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REGION I

Report Nos. 50-317/91-01
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Docket Nos. 50-317
50-318

License Nos. DPR-53
DPR-69

Licensee: Baltimore Gas and Electric Company
Post Office Box 1475
Baltimore, Maryland 21203

Facility Name: Calvert Cliffs Nuclear Power Plant, Units 1 and 2

Inspection At: Lusby, Maryland

Inspection Conducted: January 7-11, 1991

Inspectors: _____ 2-5-91
A. Markley, Radiation Specialist, Radiological Control and Emergency Preparedness Section, Reactor Programs Branch, Division of Radiation Safety and Safeguards, RIII — date

_____ 1-24-91
J. Furia, Senior Radiation Specialist, Facilities Radiological Protection Section (FRPS), Facilities Radiological Safety and Safeguards Branch (FRSSB), Division of Radiation Safety and Safeguards (DRSS) — date

Approved by: _____ 2-4-91
W. Pasciak, Chief, FRPS, FRSSB, DRSS — date

Inspection Summary: Inspection on January 7-11, 1991 (Combined Inspection Report Nos. 50-317/91-01; 50-318/91-01)

Areas Inspected: Routine, unannounced inspection of the Radiation Protection program including: management controls, audits, quality assurance, ALARA, training and implementation of the above programs.

Results: Within the areas inspected, no violations or deviations were noted.

DETAILS

1. Personnel Contacted

1.1 Licensee Personnel

* A. Anuje, Supervisor, Quality Assurance Audits
J. Brown, Technical Training Coordinator
* S. Cowne, Senior Engineer, Quality Assurance Auditing
* R. Franke, Compliance Engineer
* P. Katz, Superintendent, Technical Support
* N. Millis, General Supervisor, Radiation Safety
* G. Phair, Assistant General Supervisor, Radiation Control & Support
* J. Roller, Technical Training Coordinator
* C. Sly, Compliance Engineer
* B. Watson, Plant Health Physicist
* J. Wood, Lead Auditor
* P. Wright, Supervisor, Radiation Control - ALARA

1.2 NRC Personnel

A. Howe, Resident Inspector
* A. Markley, Radiation Specialist, RIII
* L. Nicholson, Senior Resident Inspector

1.3 Other Personnel

B. Dionne, ALARA Center, Brookhaven National Laboratory

* Denotes those present at the exit interview on January 11, 1991.

2. Purpose

The purpose of this routine inspection was to review the licensee's radiation control program, especially in the areas of: operational health physics, dosimetry, ALARA, training and Quality Assurance.

3. Radiation Safety

3.1 Operational Health Physics

The licensee was operating Unit 1 at approximately 80% power, while Unit 2 continued to be in an extensive outage during this inspection. The

licensee's Radiation Safety staff continued to be augmented by contractor health physics technicians, which were used to support the Unit 2 outage.

The licensee recently announced that effective February 1, 1991, the current General Supervisor - Radiation Safety (GSRS) was transferring to the training Department, and that one of the Plant Health Physicists would be assuming the position of GSRS. The training and qualifications of this new GSRS were reviewed and found to meet the requirements of plant Technical Specifications.

As part of this inspection, the respiratory protection program was reviewed for compliance with plant procedures and instructions, and with general industry practice. In accordance with Calvert Cliffs Instruction (CCI) 801, "Respiratory Protection Program", responsibility for the management of this program area rests with the GSRS. In accordance with RSP 1-117, Rev 1, "Selection, Issuance, and Wearing Respiratory Protection Devices Used to Protect Against Airborne Radioactivity", the three Plant Health Physicists who work for the GSRS had discrete areas of responsibility for this program. Fit testing and bioassays were conducted by the Lead Technician - Bioassay within the Dosimetry Section. Records of approval to wear respirators and for the required annual medical examination were maintained by the Lead Technician - Records in the Dosimetry Section. Maintenance and repair of respiratory protection devices was conducted by the Materials Processing Section. MPC-hour records were gathered by the Radiation Control - Operations Section and were included in the monthly dosimetry report published by the Dosimetry Section. Respirator usage at the plant was generally kept to a minimum by the institution of engineering controls, and was being further enhanced by the plant restoration project currently being conducted. Records of approval and the results of bioassay analysis of respirator users was properly maintained at the Dosimetry Section. The inspector had no further questions in this area.

