

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Sibley Memorial Hospital 5255 Loughboro Road, N.W. Washington, D.C. 20016-2695 REPORT NUMBER(S) 2018001	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region I, 2100 Renaissance Blvd, Suite 100 King of Prussia, Pennsylvania 19406-2713	
3. DOCKET NUMBER(S) 030-14754	4. LICENSE NUMBER(S) 08-07398-03	5. DATE(S) OF INSPECTION 4/9/18 on site, 4/27/18 phone exit

LICENSEE: *PE OR*

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:

1. Based on the inspection findings, no violations were identified.
2. Previous violation(s) closed.
3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

Non-cited violation(s) were discussed involving the following requirement(s) and corrective action(s):

4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with the NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11. (Violations and Corrective Actions)

10 CFR 35.610(d) states, in part, that a licensee shall provide instruction, at least annually, to all individuals who operate the unit, as appropriate to the individual's assigned duties, and 10 CFR 35.610(e) states, in part, that the licensee shall ensure that authorized users participate in drills of the emergency procedures at least annually. Contrary to the above, for calendar year 2017, the licensee did not provide instruction, at least annually, to all individuals who operate the unit, as appropriate to the individual's assigned duties and did not ensure that authorized users participate in drills of the emergency procedures at least annually. Specifically, Sibley Memorial Hospital, did not provide the required annual training on the operation of the HDR unit and did not ensure that an authorized user for 35.600 participated in a drill of the emergency procedures in calendar year 2017. This is a Severity Level IV violation, (Enforcement Policy section 6.3).

On April 27, 2018, the Radiation Safety Officer provided the required annual training on the operation of the unit and conducted an emergency drill with the 35.600 authorized user.

Statement of Corrective Actions

I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

Title	Printed Name	Signature	Date
LICENSEE'S REPRESENTATIVE	<i>[Signature]</i>	<i>[Signature]</i>	<i>4/17/18</i>
NRC INSPECTOR	Robin Elliott	<i>Robin Elliott</i>	4/27/18
BRANCH CHIEF	Donna M. Janda	<i>Donna M. Janda</i>	5/17/18

SUNSI Review Completed By: / RA / RElliott

Public

Non-Sensitive