble if we lost some more people.

And unfortunately, since the review, that has come to pass. And now we're in a position where I'm a little bit concerned. My staff is - I'm getting grumbling from the managers so to speak. My staff feels overworked.

And if I can get these two people and get them onboard and trying to - I don't think we're going to have a tragedy or anything. But we're at the - now we are at the point where I feel like we're hanging on by our fingernails with staff to be blunt.

Steve Reynolds: Okay. I don't have any other questions.

Mike Weber: Isabelle any questions?

Isabelle Busenitz: Not on this indicator.

Jim Lynch: Okay.

Mike Weber: Charles, how do you view the team's (recordation)?

Charlie Miller: I support the team's findings.

Mike Weber: Okay. Steve?

Steve Reynolds: Support it.

Mike Weber: Jim?

Jim Biggins: I support the team's findings.

Mike Weber: Isabelle do you support the team's findings?

Isabelle Busenitz: Yes, I do.

Mike Weber: Okay. Let's go onto the next indicator.

Jim Lynch: The next indicator is the status of materials inspection program. I'm looking at kind of the numbers of the inspection part of their program. And David Turberville from the State of Alabama will discuss that one.

David Turberville: Thank you Jim. As you see in our report, for this indicator the team focused on the five factors - inspection frequency, overdue inspections, the initial inspection of your new licensees as well as timely dispatch of the inspection findings to the licensee and the performance of reciprocity inspections.

The team noted that the inspection frequencies were at least the same as Chapter 2800 and really found no issues there for the timeliness of the issuance of inspection findings to the licensee.

We found that - the team found that the large majority of the inspection findings were communicated to the licensee in a timely manner. The section has a goal - a 30 day goal to get the findings out to the licensees. And most times they met that goal.

For the reciprocity licensees the review team did determine that the section met or exceeded the criteria established of inspecting 20% of the candidate licensees that are operating under reciprocity in each of the four years covered by the review period.

Now as far as the routine and initial inspections the team did find some - did have some concerns. As you can see in the report, this - as Jim said, this is pretty much a number crunching type deal.

We look at the Priority 1, two and three inspections as well as initial

inspections that were conducted late during the review period and using the calculation formulas in SA 101.

The team concluded that 17.9% of the Priority 1, 2 and 3 and initial inspections were conducted overdue based on the criteria established in management directed 5.6.

We did - Mike provided information that indicates that a lot of the past due inspections were not assigned until after the due date due to administrative issues that I'm sure Mike will address and it's been noted in the report.

But at the time of the review in September we'll point out that no licensees were overdue for inspection as far as I'm aware of.

Based on the fact that the overdue inspections did occur during the review period, the team did make a recommendation that the section take appropriate measures to conduct inspections in accordance with the established inspection priority system.

And such measures should focus on the sustainability of the inspection program.

And based on the IMPEP evaluation criteria, using the criteria established in management directed 5.6 that the review team recommends that the Oklahoma performance with respect to the indicator staff and material inspection program be found satisfactory but needs improvement.

Mike Weber: And if I could just clarify, the needs improvement is with respect to insuring the timeliness of the issuance of the reports and also the timeliness of the inspections?

David Turberville: No. The - we found that the real concern was the overdue inspections for the Priority 1, two and three as well as the initial inspections being that it was 17.9% where management directed 5.6 has a criteria of anything above 10% to be considered that way, needs improvement.

Mike Weber: Okay, thanks. Charlie?

Charlie Miller: This is the one I think we commented on, right?

Mike Broderick: Yes.

Charlie Miller: Okay. What I'd like to be able to do is listen to the state's response and presentation and then maybe I'll have a couple of questions.

Mike Broderick: Okay. Okay. Basically it is as David said, an administrative issue is what led

to this. Back in 2006 we got somewhat of a double whammy. The lady that had been assigning inspections, Pam Bishop, is somebody who has been around a while if you'll remember. She was a very key figure in our program.

She had been assigning inspections and she had been using a computer program that I joked it was written in (KNEA) form. But she was the only one bluntly, who understand the program that she used. It worked very well. And she'd always done a good job of it.

But she retired rather abruptly because of family issues. And we were in at the time the process. We had hired a consultant to develop a program called RADMAN that would track the inspection and licensing and so forth and move us at least into the 1990s if not the 2000s on database stuff.

But it wasn't quite ready for primetime yet and so these both happened at the same time. And you can see the potential for problems there and unfortunately it happened. RADMAN - there were a number of problems with RADMAN and with the system that we set up.

And as a result we weren't getting inspections entered into the database to be assigned in a timely manner. And unfortunately the reporting stuff on RADMAN was not reliable in the early versions.

So it tended either not to show them or it would show them but we would say oh, that's just another one of these little glitches type thing. So we had a number of problems. We did identify them. I started identifying them because I would look in to see about the status of radiography.

Radiography was probably what got us in trouble most here because of the short period between inspections. And we'd say gee, these guys haven't been inspected in 13 months or whatever, and dig into it. But we began in investigations and we did do it in a very timely manner.

There was a copy in the email. I've got nice printed copies here if you want to look at them, that show this quickly came to a head in 2007. But we began measures to identify the problem and fix it.

Unfortunately there were multiple causes for the issues among the things happening. We were depending on the inspectors to enter the data.

The next inspector - or next inspection when they did their inspection and they didn't always do that and also were intending on the license riders to enter the date of the initial inspection when they put the license into RADMAN and they did not always do that.

There were also some logic problems. So unfortunately even though we

began energetic measures fairly quickly I think, it was not an immediate process. We got better but we didn't immediately solve the problem. We intended to find the problem and say well, that solves the problem.

We'll never have to deal with that again and we find not long later that no, there was still a problem. However, we have got it down back to a not perfect but almost a reasonable level. And I think - we should have nearly zero from now on.

What I ended up doing was two different ways to check for an inspection that's not assigned. We have one that is done electronically in a database but separate from RADMAN so it's not dependent on the Chinese math as our IT people call it, in RADMAN for calculating inspection time ranges.

But one - that - it just takes the raw data and does a very simple database. And then we have a second where one of my staff gets a list and physically eyeballs the list to look for it and that seems to be working well.

And I agree with the inspection team's finding, David and Jim's findings as far as their findings of fact. I have no problem with that. I do encourage the MRB - you followed your system mechanically which as I of course constrained you to give us a satisfactory but needs improvement.

And I would encourage the MRB to exercise their judgment. This graph more than anything I think, shows that we got on the problem immediately. And we didn't perfectly solve the problem overnight but we immediately started seeing improvements. So we're on top - and also it happened back in 2007.

It wasn't a case that said oh my gosh, the NRC is coming, we've got to fix this which I'm sure you've seen states do that. Of course we would never do such a thing.

Mike Weber: No.

Mike Broderick: But in any case, we started on this in a timely fashion so that shows that we were on top of the problem. My feeling is that, you know, we've shown that we have a solution in place that's being, you know, being effective.

I certainly think that this should be a four and you should check the next IMPEP certainly. You would whether I thought you should or not but I do think you should.

But in the interim if we weren't being energetic on this there might be some justification for rating us satisfactory but needs improvement I think. But I think we've shown that we're on top of it.

The only thing now that that will accomplish is it'll lower the credibility of our

program in my - for management and in our licensees' eyes. It will be, you know, have a negative effect.

So I would encourage you to - acknowledging the factual nature of it I just don't think that any good purpose and I think a negative purpose is certified, leaving the rating as satisfactory but needs improvement.

Mike Weber: Charlie is that you?

Charlie Miller: Yeah. This graphic shows, you know, your ability to catch up and in inspections creating an assign before the due date section. A separate curve could show what you've done to try to catch up, right?

And I think what the team found is by decline, before it was written they caught up, you know, okay. So the concern here looking to the future, is sustainability. I probably should say my next comment.

Mike Weber: You can say it now. You're on a roll.

Charlie Miller: But I can say it now. I guess what I'm looking for here is - what I'm looking for is the team followed the (bulk) in making their findings, you know, what the guidance said to do.

I guess the question becomes if the MRB feels that the state has taken pertinent action of their own volition to try to correct the problem.

I guess there's some middle ground we can get to with regard to the indicator where we'd consider satisfactory but have some kind of recommendation in the report and - the interest in the teams.

Mike Broderick: Well as David mentioned, we do have a recommendation that talks about sustainability. So regardless of where the indicator falls out that recommendation will...

Charlie Miller: I guess this is where it gets more difficult because if you're in a situation where they need an improvement of unsatisfactory we have shorter time windows by which we go back and assess it. But if you go to (SAT) then you go to (foreign use).

And I guess what I'd like to be able to feel comfortable with is if you look down the road a year, two years, been able to sustain (unintelligible) you have them falling back. That's where I'm wrestling.

Mike Weber: Okay. Steve?

Steve Reynolds: If I can go back to the prior IMPEP there was the (SAT) material, right?

Mike Broderick: Yes.

Steve Reynolds: You didn't have this problem. So during this period that we had - instructions - a couple of questions on this - of these 40 that you've now caught up - violations?

David Turberville: No. We have most of these - and the root of the problem Jim - or one of the roots of the problem anyway - Jim mentioned earlier, were distinct from a normal agreement - "normal agreement state program."

Because almost 10% of our licensees are (industry) radiographers which - that's part of the reason that these accrued so fast is because it's an annual inspection period so things started coming off it. We have pretty good compliance among our industrial radiographers.