Also as part of this inspection, plant tours of the Auxiliary Building and the Unit 2 Containment were conducted. Ongoing work in the Auxiliary Building was minimal, with two rooms currently being renovated as part of the plant restoration project. Due to restoration activities at the Materials Processing Facility, the backlog of Dry Active Waste in storage at the 45' Auxiliary Building Truck Bay was larger than normal, but the housekeeping in this area was good, and all materials were properly placed in designated containers. In the Unit 2 Containment, work was ongoing in preparation for plant restart, and prior to this for the Integrated Leak Rate Test (ILRT). Housekeeping, especially in the area of temporary storage locations at the 10' and 45' elevations was poor. The licensee indicated awareness of this problem and indicated that further cleanup would be

conducted following the ILRT. The inspector had no further questions in this area.

3.2 Dosimetry

The Dosimetry program was under the direct management of the Supervisor - Dosimetry, who in turn reported directly to the GSRS. The Dosimetry Section was divided into three subgroups, the Dosimetry Laboratory, Records and Bioassay groups.

The licensee currently utilizes a Panasonic TLD system with two readers, whose results were used as the official record dose, and Self Reading Dosimeters used to track doses on a daily basis, but not for the official record dose. Whole body TLDs were changed out on a monthly basis, with the results compiled monthly for review by the GSRS and staff. Extensive Quality Control checks were utilized in conjunction with the TLD program, and all anomalous results promptly investigated. Results of these investigations were also included in the monthly reports.

The records group maintains data on both current and former dosimetry users. As part of this inspection, the records of 30 individuals, 22 current dosimetry users and 8 former users were examined. Although the licensee utilizes minimal computerization of records, the individual files were found to be complete and up-to-date. In addition to external dosimetry results, records on annual physicals, respirator fit tests, annual General Orientation Training (GOT) and bioassay results were also maintained.

The bioassay group utilized a chest monitor and bed counter for whole body bioassay. Both systems were subject to once-per-shift source and background checks together with other weekly quality control checks on the system. The licensee maintained records on these QC checks and utilized a two standard deviations limit on control charts for declaring a system inoperable. The licensee also maintained a technical support contract for its bed counter, which allowed the contractor access to bioassay data from this counter and provided the licensee with further verification of counting results. The inspector had no further questions in this area.

3.3 Maintaining Occupational Exposures ALARA

The inspector reviewed the licensee's program for maintaining occupational exposures ALARA, including: ALARA group staffing and qualification; changes in ALARA policy and procedures, ALARA considerations for planned, maintenance and refueling outages; worker awareness and involvement in the ALARA program; and establishment of goals and objectives.

3.3.1 ALARA Program/Organization

The licensee first formally implemented a program to maintain occupational exposure as low as reasonably achievable (ALARA) when the Calvert Cliffs Instruction (CCI) 809, ALARA Program, was approved on August 21, 1981. This administrative procedure described ALARA responsibilities, the ALARA job review and ALARA records. The Radiation Control (RC) Department first established the ALARA Coordinator position in late 1981. A procedure to incorporate ALARA design considerations into major and minor modifications was approved later.

The station's ALARA program is described in CCI-809D, ALARA Program with the latest revision dated January 9, 1991. This instruction describes ALARA responsibilities, the implementation of collective dose goals, ALARA job reviews, reports, records and ALARA suggestion program. The licensee's ALARA program was compared with ALARA program elements as described in NUREG/CR-4254. The licensee's program exhibited all but two elements which were the ALARA Committee and the Administrator ALARA Training.

The ALARA organization, prior to the reorganization of August 6, 1990, was comprised of one Radiation Control (RC)-ALARA Supervisor and nine ALARA technicians. The new ALARA organization when staffed will consist of one RC-ALARA Supervisor, five Principal RC technicians, six RC technicians and a support clerk. The Principal RC technicians are responsible for preparing special work permits (SWP), coordination with maintenance and outage planners and performing ALARA job reviews. The RC technicians are responsible for performing and preparing ALARA job inspections, proper use of plant breathing air, coordination of installation of temporary ventilation, containment devices and shielding. Financial and management support of ALARA efforts was evident. The RC Department is in the process of adding approximately 27 positions, five positions which will be

added to the ALARA unit.

The licensee does not utilize an ALARA Committee. However, personnel interviewed indicated that the ALARA program received plant wide support and that cooperation and communications among the plant organization obviated the need for this committee. While the inspectors did note that communications among work groups appeared to be good, some of the review functions typically provided by an ALARA Committee had yet to be established within the plant organization.

