



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION**

REGION I  
2100 RENAISSANCE BLVD., SUITE 100  
KING OF PRUSSIA, PA 19406-2713

July 6, 2017

Karen Hays, Branch Chief  
Air Protection Branch  
Georgia Environmental Protection Division  
4244 International Parkway, Suite 120  
Atlanta, GA 30354

Dear Ms. Hays:

A periodic meeting with you and your staff was held on May 22, 2017. The purpose of this meeting was to review and discuss the status of the Georgia Agreement State Program. The U.S. Nuclear Regulatory Commission (NRC) was represented by Daniel Collins and me.

I have completed and enclosed a general meeting summary, including any specific actions resulting from the discussions. A Management Review Board (MRB) meeting to discuss the outcome of the periodic meeting has been scheduled for August 29, 2017 from 1:00pm – 4:00pm. Call in information for the MRB will be provided in a separate transmission.

If you feel that our conclusions do not accurately summarize the meeting discussion, or have any additional remarks about the meeting in general, please contact me at (610) 337-5214 or via e-mail at [Monica.Ford@nrc.gov](mailto:Monica.Ford@nrc.gov) to discuss your concerns.

Sincerely,

*/RA/*

Monica Lynn Ford  
Regional State Agreements Officer  
Division of Nuclear Materials Safety  
U.S. NRC Region I

Enclosure:  
Periodic Meeting Summary for Georgia

cc w/encl.: David Matos, Manager  
Radiation Protection Programs

Irene Bennett, Manager  
Radioactive Materials Program

July 6, 2017

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**SUNSI Review Complete: MLF (Reviewer's Initials)**

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AGREEMENT STATE PERIODIC MEETING SUMMARY FOR THE  
 GEORGIA ENVIRONMENTAL PROTECTION DIVISION'S  
 RADIATION PROTECTION PROGRAMS SECTION

DATE OF MEETING: May 22, 2017

<b>U.S. Nuclear Regulatory Commission (NRC) Attendees</b>	<b>Georgia Environmental Protection Division (EPD) Attendees</b>
Monica Ford, Regional State Agreements Officer, Region I	Karen Hays, Chief, Air Protection Branch
Daniel Collins, Director, Division of Material Safety, State, Tribal, and Rulemaking Programs, Office of Nuclear Material Safety and Safeguards	David Matos, Manager, Radiation Protection Programs
	Irene Bennett, Manager, Radioactive Materials Program
	Barty Simonton, Team Leader, Environmental Radiation Section

**DISCUSSION:**

During the May 2016 Integrated Materials Performance Evaluation Program (IMPEP) review of the Georgia Agreement State Program (the Program), the review team evaluated the State's performance with respect to five common performance indicators and one non-common performance indicator. On August 4, 2016, the Management Review Board (MRB) met to consider the team's proposed final IMPEP report. The MRB found the State's performance satisfactory for five performance indicators and satisfactory, but needs improvement, for one performance indicator. Overall the MRB found the State 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 five recommendations. The MRB directed that the State be removed from Heightened Oversight and that a period of Monitoring be initiated. Additionally, calls between Georgia and the NRC staffs were to be conducted quarterly and two periodic meetings should take place. One periodic meeting was to be held approximately one year from the 2016 IMPEP review and a second periodic meeting was to be held approximately 18 months after the first periodic meeting.

As directed by the MRB a periodic meeting was held, approximately one year after the IMPEP review, on May 22, 2017. This summary is a reflection of that periodic meeting.

**TOPICS COVERED DURING THE MEETING INCLUDED:**

**Feedback on the NRC's Program**

The Program stated that they were very appreciative of the NRC's training courses. The Program was especially thankful for the NRC's helpfulness in getting multiple students into classes where more than one student registered for the class since the Program has 60% of its staff going through qualifications. The Program also stated that it was very appreciative of the open and responsive communications with the NRC.

### Organization

The Program is administered by the Radiation Protection Programs Section, which falls under the Air Protection Branch. The Air Protection Branch is located in the Environmental Protection Division of the Georgia Department of Natural Resources.

### Program Budget and Funding

The Program is 100% fee funded. The Program cannot carry over funds from one fiscal year to the next. Any surplus funds that are not allocated will be taken at the end of the fiscal year and used to pay administrative expenses (ex: building rent). The Program's fees are not tied to the NRC's fees.

### Technical Staffing and Training (2016 IMPEP: Satisfactory)

The Program is made up of one Program Manager-2 who oversees both the Radioactive Materials Section and the Environmental Radiation Team, one Program Manager-1 who oversees the Radioactive Materials Section, one Team Leader who oversees the Environmental Radiation team, and 10 technical staff positions. There are 11.5 full time equivalents (FTE) dedicated to the Program with 2.5 FTE being managerial and 9 FTE being technical. Since the 2016 IMPEP review two people have left the Program. The first vacancy was created when the program manger left to take a job in another Agreement State in June 2016. This position was filled in October 2016. The second vacancy was created when a staff person left the program in January 2017 for a promotion opportunity to become a manager in another GA government agency. At the time of the periodic meeting this position was still vacant. The Program is moving along in the hiring process and has posted the position, completed interviews, and has sent a recommendation forward for approval. The Program hopes to have the approval to offer the job to the selected individual soon.

