

VII, CIVIL, AZ 01  
White Side



STATE OF ARIZONA  
EXECUTIVE OFFICE

FIFE SYMINGTON  
Governor

October 30, 1992

Mr. Carlton Kammerer, Director  
Office of State Programs  
Governmental & Public Affairs  
U.S. Nuclear Regulatory Commission  
Washington, D.C. 20555

Dear Mr. Kammerer:

In response to the letter of August 5, 1992, the Agency staff has reviewed the results of the audit of the Arizona Radiation Control Program. The review was performed in an expeditious and professional manner by Mr. Jack Horner and Mr. James Meyers during the period June 1-12, 1992.

The Agency greatly appreciates the in-depth, knowledgeable, constructive and responsive evaluation on behalf of the USNRC inspectors and looks forward to the resolution of the stated mutual problems.

Specific responses to the comments are enclosed as Attachment A.

Sincerely,

A handwritten signature in cursive script, appearing to read "Rita Pearson".

Rita P. Pearson, Esq.  
Deputy Chief of Staff

RPP:dn  
Enclosure  
cc: J. Horner, USNRC  
Aubrey Godwin, ARRA

9306090070 930503  
PDR COMMS NRCC  
CORRESPONDENCE PDR

**USNRC REVIEW OF ARIZONA  
RADIATION CONTROL PROGRAM**

**RESPONSE TO SPECIFIC COMMENTS AND RECOMMENDATIONS**

I. Status and Compatibility of Regulations

The State's Radiation Control Program (RCP) regulations are compatible with the USNRC regulations up to the Title 10, Code of Federal Regulations, Parts 30, 40, and 70 amendments on decommissioning that became effective on July 27, 1988. This decommissioning Amendment is a matter of compatibility. At the time of the review, the State had not initiated rule making on decommissioning.

State Response

Shown as Enclosure 1, dated June 8, 1992, is a written plan for drafting the decommissioning regulations. The State has also begun "Emergency Planning" regulations that are needed for compatibility. Full effort is being directed toward the drafting of rules in the two aforementioned areas and the "Decommissioning" rules will be completed November, 1992 and the "Emergency Planning" rules will be completed in January, 1993.

II. Administrative Procedures

- A. The RCP does not have written administrative procedures for license terminations. Six of the 23 terminated licenses reviewed had errors and omissions that could have been prevented by a use of written procedures and checklists. The use of the license termination procedure and check sheet would help ensure that close-out actions are adequate and that proper support documents are received and retained.

State Response

Enclosure 2 is RAM Policy #26 which addresses Termination/Closeout of Licensee Programs. As a part of the enclosure is a form that must be completed by the inspector prior to license termination.

- B. The RCP's administrative procedures (inspection policy and priority schedule) must be updated as needed to provide continuity in regulatory practices. The Agency has two licenses in effect that do not correspond to the types listed



in the current inspection priority schedule.  
State Response

The internal inspection policy and priority list will be revised to reflect the new types of licenses. Additionally, the current rules governing license types and fees are in the final stages of revision.

- C. Administrative procedures for document control should ensure the prompt distribution of exchange-of-information material contained in All Agreement States Letters, Information Notices, etc. The State's practice of circulating the original documents slows the process and risks losing the document.

State Response

The new ARRA Director has requested that all pertinent documents that may impact on regulatory actions be reviewed and initialed by the staff. Additionally, all pertinent information will be circulated through the RAM Program and will be provided to licensee's as applicable.

III. Licensing Procedures

- A. In some cases, the State's standard license conditions no longer reflect current technology and accepted regulatory practice. As examples: 1) the State's license condition regarding waste disposal does not specifically require using the appropriate survey instrument to read the dose rate before sending the material to a landfill, and 2) one condition exempts bio-assay when using foils containing tritium greater than 100 mCi.

State Response

Enclosure 3 shows the revised Standard License Condition (SLC) which adds the requirement, in SLC number 17.1 and 17.2, to survey RAM with a survey meter appropriate for the type of radiation being detected. Additionally, enclosure 4, SLC 75.A has been rewritten to remove the exclusion for bioassays for licensee's, possessing metallic tritium foils.

- B. Contrary to NRC practice, the State does not require Type A broad scope industrial licensees to have radiation safety committees, as required under 10 CFR Part 33.13.

#### State Response

The three Broad Scope (Type A) licensee's that are the offenders were probably misclassified when assigned and are being amended to a Type B licensee's which do not require a radiation safety committee.

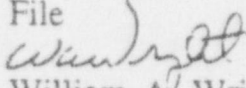
#### IV. Enforcement Procedures

Enforcement Procedures should be sufficient to provide a substantial deterrent to licensee noncompliance with regulatory requirements. Written procedures should exist for handling escalated enforcement cases of varying degrees. Arizona's civil penalty rule may be too severe in requiring penalties be assessed for all repeat violations. In two cases, repeated items of non-compliance were downgraded to "concerns" because, in the inspectors' judgments, the circumstances did not warrant a civil penalty. Relying on inspector's judgments as to what circumstances justify a mitigated penalty may weaken the Agency's position concerning uniform application of the enforcement policy. It may be possible for the RCP to resolve this issue with a revision of the enforcement policy and with concurrence from the State's legal staff. We understand that the Agency drafted changes to the civil penalty regulation, but these changes were never submitted for adoption.

#### State Response

The State RCP is reviewing the civil penalty regulation and is in the process of changing the enforcement levels from three to five the same as the USNRC currently does. This will be completed and submitted for rule change the first part of calendar year 1993.

## OUTLINE OF RULE MAKING FOR 1992-93

TO: File  
FROM:   
William A. Wright  
Acting Director  
DATE: June 8, 1992  
SUBJECT: ACTION PLAN FOR IMPLEMENTING THE NRC REQUIRED  
DECOMMISSIONING RULE

Promulgation of rules during this time period does include a requirement for submission of a decommissioning plan by certain specific license applicants.

- I. Review procedures for rule promulgation.
- II. Review NRC compatibility requirements and determine the following:
  - A. Determine best location in Chapter 1 for Decommissioning rules:
    1. List with other pertinent licensing requirements.
    2. Ease of locating rules is important.

Note: Will probably locate in Article #3 and will assign a separate rule number. An existing number will be used (R12-1-314) because of its proximity to "Specific terms and Conditions of the License," R12-1-313.

- III. Include other required NRC updates:
  - A. Emergency Plan requirements, compatibility date of April 7, 1993.

Enclosure 1



- B. Changes to Administrative Sanctions as described in Agency letter dated September 11, 1990 (five severity levels).
- IV. Establish a schedule (Time Table) to adopt rule updates;
- A. Priority of rule making:
    - 1. Decommissioning and Emergency Plan requirements;
    - 2. Changes to Administrative Sanctions, Article 12.
  - B. Unable to meet schedule:
    - 1. Other state rule deadlines may prevent completion in a timely manner;
    - 2. Uncertain staffing in radioactive materials program
- V. Hopefully all changes will be completed by the end of 1993.

## Policy No. 26 Termination/Closeout of Licensee Programs

This policy supercedes the following policy No. N/A\_

## Reason for policy:

NRC determined that the Agency's current termination policy was deficient. this policy is written in response on their findings and will be submitted to them for review.

## Who will policy affect?

This policy will affect any staff member wanting to grant a licensee termination of a radioactive material use program.

## POLICY:

This is a two part policy. The first part is a general description and the second is a form that must be completed before a termination request will be granted.

- A. Each licensee requesting termination must submit a radiation survey form if unsealed sources are used with a disposal/transfer document. Only a disposal/transfer document will be required if sealed sources are authorized.
- B. A staff member will be assigned a termination action and will insure all issues are satisfied before submitting it to the program manager for final review.

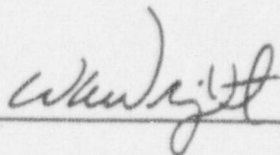
Duration of policy: indefinite, essential to basic program.

## Peer Review:

JW\_\_\_\_ PWH\_\_\_\_ JPG\_\_\_\_ DHK\_\_\_\_ ☒ NP\_\_\_\_

Comments: See attached review form.

Approval of policy by program manger: \_\_\_\_\_







NOTE: POSSESSION LIMIT AND/OR HALF LIVES OF ISOTOPES MAY NOT WARRANT AN AGENCY VISIT.

TERMINATION INSPECTION INCLUDED THE FOLLOWING:

Y N NA -REVIEW OF RECEIPTS

Y N NA -TRANSFER/DISPOSAL RECORDS

Y N NA -VERIFICATION OF TRANSFER/DISPOSAL

Y N NA -FACILITY SURVEY, INCLUDING WIPES

Y N NA -SURVEY INSTRUMENT DATA

COMMENTS: \_\_\_\_\_

AGENCY SURVEY RESULTS: \_\_\_\_\_

INSTRUMENT USED: \_\_\_\_\_

CALIBRATION-OK, OPERATION-OK, IF NOT, WHAT ACTION WAS TAKEN? \_\_\_\_\_

Y N NA AGENCY INSPECTION SURVEY VERIFIES LICENSEE'S CLOSEOUT SURVEY RESULTS? IF NOT, WHAT ACTION WAS TAKEN? \_\_\_\_\_

Y N NA AGENCY LABORATORY ANALYSIS OF WIPES ATTACHED?

E. Y N NA LICENSEE STATEMENTS VERIFIED TO THE SATISFACTION OF THE REVIEWER?

F Y N NA WAS NEW JURISDICTIONAL AGENCY NOTIFIED OF TRANSFER?

REVIEWER/INSPECTOR: \_\_\_\_\_

PROGRAM MANAGER: \_\_\_\_\_

## STANDARD LICENSE CONDITIONS

- B. The Alternate Radiation Safety Officer shall be ^C. The Alternate Radiation Safety Officer shall administer the Radiation Safety Program under the Policy and Procedure Guidance of the Radiation Safety Officer.
12. Physicians authorized to use radioactive material in or on humans shall meet the training criteria established in Title 10, Code of Federal Regulations, Part 35, Subpart J, in effect at issuance of this license, until such time compatible rules for user training are adopted by the state of Arizona.
13. For a period not to exceed 60 days in any calendar year, a visiting physician is authorized to use radioactive material for human use under the terms of this license, provided the visiting physician:
- A. Has the prior written permission of the hospital's Administrator and Radiation Safety Committee; and
  - B. Is specifically named as a user on a license authorizing human use issued by the Agency, the U.S. Nuclear Regulatory Commission or another Agreement State; and
  - C. Performs only those procedures which the physician is specifically authorized to perform pursuant to the license in B above, and authorized by this license.
- The licensee shall maintain for inspection by the Agency copies of the written permission specified in A above and of the license specified in B and C above for a period of five years from the date permission is granted under A above.
14. The use of radioactive material in, or on human beings, shall be by a physician.
15. The licensee shall not use radioactive material in, or on human beings.
16. The licensee shall not use radioactive material, or the radiation therefrom, in, or on, human beings.
17. 1. The licensee is authorized to hold radioactive material with a physical half- life of less than 65 days for decay-in-storage before disposal in ordinary trash provided:
- A. Radioactive waste to be disposed of in this manner shall be held for decay

## STANDARD LICENSE CONDITIONS

a minimum of 10 half-lives.

- B. Before disposal as normal waste, radioactive waste shall be surveyed with a survey meter appropriate for the type of radiation being detected, to determine that its radioactivity cannot be distinguished from background. All radiation labels shall be removed or obliterated.

- 17. 2. The licensee is authorized to hold radioactive material with a physical half-life of less than 65 days for decay-in-storage before disposal in ordinary trash provided:

- A. Radioactive waste to be disposed of in this manner shall be held for decay a minimum of 10 half-lives.
- B. Before disposal as normal waste, radioactive waste shall be surveyed with a survey meter appropriate for the type of radiation being detected, to determine that its radioactivity cannot be distinguished from background. All radiation labels shall be removed or obliterated.
- C. Generator columns shall be segregated so that they may be monitored separately to ensure decay to background levels prior to disposal.

- 18. In accordance with A.A.C. R12-1-417 the licensee may dispose of scintillation vials and waste contaminated with Iodine-125 containing concentrations less than 50 nanocuries per gram, without regard to its radioactivity.

- 19. All radiation warning labels will be obliterated or removed prior to disposal in the trash.

### GENERATORS:

- 20.1 A. Radioactive material shall not be used in humans until its pharmaceutical quality and assay have been established.
- B. Radiopharmaceuticals prepared contrary to manufacturer's recommendations shall be in accordance with a physician's prescription. Prescriptions shall be available for Agency review.

