

Georgia Department of Natural Resources
Environmental Protection Division

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Judson H. Turner, Director
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April 2, 2014

Duncan White, Chief
ASPB/DMSAA/FSME
Mail Stop: TW8-E24
U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

Dear Mr. White,

I want to express my appreciation for your staff's efforts on the recent Integrated Materials Performance Evaluation Program (IMPEP) review. The Nuclear Regulatory Commission (NRC) team confirmed a number of accomplishments that Georgia's Radioactive Materials Program has achieved since our last review. While they identified targeted opportunities for improvement going forward, progress has been made on those items as well. We appreciate the guidance of the NRC team in assisting our program's return to satisfactory performance. During this process, a strong working relationship has developed between the NRC staff and Georgia's program staff that will serve us well as we continue to strengthen our program.

Our Radioactive Materials Program shows continual progress and I am confident that we are applying the resources and talent to achieve sustained performance. We are committed to ongoing improvement and will strive to address the latest NRC recommendations in the near future. As I have committed to Governor Deal and to your team, everyone here in Georgia is dedicated to seeing the unwavering success of the program.

Regarding the specifics of the draft report, we offer the attached comments that we believe should be incorporated to improve the accuracy and completeness of the final report.

Thank you again for the opportunity to comment on this report and for the excellent review. I very much look forward to discussing these matters further at the Management Review Board (MRB). If you have any questions between now and the MRB about our program, please contact the program manager, David Crowley, at (404) 363-7117 or by electronic mail at david.crowley@dnr.state.ga.us or you can contact me directly.

Sincerely,



Judson H. Turner, Director
Georgia Environmental Protection Division

Enclosure:

1. Comments on the "Review of the Georgia Agreement State Program" – Draft Report

ENCLOSURE (1) – Comments on the “Review of the Georgia Agreement State Program” – Draft Report

- 1) Page 2, Section 2.0, Recommendation 1 within the “Status” paragraph: The new database was implemented in the middle of November, 2013. More importantly, it is not exclusively being used for tracking inspections. Since November, this has also been utilized for the writing, and tracking of license actions.
- 2) Page 3, Section 2.0, Recommendation 6 within the “Status” paragraph: The status summary does not properly credit the work which the program has completed to date, nor does it mention the plan forward in rectifying this item. Georgia devoted two full time employees for over two entire months just to identify how many doctors, radiation safety officers, nuclear pharmacists, and medical physicists may have been added to a license prior to receiving all necessary credentialing documentation. Due to a prioritization of more immediate health and safety issues within the state, program management settled on passively collecting the appropriate documentation when the users are listed for amendments, renewals, or notifications throughout the state. Active pursuit of these credentials has not started yet because of the administrative burden and vast backlog in inspections and license activities within the state up until present. The program plans to actively seek these documents beginning in May 2014. At that time, letters will be sent out once a month to 10% of the remaining list until all have been acquired.
- 3) Page 3, Section 2.0, Recommendation 7 within “Status” paragraph: Again, the status paragraph does not mention some of the actions which Georgia’s program has completed. Most importantly, there was NRC conducted training on proper completion of pre-licensing activities. Since that training, it has been an internal policy to complete this pre-licensing basis for confidence. The internal policy is to be formally written into official licensing procedures and then refresher training will reiterate the importance of this step in licensing.
- 4) Page 5, Section 3.0, Indicator 3.1, end of second paragraph: There is now a second vacancy that will need to be filled. A qualified member with six years of experience is resigning at the end of March. Program management will not “begin the process” but rather it has already started in filling both positions. The application acceptance period closed on 28 February 2014 and application review is soon underway. We are proceeding to hire two individuals from February’s posting in order to expedite the filling of both full time positions.
- 5) Page 10, Section 3.0, Indicator 3.4, third paragraph: This inaccurately represents the staffing design of the program. The program has nine full time license reviewer staff positions, two of which will be hired in the near future. However, it would be accurate to say there were seven license reviewers with signature authority. The second sentence mentions one of the staff is limited to doing simpler licensing actions, but this is not the case. All license reviewers receive a mixed set of licensing actions to work through; although, the new staff without signature authority are assigned a mentor who will work alongside the reviewer and eventually provide the signature on the action. Mentored work is still subject to an independent second review by someone else with signature authority. The last sentence of this paragraph is also incorrect. The old system was phased out the very week we received the new database, and has not been used since November 2013. This new database has improved transparency of licensing work and is proving extremely useful to hold staff accountable for their work products.

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- 6) Page 10, Section 3.0, Indicator 3.4, last paragraph: Same as comment 2.

- 7) Page 13, Section 4.0, Indicator 4.1, first paragraph of 4.1.2: We request the last sentence be removed or further clarified. As it stands, it suggests program staff is also accountable for the registration and inspection of machine produced radiation. This is not the case, but rather Georgia Department of Community Health (GA DCH) is responsible for these activities and maintains separate full time employees to cover this objective. Georgia’s Agreement State Program regulations are found in Chapter 391, but GA DCH has separate regulations all together. All nine of our full time staff (ten with the manager) are completely dedicated to the licensure and inspection of radioactive materials.