

GEORGIA DEPARTMENT OF NATURAL RESOURCES (DNR)
PROBATION CONFERENCE CALL
November 18, 2013

Nuclear Regulatory Commission (NRC) Attendees	Georgia DNR Attendees
Monica Ford, Region I	David Crowley, Manager
James Clifford, Region I	Chuck Mueller, Policy Advisor
Donna Janda, Region I	Keith Bentley, Branch Chief
Pamela Henderson, FSME	
Michelle Beardsley, FSME	
Duncan White, FSME	
Lisa Dimmick, FSME	

BACKGROUND

During the 2008 Integrated Materials Performance Evaluation Program (IMPEP) review of the Georgia Agreement State Program (Program), the review team found the State's performance satisfactory, but needs improvement for the indicators Technical Staffing and Training, Status of Materials Inspection Program, Technical Quality of Licensing, and Technical Quality of Inspections and satisfactory for the indicators Technical Quality of Incidents and Allegations, Compatibility Requirements, and Sealed Source and Device Evaluation. Two recommendations were made by the IMPEP review team and two recommendations were carried over from the previous IMPEP review. On December 4, 2008, the Management Review Board (MRB) met to consider the proposed final IMPEP report on the Program. The MRB found the Program adequate to protect public health and safety, but needs improvement, and compatible with the NRC's program. The MRB directed NRC staff to initiate a period of monitoring for the Program.

During the 2012 IMPEP review the review team found the State's performance unsatisfactory for the indicators Technical Quality of Inspections and Technical Quality of Incidents and Allegations; satisfactory but needs improvement for the indicators Technical Staffing and Training, Status of Materials Inspection Program, and Technical Quality of Licensing; and satisfactory for the indicators Compatibility Requirements and Sealed Source and Device Evaluation. Twelve recommendations were made by the IMPEP team, one of which was carried over from the 2004 and 2008 IMPEP reviews. On January 17, 2013 the MRB met to consider the proposed final IMPEP report on the Program. The MRB found the Program adequate to protect public health and safety but needs improvement and compatible with the NRC's program. The MRB stated that it would recommend to the Commission that the Georgia Agreement State Program be placed on probation and until such time as the Commission votes, the Program would be on Heightened Oversight. The MRB also directed that another full IMPEP review take place one year from the date of the MRB. SECY-13-0051, conveying the IMPEP findings and the MRB's recommendation, was presented for Commission vote on May 9, 2013. On August 1, 2013 the Commission sent a letter to Georgia Governor Nathan Deal informing him of their decision to place the Program on probation (ML13193A193). A press release, letters to Congress, and a Federal Register Notice were also issued.

Heightened Oversight/ Probation are processes that involve submittal of a program improvement plan (Plan) and bimonthly conference calls between the State and the NRC. The Program submitted their Plan to the NRC on March 7, 2013 (ML13070A161) and the Plan was approved by the NRC in a letter dated April 4, 2013 (ML13084A029). A revised Plan was submitted on June 10, 2013 (ML13161A314), August 21, 2013 (ML13240A136), and November

11, 2013 (ML13317B659). This is the fourth bi-monthly conference call with DNR since the January 17, 2013 MRB.

DISCUSSION OF PROGRAM STATUS

Technical Staffing and Training (2012 IMPEP: Satisfactory but Needs Improvement)

The Program staffing plan calls for nine technical staff positions and one program manager. At the time of the June 2013 bimonthly call the Program had three vacancies at the technical staff level. The Program was able to post these positions and all three positions were filled at the time of the August 2013 call. The Program has no vacant positions at this time. One of the three newly hired employees worked for the Program previously and is already a fully qualified license reviewer and inspector. The other two new employees have been given their training manuals, have paperwork submitted to the NRC for training, and are beginning to work on becoming qualified license reviewers and inspectors. The Program expects to have all staff currently going through the qualification process fully qualified within two years of starting their qualification process.

