# U. S. NUCLEAR REGULATORY COMMISSION REGION I

Enforcement Conference Report Nos. 030-04530/90-022 030-06923/90-002

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License Nos. <u>19-00915-03</u> Priority <u>1</u> Category <u>E1A</u> Program Code <u>03613</u> <u>19-00915-06</u> Priority <u>3</u> Category <u>E</u> Program Code <u>03520</u>

Licensee: U.S. Department of Agriculture 6505 Bellcrest Road Hyattsville, Maryland 20782

Enforcement Conference At: Region I, King of Prussia, Pennsylvania

Enforcement Conference Conducted: July 11, 1990

Prepared by:	Francis M. Cooll	7-21-	90
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Approved by:	per principal	 690	
	John D. Kinneman, Chief Nuclear Materials Safety Section B	'date	

Summary: The findings documented in Combined Inspection Report Nos. 030-04530/ 90-020 and 030-06923/90-002 were discussed. The licensee described corrective actions taken or planned. The NRC's enforcement policy was explained.

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# DETAILS

### 1. Persons Attending

## Department of Agriculture

Mary Carter. Associate Administrator, Agricultural Research Service (ARS) Lewis Smith, Acting Chairman, Radiation Safety Committee Thomas Clark, Deputy Administrator, ARS Arthur Nies, Associate Deputy Administrator, ARS David Zimmer, Director, Russell Research Center, ARS John Jensen, Radiation Safety Officer

## Nuclear Regulatory Commission

Dick Cooper, Deputy Director, Division of Radiation Safety and Safeguards Lee Bettenhausen, Chief, Nuclear Materials Safety Branch John Kinneman, Chief, Nuclear Materials Safety Section B Daniel J. Holody, Enforcement Officer Francis Costello, Senior Health Physicist Eric Reber, Health Physicist Lydia Roche, Acting Chief, Nuclear Materials Safety Section C

#### 2. Conference Summary

After a brief introduction by Mr. Cooper, Dr. Carter acknowledged the violations which had been identified during the NRC inspections and also acknowledged that insufficient program oversight by USDA management had contributed to these violations. She stated that USDA first became aware of these management deficiencies in early 1989 and had made personnel changes which were intended to correct the situation. These changes include the selection of a new Director of the Radiological Safety Staff (RSS), the increasing of the staffing level of the RSS to three health physicists in addition to the Director, and the establishment of a health physicist position dedicated solely to the Beltsville Agricultural Research Center.

Dr. Carter also described the roles of USDA management, the Radiation Safety Committee, the Radiation Safety Officer, and line management in the operation of the radiation safety program. Dr. Smith described the role of the Radiation Safety Committee (RSC) in greater detail and described plans to make the RSC more accountable. He described the Committee's plan to arrange for an outside audit of the radiation safety program.

Dr. Clark described the licensee's plan to expand the resources available to perform inspections of USDA licensed facilities by employing Health and Safety representatives from the Agricultural Research Service and the National Forest Service. This plan will be implemented over the next six to eighteen months. The licensee representatives acknowledged the need to request a license amendment to have these inspections replace those which are currently required to be performed by the Radiological Safety Staff. Dr. Clark described the discussions of NRC violations which have taken place with area directors and others to ensure that field offices know of the problems identified and the desire to correct them.

Dr. Zimmer described the corrective and preventive actions which were put into effect at the Russell Research Center in Athens, Georgia. The actions include management initiatives to increase oversight of regulatory compliance. Some of these initiatives include periodic audits by the USDA Area Office Safety and Health Management organization, elevation of audit results to the Center Director, review of progress of corrective actions with the Center Director, establishing a technical contact for questions relating to radiation safety, and conducting monthly meetings with authorized users.

Mr. Jensen provided copies of organization charts, inspection checklists which will be used to audit USDA facilities, and a questionnaire used to evaluate the radiation safety programs at these facilities. The documents provided by Mr. Jensen are included as an attachment to this report.