And we did not find any (unintelligible). My suspicion - I have to admit I expect there are a lot of radiographers who don't wear their badges.

Steve Reynolds: Right.

David Turberville: And I think that's in every state. I don't think it's...

Steve Reynolds: Right. Right.

David Turberville: ...an Oklahoma problem. I think - I do think we have that.

Steve Reynolds: Okay.

David Turberville: But as far as things that you can find in an inspection I think we have - we do have pretty good compliance.

Steve Reynolds: And Mike, you don't have any of these inspections included in the (IC) inspection portfolio?

Mike Broderick: Since they're industrial radiographers - of course all of the industrial radiographers did.

Steve Reynolds: Okay.

Mike Broderick: My suspicion is that I would take a guess that probably 25 or 30 out of the rest - or 40 probably included the - were industrial radiography and would do that. And of course this was just as the ICs were really getting going.

Steve Reynolds: Right.

Mike Broderick: The only ISC violation - the only major violation anyway we've had, and it had

nothing to do with this, was that the initial inspection was first a company from Louisiana that operates under an Oklahoma license, to be blunt they lied to us.

Steve Reynolds: Right.

Mike Broderick: They told us that yeah, we've done all of this IC stuff and we're totally good. And our inspector went out there, this was not one that we missed fortunately and we inspected in a timely fashion. And the inspector went out and found literally nothing had been done, nothing at all.

And we did - we fined them \$10,000 for that. So...

Man: I don't know where Charlie is on this. I agree with the - staff that needs improvement - are ready to improve - that probably stayed through the process and adding (unintelligible).

Mike Weber: Okay. Jim?

Jim Biggins: It's clear that I'm jumping the gun on the other indicator in trying to get to a response to this indicator. I guess I'll ask again. And I think you've provided a pretty clear explanation though of why you feel that a different rating would be appropriate for this particular indicator.

Do you then, you know, disagree with what the new team found when they reviewed the program for this indicator? What I'm hearing is that you don't necessarily disagree.

It's just a matter of before our inspection occurred, before our review of your program occurred you're already taking action to correct the problem and you're certainly coming into a position where - alleviated the problem for the most part.

And so I think I would share the other members' concern that it continue so that the problem doesn't reoccur which (unintelligible).

So my - just to give you a chance again, do you agree with what the staff found for this indicator and, you know, am I properly characterizing your response as being this is our corrective action?

Mike Broderick: Certainly we agree with the factual account in your draft report. We certainly agree with that. As to what should be done about it, I do feel having two of the findings be satisfactory but needs improvement, I think that casts a shadow or a pall or whatever you want to call it, over our program.

I think it will lower the perception of our program in the eyes of the regulated

community and certainly in upper management.

So I would rather - from what Charlie just said, I would request anyway, suggest a slightly different spin on what Charlie said, that you go ahead and raise the indicator because that's really - that's the short form that people look at.

But put accounting off that you'll check, you know, you know your process better than I do. My suggestion would be you have a midyear or a midyear visit I think in two years. And that you have a report, you know, and you check into this at the two year.

And then if we aren't on the ball at that point then move us into some heightened oversight or something like that, whatever you feel is appropriate with your system. I would suggest doing it as almost the flip side of what Charlie suggested.

When raised the thing that was the proviso at two years if they aren't on top of things that then (unintelligible) may be a little bit too strong. You know, then we would get in - we would go into something lower - some more status with more concern to it.

Mike Weber: Monitoring?

Mike Broderick: Yeah. Something like that.

Mike Weber: Okay, thanks. Isabelle?

Isabelle Busenitz: Yes. On this particular indicator although Oklahoma met the prescriptive criteria to get satisfactory but needs improvement I believe that because it - you won't kind of look at the performance basis as well the state self identified during the review period and to corrective action to fix the problem and to insure that it does not occur again.

So I would support a change to this indicator to satisfactory. Based on what I heard I thought I heard them say that they are now caught up with this. But I heard a couple of different things.

Mike Weber: Mike, do you want to address that?

Mike Broderick: We are definitely caught up with inspections at this time and we've been and I expect to stay caught up on inspections.

Mike Weber: Any other questions or comments Isabelle?

Isabelle Busenitz: That's all I have.

Mike Weber: I have a question for our authorities. The definition of satisfactory versus satisfactory but needs improvement?

Given the state's explanation is the - is it conceivable that we could find them to be satisfactory because they have taken the necessary corrective action and have restored performance and the solution appears to be a sustainable one? I'm just wondering how much flexibility.

Because we're trying to stay within the process and yet I think the state's perspective and I don't hear arguments contrary to that from the theme is that action has been taken to a restored performance. Do you know Monica Orendi Orendi? Do you have your management directive in there?

Monica Orendi: I do have a management directive. It doesn't fully speak to this though.

Mike Weber: Oh.

Monica Orendi: But what - I will make the comment on is and this is kind of going back to what Charlie mentioned a little bit ago, we do tend to point (unintelligible) and we'll put in the letter that when the periodic happens (unintelligible) we will specifically follow up on recommendations made in the IMPEP report.

And since there is a recommendation specifically speaking to this, this is something that would come up in the periodic meeting.

So changing to a finding of satisfactory really would not stop us from looking at that recommendation into here and readdressing this to make sure that they're still meeting what they're claiming they're meeting. So I don't know if that helps.

Mike Weber: Yeah. It helps. And similarly if you look at it the other way, where we define satisfactory but needs improvement would there be any material difference in the actions that the team would take at the periodic because we already have a recommendation there.

Monica Orendi: Correct.

Mike Weber: So what value is served by the satisfactory but needs improvement from the team's perspective?

Rob Lewis: I was just going to offer - where we would have two sets of (unintelligible) where there's only one (unintelligible) improvement.

Isabelle Busenitz: This is Isabelle. Whoever is speaking I can't hear right now.

Rob Lewis: Isabelle it's Rob. I was just saying that I think from the perspective of the

management directives the only difference to respond to Mike Weber's question would be that when there's two findings of sat but improvement and we see in the next review subsequent - a further degradation of the program then we're in a different place than if we only had one finding in the subsequent review (unintelligible) degradation of the program.

So that's the difference to me. And the other part of the question that was asked earlier, I do think that there's very clear authority of the MRB to change the finding if that's the question.

And I think there have been several recent examples where people were behind on inspections because they had focus on increased controls for example and rolling out those and the MRB varied from some of the - from the actual percentages.

Jim Lynch: If I could add just one thing to that discussion. As (Rob) mentioned, management directive 5.6 clearly talks about what to do if you have more than one non satisfactory finding. And in fact the team discussed the possibility of monitoring whether we would recommend that to the MRB.

We decided not to for the reasons that Mike identified, that we felt that they identified the problem and took corrective actions. We're still concerned about the sustainability of those corrective actions.

But that was - I just wanted you to be aware that the team had those very discussions about whether we should look at a monitoring call.

Man: And the concern about the sustainability is that you're not sure whether the corrective actions taken are in fact sustainable or is it that you want to follow through and insure that that restored performance continues?

Man: The latter. The latter. Yeah. We're - and David help me out if I'm misspeaking here. But we were very comfortable that the State of Oklahoma identified the issues, fixed the problem, had some backup checks to insure that their current system is up to speed.

And but we just have not seen that performance for a very long period of time. So that was - if everything is - continues as they're doing right now we're comfortable they'll stay satisfactory in this end of care.

Mike Weber: And the recommendation that was referred to is recommendation number one under the summary? Okay. All right. Charlie?

Charlie Miller: Yeah. I want to continue to pursue the discussion if I could. It's a good discussion. But I want to make sure that my comments (unintelligible).

But where I was on the fence was whether or not we should raise them to sat with some recommendation versus keeping them at satisfactory but needs improvement. Another process question Monica Orendi Orendi.

Monica Orendi: Okay.

Mike Weber: Really on your last MRB.

Mike Weber: It must be a rite of passage.

Charlie Miller: If we were to, as an MRB, change it to sat, for lack of a better word, beef up the recommendation to talk about the two year cycle my question is that midcycle if we've found that it hasn't sustained itself and it's slipped back as a result of the midcycle meeting can they, you know, given that they got a sat this time can we reconvene the MRB and evaluate the indicator to move it back even further - on the four year cycle?

Jim if you have any - you've done a thousand of these.

Jim Biggins: Yeah.

Monica Orendi: I mean the MRB will be reconvened for the periodic meeting.

Charlie Miller: Yeah.

Jim Biggins: Yeah. That's a good one.

Monica Orendi: So and, you know, the indicator would be discussed at that MRB.

Mike Weber: For a status.

Monica Orendi: And we do use the findings from periodic meetings as well as the previous IMPEP when we go out on the next IMPEP review that is four years down the road.

Charlie Miller: Right. Right.

Monica Orendi: But I see what you're saying. You're wondering could we, with this report, get something. Well we could go back and change this report.

Charlie Miller: No, I didn't say that.

Monica Orendi: Okay.

Charlie Miller: What I was saying was...

Monica Orendi: Right.

Charlie Miller: ...can you change an indicator in midcycle if you find degradation in the program.

Mike Weber: You can request - the MRB can order I guess a period of monitoring. So you have that tool. No matter what the findings are the MRB can say based on the degradation and performance we're going to go now to a period of monitoring for the state which, you know, gets...