### UNIT DOSE:

- 20.2 A. Radioactive material shall not be used in humans until its assay has been established.



## STANDARD LICENSE CONDITIONS

- B.
    - 1. Notwithstanding the requirement in Part A. above, individuals participating in the medical administration of Iodine-131 in capsule or liquid form in a closed system (i.e. sealed vial and double lumen needle patient delivery system.), in quantities greater than 1 millicurie per calendar quarter and less than 15 millicuries per patient, shall be included in a quarterly bioassay program. The quarterly bioassay shall be performed within six to seventy-two hours after exposure to radioiodine.
    - 2. Individuals exposed to Iodine-131 due to an accidental spill, crushed capsule, or patient vomiting; or individuals exposed to a quantity equal to 15 millicuries or larger shall participate in a bioassay program in accordance with Part A. above.
  - C. Bioassays shall consist of the measurement of the amount of radioiodine contained in the thyroid compared to a suitable standard.
  - D.
    - 1. Thyroid burden of less than 0.04 microcuries of Iodine-131 or 0.12 microcuries of Iodine-125 will require no action.
    - 2. Thyroid burdens of 0.04 microcuries of Iodine-131 or 0.12 microcuries of Iodine-125 or greater shall be investigated as to the circumstances surrounding the uptake. Bioassays shall continue at weekly intervals until the thyroid burden has dropped below the levels specified in D.1.
    - 3. Should the thyroid burdens exceed 0.14 microcuries of Iodine-131 or 0.5 microcuries of Iodine-125, the licensee shall restrict the worker from further radioiodine exposure until the burden falls below the levels specified in D.1.
  - E. Records of all bioassay measurements described above will be maintained as part of the personnel dosimetry, retained indefinitely, and be made available for inspection by the Agency.
76. A. Individuals involved in operations which utilize, at any one time, more than 100 millicuries of Hydrogen-3 in a non-contained form shall have bioassays performed within one week following a single operation and at weekly intervals for continuing operations.
- B. Tritium shall not be used in such a manner as to cause any individual to receive a radiation exposure such that urinary excretion rates exceed 28 microcuries of Tritium per liter when averaged over a calendar quarter.
  - C. Urinalysis shall be performed at weekly intervals on all individuals who work in the restricted areas of facilities in which tritium is used. If the average concentration of tritium in urine for any single individual during a calendar quarter

## STANDARD LICENSE CONDITIONS

is less than 10 microcuries per liter, urinalysis may be performed on that individual at monthly intervals for the following calendar quarter and may continue at monthly intervals so long as the average concentration in the calendar quarter remains below 10 microcuries per liter. The urine specimen shall be collected on the same day of the week insofar as possible.

- D. A report of an average concentration in excess of the limit, specified in B. above, for any individual shall be filed in writing within 30 days of the end of the calendar quarter with the Agency. The report shall contain the results of all urinalyses for the individual during the calendar quarter, the cause of the excessive concentrations and the corrective steps taken or planned to assure against a recurrence.
- E. Any single urinalysis which discloses a concentration of greater than 50 microcuries per liter shall be reported in writing within seven days of the licensee's receipt of the results to the Agency.

- 77. A. The licensee shall perform a test to detect and quantify the activity of Molybdenum-99 contamination in each elution of Technetium-99m from a Molybdenum-99/Technetium-99m generator and in each extraction or separation of Technetium-99m from Molybdenum-99 not contained in a generator.
- B. The licensee shall not distribute for human use Technetium-99m that, at the expiration date and time shown on the package label, contains more than 0.15 microcuries of Molybdenum-99 per millicurie of Technetium-99m. An action level for Molybdenum-99/Technetium-99m at elution shall be determined so that the above concentration is not exceeded by radiopharmaceutical expiration (i.e., the maximum concentration shall be 0.07 microcurie per millicurie at elution for a dose that expires six hours later.) The expiration time shown on the package label shall be such that the limits above are not exceeded for any single patient dose. The limits for Molybdenum-99 contamination represent maximum values and Molybdenum-99 contamination should be kept as low as reasonably achievable.
- C. The licensee shall establish written procedures for personnel performing tests to detect and quantify Molybdenum-99 contamination. These procedures shall include all necessary calculations and steps to be taken if activities of Molybdenum-99 in excess of the limits specified in Subitem B. above, are detected.
- D. Personnel performing tests to detect and quantify Molybdenum-99 contamination shall be given specific training in performing these tests prior to conducting such tests.



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
WASHINGTON, D. C. 20555

February 3, 1993

Ms. Rita P. Pearson, Esquire  
Deputy Chief of Staff  
Office of the Governor of Arizona  
1700 West Washington  
Phoenix, AZ 85007

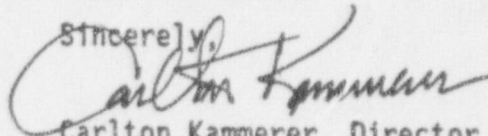
Dear Ms. Pearson:

Thank you for your letter dated October 30, 1992, in response to our 1992 review of your radiation control program for agreement materials. We have evaluated your response and we believe that your proposed changes, when implemented, will enable the program to continue to satisfy the "Guidelines for Nuclear Regulatory Commission (NRC) Review of Agreement State Radiation Control Programs."

In your response, you indicated that the decommissioning rules would be completed by November 1992; however, to date, those regulations have not been adopted. The NRC strongly encourages the Agreement States to maintain compatible regulations. Therefore, we would appreciate notification from your Arizona Radiation Regulatory Agency (ARRA) Director at the time your proposed regulations become effective.

Your support of the radiation control program is appreciated by the NRC staff and me. If you have any questions, please feel free to contact our Regional State Agreements Officer, Mr. Jack Hornor or me at anytime.

Sincerely,

  
Carlton Kammerer, Director  
Office of State Programs

cc: Aubrey Godwin, Director, ARRA

9302100159 (p.)



REPORT OF THE EVALUATION OF AGREEMENT  
STATE PROGRAM

ARIZONA

JUNE 1990 - JUNE 1992

*M. Schneider*



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
WASHINGTON, D. C. 20555

August 5, 1992

Rita P. Pearson, Esquire  
Deputy Chief of Staff  
Office of the Governor of Arizona  
1700 West Washington  
Phoenix, AZ 85007

Dear Ms. Pearson:

This letter confirms the discussion Jack Hornor and James Myers held with you and your staff on June 12, 1992, following our review of the State's radiation control program.

As a result of our review of the State's program and the routine exchange of information between the NRC and the State, we believe that the State's program for regulating agreement materials is adequate to protect the public health and safety. However, a finding of compatibility is being deferred until the State has adopted the Decommissioning Rule.

Compatible regulations are an important part of the Agreement State Program. In a letter to All Agreement States dated July 12, 1988, the NRC advised the Agreement States of the need to adopt the Decommissioning Rule. In a letter dated September 14, 1990, we informed the States that the NRC planned to include a formal comment in its review letters to any State that has not adopted the Decommissioning Rule by the three-year target date, i.e., July 12, 1991, and if the State has not initiated timely rulemaking for this purpose, a finding of compatibility would be withheld. At the time of this review, the State had not initiated rulemaking on decommissioning; however, your staff has a plan for the adoption of the Decommissioning Rule. Additional details on the regulations are provided in Enclosure 2, comment number 1.

Arizona has been a model Agreement State for several years, but we are beginning to see a degradation of your program as evidenced by the increased number of findings this year. We feel that cuts in your staffing level and the uncertainty of working with an "acting" director and temporary supervisors are contributing to this decline. We are aware of your budget difficulties and offer this suggestion. Several Agreement States fund their radiation control program entirely and directly with license and registration fees. This allows adequate regulation of radioactive materials without relying on the fluctuations of the General Fund.

Enclosure 1 contains an explanation of our policies and practices for reviewing Agreement State programs.

9208100149 8pp.



AUG 5 1992

Enclosure 2 is a summary of the review findings which were discussed with Mr. Wright. We request specific responses from the State on the comments in Enclosure 2.

In accordance with NRC practice, I am also enclosing a copy of this letter for placement in the State's Public Document Room or otherwise to be made available for public review.

I appreciate the courtesy and cooperation extended the NRC staff during the review. I am looking forward to receiving your response to our comments regarding your plans for providing adequate funding for your radioactive materials program and your staff responses to the Enclosure 2 recommendations.

Sincerely,

original signed by Carlton Kammerer

Carlton Kammerer, Director  
Office of State Programs

Enclosures:  
A stated

cc w/encls:

William Wright, Acting Director,  
Arizona Radiation Regulatory Agency  
J. M. Taylor, Executive Director for  
Operations, NRC  
John B. Martin, Regional Administrator,  
NRC Region V  
State Liaison Officer  
State Public Document Room  
NRC Public Document Room

bcc w/encls:

The Chairman  
Commissioner Rogers  
Commissioner Curtiss  
Commissioner Remick  
Commissioner de Planque

Distribution:

SA RF SSchwartz JHornor  
DIR RF RBernero RScarano  
EDO RF SDroggitis DCD (SP01)  
CKammerer Arizona File JMartin  
VMiller RWoodruff DKunihiro

\*See previous concurrence

OFC	RV:SAO <i>SA</i>	RV:DRSS <i>SA</i>	RV:RA <i>SA</i>	SP:SA:AD	NMSS <i>PS</i>
NME	JHornor <i>SA</i>	RScarano <i>SA</i>	JMartin <i>SA</i>	VMiller	RBernero
DTE	7/20/92*	7/20/92*	7/20/92*	7/20/92	7/30/92
OFC	SP:DD <i>SA</i>	SP:D <i>SA</i>	EDQ:DEDS <i>SA</i>	EDQ	
NME	SSchwartz	CKammerer	HTHompson	JTaylor	
DTE	7/20/92	7/20/92	8/1/92	8/1/92	

G:\AZ92com.rlw

*C.F.*



Application of "Guidelines for NRC Review  
of Agreement State Radiation Control Programs"

The "Guidelines for NRC Review of Agreement State Radiation Control Programs," were published in the Federal Register on May 28, 1992, as an NRC Policy Statement. The Guidelines provide 30 indicators for evaluating Agreement State program areas. Guidance as to their relative importance to an Agreement State program is provided by categorizing the indicators into two categories.

Category I indicators address program functions which directly relate to the State's ability to protect the public health and safety. If significant problems exist in several Category I indicator areas, then the need for improvements may be critical.

Category II indicators address program functions which provide essential technical and administrative support for the primary program functions. Good performance in meeting the guidelines for these indicators is essential in order to avoid the development of problems in one or more of the principal program areas, i.e., those that fall under Category I indicators. Category II indicators frequently can be used to identify underlying problems that are causing, or contributing to, difficulties in Category I indicators.

It is the NRC's intention to use these categories in the following manner. In reporting findings to State management, the NRC will indicate the category of each comment made. If no significant Category I comments are provided, this will indicate that the program is adequate to protect the public health and safety and is compatible with the NRC's program. If one or more significant Category I comments are provided, the State will be notified that the program deficiencies may seriously affect the State's ability to protect the public health and safety and that the need of improvement in particular program areas is critical. If, following receipt and evaluation, the State's response appears satisfactory in addressing the significant Category I comments, the staff may offer findings of adequacy and compatibility as appropriate or defer such offering until the State's actions are examined and their effectiveness confirmed in a subsequent review. If additional information is needed to evaluate the State's actions, the staff may request the information through follow-up correspondence or perform a follow-up or special, limited review. NRC staff may hold a special meeting with appropriate State representatives. No significant items will be left unresolved over a prolonged period. The Commission will be informed of the results of the reviews of the individual Agreement State programs and copies of the review correspondence to the States will be placed in the NRC Public Document Room. If the State program does not improve or if additional significant Category I deficiencies have developed, a staff finding that the program is not adequate will be considered and the NRC may institute proceedings to suspend or revoke all or part of the Agreement in accordance with Section 274j of the Act, as amended.

ENCLOSURE 1

SUMMARY OF ASSESSMENTS AND COMMENTS  
FOR THE ARIZONA RADIATION CONTROL PROGRAM  
JUNE 16, 1990, TO JUNE 12, 1992

SCOPE OF REVIEW

This program review was conducted in accordance with the Commission's Policy Statement for reviewing Agreement State Programs published in the Federal Register on May 28, 1992 and the internal procedures established by the Office of State Programs. The State's program was reviewed against the 30 program indicators provided in the Guidelines. The review included inspector accompaniments, discussions with program management and staff, technical evaluation of selected license and compliance files, and the evaluation of the State's responses to an NRC questionnaire that was sent to the State in preparation for the review.