The Program revised its training manual in June 2013 to incorporate changes that were made in the 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 license reviewer and inspector qualification process. Fully qualified inspection and licensing staff are aware of the requirement to complete 24 hours of refresher training every two years and are working to meet this requirement. The Program has each of the technical staff track their own refresher training and management reviews it as part of the technical staff's annual performance review.

**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:** The Program analyzed the reasons staff gave as to why they left the program. Although an explicit reason was not identified, as reasons for departure varied widely, salaries and lack of promotion potential were common contributing factors. The Air Protection Branch Chief met with the human resources director and with the director of the GA Environmental Protection Division to discuss issues involving 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. One corrective action the Program took was to create a path for upward mobility

within the Program. They accomplished this in April 2016 by creating a program manager 1 position and a team leader position within the Radiation Protection Programs Section. Now technical staff have promotion potential positions to aspire to within the program rather than looking for those opportunities elsewhere.

As part of a separate effort, the Air Protection 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. After collecting all of the feedback the Branch Chief decided that the most critical need was to ensure licensing accuracy. A charter was put in place for an initiative, which is being led by a lean six sigma green belt, with the objective of “consolidating, revising, and adding adequate technical detail to existing procedures and developing licensing templates for the major licensing types by October 2017.” 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. Since the last IMPEP review the Program has implemented a new database. The previous database, was Access based, and was not conducive to the Program’s long-term needs or compatible with the Division’s long-term strategy on databases. The State’s in house information technology (IT) staff built a web-based database for the Program. Phase 1 of the database which includes inspection tracking, is currently operational. Phase 2 will include updates that will help to make the database more user friendly for the Program and will be rolled out in the near future. The Program was asked whether or not they gave any consideration to using the NRC’s web based licensing system (WBL). The Program stated that they had considered it when deciding how to proceed with obtaining a new database. However, it’s the Program’s understanding that the previous program manager (who was in place when the initiative started) felt that WBL didn’t have the right capabilities to help with the overall administration of the Program. Additionally there were concerns in regards to integrating the NRC’s system with other GA database systems. The Program decided the best course of action was to work with their IT staff to create a database that would help to manage every aspect of the Program and easily integrate with other GA databases. The Program stated that this new database will have the ability to push information to Federal databases when required.

The Program has completed 57 priority 1, 2, and 3 inspections since the last IMPEP review. Of those inspections, four were completed overdue. All of the inspections completed overdue occurred as a result of incorrect priority codes listed in the database. All four inspections were mistakenly listed as a priority 5 in the database. However, one inspection should have been listed as a priority 2 and three inspections should have been listed as a priority 3. The errors were not discovered until the Program started to prep for each inspection at the priority 5 interval, making them late. No priority 1, 2, and 3 inspections are currently overdue. Two initial inspections were completed overdue since the last IMPEP review and no initial were overdue at the time of the periodic meeting. One was completed overdue because of a database error that occurred when the six month telephone call was performed late (which is not an NRC requirement but a requirement of the Program) and the call date that was entered into the database pushed out the initial inspection date which was not caught. When the Program went to perform the inspection they discovered the error, however the inspection was already past the 12 month deadline. The second inspection was the 2<sup>nd</sup> initial inspection being performed for

a new licensee. At the time of the first inspection the licensee did not possess material and was not performing licensed operations. Per the NRC's Inspection Manual Chapter 2800, another inspection should have been completed within 12 months. The Program was not aware that the +/-25 percent did not apply to the second inspection. Therefore this initial inspection was performed overdue by 51 days. 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 management implemented a policy that each staff person must perform at least one reciprocity inspection every year. Program management believes that this should ensure that the Program meets the requirement of inspecting 20 percent of candidate licensees every calendar year. Program management recognizes that for this to be accomplished all staff need to be qualified to inspect those types of licensees that typically come in under reciprocity. The Program is working on ensuring that all staff are qualified to perform these types of inspections. Until that occurs, program staff that are qualified will be performing additional inspections to ensure the requirement is met.

The program manager of the radioactive materials program has been given the responsibility to track reciprocity inspections to ensure that the Program meets the goal of inspecting 20 percent of candidate licensees. For calendar year 2016 the Program stated that they performed eight inspections on 38 reciprocity candidates (21 percent). So far in calendar year 2017, 20 reciprocity candidate licensees have performed work in Georgia. The Program has inspected eight of those licensees (40 percent).

#### Technical Quality of Inspections (2016 IMPEP: Satisfactory)

Inspection guidance used by the Program is equivalent to the NRC's Inspection Manual Chapters and Inspection Procedures. The Program does not issue inspection findings in the field. Inspection findings are routinely sent to licensees within 30 days of the completion of an inspection. The Program completed all supervisory accompaniments in calendar year 2016 and is working on completing supervisory accompaniments for calendar year 2017. The program manager stated that the Program was counting inspection accompaniments performed by the supervisor during the course of inspectors being qualified in a particular modality as a "supervisory accompaniment" of the individual. These accompaniments are only being counted as long as the outcome of the inspection was that, going forward, the inspector was approved by management to perform these types of inspections independently. This practice was questioned during the periodic meeting since the inspectors being accompanied at the time of the supervisory accompaniment weren't "qualified" for the modality they were inspecting as the supervisor was observing the inspection for the purpose of qualifying the individual. Guidance was sought from the NRC's Office of Nuclear Material Safety and Safeguards as to whether or not this practice was acceptable under IMPEP. The Agreement State Programs Branch was tasked with this effort and will provide guidance at a later date.