One of these documents, Enclosure 5, outlined specific corrective actions. These were summarized by Dr. Carter. She stated that the corrective actions taken and planned are adequate to assure safe use of radioactive material and reiterated USDA's commitment to this safe use. In response to a question, the USDA representatives had no disagreement with information provided in the inspection report.

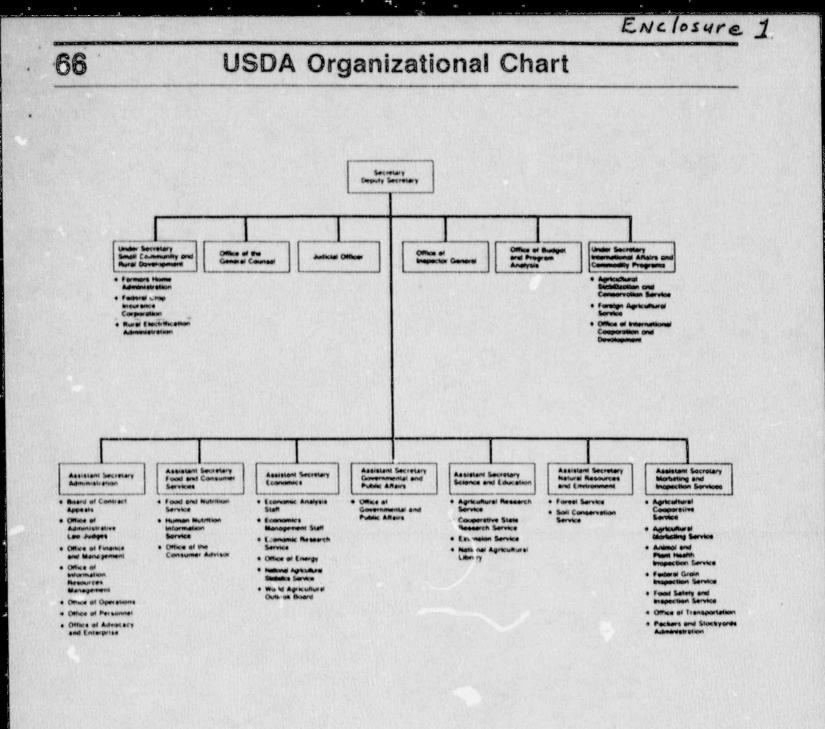
Mr. Holody described the NRC enforcement options.

Mr. Cooper stated that the licensee should include a list of milestones for its corrective actions with the licensee's response to the NRC enforcement action. He also requested that the licensee's response include their position on whether other Category I facilities will be required to develop and implement similar initiatives to those in place at the Athens, Georgiz facility to increase oversight of regulatory compliance. ATTACHMENT 1 - ENFORCEMENT CONFERENCE REPORT NOS. 030-04530/90-22 and 030-06923/90-02