3.3.2 Management Support of Technical Issues

The failure to resolve the technical problems associated with the neutron streaming in both Unit 1 and 2 containments demonstrated a lack of management support, in particular for long-term planning and resolution of technical issues. The neutron streaming problems have existed since plant startup. This problem is compounded by a history of unreliable safety injection (SI) accumulator level transmitters. Surveillance requirements require personnel to periodically enter the containment at power to verify SI accumulator level. This has resulted in neutron exposure to personnel and a significant reduction in reactor power in the November - December 1990 period to terminate a nitrogen leak associated with the SI accumulator system. The average monthly operating gamma plus neutron exposure for the years 1986 through 1989 was 3.930 person-rem. The average monthly operating neutron dose to personnel was 1.995, 1.309, 0.497 and 5.306 person-rem for 1987, 1988, 1989, and 1990, respectfully. The licensee received a plant modification proposal to address this issue in March, 1981. The licensee deferred action on this issue until fiscal year 1983. A facility change request to replace the neutron shield was approved in February, 1986. The licensee indicated that this modification was planned for installation during the 1992 refueling outage.

The inspectors noted that ALARA review of design occurred after the design formulation and conceptualization. This can result in a cursory type of ALARA review that only evaluates the impact of a given design. At other facilities it has been observed that it would be too late or too expensive to make significant changes in the design. The licensee utilizes a civil engineer who has received training in performing ALARA reviews of design, nevertheless, no

evidence was presented by the licensee to indicate that operational experience was being factored into the design process. Operational experience, such as minimization of surveillance in the RCA, provision for room to perform maintenance, and best locations to obtain representative samples from fluid systems, are the type of inputs which would further enhance the licensee's program in this area.

Other areas for possible improvement include the performance of formal programmatic self-assessments. At many facilities self-assessments are performed by a corporate support group. The licensee does not have a corporate health physics support group. Interviews with the licensee indicated that self-assessments generally consisted of supervisory reviews that were seldom documented. Also, additional funding in the Radiation Safety area would allow for such improvements as computerization of ALARA records and services, real-time dose tracking capabilities and implementation of electronic dosimetry systems.

As indicated in the above paragraph, the licensee does not have a corporate health physics support group. The inspectors attempted to determine if the functions normally performed by a corporate radiation safety organization were being implemented at CCNPP. The inspectors noted that two corporate radiation safety functions were not apparent in the licensee's on-site organization. The two functions missing were the lack of an ALARA committee and the lack of formal self-assessments. In spite of this, the licensee has been effectively controlling exposure without the existence of these functions. Some program elements that are observed to exist at other facilities because of a health physics corporate support group were also found to exist at CCNPP. These functions include good use of dose-reduction equipment like the automated cavity decontamination equipment, licensing support, evaluation of exposure trends, review of industry experience and provision of basic guidelines and policy to implement ALARA.

3.3.3 Training

The inspector reviewed selected training programs used to train workers and RC technicians in the ALARA policies and their responsibilities for reducing exposure, minimizing the spread of contamination and the generation of radwaste. This included discussions with the respective training instructors, review of lesson plans and a tour of the training facilities.

The current lesson plan for training new employees in accordance with the requirements of 10 CFR 19.12 is GOT-337-19-1. A review of this lesson plan and discussion with the instructor indicated that ALARA objectives were covered. The ALARA concept is defined, the management policy is stated, the function of the ALARA program is described and the workers' responsibilities are explained. The presentation of ALARA in GOT-337-19-1 was adequate.

The current lesson plan for training radiation workers is GOT-337-21-1. A review of this lesson plan and discussion with the instructor indicated that ALARA objectives were covered. Radiation workers receive additional training in the methods to reduce exposure and in methods to control the spread of contamination. The presentation of ALARA in Radiation Worker Training was adequate.

The current training program for RC technicians is documented in Radiation Safety Section Training and Qualification Manual. This manual describes the knowledge, skills, prerequisites and qualifications needed to become an RC technician. Specialized ALARA training is given to the ALARA field services technicians which qualify them for such tasks as installation and removal of temporary shielding, ventilation units, and performing quality checks on plant breathing air systems. Additional training is provided for filter replacements in plant systems, spent resin transfers, divers in the spent fuel pool, steam generator maintenance, and reactor disassembly and reassembly.