Charlie Miller: Well I think what I'm searching for is the middle ground where we give the state credit for having self identified that, recognizing that it took some time to get to where they were to correct the problem. Mike says he's confident that they'll sustain it.

I'd like to be able to give them the opportunity to do that. But at the same time I want to be able to address the team's concern and not the sustainability aspect of it. That's where I'm struggling.

Monica Orendi: You wouldn't be able to go back and change the findings for this indicator because we'd also do findings...

Charlie Miller: Okay.

Monica Orendi: ...with that during the periodic. So we wouldn't be able to go back and say that we're now changing the finding from the 2010 IMPEP when we do that periodic meeting...

Charlie Miller: But we could...

Monica Orendi: ...through the year. What we did is...

Charlie Miller: ...do a period monitoring, right?

Monica Orendi: Yes. If we see degradation in their program and not just for this indicator but for any indicator, of anything because let's say knock on wood I hope this doesn't happen, but let's say you don't get your staff.

Charlie Miller: Right.

Monica Orendi: You know, that could cause us to push them to monitoring...

Charlie Miller: Sure.

Monica Orendi: ...even though their staffing is considered satisfactory in the IMPEP award.

Michelle Beardsley: Or - it's Michelle. Or couldn't we - the MRB could also call for a follow up review just for that specific indicator if you thought you wanted to change the recommendation on that. Couldn't we?

Man: Okay.

Man: Yeah. We - Isabelle mentioned that in the past they can always have the option in midyear to move the review op. And I think it's - I think it's a discussion about the importance of the recommendation being said in the report again, flagged for future impact.

You know, there was a concern at some point during the last (unintelligible) identified it. Again, four years from now we may be back (unintelligible) happen between the next two (unintelligible) sustained performance issue because we're going to have to follow up on that recommendation.

And not only is this (unintelligible). There are a number of examples for the pass to the MRB has changed the findings of the team but has kept the recommendation because again (unintelligible) point out very clearly, you know, it's still the sustained form over a period of time.

And recommendations already give you that look.

Man: Another option available to the MRB would be to wait two years for the next periodic meeting. And we'll raise the satisfactory - periodic was done in a year say - better and more staffing as well as the - things have continued to improve.

Man: I had thought about that. Sometimes we get into these discussions as to whether a year is sufficient time to demonstrate sustainability. And it gives the states sufficient time. So - everybody's perspective on that. You know, we struggle with that sometimes. You know?

Woman: It's not easy to (run) as well, you know?

Man: Yeah.

Woman: I mean it gives them a little bit...

Man: Yeah. Yeah.

Woman: ...more of a time than if we don't want to go the whole two years.

Mike Weber: But am I correct in discerning the view of the team that you're comfortable with the adequacy of the corrective actions that have been taken and your desire in the follow up recommendation is to insure that that performance is sustainable?

Man: That's correct.

Mike Weber: Okay. David do you agree with that?

David Turberville: Yes, that's correct.

Mike Weber: So that might argue against shortening the period before the next periodic check because we've got every indication at this point that we should expect to see sustained performance.

Woman: Do you mean it's not as (unintelligible)?

Mike Weber: No. You'd have all of this.

Woman: No. It would actually - it would - the finding.

Mike Weber: Right.

Woman: And it would be that the MRB disagrees and...

Mike Weber: Based on the information presented by the State of Oklahoma that corrective actions - that the problem has been identified.

Monica Orendi: There would be additional language about it. Feeling that the team's initial recommendation was (unintelligible) with the MRBs on the (unintelligible).

Man: I don't know exactly how that - I mean I can see how that goes without - I'm wrestling with the two - I'm hitting you with the process. But I'm also in the process not inadvertently punishing you.

Mike Weber: Right.

Steve Reynolds: (Unintelligible). There's a way to say process without (unintelligible) extraordinary steps that the state did in identification and aggressively (unintelligible) which is above and beyond what we would expect and that's why they're sat - something like that.

It's just the fact that we came here and (unintelligible) a reflective action. I think - everybody is always going to be like that - they've got to do - they did something (unintelligible) before the MRB - articulated here - aggressive action when they're not invited (unintelligible) - programs were called in (unintelligible) improvement - actions that they took - adjective like that but they went above and beyond.

Mike Weber: Without getting too carried away.

Man: It would have to be factual. You can't make this up.

Mike Weber: Yeah, right. But if I just...

Man: Like you said if they did it the last minute I don't think (unintelligible) - jumped on it and expect positive...

Mike Weber: Being comfortable in writing that justification?

Charlie Miller: Well ask the question of the team in a different way - do you think - Mike's assertion that they did get, you know, they did get on it and worked through the time period as best as they could and (unintelligible) places.

Mike Weber: You've got to watch your hedges?

Charlie Miller: Yeah. Watch your hedges as opposed to, you know, getting onto this (12 power) point team. You were the one in there looking at the last four years. And you know, you did...

Mike Weber: Well if you look at the chart you didn't see the overdue staff. I mean it was gradual trending down. So that's certainly a positive. I don't know if that would be the heroic sort of indication there.

Charlie Miller: You can get yourself way behind. And with the staffing levels you have it may be impossible to catch up...

Mike Weber: Possibly.

Charlie Miller: ...in a period of time. So I'm really looking at judgment.

Mike Weber: David do you want to tackle that?

David Turberville: Well Jim you know, good and well we went back and forth on this ourselves as a team.

And, you know, if you look at the numbers - if you take out the numbers that might give you as far as the ones that were administrative overdues you're still looking at approximately 8.6% of the licensees or the stations were then overdue.

That's approaching the 10% in itself. The IMPEP before they were at 9%. So, you know, the - I think all those issues need to be considered. They have shown that they've improved. And they have no overdue inspections right now.

It's a tough call. It really is. And it's easier for Mike to present his case than

for me to - for the - for our team to say - to give it a satisfactory. And then we would have to justify the other way. Why did we give a satisfactory instead of satisfactory but needs improvement?

Man: Well I guess I understood from your earlier presentation that the team felt that it was obliged to strictly adhere to the process. And because it tripped the criteria it warranted the satisfactory but needs improvement rating.

David Turberville: Yes. That's correct. That's - we just basically went with what management directive 5.6 said. It was straightforward.

Man: Right. So it sounds like you had discussions about it but you've - I'm putting words in your mouth. I recognize that but it sounds like you felt constrained that that was really the only outcome you could come up with.

David Turberville: Exactly. And Jim you can speak to that as well because it was...

Jim Lynch: We didn't see the latitude. We didn't think the team had the latitude at least for the draft report.

Man: Well I'm glad you didn't because if you had used it we might be a lot less informed as a board in terms of what was the performance...

Jim Lynch: Exactly.

Man: ...that you identified and how was it corrected regardless of how we come out?

Jim Lynch: Yeah.

Man: So...

Steve Reynolds: My concern is we have very specific criteria that led to this (unintelligible) being rated the way it was.

To me it would take - I guess we have to decide what level of effort would be used as a standard that the next person would say has to be displayed by the state programming in order for us to deviate from that almost prescriptive criteria, numerical criteria.

Are we saying it's an extraordinary level of effort before we would be willing to deviate from that or is it something less? And if we're saying it's an extraordinary level of effort then we have to make the determination here that that's what happened.

And so I'm a little hesitant to set a standard and say that they must have

standards in order to deviate and give them a different rating than what management directives would prescribe.

However, you know, I think I agree with the other members that I would not want to inadvertently punish (big) for, you know, on its own initiative identifying the problem and taking the corrective action. Going to the management directive itself regardless.

And so to me, you know, the balance might be struck more in leaving the rating where it is unless we say that there is some extraordinary effort.

And it said in the report, you know, making sure that it is explicitly stated that we recognize that they did on their own initiative, make an effort and correct the problem. And, you know, I would add one further thought to that.

If we're reviewing a program over a four year period we would expect them to maintain their performance over a four year period.

And so I guess I would have the question to the team in that is this something that should have been a little more obvious, you know, with - not necessarily tied to the loss of one individual from the program.

But, you know, isn't it obvious to the inspectors that they're not doing the number of inspections that they should be doing?

Now isn't this something that, you know, aside from the loss of one person it should have been obvious at the programmatic level rather than just, you know, we had a database problem and we lost the key person who was keeping track of these measures.

If the review team can provide some insight as to how obvious it should have been, you know, how heroic was this effort that would be helpful to me.

Mike Weber: I think somebody already made reference to it. But this is the same period when you were implementing the ISC - right, the interim controls. So it's conceivable that there was some distraction due to all that workload which we were also imposing on the states to impose on their licensees.

Man: Yeah. The increased controls was a significant effort.

Mike Weber: Yeah. And I guess in other situations where the threshold for the timeliness of the inspections was not met, the MRB found that nevertheless the performance was unsatisfactory.

Man: I believe that's the case for some states.

Mike Weber: I didn't want to jump in front of you but - going back over what we had earlier heard. So with that, Mike do you want to...

Mike Broderick: Kind of a final comment from my perspective, something that is - a point that Isabelle made that I thought was a good one, this is a case where my suggestion would be if you look at this like a performance based issue as opposed to a blind mechanical thing.

I think that - I think that's an appropriate way to look at it. And I would suggest that's the point as Jim explained this to me when he was - we were talking about this while the team was out there.