USDA DOCUMENTS PROVIDED AT ENFORCEMENT CONFERENCE

# USDA Radiation Safety Program

US Nuclear Regulatory Commission Enforcement Conference July 11, 1990



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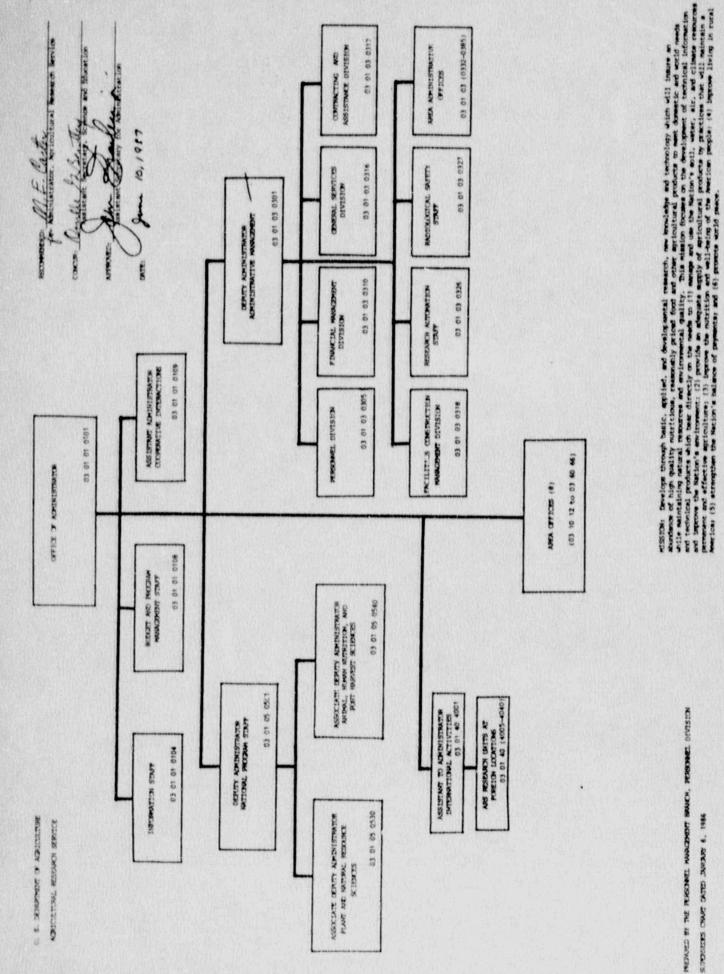
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Enclosure 2

#### Enclosure 3

#### Radiation Safety Audit Form

## Audits of Unsealed Radioisotope Users

#### (Please check or fill-in appropriate blanks)

Name of Responsible User:\_\_\_\_\_ RSC#:

Are in jviduals who use radioactive material in laboratory approved by 1. RSS? YES\_\_\_\_ NO\_\_\_\_

Names of individuals who use radioactive material and are not approved by RSS:\_\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,

- Are radioactive materials used in rooms/laboratories/areas that are 2. indicated on responsible users RSC approval form? YES\_\_\_\_\_ NO\_\_\_\_\_
- Are rooms/laboratories/areas where radioactive materials are used 3. labeled "Caution - Radioactive Materials"? YES\_\_\_\_ NO\_\_\_\_
- 4. Which radioisotopes are used in responsible users laboratory (indicate maximum activity in millicuries on hand for each radioisotope in blank)?

I-3	C-14	P-32	S-35		
Ca-45	Cr-51	Rb-86	I-125	I-131	
other					

- Are stock solutions of radioactive materials stored in locked 5. containers (i.e., refrigerator, cabinets)? YES\_\_\_\_ NO\_\_\_\_ OR is laboratory locked when not attended by authorized users? YES\_\_\_\_NO\_\_\_\_
- What survey instruments are used for radiation level surveys? 6. Model No. Manufacturer Calibration Date

Is a label indicating the date of the calibration affixed to the side of the meter? YES\_\_\_\_ NO\_\_\_\_

Is a check source available in the laboratory to test instruments for proper operation? YES\_\_\_\_\_NO\_\_\_\_

How often are the meter tested with the check source? WEEKLY\_\_\_\_OTHER DAILY

Who calibrates the meter? AUTHORIZED COMPANY \_\_\_\_ OTHER\_\_\_\_\_

Audits of Unsealed Radioisotope Users (Page 2)