The current training provided to design engineers is described in DESP-17, ALARA Design Review. This procedure requires that design engineers shall receive training in ALARA design principles and are provided a basic knowledge to complete the ALARA design review checklist. This training is documented and is conducted by the Design Engineering Section's ALARA Design Coordinator (ADC). The training and qualification of the ADC includes completion of a formal ALARA training program and becoming familiar with the references listed in the procedure or have past experience in ALARA/radiation protection.

The inspector noted that only one individual was qualified as ADC. Since the ADC is responsible for performing the majority of the ALARA design reviews, the absence of this individual would preclude ALARA review performance.

Currently no specific training in ALARA is available for

administrators and supervisors. The RC Department is assisting in the development of a first line supervisor job observation training. This training will require the supervisor to look for methods to reduce dose, minimize the spread of contamination and generation of radwaste.

3.3.4 Management Goals

The inspector reviewed the procedure for collective dose goals along with the 1990 exposure performance measured against established goals. Management involvement was evident in the setting and negotiating of exposure goals. The goal is established based on past experience based on the work planned for the upcoming year. Upon concurrence among discipline management, the plant manager approves the projected exposure estimate and the discipline managers are held accountable for goal performance. Should significant unplanned work arise, the goal is adjusted to distribute the additional exposure to the groups most affected or are distributed across the plant based on percentages of "dose budget" that were negotiated at the beginning of the year. Performance for 1990 was good; projected dose was 335 person-rem and actual dose expended was 305 person-rem.

3.3.5 ALARA/SWP Procedure Implementation

The licensee uses a special work permit (SWP) system to evaluate the radiological conditions and to specify the radiological control requirements to be implemented. There two types of SWPs: Routine, which is used for repetitive access to work in radiologically controlled areas (RCA); and Specific, which is required for specific jobs and where significant dose, contamination, or airborne radioactivity may be involved. Routine SWPs are updated quarterly and Specific SWPs are valid for the duration of the job.

The policies, goals and standards to reduce personnel radiation exposure are specified by licensee procedure CCI-809D, ALARA Program. It establishes criteria for ALARA reviews based on radiological conditions and defines responsibilities for management and workers. ALARA Administrative Procedure, RSP 1-200, establishes criteria for dose tracking, post-job reviews, job inspections, reports to plant management and ALARA open item tracking and resolution.

The licensee's procedures require an ALARA review of a job to be

performed whenever the whole body exposure estimate for a job exceeds 1 person-rem for that job, the job is to be performed in an area that exceeds 1 R/hr, and/or as deemed necessary by the Supervisor Radiological Controls - ALARA (SRCA) or the Assistant General Supervisor - Radiation Control and Support (AGS). Personnel who are involved in performing ALARA reviews include radiological work planners, ALARA Coordinator and the SRCA. The inspectors noted that the licensee does not routinely perform ALARA reviews of work in areas that exceed 100 mr/hr but that are less than 1 R/hr.

Procedure RSP 1-106, Special Work Permit Administration, requires the performance of pre-job briefings (when deemed necessary on the SWP) by the RC technician. The RC technician will discuss the scope of the job, ALARA controls to be implemented and any concerns identified by the workers. The pre-job briefing is documented and added to the SWP file. Licensee and contractor personnel indicated that RC personnel insist on knowing the exact scope of work and ensuring that the workers understand what is required of them. The licensee also indicated that the relationship between radiation controls and maintenance personnel were good. Contract personnel also indicated that maintenance personnel were cooperative and supportive.

The licensee benefits from a consistent, highly experienced work force. Many of the maintenance, instrumentation and controls and inservice inspection personnel have worked at CCNPP since the plant started up. Additionally, the licensee contracts very little maintenance and inspection work.

Procedure RSP 1-200 requires the performance of post-job reviews when actual and estimated dose differ by more than 25% and actual dose exceeds 0.5 rem, unknown or unusual problems arose during the conduct of the job, improved exposure control techniques were identified during the job and when deemed beneficial by the SRCA.

The inspector reviewed approximately 20 SWP packages/job history files from 1989 through 1990. Several problems were noted during this review. In SWP 89-2055, problems were encountered during job performance and were discussed in the post job review; yet the recommendations identified for future job performance appeared incomplete. In SWP 89-2303, two open items were identified. However, these items were not logged into the open item log and resultant evaluations and corrective actions have not been addressed.

