

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

<p>1. LICENSEE/LOCATION INSPECTED:</p> <p>University of Notre Dame du Lac 636 Grace Hall Risk Management and Safety Notre Dame, IN 46556</p> <p>REPORT NUMBER(S) 2018001</p>	<p>2. NRC/REGIONAL OFFICE</p> <p>Region III U. S. Nuclear Regulatory Commission 2443 Warrenton Road, Suite 210 Lisle, IL 60532-4352</p>	
<p>3. DOCKET NUMBER(S)</p> <p>030-00694</p>	<p>4. LICENSE NUMBER(S)</p> <p>13-01983-¹⁵01</p>	<p>5. DATE(S) OF INSPECTION</p> <p>OCTOBER 23, 2018</p>

LICENSEE:

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:

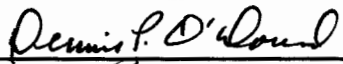
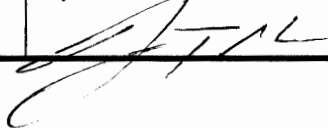
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is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

- 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 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)

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			
NRC INSPECTOR	Dennis P. O'Dowd		10/23/18
BRANCH CHIEF	Aaron T. McCraw		11/15/18

Docket File Information
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3. DOCKET NUMBER(S) 030-00694	4. LICENSE NUMBER(S) 13-01983-01	5. DATE(S) OF INSPECTION October 23, 2018
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6. INSPECTION PROCEDURES USED 87122, 87126	7. INSPECTION FOCUS AREAS All
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 01100, 03520, 22110	2. PRIORITY 3	3. LICENSEE CONTACT Andrew G. Welding	4. TELEPHONE NUMBER (574) 631-5037
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Main Office Inspection Next Inspection Date: 10/23/2021

Field Office Inspection Main Campus & 929 Eddy St. South Bend, IN

Temporary Job Site Inspection

PROGRAM SCOPE

This was routine, unannounced inspection of a large academic institution that operated a Type A academic broad scope program with authorization for byproduct material with atomic numbers 3-83, self-shielded irradiators, and several sealed sources for R&D as defined in 10 CFR 30.4 and/or 10 CFR 70.4, including animal studies and training of students, and other sealed and unsealed byproduct, source, and special nuclear material in specified quantities for research, training, and instrument calibration. The radiation safety department was staffed with a dedicated full-time RSO and a safety specialist. Radioactive wastes are handled by the institutions waste staff, whose training includes handling rad waste. The licensee established a Radiation Safety Committee (RSC) that reviewed and approved users, uses and facilities for the institution. The RSC met quarterly to conduct business. Approximately 32 individuals were approved by the RSC as principle investigators (PIs), approved for research in 70 laboratories on campus; of these, there were 11 PIs who actively conducted research in about 30 labs. Approximately 70 individuals worked under the supervision of the PIs. The majority of the licensee's research involved actinides, as well as P-32, H 3, I-125, and C-14, The radiation safety office conducted audits of the Actinides Research Facility labs on a monthly basis, and at all other research labs every other month.

PERFORMANCE OBSERVATIONS

This inspection consisted of interviews with licensee personnel, observations of laboratory use of RAM, independent measurements, and a review of select records. Accompanied by the radiation safety officer (RSO), the inspector toured several research laboratories on and near the campus, including the Actinides Research Facility labs, and the radioactive waste storage area. Observations by the inspector, along with interviews conducted with available licensee staff, revealed an adequate level of understanding of emergency and materials handling procedures and techniques. The RSO described how inventories, surveys, and periodic laboratory inspections were performed, the process of permit application reviews, and the methods and frequency of radiation training of licensee staff. The inspector reviewed licensee records, including RSC meeting minutes, annual audits, RSO laboratory audit reports, waste manifests, sealed source leak tests, and personnel monitoring. The inspector performed independent and confirmatory radiation surveys and found no readings indicative of residual contamination or exposure in excess of 10 CFR Part 20 dose limits. (cont'd. on next page)

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PROGRAM SCOPE

(cont'd. from previous page)

The inspector reviewed two security-related violations (SLIV) cited in IR 03000694/2015001(DNMS) (ML16012A445) and determined that corrective actions were completed as described and that the violations had not recurred. Based on this, the violations are closed.

No violations of NRC requirements were identified during this inspection.