The 23rd regulatory program review meeting with Arizona representatives was held during the period June 1-12, 1992, in Phoenix. The State was represented by William Wright, Acting Director, Arizona Radiation Regulatory Agency (ARRA), and Dan Kuhl, Lead Regulation Regulatory Officer.

Selected license and compliance files were reviewed by Jack Hornor, Regional State Agreements Officer, Region V, assisted by James Myers, Office of State Programs. Field accompaniments of three inspectors were made by Mr. Hornor and Mr. Myers on June 3-5, 1992, and June 10, 1992. Mr. Hornor and Mr. Myers, accompanied by Mr. Wright, visited the University of Arizona on June 9, 1992.

A summary meeting regarding the results of the review was held with Rita P. Pearson, Esq., Deputy Chief of Staff, State of Arizona Executive Office, on June 12, 1992.

CONCLUSION

The program for control of agreement materials is adequate to protect the public health and safety. However, a finding of compatibility is being deferred until the State has adopted the Decommissioning Rule.

STATUS OF PROGRAM RELATED TO PREVIOUS NRC FINDINGS

The results of the previous review were reported to the State in a letter to Charles F. Tedford dated July 18, 1990. In that letter, compatibility was conditional pending the State's final adoption of the bankruptcy rule. The rule was actually adopted July 10, 1990. No other comments required a response.

CURRENT REVIEW COMMENTS AND RECOMMENDATIONS

All 30 program indicators were reviewed and the State fully satisfies 26 of these indicators. Specific comments and recommendations for the remaining four indicators are as follows:

ENCLOSURE 2

1. Status and Compatibility of Regulations is a Category I indicator.  
Comment

The review of the State's radiation control regulations disclosed that the State's regulations are compatible with the NRC regulations up to the 10 CFR Parts 30, 40, and 70 amendments on decommissioning that became effective on July 27, 1988. This decommissioning amendment is a matter of compatibility. In a letter dated September 14, 1990, we informed the States that the Commission planned to include a formal comment in its review letters to any State that has not adopted the Decommissioning Rule by the three-year target date, i.e., July 12, 1991. At the time of this review, the State had not initiated rulemaking on decommissioning. However, the State has provided a written plan for drafting the decommissioning regulations. The State has also begun working on the adoption of the "Emergency Planning" regulations that are needed for compatibility.

Other regulations have been adopted by NRC that are also matters of compatibility. These regulations are identified below with the Federal Register (FR) notice and the date that the State needs to adopt the regulation to maintain compatibility.

- "Emergency Planning Rule," 10 CFR Parts 30, 40, and 70 amendments (54 FR 14051) are needed by April 7, 1993.
- "Safety Requirements for Radiographic Equipment," 10 CFR Part 34 amendment (55 FR 843) is needed by January 10, 1994.
- "Standards for Protection Against Radiation," 10 CFR Part 20 amendment (56 FR 61352) is needed by January 1, 1994.
- "Notification of Incidents," 10 CFR Parts 20, 31, 34, 39, 40, and 70 amendments (56 FR 40757) are needed by October 15, 1994.
- "Quality Management Program and Misadministrations," 10 CFR Part 35 amendment (56 FR 153) is needed by January 27, 1995.

During our discussions with the Program managers, we discussed the need to devote more staff time to the regulation effort and the State's option of temporarily utilizing personnel from other State offices who are experienced in the rulemaking procedure to assist the Program in updating the regulations.

#### Recommendation

We recommend that the State adopt the decommissioning regulations as soon as possible. In addition, the State should begin to address the other regulations that are needed to maintain compatibility.

2. Administrative Procedures is a Category II Indicator.

#### Comment

The Radiation Control Program (RCP) should establish written internal policy and administrative procedures to assure that program functions are carried out as required and to provide a high degree of uniformity



and continuity in regulatory practices. These procedures should address license termination, decommissioning, exchange-of-information, and other functions required of the program.

- a. The RCP does not have written administrative procedures for license terminations. Six of the 23 terminated licenses reviewed had errors and omissions that could have been prevented by the use of written procedures and checklists. The use of a license termination procedure and check sheet would help ensure that close-out actions are adequate and that proper support documents are received and retained.

#### Recommendation

We recommend the State develop and use written administrative procedures for license termination to ensure that proper close-out actions have been taken before a license is terminated.

- b. The RCP's administrative procedures (inspection policy and priority schedule) must be updated as needed to provide continuity in regulatory practices. The Agency has two licenses in effect that do not correspond to the types listed in the current inspection priority schedule.

#### Recommendation

We recommend the internal inspection policy and priority list be revised as needed to reflect new types of licenses.

- c. Administrative procedures for document control should ensure the prompt distribution of exchange-of-information material contained in All Agreement States Letters, Information Notices, etc. The State's practice of circulating the original documents slows the process and risks losing the document.

#### Recommendation

We recommend that the RCP revise their administrative procedures for document control to provide prompt distribution of documents to the staff and for the distribution of all pertinent information documents to the regulated parties.

### 3. Licensing Procedures is a Category II Indicator.

#### Comment

The RCP should have internal licensing guides, checklist, and policy memoranda consistent with current NRC practice. Standard license conditions comparable with current NRC standard license conditions should be used to expedite and provide uniformity in the licensing process.

- a. In some cases, the State's standard license conditions no longer reflect current technology and accepted regulatory practice. As examples: 1) the State's license condition regarding waste disposal does not specifically require using the appropriate survey instrument to read the dose rate before sending the

material to a landfill, and 2) one condition exempts bio-assay when using foils containing tritium greater than 100 mCi.

#### Recommendation

We recommend the staff carefully review the standard license conditions and revise them as necessary to conform with current accepted regulatory practice.

- b. Contrary to NRC practice, the State does not require Type A broad scope industrial licensees to have radiation safety committees, as required under 10 CFR Part 33.13.

#### Recommendation

We recommend these broad scope (Type A) licenses be amended to require a radiation safety committee or be changed to limited scope specific licenses.

#### 4. Enforcement Procedures is a Category I Indicator.

##### Comment

Enforcement Procedures should be sufficient to provide a substantial deterrent to licensee noncompliance with regulatory requirements. Written procedures should exist for handling escalated enforcement cases of varying degrees. Arizona's civil penalty rule may be too severe in requiring penalties be assessed for all repeat violations. In two cases, repeated items of non-compliance were downgraded to "concerns" because, in the inspectors' judgements, the circumstances did not warrant a civil penalty. Relying on inspector's judgements as to what circumstances justify a mitigated penalty may weaken the Agency's position concerning uniform application of the enforcement policy. It may be possible for the RCP to resolve this issue with a revision of the enforcement policy and with concurrence from the State's legal staff. We understand that the Agency drafted changes to the civil penalty regulation, but these changes were never submitted for adoption.

##### Recommendation

We recommend that the RCP review the civil penalty regulation and the current enforcement policy with the State's legal staff, and take action to resolve the enforcement issue regarding repeat violations.

#### SUMMARY DISCUSSION WITH STATE REPRESENTATIVES

A summary meeting to present the results of the regulatory program review was held with Rita P. Pearson, Esq., Deputy Chief of Staff, Office of the Governor. The meeting was also attended by William Wright, and James Myers. During the exit meeting, the history of Agreement State Programs was reviewed with Ms. Pearson. It was pointed out that Arizona has been a model program for several years, and although it continues to be adequate, continued funding cuts and staff attrition may affect the adequacy of the program. We discussed the advantages of funding the program entirely from dedicated license and registration fees, where the monies would be sent directly to the RCP rather than allocated from the General Fund.

The need for compatible regulations was also discussed, and Ms. Pearson offered the Agency assistance in drafting the decommissioning rule.

Ms. Pearson emphasized the State does want to continue the Agreement State program. They are concerned about the program at the executive level and they will provide resources to keep it operating. The State was in the process of selecting a Program Director during the time of the review. A decision on whether to keep the RCP as a separate agency or combine it with another agency to save administrative costs is still under consideration.



REVIEW REFERENCES  
FOR  
REPORT OF THE EVALUATION OF AGREEMENT STATE PROGRAM

ARIZONA  
JUNE 1990 - JUNE 1992

Prepared by Jack Hornor June 12, 1992

Contents

Appendix A . . . . .	Program Guidelines and State Questionnaire
Appendix B . . . . .	State Organizational Charts
Appendix C . . . . .	Reviewer Explanatory Comments and Observations
Appendix D . . . . .	License File Reviews
Appendix E . . . . .	Compliance File Reviews
Memo from last Review Visit	

# APPENDIX A

## EVALUATION OF AGREEMENT STATE RADIATION CONTROL PROGRAM

### PART I PROGRAM GUIDELINES AND STATE QUESTIONNAIRE UPDATE

Name of State Program Arizona

Reporting Period from: July, 1991 to June, 1992

#### I. LEGISLATION AND REGULATIONS

##### A. Legal Authority (Category I)

NRC Guidelines: Clear statutory authority should exist, designating a State radiation control agency and providing for promulgation of regulations, licensing, inspection and enforcement. States regulating uranium or thorium recovery and associated wastes pursuant to the Uranium Mill Tailings Radiation Control Act of 1978 (UMTRCA) must have statutes enacted to establish clear authority for the State to carry out the requirements of UMTRCA.

##### Questions:

1. What changes were made to the State's statutory authority to regulate agreement materials, low level waste disposal, or uranium mill operations in the reporting period?

Answer: No changes were made.

2. Are your regulations subject to a "Sunset" or equivalent law? If so, explain and include the next expiration date for your regulations.

a) NO

b) Agency reviews Rules on a schedule established by the Governing Regulatory Review Council (GRRC). They are reviewed for clarity, conciseness, and understandability.

Second Review Cycle Schedule and Current Year Activity for 1992:

<u>TITLE/CHAPTER</u>	<u>DESCRIPTION</u>	<u>GRRC YR/MO</u>
12/01 (Art 01)	General Provisions	96/07
12/01 (Art 02)	Registry Rad Machines	92/04
12/01 (Art 03)	Licensing Rad Matl's	94/04
12/01 (Art 04)	Stand Protect Agnst Rad	95/02
12/01 (Art 05)	Rad Saf Require-Ind Rad	93/07
12/01 (Art 06)	X-Rays	95/02
12/01 (Art 07)	Sealed Src's - Heal Art	93/07
12/01 (Art 08)	Rad Sfty & Anal X-ray	93/07
12/01 (Art 09)	Rad Sfty - Part Accel	95/02
12/01 (Art 10)	Ntc's, Rpts, Inst - Wrkrs	96/02
12/01 (Art 11)	Rad Sfty-U & Th Mat Tlg	96/02
12/01 (Art 12)	Admin Sanctions	93/07
12/01 (Art 13)	Lic & Regtr Fees	92/04
12/01 (Art 14)	Non Ioniz. Radiation	94/06
12/01 (Art 15)	Transportation	96/02
12/01 (Art 17)	Reserved	94/02
12/02	Rad Safety - Wireline	94/01

B. Status and Compatibility of Regulations (Category I)

NRC Guidelines: The State must have regulations essentially identical to 10 CFR Part 19, Part 20 (radiation dose standards, effluent limits, waste manifest rule and certain other parts), Part 61 (technical definitions and requirements, performance objectives, financial assurances) and those required by UMTRCA, as implemented by Part 40. The State should adopt other regulations to maintain a high degree of uniformity with NRC regulations. For those regulations deemed a matter of compatibility by NRC, State regulations should be amended as soon as practicable but no later than 3 years. The RCP should have established procedures for effecting appropriate amendments to State regulations in a timely manner, normally within 3 years of adoption by NRC. Opportunity should be provided for the public to comment on proposed regulation changes. (Required by UMTRCA for uranium mill regulation.) Pursuant to the terms of the Agreement, opportunity should be provided for the NRC to comment on draft changes in State regulations.

## Questions:

1. What is the effective date of the last compatibility-related amendment to the State's regulations? June, 1990
2. Referring to the latest NRC chronology of amendments, identify those that have not been adopted by the State, explain why they were not adopted, and discuss actions being taken to adopt them.

Answer: The Decommissioning Rule. Due to the loss of the Deputy Director, who was the primary person implementing rule changes, replacement personnel are acquiring the knowledge and expertise to take over where he left off. However, the RAM Program has written an action plan for implementing the rules change as will be reviewed by USNRC personnel.

3. Identify the person responsible for developing new or amended regulations affecting agreement materials.

William A. Wright, Interim Acting Director since Oct 26, 1991.