In almost all cases (16 of 20), the actual exposure expended was not recorded on the front of the SWP. The inspector noted that the files for 1989 and 1990 appeared not to be closed out. In general, an inconsistent level was noted in the SWP/ALARA job history file documentation and in post-job reviews. Loose procedure requirements and inconsistent performance in post-job reviews suggest weak management support for post-job reviews.

With respect to process job reviews (routine SWPs), discussions with licensee personnel indicated, that while dose estimates for some of these activities exceeded the ALARA review planning criteria, ALARA reviews were not performed or documented. The inspector could find no provision within the procedures provided by the licensee that would allow "waiving" of ALARA review documentation requirements.

3.3.6 Planning and Scheduling

The inspector reviewed the adequacy of the licensee's work planning and scheduling process for allowing sufficient lead time to incorporate ALARA concerns. Short term planning of work activities is accomplished with the station's maintenance scheduling personnel. The licensee indicated that outage planning utilized two time horizons and is schedule driven. At six months prior to an outage, the SRCA, ALARA coordinator and the unit RC planner will meet with outage management personnel to determine the support requirements for the planned outage. Subsequent meetings are held between the unit RC planner and maintenance planners to identify specific job steps and activities that require radiological support. Upon commencement of the outage, a continuously updated Project 2 schedule is provided to the RC-ALARA group. The RC-ALARA group ensures that activities are planned for a three day horizon. This includes obtaining recent radiological information and preparation of the work site.

The RC department does not have to rely on other work groups to support radiological protection job site preparations. Within the RC department, the nuclear plant support services group provides the labor force for erection of temporary shielding, construction of containments, provision of portable ventilation and decontamination activities.

The licensee has developed a significant data base of work experiences to draw from to support future reductions in exposure

The tracking and trending of radiological data is, however, essentially a manual task. Despite this, the licensee does draw on work experiences to control work activities.

3.3.7 ALARA Initiatives/Operational Practices

The licensee has maintained a low source term in its reactor systems primarily due to good operational practices and maintenance of good chemistry. The licensee adopted a coordinated lithium-boron system of pH control during the initial startup of each unit. The steam generators at CCNPP are in excellent condition with less than 1% of the tubes plugged. Approximately three years ago, the licensee adopted an elevated pH of 7.3. Since this adoption, the licensee indicated that the radiation levels in the steam generator channel heads have dropped off to 3-4 R/hr contact on the tube sheet and 2-3 R/hr general area in the channel head. The licensee also indicated that morpholine had been used on the secondary side since startup for chemistry control of the secondary plant. Licensee personnel indicated that sludge lancing operations during outages usually resulted in less than a gallon of sludge removed from each steam generator. Minimization of the source term appears to have contributed to the historically low occupational radiation exposures at the site have been small.

The licensee has recently adopted a hot spot reduction program. The program is intended to systematically identify, track and reduce hot spots in plant systems. However, it is too early to evaluated the importance of this program to exposure reduction. The licensee has also adopted a number of dose reduction methodologies to support outage maintenance and refueling activities. Some of these include use of: Automated cavity decontamination equipment, multi-stud tensioners/detensioners, steam generator manway lift rigs, and the implementation of a new design of reactor coolant pump seals. The licensee has also utilized the Nuclear Network to elicit information regarding specific dose intensive tasks.

The licensee has made extensive use of video equipment and mockup training to support radiological coverage. This equipment has audio capabilities as well. Cameras have been setup to monitor steam generator, reactor coolant pump seal, spent fuel pool, radwaste truck bay and resin transfer work activities. The licensee also indicated that portable cameras have been setup to monitor other special project activities such as work in containment tents. The licensee indicated that video taping of work activities had been

used for training. The licensee has used mockup training for steam generator, reactor coolant pump seal, incore instrument flange, and pressurizer heater work.

The licensee adopted restrictive administrative dose controls in 1986 to minimize individual exposure. The annual administrative whole body dose limit is 2 Rem, not to exceed 10 Rem in a 5 year period. This limit appears to have positive effect on the management of exposure "resources."

3.3.8 Conclusions - ALARA Program

The ALARA program has been very successful at Calvert Cliffs. As the above observations indicate, there are a number of elements that appear weak or missing in the program. It is concluded that the program has been successful for the following reasons:

- The licensee has historically maintained a good regimen of chemistry control that appears to have resulted in a low source term.