That he feels that the actual team out there in the front, they are constrained to follow - mechanically follow this process that you spit out a result. It's at the management review board level where judgment can be used. And I would - I think that's a reasonable - it's a plausible idea.

It keeps us from capturing and say if I had wined and dined Jim and Charlie (unintelligible). And as you say - as Mike said, you guys would be (unintelligible) and we'd never know.

Mike Weber: Right.

Mike Broderick: And this - but this is a case where if you have the opportunity not just to be - but guided by the mechanical things but to look at for the - for it to get the best outcome I really - I don't think - there's nothing that I could do if you guys don't change this indicator.

It's not a spur to me. I'm not going to do anything different when I go back except get chewed on by my bosses perhaps. But I'm not going to - in terms of constructive things for the program I'm not going to do anything different.

The only thing that keeping the rating at a lower level does is it punishes the program. It lowers the credibility of our program in the eyes of my management and the regulator community. And so I think that would be unfortunate.

And I don't - of course I'm biased but I don't think we deserve that.

Mike Weber: Charlie are you ready to weigh in on your view on the recommendation?

Charlie Miller: Yes. If I felt as a result of them falling behind - the results of that identified safety problems I would probably feel a little bit differently than in the next indicator. I guess what I would vote for is to - given everything that I've heard, raise it to a satisfactory.

But somehow either in a cover letter or in the recommendation make it more specific that it's a real area of focus that the midcycle. And sustainability is an issue that, you know, we'll make sure that we keep on the radar screen and evaluate. I guess that's where I'm coming out.

Mike Weber: Steve?

Steve Reynolds: (Unintelligible) talk out loud in a while.

Mike Weber: That's okay.

Steve Reynolds: (Unintelligible) thought in my head. You know, it's not exactly in decline (unintelligible) - and then they found it and got it back together - is about (unintelligible). They really didn't maintain or sustain the thing - got better. Hiring new people - I still think they (unintelligible) - point of view.

But I think - I think there's a door between process (unintelligible) got to call it that (unintelligible) - we did it aggressively. (Unintelligible). Our process is valued at (unintelligible) recommendation. But based on the threats of action (unintelligible) the stronger your recommendation.

Like Charlie said we'd be able to make the call on that process in two years - it has positioned itself (unintelligible) so they couldn't take action during periodics (unintelligible) by being - I don't think we're being too nice here. I think - might take good action.

But we - position ourselves so that we can take the right action.

Mike Weber: Thank you. Jim?

Jim Biggins: I think I agree with that in that I think the review team's position is clearly stated and the basis for that is clearly stated. However, I don't believe that the management directive requires us to be so inflexible that our review cannot change that.

So I think it is appropriate to change that but because this is a review over the prior review period and not just time immediately prior to the team going out there.

In other words, not just a period where they did improve but the entire period I think it is a (preference) to make the recommendation a little stronger as far as insuring the sustainability is there over the next entire review period.

Mike Weber: Thanks. Isabelle what's your view?

Isabelle Busenitz: My view remains the same as what I had stated. From what I heard it

appears as if this incident is something that is not likely to reoccur since it has been identified and remedied midterm of the review period.

And so my feeling is that a satisfactory with the recommendation being looked at, at the two year point, would be sufficient to track the sustainability of this indicator.

Mike Weber: And you would support adding language to this part of the report which would explain why the Board decided as it did to raise the rating for the reasons of prompt identification and corrective action and the appearance of that corrective action should be a sustainable approach?

Isabelle Busenitz: Yes. I agree with that. And that's one of the points that I was thinking of while we were listening, is that the report really didn't - that I got didn't really address Mike's comments at all. And I thought that in any case it needed to reflect what the Oklahoma program had done.

Mike Weber: Yeah. And I think that's probably a matter of timing because the team issues its report and then it gets a response from the state. It's always better to hear it live from the State Representative than reading it as an email. All right. So it sounds like it's satisfactory.

We'll strengthen the rationale for how the Board reached its conclusion and strengthen the recommendation so that we could position forward for coming back at the midcycle review. And carefully reviewing that, determining whether additional action is warranted.

Charlie Miller: I think, you know, if we could I'd like to see in that recommendation personally the recognition if the Board does agree with the team's (unintelligible) sustainability. And that's why we want to put that focus there.

Man: I agree with what Charlie said also. Would it be possible to somehow put it in a more - if we see (unintelligible). You know, we'll consider going - out there.

I mean it's possible if you put it out there because two years from now in the next board says yes, this Board (unintelligible) possibility in putting the state on notice if they don't sustain it. It's a possibility for the monitoring.

Mike Weber: Yeah. I think we want to be careful about boxing ourselves in.

Man: I don't say go through it.

Mike Weber: Right.

Man: I say that, you know, we talked about the possibility doing monitoring. We've been saying that again - go back - I've been on several MRBs where you look

at the past record and you're not sure if they even talk about going (unintelligible).

But you see - you know, the strong performance but you don't know where to go with that. And we had the thoughts...

Woman: You want to box us in only - that's my concern. When will you make the recommendation based on the overall performance not just one. And I see where your concern...

Mike Weber: Well we still have another one where there's...

Man: Could you withhold that really?

Mike Weber: Yeah.

Man: I don't think - two years from now it's going to be saying - it might say well, the team just did it based on nothing - and those of you who put reality into it...

Mike Weber: Well we don't want to convey that.

Charlie Miller: I would hope that the words...

Mike Weber: Yeah.

Charlie Miller: ...mean more than that.

Mike Weber: Yeah.

Mike Weber: Right. All right.

Man: I have that concern.

Woman: (Kim) and I will work on this and put something together that will be acceptable for everyone.

Mike Weber: Okay.

Man: Okay.

Mike Weber: Next indicator.

Jim Lynch: Good. The next indicator is a technical quality of inspections. And David if you're still with us you're going to talk about that one as well.

David Turberville: I'm still here. All right, thank you Jim. For this indicator the team reviewed

inspection reports, enforcement documentation and interviewed appropriate staff as needed. Also during this time Jim accompanied three of the sections inspectors in the July timeframe.

From the review of the inspection reports we found that the reports adequately addressed health and safety issues as well as security issues as appropriate reports adequately supported violations and the recommendations to the licensees were well documented in the reports.

For the accompaniments by Jim it was found that the inspectors were well trained, prepared and were thorough with their audits using performance based techniques while conducting the inspections. Another part of this indicator is the inspector accompaniments by the section management.

Mike Broderick performs that function and on an annual basis he accompanies his - the inspectors. And it was noted that there were a couple of times I think in 2007, 2008 timeframe where one of - one each year of the inspectors were missed.

So that was discussed. And Mike indicated that he was setting a goal to get 75% of the inspectors accompanied by September of each year. So that would make sure that he was on time and also he had approved a senior inspector to assist in this function as needed.

So all in all we really found no issues in reference to this indicator. And based on the IMPEP evaluation criteria the review team recommends that this indicator - technical quality of inspections be found satisfactory for the Oklahoma program.

Mike Weber: Thanks. Charlie, questions?

Charlie Miller: Yeah, just a comment. While it's a different indicator I think it was - my reading of this indicator in the performance is - gave me some solace with regard to the first.

Mike Weber: Okay. Steve?

Steve Reynolds: Jim, you accompanied some of these inspectors didn't you?

Jim Lynch: Yes, I did.

Steve Reynolds: Could you just talk about your observations a little more, in what your senior...

Jim Lynch: Yeah. The accompaniments were three different programs. One was a medical breakthrough therapy program, one was an industrial radiography operation. And the third was an equine nuclear medicine facility. That's a lower level inspection.

But it was that particular inspector was not qualified on the more significant type of inspection so we went to her highest level. Generally speaking, the accompaniments went very well. The most significant feedback that I had for any of them had to do with the medical breakthrough therapy inspection.

And that one, as you know with the BA issue that we've been involved with for a number of years, we found it very important that we look at a lot of data when we're doing our inspections. And in this particular case the inspector looked at one patient file and drew her conclusions from that.

I didn't think that was adequate or at least I didn't think that was the - a good basis for drawing an overall conclusion.

I talked to her about that and she understood my concern and took that - also discussed that one with Mike and updated their procedures now to require more looking, you know, at medical events and that sort of thing. So that was a weakness that was identified during the accompaniments.

I think the other inspections although we certainly give the inspectors a lot of feedback when we do these accompaniments based on the team's experience, those were very good.

Mike Weber: Did you question the inspector on the - how she - was it a female?

Jim Lynch: It was a she. Yes.

Mike Weber: How she came to the conclusion that that was an adequate data review?

Jim Lynch: Yeah. She indicated that her discussions with the physicist and the medical physicians were in her mind, adequate to make her determinations.

Mike Weber: So she had a rationale...

Jim Lynch: She had a rationale.

Mike Weber: ...for how she decided on the...

Jim Lynch: Yes.

Mike Weber: ...sample size. I believe that she had - the inspector identified - told me in her discussions that he praised the inspector for identifying one issue there. Just in looking at it you missed really I think...

Jim Lynch: Yeah, it was - and she was at - it wasn't apparent to me and she picked up on it. So, you know, her review was very thoughtful. And our finding as David said, on this indicator was positive.

But as I mentioned, when we're doing these we want to point out room for improvement and certainly this was that. but not a showstopper.