II. ORGANIZATION

Under the Appendix B title sheet provided at the end of this document, please enclose copies of your organization charts as follows:

- a) Organization chart(s) showing the position of the radiation control program (RCP) within the State organization and its relationship to the Governor, other State and local RCPs (if any), and comparable health and safety programs.

See Appendix B

- b) RCP internal organization charts. If applicable, include regional offices and contract agencies.

See Appendix B

A. Location of the Radiation Control Program Within the State Organization (Category II)

NRC Guidelines: The RCP should be located in a State organization parallel with comparable health and safety programs. The Program Director should have access to appropriate levels of State



management. Where regulatory responsibilities are divided between State agencies, clear understandings should exist as to division of responsibilities and requirements for coordination.

Questions:

1. During the reporting period, did the management, program name, or location of the RCP within the State organization change?

NO

B. Internal Organization of the RCP (Category II)

NRC Guidelines: The RCP should be organized with the view toward achieving an acceptable degree of staff efficiency, place appropriate emphasis on major program functions, and provide specific lines of supervision from program management for the execution of program policy. Where regional offices or other government agencies are utilized, the lines of communication and administrative control between these offices and the central office (Program Director) should be clearly drawn to provide uniformity in licensing and inspection policies, procedures and supervision.

Questions:

1. What changes occurred in the organization of the RCP during the reporting period?

Answer: Deputy Director's position was eliminated. Temporarily, the Program Manager of RAM/X-ray Program is Acting Director.

2. If changes occurred, how have they affected the RCP and its effectiveness?

Answer: During the last several years, the following losses have occurred with regard to Agency staffing:

Fiscal Year 1991

a. Emergency Response Program Manager lost general fund funding (picked up by NEMF).

b. Low Level Radioactive Waste Program Manager lost general fund funding (funding picked up by a one-time allocation of surcharge rebate money by California). Employee occupying the position currently will resign June 19, 1992. Funds left over will be returned to California.

c. Executive Assistant position and general fund funding was lost.

d. X-ray Program Manager position and general fund funding was lost. The program was consolidated with the RAM Program under one Program Manager.

Fiscal Year 1992

a. Deputy Director position and general fund funding was lost.

b. Accounting Technical position and general fund funding was lost.

c. Management Analyst II (Computer Position) - position and general fund funding was lost.

d. RRO II Emergency Response position funding was lost (picked up by Nuclear Emergency Management Fund).

e. Secretary/Receptionist - general funding was lost (position funded by vacancy savings).

During the last three years, the Agency has lost three professional, three administrative personnel, and 38.6% of its general fund budget.

The Joint Legislative Budget Committee Analyst's recommendation for this years budget was to eliminate the director, budget analyst, and secretary/receptionist positions and place this Agency under the Arizona Department of Environmental Quality or Department of Health Services. If this is accomplished, it would be very difficult to maintain Agreement State Status.

C. Legal Assistance (Category II)

NRC Guidelines: Legal staff should be assigned to assist the RCP or procedures should exist to obtain legal assistance expeditiously. Legal staff should be knowledgeable regarding the RCP program, statutes, and regulations.

Questions:

1. If legal assistance was utilized during the reporting period, briefly describe the circumstances.

Answer: Legal assistance was used in developing Article 13 "License and Registration Fees", which is in final review at this time. Additionally, assistance is often used to develop Agency policy and assist in guiding the Agency through difficult escalated enforcements and legal questions.

2. Was the legal assistance satisfactory during this period? If not, what were the problems?

Answer: Satisfactory, but not always timely.

D. Technical Advisory Committees (Category II)

NRC Guidelines: Technical Committees, Federal Agencies, and other resource organizations should be used to extend staff capabilities for unique or technically complex problems. A State Medical Advisory Committee should be used to provide broad guidance on the uses of radioactive drugs in or on humans. The Committee should represent a wide spectrum of medical disciplines. The Committee should advise the RCP on policy matters and regulations related to use of radioisotopes in or on humans. Procedures should be developed to avoid conflict of interest, even though Committees are advisory. This does not mean that representatives of the regulated community should not serve on advisory committees or not be used as consultants.

Questions:

1. Please list the names, affiliations, and terms of the technical committee(s) members.

Answer: The Radioactive Materials Program has a single advisory committee. The membership is indefinite and includes:

Dennis Patton, M.D.	University of Arizona Medical Center
Michael Geysor, M.D.	Mesa Lutheran Hospital
Michael Lawson, M.D.	Good Samaritan Hospital and Med. Ctr.

2. If an advisory committee or consultant was used during the reporting period, briefly describe each circumstance (i.e., the subject, the need, the result, and the manner obtained -- by meeting, phone call, or letter).

Answer: No advisory assistance was used.

### III. MANAGEMENT AND ADMINISTRATION

#### A. Quality of Emergency Planning (Category I)

NRC Guidelines: The State RCP should have a written plan for response to such incidents as spills, overexposures, transportation accidents, fire or explosion, theft, etc. The Plan should define the responsibilities and actions to be taken by State Agencies. The Plan should be specific as to persons responsible for initiating response actions, conducting operations and cleanup. Emergency communication procedures should be adequately established with appropriate local, county and State agencies. Plans should be distributed to appropriate persons and agencies. NRC should be provided the opportunity to comment on the Plan while in draft form. The plan should be reviewed annually by Program staff for adequacy and to determine that content is current. Periodic drills should be performed to test the plan.

#### Questions:

1. Other than the communications list, when was the emergency plan last revised?

Answer: The State Hazardous Materials Response and Recovery Plan, published in 1989 and administered by the Arizona Division of Emergency Services, is currently under revision. To complement the state plan, the Agency has developed an SOP for Response to Incidents Involving Radioactive Materials. The SOP was last revised in July 1991, and undergoes an annual review.

2. If the plan was revised since the last review, what changes were made?

Answer: The SOP was updated to reflect additional communication capabilities (cellular telephones, portable fax); to make minor modifications to the incident report form; and to reflect personnel changes.

3. If the plan was substantially revised during the reporting period, was the NRC provided the opportunity to comment on the revision while it was in draft form?

Answer: The revisions noted in item 2 were not substantial to the extent that NRC review was considered necessary.

4. When was the emergency communication list last reviewed or revised?



EMERGENCY CALL LIST

REVISED APRIL 3, 1992

John Lutton	948-3623	Toby Morales	569-6639
Bill Wright	867-8025	Jim Geringer	834-6564
Dan Kuhl	973-5517	Leroy Klotz	866-0117
John Neal	872-8460	John Lamb	963-4130
Norm Pratt	898-7196	Gary Freeland	985-4974
John Wilson	971-7022	Paul Harvey	829-1615
Jeff Short	934-7523	Perry Kepley	274-2880
Bill Dotter	831-9455	John Gray	843-1753
Jan Stewart	968-6742	Bob Kovalcik	997-9479

RAD ASST PAGER	227-2465	
ER CELL PHONE	228-5735	(Bill Wright)
2ND CELL PHONE	228-5736	(John Lutton)
3RD CELL PHONE	228-1690	(Toby Morales)
FAX	437-0705	
ER FAX	437-0704	

<u>DPS DUTY OFFICER</u>	223-2212
<u>DPS COMM ROOM</u>	223-2177

ST OPERATOR	1-800-352-8400
(CALLER.DOC)	

## 5. When and how was the plan last tested?

Answer: Drills have been conducted by some participating agencies for hazardous materials; however, the RCP would not participate unless the drill included radioactive materials. The RCP tests the plan, or portions of it, by responding to actual events each year.

B. Budget (Category 11)

NRC Guidelines: Operating funds should be sufficient to support program needs such as staff travel necessary to conduct an effective compliance program, including routine inspections, follow-up or special inspections (including pre-licensing visits) and responses to incidents and other emergencies, instrumentation and other equipment to support the RCP, administrative costs in operating the program including rental charges, printing costs, laboratory services, computer and/or word processing support, preparation of correspondence, office equipment, hearing costs, etc. as appropriate. Principal operating funds should be from sources which provide continuity and reliability, i.e., general tax, license fees, etc. Supplemental funds may be obtained through contracts, cash grants, etc.

## Questions:

## 1. Show the amount for funds for the RCP for the current fiscal year obtained from:

a.	State general fund	\$937,500 - 16,500 =	\$921,000
		(Ex-appropriation	
		April, 1992)	

## b. Fees

\$680,500 - fee monies are deposited to the State General Fund and are not available for expenditure.

## c. Federal grants and contracts (identify)

NRC Cooperative Agreement #32-83-681	\$ 4,575
EPA Radon Grant	\$ 82,706

- d. Other: \$65,900 from CA for FY92 LLW.
- |  |           |
|--|-----------|
| Nuclear Emergency Management Fund (NEMF)           | \$406,100 |
| Medical Radiological Technology Board of Examiners | \$ 15,700 |
- e. Total: \$1,443,445
2. Show the total amounts in the current RCP budget allocated for the following (if contract costs are incurred, e.g, in LLW regulation, please include):
- |   |                 |
|---|-----------------|
| a. Administration   | \$188,775       |
| b. Radioactive materials  | \$211,830       |
| c. X-ray  | \$206,774       |
| d. Environmental surveillance   | \$552,157       |
| General Fund:   | \$239,460       |
| NEMF:   | \$312,697       |
| e. Emergency planning   | \$185,503       |
| General Fund:   | \$ 92,100       |
| NEMF:   | \$ 93,403       |
| f. LLW regulation (regulation only, do not include site development)          | <u>\$65,900</u> |
| g. U-mill regulation - None   |                 |
| h. Other (radon, non-ionizing, operator credentialing, etc. Please identify). |                 |
| State Indoor Radon Grant  | \$ 82,706       |
| MRTBE   | \$ 15,700       |
| i. Total:   | \$1,443,445     |
3. What percentage of your radioactive materials program is supported by fees?
- Answer: None. All monies collected return to the general fund.
4. Discuss any changes in program funding that occurred during the reporting period, the reasons for the changes (new programs, change in emphasis, statewide reduction, fee cost recovery percentage, etc.), and how the changes affected the program.
- Answer: Since CA LLW facility will not open before 1 Jul, 92, the LLW position will cease for lack of funds on or about July, 1992.
5. Overall, is funding sufficient to support all of the program needs? If not, what are the problem areas?
- Answer: If the budget for continuation, suggested by the Office of Strategic Program Budget, is allowed during this budgeting year for FY93, funds will be adequate to continue the program at its current staffing level. If that level funding is not approved, positions may be lost.

C. Laboratory Support (Category, II)

NRC Guidelines: The RCP should have the laboratory support capability in-house, or readily available through established procedures, to conduct bioassays, analyze environmental samples, analyze samples collected by inspectors, etc., on a priority established by the RCP.

## Questions:

1. Describe changes in your laboratory support, such as new instruments, cutbacks, etc., in this period.

Answer: The laboratory has acquired a new alpha-beta-gamma gas flow proportional/NaI Counter for screening wipes and a new liquid scintillation counter capable of alpha bet. discrimination.

2. Have there been problems in obtaining timely and accurate lab results? If yes, discuss the circumstances and how the problem might be corrected.

Answer: Lab results have been timely and accurate.

D. Administrative Procedures (Category II)

NRC Guidelines: The RCP should establish written internal procedures to assure that the staff performs its duties as required and to provide a high degree of uniformity and continuity in regulatory practices. These procedures should address internal processing of license applications, inspection policies, decommissioning and license termination, fee collection, contacts with communication media, conflict of interest policies for employees, exchange of information and other functions required of the program. Administrative procedures are in addition to the technical procedures utilized in licensing, and inspection and enforcement.

## Questions:

1. Briefly list the changes, such as new procedures updates, policy memoranda, etc., made in your written administrative procedures during the reporting period. Include internal processing of license applications, inspection policies, decommissioning and license termination, fee collection, contacts with media, conflict of interest policies for employees, and exchange of information procedures.

Answer: A new "special topics" policy book has been developed. Approximately 25 policies have been drafted to assist the RAM person in administrative, licensing and inspection activities. The policy book has been provided for your review.

E. Management (Category II)

NRC Guidelines: Program management should receive periodic reports from the staff on the status of regulatory actions (backlogs, problem cases, inquiries, regulation revisions). RCP management should periodically assess workload trends, resources and changes in legislative and regulatory responsibilities to forecast needs for increased staff, equipment, services and fundings. Program management should perform periodic reviews of selected license cases handled by each reviewer and document the results. Complex licenses (major manufacturers, large scope - Type A Broad, or ones with the potential for significant releases to environment) should receive



second party review (supervisory, committee, or consultant). Supervisory review of inspections, reports and enforcement actions should also be performed. When regional offices or other government agencies are utilized, program management should conduct periodic audits of these offices.