**Recommendation 3:** The review team recommends that the Program develop and implement training for inspections on the examination of the written directives and NRC inspection procedure 87132, Brachytherapy Programs.

**Status:** After the 2016 IMPEP, the Program expressed concern to the NRC that in house expertise did not exist in a manner to allow for the development of training. The NRC suggested that as a start the Program use training located on the NRC's Agreement State Webpage (Update on Inspection Procedure 87132, Brachytherapy Programs) to address part of this recommendation. Additionally, the NRC developed a medical webinar training that was offered to all Agreement States on April 4, 2017, entitled "Medical Webinar Training Series: Brachytherapy Medical Events/Reporting – Y-90 Microsphere and High Dose Rate Brachytherapy." The Program management and staff viewed this training and felt that it increased staff knowledge of written directives used in brachytherapy procedures.

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

The Program has approximately 410 specific licensees. Since the last IMPEP review the Program has processed 715 licensing actions including amendments, new applications, renewals, and terminations. The program does not have a backlog of licensing actions. The licensing action that was in house the longest, at the time of the periodic meeting, had been with the program 71 days and was an amendment.

**Recommendation 4:** The review team recommends that the Program verify that all previously approved radiation safety officers (RSO) 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 response procedures for the appropriate license type.

**Status:** The Program has reviewed all documentation for medical RSOs that are currently on a specific license. The Program started with a pool of over 200 RSOs that needed additional documentation. Of those 200 only two RSOs remain that need additional information. Both of the licensees that have licenses reflecting these two RSOs have submitted requests to terminate their respective licenses.

**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. As the Program receives new license applications it will use the revised guidance and will periodically evaluate the actions completed against 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, the inspector returns to the office and if at that time, taking everything into consideration, no questions remain and a basis for confidence has been reached, the license is signed and transmitted 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.

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

The Program has processes in place to maintain an effective response to incidents and allegations. The Program has reported five events since the last IMPEP review. The Program communicates reportable incidents to the NRC Operations Center. Additional follow-up information is updated in the NRC's Nuclear Materials Events Database system.

The Program has received four allegations since the 2016 IMPEP review, of which two were referred from the NRC. The Program evaluated each allegation as it was received and performed onsite follow-up. Closure letters to the concerned individuals were issued in a timely manner. Due to Georgia's open records act, the Program is unable to guarantee protection of an allegor's identity.

### Compatibility Requirements (2016 IMPEP: Satisfactory)

No legislative changes affecting the Program have occurred since the last IMPEP review. The Program has one amendment overdue for adoption. The Program has incorporated changes into its regulations and is waiting for final approval. These changes will be going to the Board of the Department of Natural Resources for final approval at the beginning of June. Additionally, the Program is working on addressing all of the outstanding NRC comments received during previous rule adoptions on final Georgia regulations. The Program's regulation review process can take approximately one year to complete. The Program's rules are not subject to sunset requirements.

### Current State Initiatives

- As discussed under the section "Status of the Materials Inspection Program," the Program has created its own web-based database for inspection tracking.

### Emerging Technologies

- Lutathera (Lu-177): currently allowed by the FDA for compassionate care for gastroenteropancreatic-neuroendocrine tumors (GEP-NETs). Currently, no specific NRC licensing guidance exists for this material (although it was determined that use of this material would fall under 10 CFR 35.300) so the Program worked with the Organization of Agreement States to obtain some guidance for licensing the material.

### Large, Complicated, or Unusual Authorizations for Use of Radioactive Material

- Emeris: Decommissioning action involving NORM
- Unitech: Decommissioning action, former nuclear laundry

### State's Mechanisms to Evaluate Performance

- The Program audits fifty percent of its priority 1, 2, 3, and initial inspection reports and one hundred percent of new licensing actions performed each quarter to ensure completeness.
- The Program also provides a monthly report to the Air Branch chief on the timeliness of licensing and inspection actions.



### NRC Current Initiatives

NRC staff presented several initiatives ongoing at the NRC. These included:

- Updates to the Agreement State Policy Statement
- Government Accountability Office Materials Licensing Audit and Investigation
- Category 3 Source Security and Accountability Working Group
- Agreement State training
- Changing licensing renewals from 10 to 15 years
- Rulemaking Activities involving: Part 35, Part 61, and Financial Assurance for Category 1 and Category 2 licensees

### CONCLUSIONS:

The NRC staff recommends that: the Program continue on Monitoring; quarterly calls continue with the NRC; the next Periodic Meeting be conducted as scheduled in November 2018; and the next IMPEP review be conducted as scheduled in May 2020.