Her rationale in her interviews, her thorough review of the one chart I thought were adequate to make her call just probably not as thorough as I would have expected or we would have expected our inspectors to do.

Mike Weber: Okay. Anything else? Jim?

Jim Biggins: I don't have any questions.

Mike Weber: Okay. Isabelle?

Isabelle Busenitz: I don't have any questions.

Mike Weber: I have one question. It's really clarification. In that paragraph that talks about your inspector accompaniments the first sentence says that your policy is to accompany all staff performing inspections.

And then the last sentence says that in response to the discussion you decided that you would set a goal to accompany 75% by September. Is the rationale for that is if you've got 75% by September you're likely to get the remainder in the remaining three months?

Jim Lynch: It's pretty close to - one of my problems is I tend to run out of year.

Mike Weber: Oh okay.

Jim Lynch: And so at the end of it - holidays and weather and things in December it's a bad time of the year to end if you're really trying to catch up.

Mike Weber: Yeah. I understand.

Jim Lynch: So I...

Mike Weber: Okay. I just wanted to make certain I was clear on the direction now. Because it almost seemed like okay, well we're close to 100% so we'll set the goal for 75%. I knew that wasn't what you meant but I just wanted to make certain I understood.

All right. Charlie your view on the team's recommendation?

Charlie Miller: I support the team's findings.

Mike Weber: Okay. Steve?

Steve Reynolds: I agree.

Mike Weber: Jim?

Jim Biggins: I agree.

Mike Weber: Isabelle?

Isabelle Busenitz: I agree.

Mike Weber: Okay. Well let's move onto technical quality of licensing.

Jim Lynch: Technical quality of licensing actions - Rachel Browder will discuss that.

Mike Weber: Come in Rachel.

Rachel Browder: Yes, thank you. Okay. I reviewed the licensing action that the state processed on the files represented a cross section of the types of modalities and use authorized by the state as well as examples of licensing actions conducted by each of the license reviewers.

We're going to amend that determination, renewals, new licenses. The files were reviewed for completeness as to quality, consistency, verification that health and safety and security were appropriately addressed. And the staff did use checklist. We document that item for their review.

Saving formal correspondence for sufficiency. And all the licenses were peer reviewed and they were signed out by Mike as the section manager. And they used recognition, that database that they created, (RADMAN), so all the licensing tracking was updated in (RADMAN).

The review did identify several licensing actions for medical authorizations that didn't follow the existing guidance or regulatory requirements. And this resulted in some submissions being authorized for (realities) that were not fully supported by the documentation that was submitted by the licensee.

This is a concern by the team because it's a trans boundary issue. That is once the physician is authorized under license then he can essentially work anywhere in the United States by the authorization that was granted unto the Oklahoma license.

The state did take immediate action. They followed up with the licensees that were identified during the review. In addition, the state had requested assistance to conduct on (spot) training, the staff of medical regulations and the requirements.

And the NRC has provided training to other states for I guess on the spot a specific training, focused training. This has been identified as a win/win for both parties on the NRC in the agreement states. And Region 4 did support everyone on this request.

One of our regional senior license reviewers went to the State of Oklahoma and conducted a 2-1/2 day training course during the first week of November. She provided the training, answered their questions and worked through some of the case work examples.

And the feedback for the state indicated that the training was very beneficial and productive. Other areas that were reviewed determined that the orders for increased control and fingerprinting were implemented by license conditions.

Prelicensing guidance has been successfully implemented on the state, had initiated the process to document the maximum possession limits on radioactive material licenses. And that was sent out I think in June of this year under our (TD) letter.

So they had identified those licenses that needed to be updated with that full possession on it. Those were all based on the reviews. The team recommended that this performance indicator for technical quality and licensing actions we found satisfactory but needs improvement.

Mike Weber: With one recommendation?

Rachel Browder: With one recommendation. Thank you.

Mike Weber: Okay. Charlie, questions?

Charlie Miller: Yeah.

Mike Weber: Comments?

Charlie Miller: Just a comment. Medical areas - one that's received a lot of attention recently both at the NRC filing because he was 28 years old when the VA started.

And when I look at the findings from the team with regard to that unless I'm corrected, it could have safety implications, especially if you have people working on modalities they're not authorized to work on. This has always been a constant tension between regulators and the medical community.

So this is a very important area. And so I'm happy that the state has been receptive to getting some training. We'll offer continued assistance if you need that either from the regions or from headquarters. We're more than

happy to do that. But I think that this is a new finding.

Mike Weber: Okay. Thanks. Steve?

Steve Reynolds: I agree with Charlie. I didn't want to say it head on like Charlie and Rob and all that we can do. I've always been very supportive when we give the state training when asked. And I - takes the right state to be willing to say I need help. (Unintelligible) like Charlie said.

Medical is a big area that we (unintelligible).

Mike Weber: Okay, thanks. Jim?

Jim Biggins: Just a comment. I thought the review team's analysis and basis for its finding was well described and well supported. And I think I do have to say that I agree with Charlie in that I appreciate the fact that the state, you know, is working with staff to try and improve in this area. It reflects well on the state.

Mike Weber: Okay. Isabelle?

Isabelle Busenitz: No questions.

Mike Weber: Mike, I had a question. In the other indicator where the team recommended satisfactory but needs improvement you pushed back appropriately so and offered a different view that the Board took into consideration. What's your response to this one? I didn't see it as explicit in your email response.

Mike Broderick: I guess I would say I feel it's harsh. I think it's a strong reaction considering that most of our licensing program is in good shape. But I can't, you know, I don't have a strong rebuttal or a case against it.

Mike Weber: So you accept the needs improvement on this one.

Mike Broderick: I accept it. I'm not - I guess it's a little bit harsh.

Mike Weber: You're not happy but okay.

Mike Broderick: I think it's maybe a bit harsh but I accept it.

Mike Weber: Rachel, I had a question for the team. What was the root cause for the problems that occur in licensing? And here's...

Rachel Browder: I don't know if I'd be able to identify really a root cause. I mean when I talked to - and it was not just one license reviewer. All of these cases were done by each of the license reviewers. And like I said, they were all peer reviewed by someone else.

And I asked them if they were familiar with our medical toolkit. And they were. That's where the board certifications are. An additional guidance for some of the, you know, specific modalities. They do - we'll talk about the - I mean their compatibility. They adopt our regulations by reference.

So they have (10 CFR) part 35 and follow it just like we do. In talking with some of the license reviewers there was changes.

I mean when they went through or they were going through a medical physicist - work and they were taught part 35 when they were a medical physicist it was under the old sub part J training that we don't have anymore.

And they were implementing what they remember, what they trained when they were a medical physicist and not what the regulations say today.

So I think a lot of it is just giving the training that they've had now where the items are in the medical toolkit and then pulling out the regulations and really reading and understanding what's in the regulations and all of the changes with the training and experience attestations.

And the fact that attestations are required even with board certification. And that the board certifications are on the medical toolkit and you can't just accept, you know, the old ones now. So I don't know if there's really all one root cause. I think it was perpetuated amongst it. It is a close root.

They did talk - I mean they're all in the same cubicle area. And a good rapport of the employees there in (unintelligible). I think they communicate and talk and share. And it may have just perpetuated itself. I don't know.

Mike, do you want to add something just as an outside of observation as I observed just in one week which probably isn't - is just a snapshot?

Mike Broderick: To me I think where we went wrong you had a series of changes in the medial rules back in the mid 2000s, I'll say, I don't remember the exact dates. And I think frankly we just didn't keep up on that and we just didn't - the last one as you said, as Rachel described, we did implement it.

One thing - and I know - I suspect anyway - this is a song that you hear from states a lot at these things. I didn't dwell on this particular note - on the other case where we had an issue because I felt I had a strong one. And I'll mention here.

This is - at least - I won't say that certainly it's not a cause but we may have avoided a chance to fix - avoided a chance to block this.

When you have these continual increased control things we have a certain amount of management attention and attention to implement - to do change

or to identify problems and so forth.

And whenever you guys do something on the increased controls or come up - somebody has a new idea and you correct the states to everything, that draws a lot of that attention away. It goes to that and nothing else.

And I certainly can't - I would be lying if I said oh yeah, we would have been on top of this if it hadn't been for those darned increased controls. I will not claim that but I think we may have missed a chance to do that. We may have missed an opportunity there.

Mike Weber: Okay. And were the scope of these problems confined to the medical use area?

Rachel Browder: I think every - about every medical license that I've reviewed has some issue with it.

And I mean I specifically looked at the licensing actions that were significant, you know, that had significant changes adding authorized users, looking at renewals, making sure that, you know, the, you know, RSO had been named by the hospital.

So I did focus on the review on significant actions, all of those actions under medical had a problem associated with it. On a scale of minor to I think a major scale for physicians were authorized without supporting documentation.

Some of the industrial, some of the other types of licenses that they have academic draw, a lot of it was good. There were some minor problems with those licenses. But it was not just a local problem like we saw with the medical area.

Mike Weber: And it seems like training was at least a contributing factor if not a root cause in this case. But we did not identify this under the staffing and training indicator. Is that because it didn't manifest itself outside of the licensing area? Team leaders?

Jim Lynch: Yeah. That's basically...

Rachel Browder: Yeah.

Jim Lynch: That's basically true. The medical criteria as Rachel described, is a difficult thing to keep up with. I mean we've changed our processes. We've, you know, it's hard for me to keep up on it. I don't do it every day so it's very difficult to keep up on.