Questions:

1. How many management reviews of license cases were performed in this period?

Answer: On a monthly basis, the Interim Acting Director/Program Manager/RAM and X-Ray Compliance Program has made an in depth management review of each type of license possessed in this state if processed by the Radioactive Materials Program. The actual count of the number of management reviews performed has not been made.

2. Were all license reviewers included in the cases selected for management review? If not, explain.

Answer: All license reviewers were included in the management review.

3. What audits were made of regional and contract offices?

Answer: There are no regional or contract offices.

F. Office Equipment and Support Services (Category II)

NRC Guidelines: The RCP should have adequate secretarial and clerical support. Automatic typing and Automatic Data Processing and retrieval capability should be available to larger (300-400 licenses) programs. Similar services should be available to regional offices, if utilized. Professional staff should not be used for fee collection and other clerical duties.

Questions:

1. Has the secretarial and clerical support been adequate during this period? If not, explain.

Answer: The secretarial and clerical support has been adequate. Historically a single secretary has been handling routine compliance and licensing duties with the manager of the radioactive waste program providing data management support.

2. What word processing, data base, and spread sheet programs are you using?

Answer: Word Perfect 5.0 - Word Processing & Paradox - Data Management Data Flex V2.3, Plan Perfect V3.0 - Spreadsheet.

G. Public Information (Category II)

NRC Guidelines: Inspection and licensing files should be available to the public consistent with State administrative procedures. It is desirable, however, that there be provisions for protecting from public disclosure proprietary information and information of a clearly personal nature. Opportunity for public hearings should be provided in accordance with UMTRCA and applicable State administrative procedure laws.

Questions:

1. Have changes occurred in the manner in which you handle public information?

Answer: No changes have occurred.

#### IV. PERSONNEL

##### A. Qualifications of Technical Staff (Category II)

NRC Guidelines: Professional staff should have a bachelor's degree or equivalent training in the physical and/or life sciences. Additional training and experience in radiation protection for senior personnel including the director of the radiation protection program should be commensurate with the type of licenses issued and inspected by the State. Written job descriptions should be prepared so that professional qualifications needed to fill vacancies can be readily identified.

Questions:

1. Please list all new professional personnel, indicate the degree they received, if applicable, and additional training and years of experience in health physics.

Answer: No new technical staff have been added.

##### B. Staffing Level (Category II)

NRC Guidelines: Professional staffing level should be approximately 1-1.5 person-year per 100 licenses in effect. RCP must not have less than two professionals available with training and experience to operate RCP in a way which provides continuous coverage and continuity. For States regulating uranium mills and mill tailings current indications are that 2-2.75 professional person-years' of effort, including consultants, are needed to process a new mill license (including in situ mills) or major renewal, to meet requirements of Uranium Mill Tailings Radiation Control Act of 1978. This effort must include expertise in radiological matters, hydrology, geology, and structural engineering.

Questions:

1. Complete a table listing the professional (technical) person-years of effort applied to the agreement or radioactive material program by individual. Include the name, position, and fraction of time spent in the following areas: administration, materials licensing & compliance, emergency response, LLW, U-mills. If these regulatory responsibilities are divided between offices, the table should be consolidated to include all personnel contributing to the radioactive materials program. If consultants were used to carry out the program's RAM responsibilities, include their efforts. The table heading should be:

NAME	POSITION	AREA OF EFFORT	FTE%
W. Wright	Acting Director	2 1/2% Inspect 2 1/2% License 10% PVNGS	05%
D Kuhl	Lead Staff H.P.	10% Inspections 20% Licensing 05% PVNGS	95%
P Harvey	Staff H.P.	25% Inspections 70% Licensing 05% PVNGS	95%

J. Geringer Staff H.P.	25% Inspections	95%
	70% Licensing	
	05% PVNGS	
J. Wilson Staff H.P.	25% Inspections	95%
	70% Licensing	
	05% PVNGS	
	TOTAL	3.85 FTE

2. Is the staffing level adequate to meet normal and special needs and backup? If not, explain.

Answer: Staffing is marginally adequate.

3. Do you currently have vacancies? If so, when do you expect to fill them?

Answer: There is currently one vacancy in ESL which is currently being advertised in-house. The only other vacancy is the Director's position.

C. Staff Supervision (Category II)

NRC Guidelines: Supervisory personnel should be adequate to provide guidance and review the work of senior and junior personnel. Senior personnel should review applications and inspect licenses independently, monitor work of junior personnel, and participate in the establishment of policy. Junior personnel should be initially limited to reviewing license applications and inspecting small programs under close supervision.

Questions:

1. Identify your senior personnel assigned to monitor the work of junior personnel.

Answer: All staff are senior or higher.

D. Training (Category II)

NRC Guidelines: Senior personnel should have attended NRC core courses in licensing orientation, inspection procedures, medical practices and industrial radiography practices. (For mill States, mill training should also be included.) The RCP should have a program to utilize specific short courses and workshops to maintain appropriate level of staff technical competence in areas of changing technology.

Questions:

1. Prepare a table listing all of the training courses, workshops, seminars, symposia, etc. that your materials personnel have attended since the last review. The table heading should be:

Student	Course	Sponsor	Dates
W.A. Wright	Special Topics Workshop	USNRC	Sept, 1991
W.A. Wright	10 CFR 20 Training Class	USNRC	Jan, 1992
N. Pratt	LLW Perform Assess NRC Workshop		Sep, 1990
N. Pratt	Protective Measure NRC Tech Wkshp		Jun, 1991
N. Pratt	Nuc Mat Transp	NRC	Mar, 1992
N. Pratt	LLW Qtly Mtg	Agency	Jan, 1992



N. Pratt	DOE LLW Mgmt	Agency	Nov, 1991
N. Pratt	Cal Rad Conf	Agency	Nov, 1991
			Apr, 1991
			Nov, 1990
N. Pratt	Adv Rad Accident		
	Assessment	Agy/FEMA	Jul, 1990
N. Pratt	EPA Mix Waste Tg	Agency	Sep, 1990
P. Harvey	Rad Engineering	NRC	Feb, 1991
D. Kuhl	Nuc Transport.	NRC	Sep, 1990
	Emergency Resp.	FEMA/CO	Oct, 1991
	Part 20, Reg V	NRC	Feb, 1992
J. Wilson	5 Week Course	NRC	Summer, 91
	Well Logging	NRC	Nov, 1990
J. Geringer	Ing Path Wkshp	FEMA	Mar, 1991
	" " "	FEMA	Oct, 1991
	Pro Measure "	FEMA	Jun, 1991

2. If any of your materials staff currently need NRC training, please identify the employees and the courses needed.

<u>NAME</u>	<u>COURSES NEEDED</u>
D Kuhl	Radiation Protection Engineering Licensing
J Ger...nger	Licensing Transportation
P Harvey	Licensing
W Wright	Uranium Mill Workshop Low-Level Waste Workshop
J Wilson	Radiation Protection Engineering Transportation

E. Staff Continuity (Category II)

NRC Guidelines: Staff turnover should be minimized by combinations of opportunities for training, promotions, and competitive salaries. Salary levels should be adequate to recruit and retain persons of appropriate professional qualifications. Salaries should be comparable to similar employment in the geographical area. The RCP organization structure should be such that staff turnover is minimized and program continuity maintained through opportunities for promotion. Promotion opportunities should exist from junior level to senior level or supervisory positions. There also should be opportunity for periodic salary increases compatible with experience and responsibility.

Questions:

1. Identify the technical staff who left the Agreement program during this period and, if possible, give the reasons for the turnovers.

Answer: During FY 91 and 92, the following technical staff were directly affected by either terminating the position or terminating the funding for the position and they are shown below:

a) FY 1991

- 1) Emergency Response Program Manager - terminated position funding.

2) Low Level Radioactive Waste (LLW) Program Manager terminated position funding.

3) X-Ray Compliance Program Manager - terminated the position and the position funding. The Program was placed under Program Manager, Radioactive Material Program.

b) FY 1992

1) Deputy Director - terminated position and funding.

2) Emergency Response Radiation Regulatory Officer II, (RRO II) - terminated the position funding.

3) Director - Mr. C.F. Tedford resigned on September, 1992 and was replaced by Mr. Paul Weeden, Program Manager - Environmental Surveillance Lab (ESL).

4) Mr. Paul Weeden, Acting Director resigned in October, 1992 and was replaced by Wm. A. Wright, Program Manager -RAM/X-Ray Compliance.

5) Mr. Bill Moyer - RRO II, Environmental Surveillance Lab, resigned on February 28, 1992.

6) Mr. Wm. Klingler, RRO II, Radon Program departed on April 30, 1992.

7) Mr. Norm Pratt, Program Manager, LLRW is resigning effective June 19, 1992.

8) Two vacancies exist in the Agency at this time: a RRO II position is ESL; and a Program Manager Position in RAM/X-Ray Compliance.

V. LICENSING

A. Technical Quality of Licensing Actions (Category I)

NRC Guidelines: The RCP should assure that essential elements of applications have been submitted to the agency, and which meet current regulatory guidance for describing the isotopes and quantities to be used, qualifications of persons who will use material, facilities and equipment, and operating and emergency procedures sufficient to establish the basis for licensing actions. Prelicensing visits should be made for complex and major licensing actions. Licenses should be clear, complete, and accurate as to isotopes, forms, quantities, authorized uses, and permissive or restrictive conditions. The RCP should have procedures for reviewing licenses prior to renewal to assure that supporting information in the file reflects the current scope of the licensed program.

Questions:

1. Update the list of the State's major licensees. In addition to the name, license number and type, please indicate if the license is new or was terminated (action). Include:

- o Broad Licenses
- o LLW Disposal
- o LLW Brokers (All Types)
- o Manufacturers and Distributors
- o Uranium Mills
- o Irradiators (Other than Self-Contained)
- o Nuclear Pharmacies



o Other Licenses With a Potential Significance for Environmental Impact

The table heading should be:

<u>Licensee Name</u>	<u>License Number</u>	<u>License Type Action</u>
U of AZ Med Ctr	10-044	Broad Medical
U of AZ	10-024	Broad Academic
Syncor Int'l, Inc	07-123	Pharmacy
Syncor Int'l, Inc	07-284	Pharmacy
Syncor Int'l, Inc	10-084	Pharmacy
Roche Prof Serv	07-346	Pharmacy
AZ St University	07-037	Broad Academic
N AZ University	03-026	Broad Academic
St Joseph Hosp	07-024	Broad Medical
Rad Safety Engineer	07-192	Spec. Industrial
Honeywell-Sperry	07-316	Broad Industrial
Honeywell-Sperry	07-320	Broad Industrial
TSL, Inc.	10-086	Broad Industrial
Syncor International	07-363	Pharmacy

2. Identify any major, unusual, or complex licenses issued or renewed in this period.

NAU	3-26	5/31/91
St. Joe	7-24	4/30/92
U of A	10-24	5/31/92
U of A (Med)	10-44	5/31/92
Syncor	10-84	10/31/91
Syncor	7-123	1/31/92
Syncor	7-284	2/28/91
Syncor	7-363	5/31/91

3. Have any new or amended licenses affected the list of licensees requiring contingency plans?

Answer: In determining the need for a contingency plan NUREG 0767 or Agreement/Non-Agreement State letter dated May 21, 1987 is referenced. Based on the referenced criteria no licensees currently operating in Arizona require a contingency plan.

4. Discuss any variances in licensing policies and procedures or exemptions from the regulations granted during the period.

None

B. Adequacy of Product Evaluations (Category I)

NRC Guidelines: RCP evaluations of manufacturer's or distributor's data on sealed sources and devices outlined in NRC, State, or appropriate ANSI Guides, should be sufficient to assure integrity and safety for users. The RCP should review manufacturer's information on labels and brochures relating to radiation health and safety, assay, and calibration procedures for adequacy. Approval documents for sealed source or device designs should be clear, complete and accurate as to isotopes, forms, quantities, uses, drawing identifications, and permissive or restrictive conditions.