The Program has revised its training manual to incorporate changes that were made in NRC's Inspection Manual Chapter 1248. This revised training manual is being used by new staff starting with the Program. Program staff is attending NRC training courses when available. The Program also recently held in house pre-licensing guidance refresher training to supplement the learning and qualification process.

Program management is considering a suggestion box, where staff can leave comments on ways to help improve the Program or concerns on items they believe need addressed. The suggestion box is on hold for the time being while the Program addresses other higher priority items. Program management holds weekly meetings with staff and also talks to staff individually each day in order to promote open lines of communication within the program.

Status of the Materials Inspection Program (2012 IMPEP: Satisfactory but Needs Improvement)

The 2012 IMPEP review team generated one recommendation for this performance indicator. This recommendation is listed below along with its status.

Recommendation 1: The review team recommends the State develop and implement a plan to complete higher priority and initial inspections in accordance with the inspection frequencies specified in IMC 2800.

Status: The Program developed a spreadsheet for use in tracking inspections. Assignments to complete all overdue and calendar year 2013 inspections have been made. At the time of the August 2013 call the Program had completed all overdue inspections and has performed no other Priority 1, 2, and 3 inspections overdue. At the weekly staff meeting management and staff review the spreadsheet to discuss inspections coming due in the next two weeks. The staff also discusses any inspections they completed during the last week at the weekly staff meeting. The Program implemented a policy that all inspections will be completed in the month that they are due so as to ensure no inspection is completed overdue by more than twenty five percent of its inspection frequency. If the assigned inspector cannot complete the inspection in the month that it is due they have to obtain management approval to go beyond that window.

The Program discovered, while preparing the IMPEP questionnaire that approximately 20 initial inspections had been assigned incorrectly in the inspection database. The Program estimates that between six and 10 initial inspections, of the 20 initial inspections assigned incorrectly, are

overdue beyond the one year inspection time requirement. The Program believes that the incorrect date assignments were due to some inspectors' misperception that a pre-licensing visit was the same as an initial inspection.

The Program has completed five reciprocity inspections for 25 candidate licensees to date for calendar year 2013. Program management stated that reciprocity inspections may again be put on hold in order to address the missed initial inspections. The Program's policy is to issue inspection findings within 30 days of the inspection. The Program typically issues inspection findings within the first two weeks after an inspection.

Technical Quality of Inspections (2012 IMPEP: Unsatisfactory)

The 2012 IMPEP review team generated three recommendations for this performance indicator. These recommendations are listed below along with their status.

Recommendation 2: The review team recommends that the State update its inspection procedure to include the most recent revisions to Inspection Manual Chapter 2800, including the implementation of inspection guidance for NSTS reviews.

Status: The Program updated its inspection procedure and it was finalized on May 31, 2013. Program management completed training on the new procedure on July 23, 2013. The training included a table top exercise of a mock inspection. According to the Plan, Program management will review the procedure in June and December of each year to see if additional updates are needed. Program management stated that staff have responded well to the procedure and have already pointed out areas for improvement. The Program plans to work on revisions to the procedure after the IMPEP in January 2014.

Recommendation 3: The review team recommends that the State perform Increased Controls security inspections at least as frequently as the priority of the license being inspected.

Status: The Program instituted a policy in January 2013 that required the Increased Control inspection to be completed at the same time as the health and safety inspection for a licensee. The Program finalized its revised procedure (reflecting the implemented policy) on May 31, 2013. Per the Program's updated procedure, inspectors are now required to report out to their management on all Increased Control inspections completed. Program management provided training on the revised procedure to program staff on July 23, 2013. The NRC provided in house Increased Controls refresher training on June 6, 2013. The Program stated that all security inspections are being performed along with the health and safety inspections. There was one instance where (due to separate licenses being held by the same entity) co-location of material was not known and the inspector was not prepared to address a security inspection at the time of the health and safety inspection. The Program is looking for ways to ensure that this does not happen in the future.

