

GEORGIA DEPARTMENT OF NATURAL RESOURCES (DNR)
QUARTERLY CONFERENCE CALL
February 10, 2017

Nuclear Regulatory Commission (NRC) Attendees	Georgia DNR Attendees
Monica Ford, Region I	Karen Hays, Branch Chief
Paul Michalak, NMSS	David Matos, Manager
Lisa Dimmick, NMSS	Irene Bennett, Team Leader
Joe O'Hara, NMSS	
Donna Janda, Region I	

BACKGROUND

During the May 2016 Integrated Materials Performance Evaluation Program (IMPEP) review of the Georgia Agreement State Program (the Program), the review team found the State's performance satisfactory for five performance indicators and satisfactory, but needs improvement, for one performance indicator. Three recommendations were made by the IMPEP team. On August 4, 2016, the Management Review Board (MRB) met to consider the proposed final IMPEP report. The MRB found the Program adequate to protect public health and safety and compatible with the U.S. Nuclear Regulatory Commission's (NRC) program. Upon its deliberations the MRB issued two additional recommendations to Georgia. Additionally, the MRB directed that Georgia be removed from Heightened Oversight and that a period of Monitoring be initiated, calls between Georgia and the NRC staffs be conducted quarterly, and that a periodic meeting should take place approximately one year from the 2016 IMPEP review and a second periodic meeting be held approximately 18 months after the first periodic meeting.

This is the second quarterly call since the May 2016 IMPEP review.

DISCUSSION OF PROGRAM STATUS

Technical Staffing and Training (2016 IMPEP: Satisfactory)

The Program is made up of one program manager, two team leaders (one over the environmental radiation program and one over the radioactive materials program) and 10 technical staff positions. Of those positions the program manager, one team leader, and seven specialists perform work covered by the Agreement. There is one vacancy in the Program at this time. The individual who left the Program, did so to take a management job in a sister department, the Department of Community Health. The Program has posted the position and the posting closes on February 21, 2017.

The Program revised its training manual in June 2013 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 and staff going through the qualification process. Program staff is attending NRC training courses when available. Six technical staff are going through the qualification process. Fully qualified staff are aware of the need to complete 24 hours of refresher training every two years and are working to meet this requirement.

Recommendation 1: The MRB recommends that the Program management develop a strategy to address staff retention and implement corrective actions to mitigate the causes of the Program's turnover to ensure satisfactory program performance is sustained.

Status: Since the IMPEP review a new Director of Human resources has been hired. The Air Protection Branch Chief has met with the director to discuss salaries and staff retention not only for the radioactive materials program but for the entire air branch since this issue is not unique to the radioactive materials staff. A second meeting was held in the beginning of February with the Director of the Environmental Protection Division to discuss the available options for dealing with this matter. As part of a separate effort, the Branch Chief met with all staff individually to obtain thoughts and ideas on how the program could be improved. Some of the feedback obtained involved: having staff do only licensing or inspection (not both), creating more templates for licensing to ensure accuracy, and suggestions on how to improve the training process and make it more efficient. Although these suggestions have not been acted upon yet, the Branch Chief plans to have a group of individuals who are Lean Six Sigma green belts take a look at the Programs licensing templates to make them more consistent and to create training on how to use the templates. The hope is that the end result will help staff by making the licensing process easier and more effective.

Status of the Materials Inspection Program (2016 IMPEP: Satisfactory)

The Program's inspection frequencies are the same as the NRC's inspection frequencies that are listed in Inspection Manual Chapter 2800. The Program has one Priority 2 inspection overdue at the time of this call. The reason this inspection went overdue was because a type of use was added to the license that changed the license priority from a 5 to a 2 however the code was not changed at the time the amendment was issued. At the time of the November 2016 call one Priority 1 inspection and one Priority 3 inspection were overdue. Both of these inspections were completed in January 2017. Two initial inspections have been completed within one year of license issuance since the 2016 IMPEP review. Additionally, one initial inspection was completed greater than 12 months after license issuance. This inspection was completed overdue by 2 months. The Program is in the process of transitioning to a new tracking database. The previous access database was not maintainable. The Program is still working out the problems with their IT department and hopes the database will be fully functional later this year. The Program has a policy of issuing inspection reports within 30 days of the close of the inspection.

Recommendation 2: The MRB recommends that Program management implement corrective actions and make necessary adjustments to ensure satisfactory program performance is sustained with regard to reciprocity inspections.