Questions:

1. Prepare a table listing new and revised SS&D registrations of sealed sources and devices issued during the reporting period. The table heading should be:



SS&D Registry Number	Manufacturer, Distributor or Custom User	Type of Device or Source	Indicate if NARM	Indicate if Agreement Material
----------------------------	--	--------------------------------	------------------------	--------------------------------------

None

2. List the applications for SS&D registrations for which registry documents have not yet been issued.

None

C. Licensing Procedures (Category II)

NRC Guidelines: The RCP should have internal licensing guides, checklists, and policy memoranda consistent with current NRC practice. License applicants (including applicants for renewals) should be furnished copies of applicable guides and regulatory positions. The present compliance status of licensees should be considered in licensing actions. Under the NRC Exchange-of-Information program, evaluation sheets, service licenses, and licenses authorizing distribution to general licensees and persons exempt from licensing should be submitted to NRC on a timely basis. Standard license conditions comparable with current NRC standard license conditions should be used to expedite and provide uniformity in the licensing process. Files should be maintained in an orderly fashion to allow fast, accurate retrieval of information and documentation of discussions and visits.

Questions:

1. What changes were made in your written licensing procedures (new procedures, updates, policy memoranda, etc.) during the reporting period?

Answer: Changes in written licensing procedures are minimal. The last formal update occurred in 1988 and is available in RCP procedure manuals.

Since December, 1991, some minor additions have occurred, however:

- a) A Topical procedure manual has been instituted.
- b) Included as part of the procedure (topical) manual is:
  - 1. Bioassay procedure policy.
  - 2. NARM source licensing policy.

Below is an example of a policy from the topical Procedure Manual:

Policy No. 18 Radiopharmacy Kit Variance Authorization

This policy supercedes the following policy No. N/A, however, the NRC required all users to follow radiopharmaceutical Kit inserts in Part 35.

Reason for policy:

To give medical users in Arizona the same authorization as is granted in NRC states. This was brought to a head because of a request by a local radiopharmacy.

Who will policy affect?

Medical users that feel the need to have radiopharmacy kits prepared differently than is suggested by the kit manufacturer. According to the medical community this authorization is covered under the practice of medicine.

Radiopharmacies will be authorized to fill physician orders as long as documentation is maintained.

POLICY:

As outlined in All Agreement States Memo (SP-148) and letter to Syncor relating the Agency's position. Additionally, it should be noted that this issue has been addressed with the U of A as a result of the last inspection in December, 1991.

Duration of policy: The NRC temporary policy is in effect until August 23, 1993.

All staff review policy and management signs off if policy is acceptable.

VI. COMPLIANCE

A. Status of Inspection Program (Category I)

NRC Guidelines: The State RCP should maintain an inspection program adequate to assess licensee compliance with State regulations and license conditions. The RCP should maintain statistics which are adequate to permit Program Management to assess the status of the inspection program on a periodic basis. Information showing the number of inspections conducted, the number overdue, the length of time overdue and the priority categories should be readily available. There should be at least semiannual inspection planning for the number of inspections to be performed, assignments to senior versus junior staff, assignments to regions, identification of special needs and periodic status reports. When backlogs occur the program should develop and implement a plan to reduce the backlog. The plan should identify priorities for inspections and establish target dates and milestones for assessing progress.

Questions:

1. Prepare a table identifying the Priority 1, 2, and 3 licenses with inspections that are overdue by more than 50% of their scheduled frequency. Include the licensee name, inspection priority, the due date, and the number of months the inspection is overdue. The list should include initial inspections that are overdue. The table heading should be:

Answer: As of 4/22/92, there are no inspections overdue 50% of scheduled frequency. The following list includes only overdue initial inspections.

<u>Licensee Name</u>	<u>Insp. Freq. (Years)</u>	<u>Due Date</u>	<u>Months O/D</u>
W.L. Gove & Assoc Priority III		2/23/92 (INT)	2

2. Describe your action plan for completing your overdue inspections. If there is a backlog of

- (1) Inspections with an inspection frequency of 3 years or less that are overdue by more than 50% of their scheduled frequency, or
- (2) Inspections with lower inspection frequencies that are overdue by more than 100% of their scheduled frequency,

Please include with the questionnaire a written action plan for eliminating the backlog.



The written action plan should contain inspection priorities, numerical and time frame goals for reducing the backlog, provide a method to measure the program's progress, and provide for management review of the program's success in meeting the goals.

Answer: At the end of 1991, there was a substantial backlog of overdue inspections. At that time an action plan was developed. This plan will be reviewed during the inspection and demonstrates the time frames needed to eliminate the backlog.

3. How many on-site close-out inspections prior to license termination were made during the reporting period?

Answer: 24

4. How many on-site close-out inspections are pending at this time?

Answer: None

5. How many reciprocity notices were received in the reporting period?

Answer: The number of reciprocity notices is not recorded. The notices are available for review at any time. Please note the Agency was notified 48 times for reciprocal recognition since 5/31/90.

6. How many reciprocity inspections were conducted?

Answer: Two reciprocity inspections were conducted since 5/31/90.

7. Other than reciprocity licensees, how many field inspections of radiographers were performed?

Answer: 5 field radiography inspections were performed in the field since 5/90:

El Paso Nat. Gas	15-5	9/19/90
El Paso Nat. Gas	15-5	12/4/91
MQS	15-54	12/16/91
Mobile Insp	15-62	Apr, 1992
U.S. Testing	15-37	Apr, 1992

8. What percentage is this of your total number of radiographer licensees?

Answer: There are nine companies currently licensed for radiography in Arizona. Since 5/90 the percent would be 5 of 23 = 22% over the two year period. It should be noted that of the nine licensee's in the state, only four are permanent and two are considered to be fixed facilities. The four in state licensee's are inspected annually administratively and are rarely in the field situation when the inspection is performed.

#### B. Inspection Frequency (Category I)

NRC Guidelines: The RCP should establish an inspection priority system. The specific frequency of inspections should be based upon the potential hazards of licensed operations, e.g., major processors, broad licensees, and industrial radiographers should be inspected approximately annually -- smaller or less hazardous



operations may be inspected less frequently. The minimum inspection frequency including for initial inspections should be no less than the NRC system.

Questions:

1. Identify individual licensees or groups of licensees the State is inspecting more frequently than called for in the State's inspection priority system and discuss the reason for the change.

Answer: Routinely no licensees are inspected more frequently than called for. However, follow up inspections may occur on a more frequent basis if the previous inspection findings deem it necessary.

C. Inspector's Performance and Capability (Category I)

NRC Guidelines: Inspectors should be competent to evaluate health and safety problems and to determine compliance with State regulations. Inspectors must demonstrate to supervision an understanding of regulations, inspection guides, and policies prior to independently conducting inspections. The compliance supervisor (may be RCP manager) should conduct annual field evaluations of each inspector to assess performance and assure application of appropriate and consistent policies and guides.

Questions:

1. Prepare a table showing the number and types of supervisory accompaniments made during the reporting period. Include:

Supervisor	Inspector	License Category	Date
------------	-----------	------------------	------

Answer: An accompaniment with Dan Kuhl, Jim Geringer, John Wilson, and Paul Harvey was conducted during the U of A Inspection in fall 1991. Additionally, a management conference was conducted with University staff at that time.

2. Were all inspectors accompanied at least annually by the compliance supervisor during the reporting period? If not, explain.

Answer: Yes

D. Responses to Incidents and Alleged Incidents (Category I)

NRC Guidelines: Inquiries should be promptly made to evaluate the need for on-site investigations. On-site investigations should be promptly made of incidents requiring reporting to the Agency in less than 30 days (10 CFR 20.403 types). For those incidents not requiring reporting to the Agency in less than 30 days, investigations should be made during the next scheduled inspection. On-site investigations should be promptly made of non-reportable incidents which may be of significant public interest and concern, e.g. transportation accidents. Investigations should include in-depth reviews of circumstances and should be completed on a high priority basis. When appropriate, investigations should include reenactments and time-study measurements (normally within a few days). Investigation (or inspection) results should be documented and enforcement action taken when appropriate. State licensees and the NRC should be notified of pertinent information about any incident which could be relevant to other licensed operations (e.g., equipment failure, improper operating procedures). Information on incidents involving failure of equipment should be provided to the agency responsible for evaluation of the device for an assessment

of possible generic design deficiency. The RCP should have access to medical consultants when needed to diagnose or treat radiation injuries. The RCP should use other technical consultants for special problems when needed.

Questions:

1. In this reporting period, did any incidents occur that involved equipment or source failure or approved operating procedures that were deficient? If so,  
Answer: No incidents as described were noted during the reporting period.

- a. How and when were other State licensees who might be affected notified? N/A

- b. Was the NRC notified? N/A

2. For incidents involving failure of equipment or sources, was information on the incident provided to the agency responsible for evaluation of the device for an assessment of possible generic design deficiency? Please provide details for each case.

Answer: Not applicable.

3. If the RCP utilized medical or technical consultants for an emergency during the reporting period, please describe the circumstances for each case.

Answer: No consultants were used during the reporting period.

4. In the reporting period, were there any cases involving possible criminal wrongdoing that were looked into or are presently undergoing review? If so, please describe the circumstances for each case.

Answer: No cases involved criminal wrong doing.

E. Enforcement Procedures (Category I)

NRC Guidelines: Enforcement Procedures should be sufficient to provide a substantial deterrent to licensee noncompliance with regulatory requirements. Provisions for the levying of monetary penalties are recommended. Enforcement letters should be issued within 30 days following inspections and should employ appropriate regulatory language clearly specifying all items of noncompliance and health and safety matters identified during the inspection and referencing the appropriate regulation or license condition being violated. Enforcement letters should specify the time period for the licensee to respond indicating corrective actions and actions taken to prevent recurrence (normally 20-30 days). The inspector and compliance supervisor should review licensee responses.

Licensee responses to enforcement letters should be promptly acknowledged as to adequacy and resolution of previously unresolved items. Written procedures should exist for handling escalated enforcement cases of varying degrees. Impounding of material should be in accordance with State administrative procedures. Opportunity for hearings should be provided to assure impartial administration of the radiation control program.

Questions:

1. If during the reporting period the State issued orders, applied civil penalties, sought criminal penalties, impounded sources, or held formal enforcement hearings, identify these



cases and give a brief summary of the circumstances and results for each case.

A. Civil Penalty, Micro Rel 1/8/91, Lic #7-133, for release of Kr-85 (repeat). Ordered to pay and mitigated the amount 3/12/91.

B. Civil Penalty, Good Sam Hospital, 1/22/91, Lic. # 7-56: This was a carry over from Teletherapy Misad. in 1989. Civil Penalty was dropped in April because the Agency did not have a way to address medical overexposures.

C. Civil Penalty, Humana Hospital, 6/11/91, Lic # 7/120, failure to inventory sealed sources (repeat). Licensee paid Penalty.

D. Civil Penalty, Honeywell, 7-316, 7/19/91 failure to inventory sources, Survey Meter calibration, training and personnel dosimetry (1st and 2nd are repeat). Mitigated and paid 9/91.

E. Civil Penalty, St. Mary's Hospital, 10-87, 12/5/91, failure of Licensee to notify Agency of Misadministration in timely manner (repeat); dropped penalty based on licensee response.

F. Civil Penalty. Earth Engineering 3/2/92, Lic #: 3-24, Enforcement conference conducted, Licensee continues to not follow safe practices. Due to repeated findings C.P. is assessed. Licensee must pay or terminate business. Licensee will make payments until all of bill is paid; as to date payment is late.

2. Discuss changes made in the enforcement procedures during the reporting period.

Answer: No changes to enforcement procedures since last NRC review.

#### F. Inspection Procedures (Category II)

NRC Guidelines: Inspection guides, consistent with current NRC guidance, should be used by inspectors to assure uniform and complete inspection practices and provide technical guidance in the inspection of licensed programs. NRC Guides may be used if properly supplemented by policy memoranda, agency interpretations, etc. Written inspection policies should be issued to establish a policy for conducting unannounced inspections, obtaining corrective action, following up and closing out previous violations, interviewing workers and observing operations, assuring exit interviews with management, and issuing appropriate notification of violations of health and safety problems. Procedures should be established for maintaining licensees compliance histories. Oral briefing of supervision or the senior inspector should be performed upon return from nonroutine inspections. For States with separate licensing and inspection staffs, procedures should be established for feedback of information to license reviewers.

#### Questions:

1. What changes were made to your written inspection procedures during the reporting period?

Answer: Although there has been no formal change to the Inspection Procedure Manual, there has been additions made to the Topical procedure manual involving inspection topics of interest.



G. Inspection Reports (Category II)

NRC Guidelines: Findings of inspections should be documented in a report describing the scope of inspections, substantiating all items of noncompliance and health and safety matters, describing the scope of licensees' programs, and indicating the substance of discussions with licensee management and licensee's response. Reports should uniformly and adequately document the results of inspections and identify areas of the licensee's program which should receive special attention at the next inspection. Reports should show the status of previous noncompliance and the independent physical measurements made by the inspector.