Recommendation 4: The review team recommends that the State perform a causal analysis regarding deficiencies identified during the NRC accompaniments of the Program inspectors, as documented in this section as well as Appendix C of this report, and formulate corrective actions for the causes identified during the analysis.

Status: Starting in January 2012 the Program requires a team of two inspectors for all Priority 1 and high Priority 2 inspections. This policy will be in place until the Program identifies and resolves all problematic areas of inspections. Program management interviewed the staff, involved with the deficient inspector accompaniments during the 2012 IMPEP, and has determined that inadequate preparation is the main reason for the poor inspections. Program

management had a former materials inspector accompany all of the Program inspectors to perform an independent assessment of the quality of inspections performed by staff. All inspection accompaniments were completed on May 29, 2013. The NRC also accompanied one inspector as follow-up to an inspection accompaniment completed during the IMPEP review. Program management has assessed the information provided by both reviews and determined that improvements need to be made in the areas of survey techniques, signage requirements, and utilizing performance based inspections. These areas needing improvement are being incorporated into the training module being developed. Additionally Program management will perform annual inspector accompaniments to continue to assess inspector performance starting in calendar year 2014.

Technical Quality of Licensing (2012 IMPEP: Satisfactory but Needs Improvement)

The Program has approximately 490 licensees. Georgia licensees are subject to a five year license renewal term. The Program has a backlog of 120 licensing actions which is continuing to grow each month (It was reported during the last bimonthly call that the backlog was 160 licensing actions however, that number was determined to be a miscalculation. The backlog for the Program at that time was also around 120 licensing actions). Program management stated that the Program typically receives 30 to 35 actions per month, however, that number doubled in the last month due to renewals being received in response to notices of license expiration and to a licensee trend of waiting to send in amendments until the new fiscal year based on a previous history that GA charged for amendment actions. The longest action (a decommissioning action) has been in house since 2008. The other licensing actions have been in house a maximum of 24 months. Program management is working on a solution to address this backlog, which includes having the newly hired staff help with simpler licensing actions. The Program is prioritizing its incoming and pending licensing actions based on their health and safety significance.

The 2012 IMPEP review team generated three recommendations for this performance indicator. These recommendations are listed below along with their status.

Recommendation 5: The review team recommends that the State update its medical licensing guidance documents to be consistent with Georgia regulations.

Status: The Program is using NRC's NUREG 1556 volume 9 as a guide while updating its medical licensing procedure to ensure the procedure is revised and updated accordingly. The draft medical licensing procedure was completed on April 5, 2013 and went out for review and comment to all Program staff. The staff review was completed on May 31, 2013. Comments were incorporated into the procedure and the Program finalized the procedure on August 16, 2013. Training on the new procedure occurred in September 2013. According to the Plan Program staff will review the procedure once each year to see if additional updates are needed.

Recommendation 6: The review team recommends that the State verify that all previously approved medical authorized users have proper documentation of their qualifications, since the new requirements were initiated in 2008.

Status: Two program staff, one of which is now the program manager, reviewed all existing licenses to determine the number of authorized users added to a license that did not meet the requirements in Georgia regulations. The Program found 1388 authorized users who were considered grandfathered since they were on a license prior to the 2008 rule implementation and 285 authorized users that needed to supply additional training and attestation requirements to be correctly placed on a license. Of those 285 potential authorized users, 90 to 95 percent did not have the correct attestation information in the licensee file and will need to supply the

additional information. The other 5 to 10 percent have incorrect certification or training records and will also need to provide additional information. Program management stated that the plan is to wait until licensing actions come in from a licensee who has added one of these authorized users and to request the additional paperwork at that time. Program management stated that since none of the 285 authorized users was involved in an incident or had enforcement taken against them and that most had been on the license for a few years that the Program felt that this item was of low safety significance and that other higher priority items should be completed first. NRC management made the request that the Program set a date by which all actions would be completed so that these actions do not sit for an extended period of time (note: this request was made during the August 2013 call and no date has yet been set by Program management). All new incoming actions are cross referenced by staff to check to see if any authorized user(s), listed on the license being worked on, are part of the 285 that requires additional information. During the August call the Program was asked how many of the 285 authorized users had not yet submitted the additional training/ certification and attestation requirements that they were missing when they were first placed on the license. Program management stated during the November 2013 call that 220 of the 285 originally identified authorized users still needed additional information to meet the training/ certification and preceptor requirements.