Status: The Program is mindful of reciprocity inspections and is working to meet the goal of inspecting 20 percent of candidate licensees each calendar year. The Program's policy is that each staff person perform at least one reciprocity inspection every year. This should ensure that the Program meets the requirement of inspecting 20 percent of candidate licensees. However for this to be accomplished all staff need to be qualified to inspect those types of licensees that typically come in under reciprocity. Additionally, the team leader has been given the responsibility to track reciprocity inspections to ensure that the Program meets the goal of inspecting 20 percent of candidate licensees. Currently only three staff are qualified to inspect those licensees (typically radiographers) so in order to meet the requirement those qualified staff will be doing additional reciprocity inspections until such time as the rest of the staff

becomes qualified. For calendar year 2016 the Program stated that they performed eight inspections on 38 reciprocity candidates (21 percent). So far in calendar year 2017, 14 reciprocity candidate licensees have performed work in Georgia. The Program has inspected three of those licensees (21 percent).

Technical Quality of Inspections (2016 IMPEP: Satisfactory)

The 2016 IMPEP review team generated one recommendation for this performance indicator. The recommendation is listed below along with its status.

Recommendation 3: The review team recommends that the Program develop and implement training for inspectors on the examination of the written directive and NRC Inspection Procedure 87132, Brachytherapy Programs.

Status: The Program used training located on the NRC's Agreement State Webpage (Update on Inspection Procedure 87132, Brachytherapy Programs) to address part of this recommendation. Additionally, program management discusses the inspection of Brachytherapy programs with the inspector before the inspector goes out to conduct an inspection of this type. The Program is looking for help from the NRC in addressing the training on examination of the written directive. The Program does not believe that they have the expertise in house to develop training on this topic. The NRC has scheduled this training for April 4, 2017.

Technical Quality of Licensing (2016 IMPEP: Satisfactory but needs improvement)

The Program has approximately 415 licensees. Georgia licensees are subject to a five year license renewal term. The 2016 IMPEP review team generated two recommendations for this performance indicator.

Recommendation 4: The review team recommends that the Program verify that all previously approved radiation safety officers for medical licenses have an attestation by a preceptor RSO, including that the individual has completed training in the radiation safety, regulatory issues, and emergency procedures for the appropriate license type.

Status: The Program is in the process of reviewing all documentation for medical RSOs that are currently on a license. The Program started with a pool of over 200 RSOs and only has three remaining. For these three licensees, one has submitted a request to terminate the license, one is looking for a consultant RSO, and one is in the renewal process and the Program is waiting on additional information from the licensee to be able to verify that the RSO has the necessary documentation to be placed on that license.

Recommendation 5: The review team recommends that the program management develop and implement training and guidance that provides the staff with the tools necessary to accurately complete the Program's pre-licensing requirements for each new license.

Status: The Program redesigned its pre-licensing guidance and the forms associated with the guidance and provided training to the staff before the MRB in August 2016. The Program has issued one new license since the 2016 IMPEP review. This license was issued in July 2016 before the revised guidance went into effect. The Program went back and audited this action after putting the new guidance in place and determined that everything was in place and no

additional action was required. Additionally the Program recently received a new application that it will use this guidance to process the request. As the Program continues to receive new license applications it will use the revised guidance and will periodically evaluate the revisions to see if anything additional is required.

The Program stated that they do not hand deliver licenses to new applicants. Program management reviews all information on the new applicant before approving an inspector to perform a pre-licensing visit. After performing the pre-licensing visit, if no questions remain and a basis for confidence is reached, the Program then signs the license and transmits it to the licensee.

Additionally, the Program recently updated the pre-licensing form to include a pre-licensing visit box for licensees acquiring risk significant radioactive material (RSRM) for the first time or at a new location. The RSRM checklist and the Pre-licensing guidance have been separated into two forms that can be used alone or together depending on the circumstances. Training on and distribution of the forms, for the staff, is planned in the near future.

Technical Quality of Incidents and Allegations (2016 IMPEP: Satisfactory)

The Program continues to be sensitive to notifications of incidents and allegations. The program has received six events since the previous IMPEP review. Two of the six events are significant in nature and the Program is following up on them accordingly. The Program has received three allegations, one from the NRC and two from other individuals, since the 2016 IMPEP review. As stated previously by Georgia and as listed in the Office of Nuclear Material Safety and Safeguards' 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.

Compatibility Requirements (2016 IMPEP: Satisfactory)

There have not been any legislative changes or proposals that have affected the Program. There is one regulation overdue for adoption (RATS ID: 2013-2; due for adoption by August 27, 2016). The Program has drafted proposed regulations and will be briefing their Board on February 28, 2017. The Program expects to have final regulations in place by May 2017.

Conclusion

The Program is working to address the five recommendations made as a result of the 2016 IMPEP review. The Program requested assistance from the NRC in developing training for reviewing written directives in order to address part of one recommendation. The NRC has scheduled this training for April 4, 2017. The Program has one vacancy which it is in the process of filling and is working on qualifying several new staff in inspection and licensing. The Program has implemented a process that will help to ensure that 20 percent of candidate reciprocity licensees are inspected each year.

Periodic Meeting: May 22, 2017