'•	How often are removable radioactive contamination surveys performed? WEEKLY MONTHLY OTHER
	What instrument is used to analyze the "wipes"? LIQUID SCINTILLATION COUNTER GAMMA SCINTILLATION COUNTER OTHER
	Are records of results of surveys maintained? YES NO
	What units are the survey results recorded in? COUNTS PER MINUTE(CPM) DISINTEGRATIONS PER MINUTE(DPM) OTHER
	Does responsible user transfer radioactive material to other users at location? YES NO To other USDA locations? YES NO
).	Do individuals who use gamma emitting radioisotopes (Cr-51, I-125) or hard beta emitting radioisotopes (P-32, Rb-86) wear film badges? YES NO Do they wear ring badges? YES NO
10.	Are radioiodinations performed? YESNO
	How often are radioiodination performed? DAILYWEEKLYMONTHLYOTHER
	What is the maximum activity used in any one radioiodination? < 1 millicurie > 7 millicurie
	What instrument is used for removable contamination surveys Manufacturer Model No
	What instrument is used for thyroid monitoring? Manufacturer Model No
	Are all individuals who perform radioiodinations in thyroid monitoring program? YES NO
	Who performs thyroid monitoring? LABORATORY PERSONNEL OTHER
	What instrument is used for radiation level surveys? Manufacturer Model No
	Is thyroid monitoring performed between 24 and 72 hours after radioiodination? YES NO OTHER
	Is instrument calibrated with I-125 or I-129 check source? YES NO
	Is a neck phantom used to calibrate instrument? YES NO
	Who calibrates the thyroid monitoring instrument?

# Audits of Unsaeled Radioisotope Users (Page 3)

1,1.	Are surveys of incoming packages of radioactive material performed according to required procedures? YES NO IF NOT, EXPLAIN
	Are records of surveys maintained? YES NO
:2.	Has responsible user received material from other users without notifying RSS? YES NO
	Do laboratory workers perform radiation level surveys of hands, feet clothing before leaving restricted area? YES NO
14.	What methods are used to dispose of aqueous liquid waste(check appropriate boxes)? POURED DOWN DRAIN TRANSFER TO AUTHORIZED WASTE BROKER OTHER
	What methods are used to dispose of organic liquid waste? TRANSFER TO AUTHORIZED WASTE BROKEROTHER
	What methods are used to dispose of dry, solid waste? INCINERATIONBURIAL TRANSFER TO AUTHORIZED WASTE BROKEROTHER
	TRANSFER TO AUTHORIZED WASTE BROKEROTHER
	What is the name and address of the authorized waste broker (if used)?
	If short half-life radioisotopes are used (i.e.,P-32, I-125, S-35), is the waste held for decay and then disposed as normal trash? YESNO Is short half-life waste labeled with date and activity during
	storage? YES NO
	Is short half-life waste held for at least 10 half-lives? YES NO
	Are records of survey and disposal of short half-life waste maintained in accordance with Radiation Safety Manual Procedures? YES NO
15	. Is there evidence that suggests that or did you witness individuals eating, drinking or smoking in laboratories where radioactive materials are used? YES NO
	Are food and beverages stored in refrigerators where radioactive materials are stored? YESNO
16	5. Have any spills or unusual events occurred since the last inspection?
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RADIATION SAFETY AUDIT FORM

Audit of Nuclear Gauge Users

(Please check or fill-in appropriate blank)

Name of Responsible User:\_\_\_\_\_\_ RSC #:\_\_\_\_

1. Are individuals who use gauges aproved by RSS? YES\_\_\_\_ NO\_\_\_\_

Names of individuals who use gauges and are not approved by RSS:

 Are gauges stored in romms/ locations as indicated on responsible users RSC approval form? YES\_\_\_\_\_ NO\_\_\_\_\_

3. Are rooms/areas where gauges are stored labeled "Caution - Radioactive Materials"? YES\_\_\_\_\_ NO\_\_\_\_\_

Are rooms/areas locked when not attended by an authorized user? YES\_\_\_\_\_ NO\_\_\_\_\_

- 4. What type and number of gauges are possessed by responsible user? Mftr \_\_\_\_\_\_ Model No. \_\_\_\_\_ # \_\_\_\_
- Do technicians wear film badges when using gauges? YES\_\_\_\_\_ NO\_\_\_\_\_
- 6. When gauges are at field site, are they locked or otherwise secured when not in use? YES\_\_\_\_\_ NO\_\_\_\_\_
- Do users carry shipping papers while transporting gauges? YES\_\_\_\_\_ NO\_\_\_\_\_