Recommendation 7: The review team recommends that the State implement pre-licensing guidance for all licensing actions to provide assurance that radioactive material will be used as specified on the license.

Status: The Program established a policy in January 2013 that all new licenses will be hand delivered. NRC provided pre-licensing guidance refresher training on July 30, 2013. A Program specific licensing procedure is being developed and will include a section for pre-licensing actions. Once the draft procedure is finished it will be circulated to Program staff for comment, the comments will be incorporated, the procedure will be made final, and the staff will receive training on the procedure. The draft procedure is scheduled to be finished and ready for comment on December 1, 2013.

Technical Quality of Incidents and Allegations (2012 IMPEP: Unsatisfactory)

The Program continues to be sensitive to notifications of incidents and allegations. The Program received NMED/ SA-300 training in February 2013. Since the last IMPEP review five events have been reported to the NRC. The Program has received two allegations since the 2012 IMPEP review. As stated by the Program and as listed in the Office of Federal and State Materials and Environmental Management Programs procedure SA-400 "Management of Allegations," due to Georgia's open records act the Georgia Agreement State Program is unable to protect an alleged's identity.

The 2012 IMPEP review team generated three recommendations for this performance indicator. These recommendations are listed below along with their status.

Recommendation 8: The review team recommends that the State develop, document, provide training to the Program staff on, and implement a procedure to notify the NRC of reportable incidents in a complete, timely and accurate manner in accordance with Office of Federal and State Materials and Environmental Management Programs Procedure SA-300 "Reporting Material Events."

Status: Program management has completed revisions to the Program procedure for notifying NRC of reportable incidents. The revised procedure was reviewed by staff and comments on the procedure were received by June 25, 2013. Comments were incorporated and the

procedure became final on July 31, 2013. Program staff received training on the new procedure on August 27, 2013. Program staff also received NMED/ SA-300 training in February 2013.

Recommendation 9: The review team recommends that the State strengthen its incident response program and take measures to (1) develop, document, implement, and provide training to the Program on the incident response procedure; (2) ensure that reported incidents are promptly evaluated to determine the appropriate type and level of Program response, including providing for Program management notification and review; (3) ensure that incidents are responded to with an appropriate level of effort and in a timeframe commensurate with the potential health and safety and/or security consequences of the incident; (4) ensure that licensee written reports are reviewed for completeness and appropriate corrective actions; and (5) ensure that the Program's evaluation of licensee incidents, whether based on a review of licensee reports, on-site reviews, or inspection follow-up, is properly documented to facilitate future follow-up.

Status: The Program staff received training in January 2013 on Georgia's Complaint Tracking System (CTS) which will be used by the staff to track incidents and allegations received. The system was implemented by the Program shortly after the training was completed. Program management is notified via email when a new entry is made in the system. Management then reviews the entry with the staff member who entered the information to obtain additional information if necessary and to decide on the appropriate level of response. Management will also review the system weekly to check for entries that may have been missed and to follow-up on open action items. A procedure that involves the handling of incidents and allegations was finalized on July 31, 2013. Program staff received training on the procedure on August 27, 2013.

Recommendation 10: The review team recommends that the State revise, enhance, implement, and provide training to the staff on its Allegation Procedure, including providing additional written guidance on (1) recognizing and identifying allegations; (2) notifying Program management of all received allegations; (3) promptly evaluating allegations for safety and security significance; (4) ensuring that the level of effort and timeliness in responding to allegations is commensurate with the potential significance of the allegation; and (5) tracking all allegations to ensure timely review and closure and timely feedback to allegeders.