So I think, you know, that was the problem. And once they were instructed where to go to find the information we have confidence that their license reviewers are fully capable of following the current guidance.

Mike Weber: Okay.

Rachel Browder: And I just - Jim can answer your question a little bit more about the training. A lot of the training that the NRC provides is on the different types of modalities. You know, how does, you know, breakthrough therapy, how does (canonized) work? How do microspheres work?

We don't in the training really specifically go over the licensing on it. There's one licensing course that is really probably 50,000 foot elevation and you spend one day on medical. So really to learn how to do licensing it's good to have the courses to understand the modalities that you're authorizing.

But a lot of it is on the job training in the, you know, in the region, in the group. And so if you're in an area that doesn't have that knowledge or direct to, you know, their guidance or are familiar with the regulations then you could perpetuate it.

Mike Weber: Okay.

Rachel Browder: The problem could be perpetuated.

Mike Weber: Okay. Thanks Rachel.

Mike Broderick: A suggestion that you guys may want to consider - to the extent that when you have a major rules change like the medical stuff you did do some special training back when the - at the first of those. I think it was about 2001 or '02 when that was on the horizon.

We did some sort of specialized training we had for Region 4. You didn't do - for the succeeding changes you didn't do anything in particular. A suggestion that I have had - you might want to consider. And most agreement states have I believe it's a three year period after when they do that.

And in many cases anyway it comes at the end of that three years. But you may want to look at giving some sort of a training opportunity. And of course it's easy for me to suggest things that you should do. You should do this...

Mike Weber: That's okay. We welcome feedback.

Mike Broderick: So it might be helpful at the time if - at least when you do a major revision. For something minor this would be unnecessary.

But when you do a major change or a complex one like the one that Rachel discussed about authorized users you might want to look at about the two or three years after the NRC adopts the agreement states are starting to come online.

Maybe a Web based training or something that would explain where the license writers would participate which I think would have to be Web based. You do things at the OAS meetings and the ERCPD but they're usually when you adopt...

Mike Broderick: ...a couple of years ahead of that. And it's just to me - and I don't write any licenses. I review a lot of them but I don't write any. But you need to find some way to give it out to the license writers where they can get it directly without it being filtered through me or my counterparts.

Mike Weber: Good suggestion.

Mike Broderick: Thanks.

Mike Weber: Okay Charlie. Your view on the team's recommendation?

Charlie Miller: Yes. You know, Mike had indicated and perhaps it was a little harsh and - harshness because - one of the things I always tell my staff is that - medical is the only area that we regulate (unintelligible). But people are (unintelligible) potentially. Everything else we do tries to help people avoid getting radiation.

So to me it's really a big safety area.

Mike Weber: The last barrier.

Charlie Miller: It's the last barrier. Right. So I support the team's findings.

Mike Weber: Okay, thanks. Steve?

Steve Reynolds: I agree with what Charlie said.

Mike Weber: Jim?

Jim Biggins: The same. I agree with what he said and I agree with his findings.

Mike Weber: Isabelle?

Isabelle Busenitz: I agree with the team's findings.

Mike Weber: All right. Let's move onto the next indicator - incident and allegation activities.

- Jim Lynch: Yeah. Technical quality of incident and allegation activities. And just to prove that I did do some work during this review I'll discuss this one.
- Mike Weber: Nobody questioned that.
- Jim Lynch: We looked at 16 reported incidents during the period and one of the criticisms we oftentimes have of state programs is the reluctance to go out on a site investigation of an incident.
- It's easy to sit in the office and take the phone call and talk to somebody over the phone but it takes a real commitment to go out and investigate incidents in the field. It's very time consuming. Oklahoma did really an exceptional job in this area.
- As I had mentioned before, they have a lot of industrial, a lot of radiography and well logging licensees with significant safety potential when you're talking about 100 care resources and so forth. So we were very pleased to see the strong commitment by the state to perform those onsite reviews.
- So that was very good. During the 2006 review, the previous review, there was a recommendation made to insure proper response, documentation, enforcement and follow up for incidents. We answered just about all of those concerns during this review with the exception of the documentation.
- Albeit they did very well with the response the documentation was not very good at all and the team struggled through the week just to find the pieces of information to prove that they did do the event follow up that they claim they did.
- And as I said, we did confirm that but the documentation was a bit of a mess. So the team is recommending to the MRB that this particular recommendation from the previous review, rather than close that and reissue another one, that we just leave that recommendation open until all of the components of the recommendation were satisfied. And I'll get back to that in just a second.
- On the other side of this indicator we're looking at allegations - allegations against Oklahoma licensees. We looked at seven allegations and they did a good job on all but one. That allegation we were unable to confirm that the state had gotten back to the ledger to close out that particular concern.
- It's a very important part of allegation response that you do your investigation, then you go back to your ledger, you confirm that you did - you looked into what needed to be looked into and then close it out. So there was one allegation that they could not show us that they did indeed close it out.

Mike Weber: One or two?

Jim Lynch: Just one.

Mike Weber: Okay.

Jim Lynch: During the previous review again in 2006 there was a recommendation. There was a recommendation for proper tracking and closure of allegations. So again, the same rationale - we did not feel that we could close this one.

Albeit, you know, all of that said, the documentation issues and this one allegation follow up that wasn't done very well, overall the team found the response to incidents and allegations to be satisfactory. And that's what we're recommending to the MRB.

Again, with those two recommendations left open from the previous review.

Mike Weber: Okay, thanks. Charlie?

Charlie Miller: Yeah, a question Jim. One, you said you couldn't find documentation to close that one allegation but you found others with the appropriate documentation?

Jim Lynch: We found document - allegations are you talking about?

Charlie Miller: Yeah. Allegations.

Jim Lynch: Yeah. The other ones were fine.

Charlie Miller: Okay. We have, you know, a process - a timeline with some metrics in it for - acknowledgement letter that's going to go for a period of time. Now that we're still working in a closeout letter. Do they have a similar tech name or is it...

Jim Lynch: Yeah, they could...

Charlie Miller: You know, offer to help them with in that regard to...

Jim Lynch: The DEQ - the Department of Environmental Quality has a very elaborate allegation tracking system and maybe I'll refer to you Mike, to explain how that works.

Mike Broderick: This is the one finding on the review actually where I got in trouble with my management basically. The - without going into too much ancient history - complaints which is our team for allegations locally, are very important to the history of the DEQ and they're taken very seriously.

And we do have as Jim said, an incredibly elaborate system for responding to

complaints and to dealing with those. So I heard - my management wasn't happy at that and that's - should have done that so that's okay.

But we have a very elaborate system and we're going to go ahead and just talk in general comments on this if that's okay. In our 2006 IMPEP, some ancient history, their documentation as a whole was a problem for us. And we did respond well and I got this - very good support from my management.

They transferred - hand selected a lady from another part of DEQ who had a very - a track record managing efficient record systems. And we did a good job. We had a good focus and the inspections were as they were not good back in 2006 our documentation was poor.

In this case I believe, Jim back me up, we had at least acceptable and better than acceptable probably, record keeping on our inspections and such. Unfortunately we focused on (expecting) and we didn't follow through on the complaints part. So we will.

That's a difficult thing. Unfortunately we have at least three different reporting systems to deal with between the NRC and the states. So it's going to be - frankly it's going to be difficult to define an efficient way to do that. This is one where my management is very attentive to.

Mike Weber: Anything else? Steve?

Steve Reynolds: I'll make a comment again that - over - how we want to...

Isabelle Busenitz: This is Isabelle. I'm not hearing who's speaking.

Mike Weber: He's moving.

Steve Reynolds: Sorry about that Isabelle. I thought you could hear me earlier. But I was just saying I agree with what Jim Lynch said about Oklahoma being responsive, going out on incidents. We've seen in the past some states being reluctant to go do that.

And when Jim or I are pushing to go out it's interesting that what they heard over the phone is not really what happened. So it's very important to go out there and see it firsthand. So kudos to Mike and his program for going out on that and the next piece is getting the documentation right.

But again, it's important to go out on every instance and follow up where you can because often it's a real story out there and not (unintelligible).

Jim Lynch: It's something that I personally feel is very important. So I always push back and I appreciate you giving us credit for that.

Mike Weber: Thanks Steve. Jim?

Jim Biggins: I guess for Jim I just have a question. The report states that you could not verify that a ledgers were notified of investigation results at the conclusion of two investigations. Was it two or was it one? Because you had just said one.

Jim Lynch: Oh yeah, I did, didn't I?

Jim Biggins: And I'd like a little perspective...

Jim Lynch: Yeah.

Jim Biggins: ...of, you know, about how many - that's two out of...

Jim Lynch: Oh, seven. It really should have been one.

Jim Biggins: Okay.

Jim Lynch: I'm sorry. That's an error.

Mike Weber: So conclusion of one investigation?

Jim Lynch: Yeah.

Jim Biggins: Yeah. That's...

Jim Lynch: I apologize. We'll fix that in the report. At one time there were two that were in question and I think we got one - the other one resolved so it was just one.

Jim Biggins: Okay.

Jim Lynch: Thanks for pointing that out Jim.

Jim Biggins: Other than that I don't have any particular questions about this.

Mike Weber: Okay. Isabelle?

Isabelle Busenitz: I don't have any questions.