## Questions:

1. What changes were made in the formats of your reports or inspection forms during this period?

Answer: Report formats have not changed. However, a planned update has begun for all forms. The medical inspection form is entirely revised as of 5/13/92.

H. Confirmatory Measurements (Category II)

NRC Guidelines: Confirmatory measurements should be sufficient in number and type to ensure the licensee's control of materials and to validate the licensee's measurements. RCP instrumentation should be adequate for surveying license operations (e.g., survey meters, air samplers, lab counting equipment for smears, identification of isotopes, etc.). RCP instrumentation should include the following types:

GM Survey Meter: 0-50 mr/hr  
 Ion Chamber Survey Meter: up to several R/hr  
 Neutron Survey Meter: Fast & Thermal  
 Alpha Survey Meter: 0-100,000 c/m  
 Air Samplers: Hi and Low Volume  
 Lab Counters: Detect 0.001 c/wipe  
 Velometers  
 Smoke Tubes  
 Lapel Air Samplers

Instrument calibration services or facilities should be readily available and appropriate for instrumentation used. Licensee equipment and facilities should not be used unless under a service contract. Exceptions for other State Agencies, e.g., a State University, may be made. Agency instruments should be calibrated at intervals not greater than that required to licensees being inspected.

(Note: Addition types of instrumentation that are highly desirable are thin window plastic or NaI detectors for low energy gammas and "micro-R" meters with audio signal for searching for lost gamma emitter sources.)

## Questions:

1. Describe any changes in your instrumentation or methods of calibration in this reporting period.

Answer: This Agency added to RCP a Davidson Model 4106A Multi-channel analyzer. This instrument can be taken to the field if need be. This will also provide a backup to lab support.

VII. STATUS OF PREVIOUS NRC COMMENTS AND RECOMMENDATIONS

- A. Please prepare a summary of the status of the State's actions taken in response to NRC's comments and recommendations following the last review.

Summary of States Actions to USNRC 1990 Report of Inspection:

1. With regard to compatibility, letter dated July 10, 1990 from this Agency detailed how the rule on bankruptcy notification had been taken care of.
2. With regard to licensing procedures, much effort has been put forth to better document explanatory information during licensing actions. Telephone conversations are documented more completely and utilization of FAX communications and express mail has helped speed up the licensing review process.
3. With regard to compliance actions, more attention to detail has been put forth in the area of observation and documentation of licensee operations and worker and auxiliary personnel interviews.
4. With regard to Inspection Reports, more effort has been put forth in developing better documentation of inspector observations, licensee ALARA programs, and licensee organization. A draft rule change detailing how the Agency's rules will be changed to incorporate five instead of three severity levels was provided to you at the close of the last inspection and will be implemented in the near future as is outlined in the Action Plan dated June, 1992.

VIII. SPECIAL TOPICS OF CURRENT INTEREST

- A. If you like, describe your program's successes, problems or difficulties that occurred during this reporting period.

Answer: Will be discussed at the time of the inspection.

What  
6/92PART II  
PROGRAM STATISTICSas of (June, 1992)

- \*1. How many specific licenses are currently in effect? As of 5/1/92, 297 specific licensees.
2. During the last calendar year,
  - a. how many new licenses were issued? 27
  - b. how many licenses were terminated? 22
  - c. how many licenses were renewed? 40
  - d. how many amendments were issued? 228
  - e. how many SS&D evaluations were completed? None
3. How many prelicensing visits were made during this past calendar year? 3
4. How many new licenses (or major amendments) were hand delivered to the licensee? None
5. How many materials incidents, other than unfounded allegations, occurred during the last calendar year? 9
6. How many on-site investigations of incidents were conducted during the last calendar year? 9
- \*7. How many incidents required NRC notification, either by telephone or by written report? 1
- \*8. How many of the incidents required Abnormal Occurrence Reports? None
- \*9. How many of the incidents involved leaking from sealed sources? None
- \*10. How many misadministrations occurred during the last calendar year? 18
11. How many civil penalties were imposed during the last calendar year? 5
12. How many orders were issued during the last calendar year? 2

\* Note: If the information requested in the questions marked with an asterisk has been submitted to State Programs for the prior year, please answer these questions for the date of this review or the period since January 1 of this year as appropriate.



- \*13. How many technical FTE's (not including administrative, clerical or unfilled vacancies) are currently assigned to the:

Radioactive materials program? - 3.85 FTE's

Low-Level waste program? - 0

Uranium mills program? - 0

- \*14. Compute the professional/technical person-year effort of person-years per 100 licenses (excluding management above the direct RAM supervisor, vacancies and personnel assigned to mills and burial site licenses). Count only time dedicated to radioactive materials. 1.3

- \*15. List the RCP salary schedule as follows:

<u>Position Title</u>	<u>Grade</u>	<u>Minimum Range</u>	<u>Mid-Range</u>	<u>Maximum Salary Range</u>
Director	24	\$40,533	\$50,937	\$61,340
Program Manager	22	33,737	42,398	51,058
RRO II	20	28,097	35,309	42,521
Business Manager	18	28,238	29,203	35,168
Public Info Officer	17	21,481	26,993	32,505
Accounting Tech III	13	16,618	20,278	23,937
Admin Secretary I	12	15,531	18,950	22,368

- \*16. Please complete the following table using the license categories as shown, and including the total number of specific licenses in each category, the priority or inspection frequency, the number of inspections made during the review period, and the number of overdue inspections in each category. (In Priorities 1-3, include those overdue by more than 50% of their scheduled inspection frequency; in lower priorities, include those overdue by more than 100% of their scheduled frequency.)

\*Note: If the information requested in the questions marked with an asterisk has been submitted to State Programs for the prior year, please answer these questions for the date of this review or the period since January 1 of this year as appropriate.

<u>License Category</u>	<u>No. of Licenses</u>	<u>Insp. Freq. (years)</u>	<u>No. Insp. Made</u>	<u>No.* Overdue Insp.</u>
Broad A Academic (Medical)	1	2	1	
Broad A Industrial	4	1	3	
Broad A Medical	2	2	2	
Broad A Mfg. & Dist.	10	1	10	
Industrial Radiography				
Irradiator - Pool or Large				
LLW Broker or Service - Processing, Incineration, Repackaging				
LLW Disposal & Burial				
Nuclear Pharmacy	5	1	5	
Source Material Processing				
Teletherapy (Human Use)	3	2	3	
U-Mill Operation				
Other Priority 1				
Broad A Academic (Non-Medical)	3	1	3	
Broad B Academic				
Broad A R & D				
Decontamination Services				
LLW Disposal Service (pre-packaged)	1	3	0	
Mobile Nuclear Services				
SNM (unsealed)				
Other Priority 2				
Broad B Industrial				
Broad B Mfg. & Dist.				
Broad B R & D	10	3	7	
In vitro Distribution				
Irradiators, Self-Contained, Small	1	3	0	
Leak Test & Calibration Services	10	3	5	
Medical Product Distribution				
Medical, Institutional (Hospitals & Clinics)	84	2,3	65	
Nuclear Laundry				
Source Material, Rare Earth				
U-Mill Tailings	1	1	1	
Well Logging, Field Flooding	8	3	5	

\*Note: If the information requested in the questions marked with an asterisk has been submitted to State Programs for the prior year, please answer these questions for the date of this review or the period since January 1 of this year as appropriate.

## A.31

<u>License Category</u>	<u>No. of Licenses</u>	<u>Insp. Freq. (years)</u>	<u>No. Insp. Made</u>	<u>No.* Overdue Insp.</u>
Other Priority 3 (ie Super general licenses listed under Special Industrial)	7	3	5	
GL Distribution				
Lixiscopes, Bone Mineral Analyzer, Sr Eye Applicator				
Medical, Private Practice Limited Diagnostic or Therapy				
Portable Gauge	106	3	78	
Services - Teletherapy, Gauge, or Irradiator	1	3	1	
Other Priority 4				
Broad C Academic				
Broad C Industrial				
Broad C Mfg. & Dist.				
Broad C R & D				
Fixed Gauge	40	3	31	
In vitro Labs	62	5	69	0
SNM (sealed)				
Veterinary Medicine				
Other Priority 5				
Gas Chromatographs & other Measuring Systems				
Leak Test Only				
Shielding, Depleted Uranium	13	None	_____	_____
Other Priority 6 and 7				
TOTALS	372	48	294	0

\*Note: If the information requested in the questions marked with an asterisk has been submitted to State Programs for the prior year, please answer these questions for the date of this review or the period since January 1 of this year as appropriate.

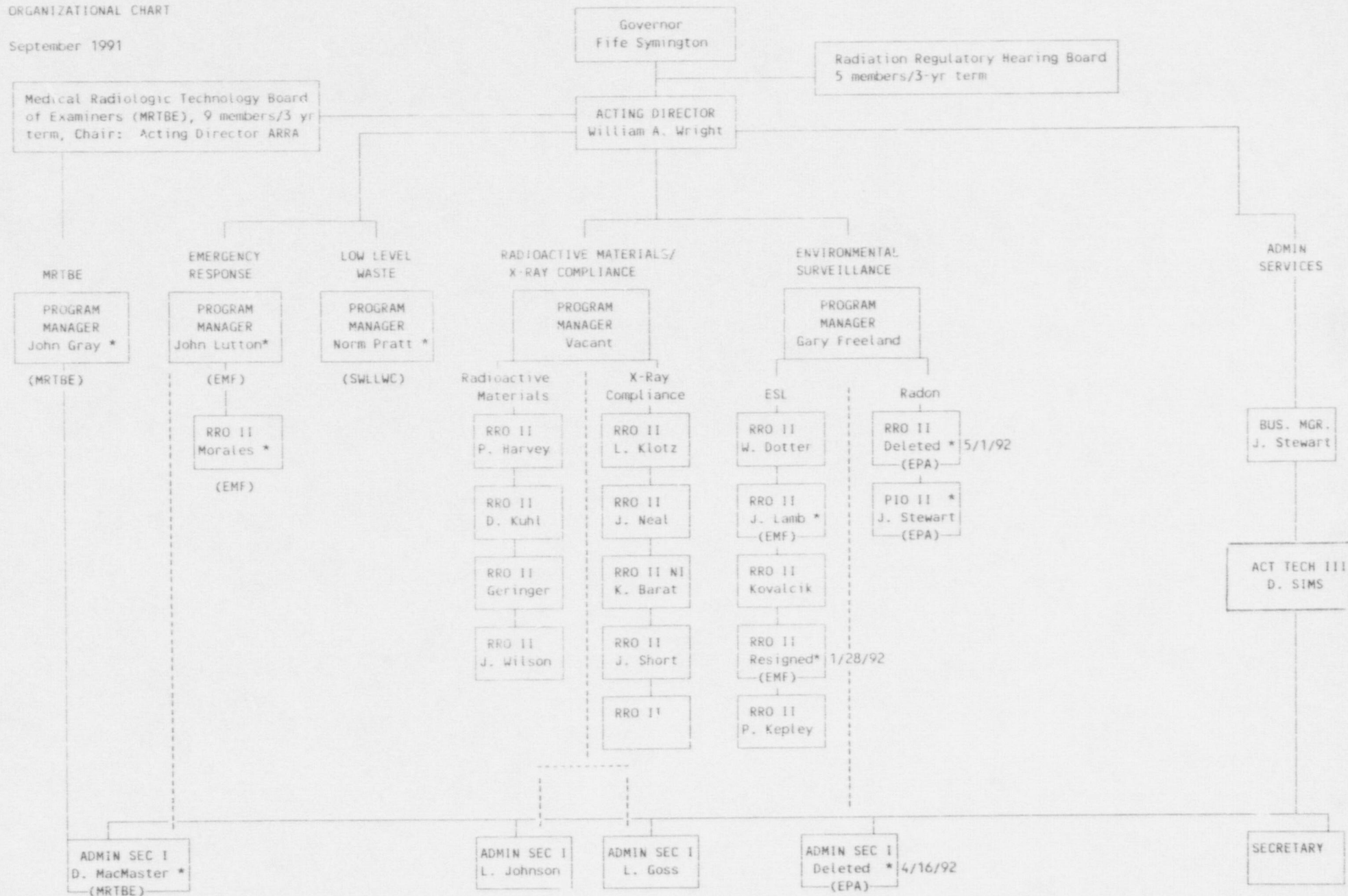


## APPENDIX B

## RADIATION REGULATORY AGENCY

## ORGANIZATIONAL CHART

September 1991



RRO: Radiation Regulatory Officer  
NI: Nonionizing

\* Funded by General fund sources

# ARIZONA STATE GOVERNMENT AGENCIES BY FUNCTIONAL CLASSIFICATION

## THE ELECTORATE

### GOVERNOR

Arizona Mexico Com.  
Gov's Highway Safety Rep.  
Gov's Regulatory Review Council

Gov's Office for Children  
Gov's Office for Women's Services  
Gov's Office for Substance Abuse

#### GENERAL GOVERNMENT

#### EDUCATION

#### RECREATION & NATURAL RESOURCES

#### AGRICULTURE/FARMING

Administration Department  
Affirmative Action Advisory Board  
Affirmative Action Office  
Automation Oversight Commission  
Civil Rights Advisory Board  
Comprehensive Data Sys Policy Bd.  
Cost Reduction - Efficiency in State  
Govt. Study Comm.  
Indian Affairs Commission  
Indian Affairs Advisory Council  
Personnel Board  
Veterans Home Establish. Study Bd.  
Veterans Service Commission

Assessors & Appraisers Education  
& Training Advisory Committee  
Community College Boards  
Community Colleges Bd of Directors  
Deaf & Blind School Dir's Board  
Deaf & Blind Sch. Joint Legislative  
Study Committee  
Education; Board of  
Educ Bd, Special Ed Advisory Ct.  
Education; Commission of States  
Education Department  
Education, Post Secondary Comm.