Status: The Program staff received training in January 2013 on CTS which will be used by the staff to track incidents and allegations received. The system was implemented by the Program shortly after the training was completed. Program management is notified via email when a new entry is made in the system. Management then reviews the entry with the staff member who entered the information to obtain additional information if necessary and to decide on the appropriate level of response. A procedure that involves the handling of incidents and allegations was finalized on July 31, 2013. Program staff received training on the procedure on August 27, 2013.

Compatibility Requirements (2012 IMPEP: Satisfactory)

There have not been any legislative changes or proposals that have affected the Program. There are four regulations overdue for adoption. The Program is aware of the overdue regulations and is working to get them adopted. Proposed regulations were submitted to NRC for review on February 19, 2013. The Program has incorporated NRC's comments and comments received from members of the public. The rules will be presented to the Board on December 3, 2013. After that the rules will become final and GA plans to submit those to NRC for final review.

The following regulations are currently overdue:

- “Exemptions from Licensing, General Licenses, and Distribution of Byproduct Material: Licensing and Reporting Requirements,” 10 CFR Parts 30, 31, 32, and 150 amendment (72 FR 58473), that was due for implementation on December 17, 2010. (RATS ID 2007-2)
- “Requirements for Expanded Definition of Byproduct Material,” 10 CFR Parts 20, 30, 31, 32, 33, 35, 61, and 150 amendment (72 FR 55864), that was due for implementation on November 30, 2010. (RATS ID 2007-3)
- “Occupational Dose Records, Labeling Containers, and Total Effective Dose Equivalent,” 10 CFR Parts 19 and 20 amendment (72 FR 68043), that was due for implementation on February 15, 2011. (RATS ID 2008-1)
- “Medical Use of Byproduct Material - Authorized User Clarification,” 10 CFR Part 35 amendment (74 FR 33901), that was due for implementation on September 28, 2012 (RATS ID 2009-1)

Sealed Source and Device (SS&D) Evaluation Program (2008 IMPEP: Satisfactory)

On June 5, 2013 Governor Deal sent in a letter addressed to Chairman Macfarlane requesting relinquishment of authority for the SS&D program and for assumption of this authority by the NRC. NRC staff drafted a commission paper regarding this issue (SECY-13-0076). A letter from the Commission was sent on August 15, 2013 to Georgia Governor Nathan Deal approving the request for relinquishment of SS&D authority. NRC resumed authority of SS&Ds on August 20, 2013. At the time of this call, all SS&D files have been transferred from GA to the NRC.

The 2012 IMPEP review team generated two recommendations for this performance indicator. However, in light of the letter to the Governor these recommendations will be removed and will not be discussed during the IMPEP review.

Recommendation 11: The review team recommends that the State qualify one additional reviewer in SS&D evaluations to provide backup for the principal reviewer. This is in addition to a qualified reviewer or supervisor performing concurrence reviews. (Carryover recommendation from the 2004 and 2008 IMPEP reviews and 2013 IMPEP MRB)

Recommendation 12: The review team recommends that the State develop and implement a plan to inactivate SS&D registrations for devices and sources that are no longer being made or distributed.

Next IMPEP

NRC staff discussed the upcoming IMPEP review of the Program. The IMPEP is scheduled for the week of January 27-31, 2013. Michelle Beardsley, FSME will be the team leader for the review. One round of inspector accompaniments was completed in August 2013 and another round is scheduled for December 2013.

Conclusion

The Program provided their Plan to the NRC on March 7, 2013 and provided revised Plans on June 10, 2013, August 21, 2013, and November 11, 2013. The Plan provides for a path forward in addressing the twelve recommendations from the 2012 IMPEP report. The Program is

currently preparing for the upcoming IMPEP review which is scheduled for January 27-31, 2014. On August 20, 2013 NRC resumed authority over SS&D in the State of Georgia. All files have been officially transferred back to the NRC.

The GA IMPEP review is scheduled for January 27-31, 2014.