Mike Weber: All right, thanks. Charlie?

Charlie Miller: I support their findings.

Mike Weber: Steve?

Steve Reynolds: I agree.

Mike Weber: Jim?

Jim Biggins: I agree with the team's findings.

Mike Weber: Isabelle?

Isabelle Busenitz: I agree.

Mike Weber: Okay. Let us proceed to the noncommon performance indicators.

Jim Lynch: Yeah. And there's only one of those and that is compatibility requirements. And Rachel Browder will discuss this one.

Rachel Browder: Yes. The state does adopt the NRC regulations by metrics. When we went through and looked at them and again it went back here in the review period and (unintelligible) (Pam Bishop) had retired. And she was the one who had primarily been doing the regulations process for compatibility.

There were several that were outstanding at the time of the review. When we looked at those specifically some of those packages that - the state had gone ahead and processed them as licensed condition. So even though they hadn't sent them into the agency they were processed in turn as license condition.

One in particular went to the national source tracking system. The other one - they were really minor. They weren't significant compatibility issues. They're in the review. Mike did identify one of his employees who has started working on the regulation package.

And they did submit that to the NRC. We reviewed that. There were seven comments on those packages. And I think the state's reviewing it. But our review of I guess what was significant we determined that they were not considered significant compatibility issues.

The state was addressing them. They had implemented a couple of those guidelines and conditions. And so we, the team, recommended that Oklahoma's performance with respect to this indicator be found satisfactory.

Mike Weber: Mike did you want to...

Rachel Browder: Do you have any questions?

Mike Broderick: As I understand it is what you're talking about us sending - Rachel is you're talking about us sending the packages for review by I want to say (OSTB) FSME. It's not on the implementation and we're up to date on the

implementation of the regulations. Is that correct?

Rachel Browder: No. Not up to date. You all sent the package in but their comments to the package. And so when you have the final completed and incorporate the comments it's truly - you'd think that maybe adopting NRC regulations by reference is easy.

But you really have to discern and identify which ones the NRC retains. And it's not adopting all of them. And that's some of the comments to some of those regulations the NRC actually retains the jurisdictional authority and not the state's and that's what they need to identify.

So it would be finalized when you actually have submitted the final to us that incorporates the comments that were identified in the letter from (Terry Reed) back to your office on October the 29th.

Mike Broderick: But the rules that we're enforcing in Oklahoma are up to date. Basically where the problem is, is in your review of the packages that we've implemented. Is that - that's what I understand anyway.

Rachel Browder: The rules that you're implementing right now are the rules that were dated January 1, 2008.

Mike Broderick: Right.

Rachel Browder: And so if you were looking at two years there because this is 2010. And so the rules on some of those rules of mine is they are incorporated in that 2008 that you have implemented. But because you haven't sent in the file to us we still say that it's not totally compatible. It's more the paperwork issue.

Mike Broderick: Exactly.

Mike Weber: Yes.

Mike Broderick: The rules that are being implemented in Oklahoma and are being enforced are up to date. You've identified a couple of minor problems that would have been identified if we had been better about sending them in for your review before we made the change.

But they're mostly things that are where we accidentally adopted something that was actually under NRC's jurisdiction. And I assure you we have no intention and I don't think you guys believe that we're going to declare our independence and start whatever process expenditure review or whatever.

Mike Weber: Yeah. All right. Thanks. Charlie? Okay. Steve?

Steve Reynolds: I don't know if I can - I thought I would ask Rachel but - is that tied up with the same (unintelligible) in 2006 and '07 or was that in your (now) success going forward?

Mike Broderick: I think Rachel got confused. It wasn't really (Pam Bishop) that was on this. It was actually a guy named (Dale McCard). And as it happens he has - he's had a lot of help. He's an older fellow and he had a lot of health problems. He has since - retired since the IMPEP. He's fully retired.

Steve Reynolds: Okay.

Mike Broderick: But yeah, (Dale McCard) was in it and he's retired. And we've identified (John Flynn), a new - another employee as the...

Steve Reynolds: Okay. So you take - but would they take corrective actions?

Mike Broderick: Yeah.

Rachel Browder: Thank you for the clarification Mike.

Mike Weber: Okay. Jim?

Jim Biggins: No questions.

Mike Weber: Isabelle?

Isabelle Busenitz: No questions.

Mike Weber: Okay. Charlie, your view?

Charlie Miller: I support the team's findings.

Mike Weber: Okay. Steve?

Steve Reynolds: I agree.

Mike Weber: Jim?

Jim Biggins: I agree with the review of the team.

Mike Weber: Isabelle?

Isabelle Busenitz: I agree.

Mike Weber: All right. That brings us to the summary. Jim?

Jim Lynch: Summary - as proposed in the draft report was that four indicators be found

satisfactory and two, satisfactory but needs improvement.

Based on the MRB's discussions today we will in the proposed final report or in the final report rather we will indicate that five indicators were found satisfactory and one - the licensing indicator be found satisfactory but needs improvement.

Four recommendations were identified and the team is recommending to the MRB that Oklahoma and the state program be found adequate to protect public health and safety, compatible with the NRC's program and that the next review be in approximately four years.

Mike Weber: Thank you. Charlie, questions? Comments?

Charlie Miller: No questions or comments at this time.

Mike Weber: Steve?

Steve Reynolds: First of all I really appreciate the frankness, you know, that Mike - I also appreciate the...

Mike Weber: We appreciate Isabelle too. And that's why we want her to hear you.

Steve Reynolds: Yeah. I just want to say that I appreciate the frankness and openness of Mike on these issues. We need to know - fully understand. The report was very well written. It's probably one of the better ones that I've read in a long time. But you still - you've got to hear the words to do that.

I think the team did a good job calling it like they see it and following the process. The process is there to be our friend and by the numbers - the process is our friend. Sorry. That was good. I think that the state has a good program.

I've known Mike for a little while and you can tell he's got passion for the job which I think you need to take this job seriously. So we're going to have troubles in the future with staffing as all states have.

Mike has the right passion for that. And so good luck in the future Mike and again, I applaud the state - I mean the review team for the work that they did.

Mike Weber: Thanks.

Steve Reynolds: Thanks.

Mike Weber: Jim?

Jim Biggins: I think the review team did a very good job documenting the basis for each of

the indicators. And I think in doing so it makes it easier for us in our review to be able to discuss the issues and have a thorough discussion in reaching our conclusion.

I'd also like to reiterate again that to me it looks like the state was very cooperative - has been cooperative.

It's working hard to maintain a quality program and if, you know, if I did point out one thing - to me it would be that, you know, especially in a smaller or lower staffed program I should - it is all the more important to insure that when one person leaves you don't end up with the kind of problem that was identified by the review team.

And so I think overall the summary and the recommendations from the review team are appropriate as we discussed increasing a full string of one recommendation. But otherwise it looks like it's on a path to a sustainable (unintelligible) program.

Mike Weber: Okay, thanks. Isabelle?

Isabelle Busenitz: I think that my comments in closing would be to say that I appreciate this process of the MRB having recently been on the other end of one.

And I think that it shows that the willingness to take all of the facts and feeling of what has happened during the IMPEP review and take that report and make it full color. And it has more character and you can understand the recommendations better.

And so I appreciate the process and the questioning out to the - that the members have during this MRB.

Mike Weber: Thanks Isabelle. The one question I had is do we want to talk about how this first recommendation needs to be beefed up? Or Monica Orendi, Jim, you think you have enough from our earlier discussion that you're going to come back and propose something that would reflect the decision of the Board?

Monica Orendi: Questions? No.

Mike Weber: It's more of a question than a - because this - you're going to leave here and work to finalize the report. So it needs to be clear to you the basis for the Board's discussion.

As I recall when we talked about the second indicator there was a concern that it be strengthened in terms of - we've got the sustainable in inspection program there but there's also the attempt to follow up and the need to demonstrate.

Monica Orendi: (Unintelligible) the incentive level be addressed not only in the cover letter. It will be attached with the...

Mike Weber: Right.

Monica Orendi: ...final report. But we're also going to add it to the final report.

Mike Weber: Okay.

Monica Orendi: So I mean like I said if there's anything you'd like to add please don't be afraid to share it because, you know, it'll just help us make sure we capture everybody.

Jim Lynch: If I may, we are - we can beef up that section a little bit to talk about the corrective actions if you will that Oklahoma took. But the recommendation itself - I don't know, I thought was - I thought adequately covered our discussions today.

Mike Weber: Well that's why I'm raising it now so that the Board has a different view that we share that with you now so we don't...

Jim Lynch: I appreciate that.

Mike Weber: ...tell you to go find a rock and give it to us.

Jim Lynch: And we, you know, obviously we want them to take whatever measures are necessary to get those inspections done within their priority system. And as David mentioned earlier, the key is sustainability.

Anybody can get caught up but to keep it over a period of time that's the key here and that's why we built that sustainability part in the recommendation.

Monica Orendi: I guess my question - I just wanted this earlier is that, all recommendations will be looked at and, you know, we don't want to (unintelligible) ourselves on one of these. You know, is it acceptable to the Board? The cover letter will really say that all recommendations are looked at periodically.

We'll just strengthen that language in the first section or in the summary section that once again, that they will be looked at, at the periodic review rather than just sticking it to this recommendation by itself. But we can still add that language in the report as well.