- The station tends to use employees from other parts of the company during outages in order to minimize the use of contractor workers and technicians. Company management has recognized that much outage work is repetitive, so that in using the same company workers over the years to do the same jobs has resulted in efficiency through experience, and minimization of exposure. The station has benefitted from a highly consistent workforce, many individuals being their since plant startup.

- The ALARA group has been innovative in the use of mock-ups and in training for high dose jobs, examples include pressurizer heater replacement and steam generator feed ring work.

- Communications, training and staffing at the station are good. As indicated above, the staff on-site has been very stable. From the onset of station operation the organization has been sensitive to exposure minimization. Maintenance and other departments are very supportive to radiation controls. This has played an important role toward exposure minimization.

- The radiation controls department has its own labor force for construction of engineering controls such as scaffolding, tents, shielding and for decontamination operations. This results in the involvement of radiation control personnel in the work activity as a partner at an early stage.

- Radiation control technicians are very conscientious about making sure that workers are thoroughly briefed in hazards, work activities and safety concerns.

- Financial and management support for ALARA has generally been good. Upper management is strongly involved in exposure goal setting and in holding other managers accountable for meeting the goals.

Areas of potential improvement include:

- Greater management committment to support program and system improvements in Radiation Safety, especially in the area of computerization.

- Greater utilization of plant experience together with inclusion of this experience earlier in the design modification process.

- Strong management committment to implement the design changes necessary to reduce the neutron streaming problems.

- Greater consistency in the performance of SWP/ALARA job history documentation and post-job reviews.

- Consider the establishment of formal programmatic self assessments in the radiation safety area.

4. Training

As part of this inspection the training programs for both technical training of the Radiation Safety Technicians and the GOT training in radiation safety for all plant employees was examined.

Technical training of the Radiation safety Technicians was conducted on an ongoing basis. In July 1990, the licensee made a complete revision to the Radiation Safety Section Training and Qualifications Manual and the associated Job Coverage Standards. New technicians receive a three week general training

followed by a 6-18 month Core Qualifications training. Technicians who will work in ALARA, Operations or Materials Processing were given the same Core Qualifications training, while a separate Core Qualifications was established for technicians working in Dosimetry. In addition, the licensee established a retraining program where 25% of the technicians were sent to training full time each quarter. In general, two training courses were presented each week, with sufficient time set aside for self study and review. During this time, these technicians are not to be made available for in-plant work or job coverage, except in the event of an emergency.

Annual GOT training consisted of several parts, including radiation safety training and dressout/mockup instruction. As part of this inspection, direct observation of the GOT - Part II (Radiation Safety) classroom training and the mockup exercise was made. At the end of this training, a written 50 question examination was administered, with a minimum passing grade of 80% correct. The inspector had no further questions in this area.

5. Quality Assurance

The licensee's program for Quality Assurance (QA) in the Radiation Safety area consisted of biennial audits of the program and periodic surveillance. As part of this inspection, the two most recent audits of the Radiation Safety program were reviewed. Audit 89-02, "Dosimetry and Respiratory Protection", dated April 29, 1989, and Audit 90-02, "Radiological Controls and ALARA", dated April 2, 1990, identified several deficiencies documented as Audit findings, and several others documented as recommendations. None of the audit findings contained significant safety issues, and all findings were resolved in a timely manner. No repeat findings were noted in the audit reports. In addition, the inspector interviewed members of the current Radiation Safety audit team. This audit commenced on January 7, 1991 and was scheduled for completion on February 25, 1991. All areas previously covered in the 1989 and 1990 audits were to be included in this audit. The inspector reviewed the audit scope and check lists to be utilized. The results of this audit will be reviewed during a future inspection.

In 1990, the QA Surveillance group performed only one surveillance in the Radiation Safety area, during the Spring 1990 restart of Unit 1. For 1991, only one surveillance was originally scheduled in this area, although input to QA from the GSRS has led to the inclusion of a second surveillance. Although the surveillance schedule was established in 1991 to allow large blocks of discretionary time to be made available, the number of surveillance to be conducted in Radiation Safety remains low.

6. Exit Interview

The inspector met with the licensee representatives denoted in Section 1 at the conclusion of the inspection on January 11, 1991. The inspector summarized the purpose, scope and findings of the inspection.