Where are shipping papers located during transport of gauges? IN CAB, WITHIN REACH OF DRIVER\_\_\_\_\_\_ STORED WITH GAUGE\_\_\_\_\_ OTHER

Do shipping papers contain correct information according to the examples in the Radiation Safety Manual? YES\_\_\_\_\_NO\_\_\_\_\_

- Is a log maintained to indicate where each gauge was used, who operated the gauge and the date of use? YES\_\_\_\_\_ NO\_\_\_\_\_
- 9. Does the responsible user possess gauges which he no longer neers and does not know how to dispose? YES\_\_\_\_\_ NO\_\_\_\_\_

#### Enclosure 5

- I. Corrective Actions for Apparent Violations Which Indicate Programmatic Weaknesses
- A. Failure to perform internal inspections of Category I and II locations at required frequency.

All Category I facilities will be inspected by RSS within 12 months. ARS, SCS and FS health safety professionals will be trained for radiation safety audit program within 6 months and will begin audits immediately thereafter. All Category II facilities will be audited within 18 months and most Category III facilities will be audited within 24 months.

B. Failure to secure licensed materia in an unrestricted area.

Corrective actions for these viriations were addressed at the time of the inspections. The RSS will contact the locations within 30 days to assure that corrective actions have been taken. RSS will require written documentation from locations that corrective actions were taken. These violations have been corrected.

C. Failure to provide copies of license and procedures to users.

Copies of the USDA NRC License were recently distributed to all responsible users, who were instructed to make the license available to all individuals who use radioactive materials or work in allow where radioactive materials are used. This violation has been corrected.

D. Failure to provide required training to radiation workers.

The RSO provided training to individuals who use radioactive materials and to individuals who work in areas where radioactive materials are used at the Russell Research Center in Athens, Georgia. The RSS provided training to the individual at BARC who was identified as having had insufficient training in the safe use of radioactive materials. The RSS has asked responsible users to identify what training has been provided to researchers in their laboratories in the Radiation Safety Questionnaire which will indicate which locations need to revamp their radiation safety training program. RSS will provide guidance to these locations in setting-up a training program. This violation will be corrected within 6 months.

E. Failure to survey laboratories and waste areas at required frequency.

The RSO provided training in the requirements of the NRC license to individuals at the RRC for laboratory and waste area surveys. The Radiation Safety questionnaire requires users to indicate the frequency with which they survey laboratory and waste storage areas and RSS will contact users who are not in compliance with this requirement to assure they correct this deficiency. In addition, the Radiation Safety Manual will be updated in the near future and will

#### Enclosure 5 (Page 2)

more clearly state the current requirements. This violation will be corrected within 6 months.

F. Failure to evaluate incinerator ash prior to disposal as normal trash.

The RSO will review all incinerator ash evaluation methods (for 11 approved incinerators) within 14 days and will assure that locations do not use adequate methods will discontinue such disposals until they submit and RSS approves new methods. All incinerator locations will have adequate evaluations programs in place within 60 days.

No.

G. Failure to perform leak tests of sealed sources at six-month intervals.

The RSO will contact all sealed source users who are delinquent in performing the leak tests within 60 days and will assure that they promptly submit a leak test or lose the authority to use the sources.

H. Failure to evaluate discharges to the sewer, to evaluate airborne releases to the environment, and to evaluate material disposed to the normal trash.

The Radiation Safety Questionnaire addresses these issues and will alert RSS to locations which are not complying with these requirements. RSS will contact locations which are not in compliance and assure that they develop adequate evaluation procedures within 90 days. In the future, RSS will make a Health Physicist responsible for each facility that is required to perform such evaluations and they will monitor and work with the facilities closely to assure continued compliance. These violations will be corrected within 6 months.