Just it would either be in the beginning or in the summary.

Mike Weber: The only thing that came to my mind when we were talking about this before is instead of the kind of conventional way that this recommendation is written

is, you might say that the State of Oklahoma identified a challenge and took corrective action to track and insure the timeliness of inspections and have restored the timeliness of the inspections by the time of the review.

And then go on to say that the - cash the recommendation to continue to implement the corrective actions that were put in place to - in order to insure the sustainability of those measures and...

Monica Orendi: ...was to put that down by the MRB at the reasoning for the MRB change.

Mike Weber: Great.

Monica Orendi: But we can put it in both places.

Mike Weber: Well that's what I'm offering.

Monica Orendi: Yeah.

Mike Weber: Is that...

Monica Orendi: Yeah, that's fine.

Mike Weber: ...the desire of the Board or is it okay to just have it up front and not have it here because this recommendation will flow from the earlier discussion?

Steve Reynolds: We can leave the recommendation all by itself. I mean if we leave it right now - it doesn't really jump out at you to say that. If they got behind and then caught up and you say caught up...

Mike Weber: Right.

Steve Reynolds: I mean we could be more (unintelligible). Now I'm not recommending that but - behind - caught up in the state. In plain English it's...

Jim Lynch: I mean we can say that certainly in the section. We don't normally address those corrective actions but we can do that here. We can say that the state identified the issue, took corrective actions and at the time of the review there were no overdue inspections. Therefore, the section...

Mike Weber: Continues to take the...

Jim Lynch: Yeah.

Mike Weber: ...measures that have been...

Jim Lynch: Right.

Mike Weber: ...implemented to insure sustainability.

Jim Lynch: Yeah.

Steve Reynolds: (Unintelligible) needs to be crisp.

Mike Weber: Yeah.

Steve Reynolds: It's not on each state...

Jim Lynch: We can specifically mention that the - instead of taking appropriate measures we can say continue to implement the corrective actions.

Charlie Miller: Yeah. I think that's the key. Because I think that by saying take appropriate measures it would indicate that they haven't.

Jim Lynch: Yeah, right.

Charlie Miller: And that they are behind. And in this case we want to be able to see the name that they've caught up with...

Jim Lynch: Yeah.

Charlie Miller: ...and not fall behind again.

Jim Lynch: Yeah. If we could call - I don't know if corrective actions is the correct term. Maybe you can help me with that. But the measures that they took to resolve the issue specifically mentioned those in the recommendations.

Steve Reynolds: (Unintelligible).

Mike Weber: Yeah. Jim?

Jim Biggins: (Unintelligible) to take corrective actions.

Jim Lynch: No. In fact the Board gave them credit for taking the corrective actions and identifying the problems.

Charlie Miller: I do believe it needs to reflect it in the recommendations along the line of (unintelligible).

Mike Weber: Isabelle?

Isabelle Busenitz: I am following your discussions of how to change that. I - just as the person who would be reading it at a later point, if it's not the same people I think or the continuity of not losing that piece of information it would be good to

include that in the recommendations that they did identify that, help identify and they had.

And all we're looking at here is a sustainability issue instead of looking at what they decided to do as a corrective action because they didn't really - they don't have to suggest a new corrective action. They already did it.

Jim Lynch: Right. Okay, we'll...

Charlie Miller: That's the distinction I think.

Jim Lynch: Yeah, okay. Well we'll play with that a little bit.

Mike Weber: Okay.

Jim Lynch: I think we have the guidance that we need.

Charlie Miller: Okay.

Mike Weber: Charlie, your view on the overall summary?

Charlie Miller: Yeah. I, you know, I thank the team again for I think a quality job. While the Board did change one area I think the information you brought allowed us to have the deliberations to do so. I thank Mike for coming in today. I think it shows a lot of dedication to the program.

And the - he had the wherewithal to be here in person today. I mean it shows the dedication to the program. And finally, you know, in areas you can always pick up the phone and call us. We're always willing to try to see how we can support you.

We're all in this together. We're not in this to play God. It's that in all of our programs as co-regulators to protect public health and safety. You know, that message needs to be - I know that the agreements in the programs understand that.

But sometimes that needs to get reemphasized for those that you report to.

Mike Weber: Okay.

Charlie Miller: And those that we report to.

Mike Weber: Yeah. Steve?

Steve Reynolds: All right, guys. That might be (zero).

Mike Weber: Okay.

Steve Reynolds: I have to say that I agree with...

Mike Weber: Okay. All right. Jim?

Jim Biggins: I agree.

Mike Weber: Okay. All right. Isabelle?

Isabelle Busenitz: I agree.

Mike Weber: Okay. Our findings - would you like to make a closing comment? Or...

Mike Broderick: In closing if you - if there's nothing else to correct, one thing I felt kind of bad about. I was hung up on one particular fine point in my interaction with Rachel earlier. And it seemed like I felt like I was going at her with hammer and tongs there.

But I do hold high regard - hold Rachel in high - and Region 4 in high regard. And she's excellent to work with even though I was very hung up on that one thing...

Rachel Browder: No problem Mike.

Mike Broderick: ...there. And I felt kind of bad about that. I didn't want to leave an impression behind. But Rachel, we hold in high regard and we feel like we get good support from Region 4 and I really appreciate that.

Mike Weber: Speak up. Speak out. Speak often. Right? Yeah. Okay. Okay. Any other comments? Everybody's okay with comments?

Charlie Miller: Thank you.

Mike Weber: Mike, would you like to make any closing comments for the State of Oklahoma?

Mike Broderick: I think I just did. I appreciate the process.

Mike Weber: Okay.

Mike Broderick: And I appreciate the support from the NRC.

Mike Weber: All right. Any additional comments from the team Jim?

Jim Lynch: Nothing else Mike.

Mike Weber: You and your colleagues? Any process improvements identified during this review that we ought to reflect on as we go forward with the program?

Steve Reynolds: One thing that might be interesting to talk about - Jim talked about his team successfully monitoring - several (unintelligible). I just wondered is that a standard practice or expectation that the team goes off on one way or the other to - always bring that forward to have more of a discussion on that?

They were on the (unintelligible) get a chance to respond or - have the discussion one way or the other and mention (unintelligible).

Mike Weber: Or if it's already clear in the procedure that emphasize that point in the training of the IMPEP team members. You make a fair point. (Rob)?

Rob Lewis: I do think we already do that.

Mike Weber: Okay. Well then we can go back and...

Charlie Miller: Yeah. I will support (Rob). I think from my experience at the MRB, the team usually does talk about those areas where they had a lot of discussion to date before they can reach a conclusion. And I think that's very helpful for us to put everything in perspective.

Mike Weber: All right.

Charlie Miller: So it encourages, you know, the teams and the team leaders to bring that on behalf of the team to the MRB.

Rob Lewis: It's very common to have a team member that has an issue and - public conception on that issue or - how we stress that that's the healthy way to do it. I do think we do - I see - I see this.

Mike Weber: Well I want to thank the team - Jim, for your leadership of the team, David Turberville from Alabama, Rachel Browder from Region 4 and Maria from FSME. I think you already heard from the other members of the Board.

You turned out a high quality report and obviously the foundation of the IMPEP program relies on the team to identify the issues, to collect the information, to assess that and to make sound recommendations. I think once again you've done that in our review of the Oklahoma program.

I also want to thank the MRB members - Charlie and Steve and Jim, congratulations\ on your first MRB.

Jim Biggins: Thank you.

Mike Weber: And Isabelle we appreciate your participation today as the OAS liaison member and also on behalf of the State of Kansas. I do believe we have a member of the public on, a Mr. Collins? Is that right?

Jim Lynch: Conley.

Tom Conley: Conley.

Mike Weber: Would you care to make any comments Mr. (Conley) or questions?

Tom Conley: Just that, you know, listening to the discussions here and having partaken of other discussions in the Kansas IMPEP I do appreciate the IMPEP process. And the fact that the Board is willing to listen to the whole story and draw conclusions based on the - not only just the cold hard facts but the performance based concept of the entire process.

Mike Weber: Okay. Anything else?

Tom Conley: No. That's all.

Mike Weber: Okay. Thanks for your participation and your comments. And David Turberville did you have any comments from your perspective as an agreements state participant on the team?

David Turberville: Well I appreciate the opportunity to participate and I want to just say that I believe it's a very fair process and Jim is an excellent team leader as well as the whole team did an excellent job listening to Mike's comments and going to the staff the whole time. I was very impressed with the whole process.

This was my first IMPEP...

Mike Weber: Oh.

David Turberville: ...and I really - it was a very good learning experience for me.

Mike Weber: Well congratulations. And thanks for your participation in the process.

David Turberville: Thank you.

Mike Weber: And with that we are adjourned. Thank you very much and have a great day.

Steve Reynolds: Thanks Mike.

Jim Lynch: Turberville was outstanding.

Mike Weber: I didn't know it was his first IMPEP.

Jim Lynch: Yeah. He is - he was going to...

Mike Broderick: He had a lot of - asked a lot of hard questions.

Jim Lynch: Yeah.

Mike Broderick: He had a lot of useful suggestions.

Jim Lynch: Yeah.

Mike Weber: Okay.

Jim Lynch: Thanks Mike.

Mike Weber: Thanks for coming in.

Charlie Miller: Thanks for coming in.

Mike Weber: Charlie I appreciate you...

END