- II. Corrective Actions for Other apparent violations
- A. Failure to prepare proper shipping papers for the transport of a portable gauge.

This violation was corrected in the field immediately after the inspection. The Radiation Safety questionnaire will alert RSS to other individuals who do not correctly complete shipping papers. RSS will contact these individuals within 60 days to assure corrective actions are taken. The RSO will stress review of shipping papers to the SCS and FS safety and health professionals who will audit the gauge users. This violation has been corrected.

B. Failure to perform iodinations in a properly operating hood.

This violation was corrected in April, 1990 when a properly operating hood, which included a charcoal filter, was identified at the RRC. The ARS safety and health professionals will be instructed to check the operation of hoods during their audits. This violation has been corrected.

#### Enclosure 5 (Page 3)

C. Failure to provide proper safety equipment and follow safety procedures during iodinations.

In April, 1996 the RSO instructed individuals who perform icdinations at RRC in proper icdination safety procedures and the proper use of safety equipment during icdinations. This violation has been corrected.

D. Failure to monitor workers thy ids after iodinations.

Individuals who had performed . inations at the RRC within the last 6 months had had their thyroids monitored in April, 1990. Results of this monitoring indicated that one individual had a thyroid burden of approximately 16 nanocuries, well below investigational limits. The Radiation Safety questionnaire addresses this requirement and will be reviewed by RSS to determine other locations which are not in compliance. This violation has been corrected.

E. Failure to have check source available.

Check sources were purchased by users at the RRC in April, 1990. RSS monitors compliance with this requirement for users at RRC by reviewing laboratory survey records which they submit to RSS each month. Records submitted by RRC users have indicated compliance with this requirement. The Radiation Safety Questionnaire addresses this requirement and RSS contact facilities which are not in compliance to assure corrective actions are taken within 6 months. This violation has been corrected.

# F. Failure to post and label radioactive materials.

These violations were corrected at the time of the inspections. The safety and health professionals will be instructed to review posting and labeling requirements during their audits. This violation has been corrected.

Enclosure (	5	
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•	RADIATION SAFETY QUESTIONNAIRE
(P1	ease check or fill-in appropriate blanks)
1.	Which radionuclides do you use? H-3 C-14 P-32
	_S-35 Ca-45 Cr-51 I-125
	Other
2.	How often are hoods where radioactive materials are used checked for adequate air flow?
	quarterly biannually annually not checked
2.	How often do you perform hand-held meter surveys of your lab?
	weekly monthly quarterly not at all
	How often do you perform removable contamination surveys (wipe tests) in your laboratory?
	weekly monthly quarterly not at all
	What is the maximum activity you use per experiment?
	<200 microcuries >200 microcuries
з.	How do you dispose of radioactive waste:
	Dry solid waste - transfer to a radioactive waste broker
	incineration hold for decay, then dispose as trash
	other(specify)
	Aqueous liquids - transfer to a radioactive waste broker
	pour down drain hold for decay, then dispose as non-radioactive
	other(specify)
	Organic liquids - transfer to a radioactive waste broker
	hold for decay, then dispose as hazardous waste
	other(specify)
4.	Are materials stored in a locked container (i.e., refrigerator,

cabinet? YES\_\_\_\_\_ NO\_\_\_\_ OR is the laboratory locked when authorized users are not in attendance? YES\_\_\_\_\_ NO\_\_\_\_\_

RADIATION	SAFETY	QUESTIONNAIRE	(PAGE 2	)

Who provided the training?	Name:
	affiliation:
Have all individuals in your Training and Experience (AD-8 YES NO	laboratory submitted a Reliation Safety 303) form to this office?
Are iodinations performed in YES NO	
Do you monitor the thyroids of in your laboratory? YES	of all individuals who perform iodination NO
What instrument is used for t Manufacturer	thyroid monitoring? Model No
dispose? YES NO	aterials which are difficult to