Educ. Private Postsecondary Board  
Education, Sensory Impaired  
Advisory Committee  
Educ.; Special Ed. Improvement  
Study Committee  
Election Offs Educ. Trng & Cert Advls Ct  
Regents; AZ Board of  
Vocational Education Council  
Vocational & Tech. Education Board  
Western Interstatn Comm. for  
Higher Education

Game & Fish Commission  
Game & Fish Department  
Land Dept. Board of Appeals  
Mines & Mineral Resources Bd./Dept.  
Motion Picture & TV Advisory Board  
Oil & gas Conservation Commission  
Outdoor Recreation Coordinating Committee  
Parks Board  
Rio Salado Dev. District; Bd. of Directors  
Watercraft Advisory Council

Ag. Advls Ct. on Animal Concentrated Feeding  
Ag. Advisory Comm. on Nitrogen Fertilizer  
Agriculture & Horticulture Commission  
Agriculture Employment Relations Bd.  
Cotton Research Council  
Dairy Commissioner  
Egg Inspection Board  
Feed Advls Comm. to the State Chemist  
Grain Research & Promotion Council  
Livestock & Agriculture Committee  
Livestock Board  
Rangeland Advisory Council

#### HEALTH & WELFARE

#### CORRECTIONAL SERVICES

#### FINANCE

#### TAXATION & REVENUE

Aging Advisory Council  
Arthritis & Musculoskeletal Disease  
Advisory Council  
Blind & Visually Impaired; Gov's Council  
Communicable Disease Advls Council  
Crippled Children Svcs Advisory Council  
Day Care Advisory Board  
Developmental Disabl. Advisory Ct.  
Develop Disabilities; Gov's Council  
Develop Disabilities Oversight Ct.  
Disease Control Research Comm.  
Economic Security Advisory Council  
Economic Security Department  
Emergency Medical Services Council  
Emergency & Military Affairs Department  
Emergency Planning Council  
Emergency Response Commission

Handicapped; Comm. on Employment  
Hth Care Cost Containment Joint Leg Ct.  
Health Care Cost Containment System  
Health Advisory Council  
Health Facilities Authority Board  
Health, Physical Fitness & Sports Council  
Health Planning & Coordination Council  
Health Services Department  
Hearing Aid Dispenser Adv. & Exam Bd.  
Hearing Impaired Children Adv Ct  
Hearing Impaired Council  
Hospital Advisory Board  
Hunger Advisory Council  
Mentally Ill; Chronic, Pilot Pgm Ct.  
Occupational Safety & Hlth Review Bd.  
Pioneers & Disabled Miners Home  
Sensory Impairment Advisory Board  
Workers Comp. Wage Advisory Comm.

Arson Prevention Advisory Committee  
Correctional Enterprise (ARCOR)  
Corrections Department  
Criminal Justice Planning Supv. Board  
Drug Enforc Policy, Joint Leg Oversight Ct  
Drug Enforcement Task Force  
Drugs; Interagency Coordinating Ct on  
Juvenile Justice & Delinquency  
Prevention Advisory Council  
Pardon & Parole Board  
Public Safety Department

Banking Department  
Compensation Fund & Comp Fund Board  
Compensation Fund Investment Comm.  
Deposit; State Board of  
Economic Coord Council, Interagency  
Economic Estimate Commission  
Economic Planning & Dev. Advisory Bd.  
Housing Finance Review Board

Industrial Comm. Investment Comm.  
Insurance Advisory Board  
Insurance Guaranty Fund Boards  
Interagency Economic Coord Council  
Private Enterprise Review Board  
Retirement Sys. Investment Advls Council  
Rural Economic Dev. Advisory Comm.  
Salaries for Elective Officers Comm.  
Tax Deferred Annuity & Comp Plans  
Governing Committee

Lottery Commission  
Mobile Home Parts Fund & Hearing Off.  
Property Tax Oversight Commission  
Revenue Department  
Tax Advisory Council  
Tax Appeals Board  
Tax Committee, Joint Legislative  
Tax Assessment Advisory Committee  
Valuation Tech. Advisory Comm.

#### HIGHWAYS

#### PROFESSIONAL LICENSING & REGULATION

#### BUSINESS LICENSING & REGULATION

#### CULTURAL

Highway Safety; State Agency of  
Highways; 5 year Comit Pgm Ct.  
Transportation Board  
Transportation Department

Accountancy Board  
Chiropractic Examiners Board  
Cosmetology Board  
Dental Examiners Board  
Denturists Advisory Committee  
Homeopathic Med. Examiners Bd.  
Medical Advisory Board  
Medical Examiners Board  
Medical Liability Review Panel  
Med. Radiologic Tech. Board  
Medical Students Loan Board  
Metabolic Screening Committee  
Naturopathic Phys Bd of Examiners  
Nurse-Midwives Dir's Underwriting Bd

Nursing; Arizona Board of  
Nursing Care Inst Admin's Bd of Exam.  
Nursing Care Inst Admin's Lic Bd  
Opticians Bd. of Dispensing  
Optometry Board  
Osteopathic Examiners in Med.  
& Surgery Board  
Pharmacy Board  
Physical Therapy Examiners Bd.  
Physician Assistants Joint Bd.  
Podiatry Examiners Board  
Psychologist Examiners Board  
Tech. Registration Board  
Veterinary Med. Exam. Board

Barbers Board  
Beef Council  
Bldg. & Fire Safety Dept.  
Building Stds Advisory Ct.  
Commerce Department  
Contractors; Registrar of  
Corporation Commission  
Cosmetology Board  
Funeral Dir's & Embalmers Bd.  
Industrial Commission  
Installation Standards Comm.  
Insurance Department

Liquor Board  
Liquor Lic. & Control Dept & Liquor Bd.  
Manufactured Housing Bd./Office  
Minority & Women Bus. & Econ Advls Bd  
Polygraph Examiners Advisory Bd  
Power Authority & AZ Power Commission  
Racing Commission/Racing Dept  
Real Estate Advisory Board  
Real Estate Department  
Structural Pest Control Board  
Weights & Measures Department  
Tourism Advisory Council/Office

Archaeology Advisory Commission  
Arts Commission  
Coronado Intl. Monument Commission  
Geographic Names Board  
Historical Advisory Commission  
Historical Records Advisory Board  
Historical Sites Review Committee  
Historical Society, Arizona  
Historical Society, Prescott  
Humanities Council  
Korean War Veterans Memorial Comm.  
Native Am. Indian Veterans Memorial Bd.  
Playway & Historic & Scenic Roads Advls Ct.

#### ENVIRONMENTAL

#### ALL OTHER AGENCIES

#### LAW / LEGISLATIVE

Air Pollution Control Board  
Air Quality Compliance Committee  
Climate, National Pgm Action Advls Council  
Climate Committee, State  
Environment Advisory Council  
Environment; AZ Commission on  
Environmental Quality Department  
Groundwater Users Advisory Council  
Radiation Regulatory Agency  
Radiation Regulatory Hearing Board  
Radioactive Waste, W. Low Level Bd/Cs

Solar Energy Advisory Council  
Solid Waste Mgt. Advisory Board  
Waste Disposal Compact;  
Western Low-level Bd.  
Water Commission  
Water Quality Advisory Council  
Water Quality Appeals Board  
Water Resources Department  
Water Systems Coord Council

Apprenticeship Advisory Council  
Apprenticeship, Joint Committees  
Boiler Advisory Board  
Boxing Commission  
Chemist, State Advisory Comm. on  
Coliseum & Exposition Center Bd.  
Cooperative Advertising Program  
Elevator Advisory Committee  
Employment Advisory Council  
Fire Safety Committee  
Job Training Coordinating Council

Law Enforcement Merit System Council  
Law Enforcement Officer Advisory Council  
Main Street Program Advisory Committee  
Public Safety Personnel Retirement System  
Public Safety Pers. System Local Boards  
Retirement System Board  
Retirement System Investment Advisory Council  
Small Business Procurement Advisory Comm.  
Utility Consumer Board, Residential  
Utility Consumer Office (RUCC)  
Women's Commission, AZ

Appellate Court Appointments Comm.  
Attorney General/Law Department  
Capital Review; Joint Leg. Committee  
Career Ladders, Joint Leg. Committee on  
Criminal Justice Commission  
Drugs; Legislative Oversight Committee  
Homeless; Joint Leg. Coordination Comm.  
Legislative Council  
Legislative Oversight, Joint Committee

Legislative Govt. Mail Comm.  
Patrol, Pricing & Mgt. Joint Leg Ct.  
Prosecuting Attorneys Advls Council  
Principal's Institute Advisory Bd.  
Public School Funding Leg. Ct.  
Trial Court Appointments Comm.  
Uniform State Laws Commission

ARIZONA STATE PERSONNEL DIVISION  
MARCH 25, 1988



# ARIZONA STATE GOVERNMENT ORGANIZATION



ARIZONA STATE PERSONNEL DIVISION  
MARCH 25, 1968

## APPENDIX C

### REVIEWER EXPLANATORY COMMENTS AND OBSERVATIONS

#### 1. LEGISLATION AND REGULATIONS

##### Status and Compatibility of Regulations (Category I)

With the exception of the compatibility rule, the State's regulations are compatible. The staff provided a written plan for adopting the compatibility regulations by the end of 1993. None of the present staff have experience in the rule making process, and they have been waiting for the SSR's to use as guidance. During the management discussions, it was suggested other State personnel experienced in rule making assist the agency temporarily. Because of the controversy encountered by NRC in enforcing the rule, and because of the State's efforts to adopt the changes, compatibility was not withheld. The staff plans to work on the emergency plan regulation concurrently with the decommissioning rule.

#### 2. ORGANIZATION

##### Location of Radiation Control Program Within State Organization (Category II)

As of now, the Agency reports directly to the Executive Office of the Governor. The State is considering placing ARRA within another State agency. During the meeting with the executive office, we discussed the advantages of keeping the RCP together as a unit with a technical person at the head.

#### 3. MANAGEMENT AND ADMINISTRATION

##### Laboratory Support (Category II)

The laboratory has purchased several new instruments including an alpha spectrometer, a liquid scintillator, a gas flow indicator, and an automated TLD reader. According to a recent NRC RV appraisal report, the lab equipment is rated "excellent".

##### Administrative Procedures (Category II)

Complete revision of the policy manual is now in progress. As it is finalized, it should incorporate changes in technology and policy (i.e., new Parts 20, 30, 34, 35, 39, 40 and the Arizona equivalent rules). We suggested the State use the new CRCPD E-15 generic procedures as a guide.

##### Management (Category II)

For several months, the RCP has been operating with "acting" management and supervisory positions. The persons in this temporary capacity have no authority to carry out some of the necessary program functions. This was discussed in the exit meetings, but not addressed in the correspondence, because the interviews were being conducted for a new director at the time of the review.

Office Equipment and Support Services (Category II)

The clerical staffing level is marginally adequate. Adequate support staff is essential to the success of the program, and this area will be watched closely in the future.

4. PERSONNELStaff Continuity

The resignation of the Director and loss of two supervisory positions has been mitigated by the fact that four long-time professional health physicists remain with the program.

5. LICENSINGTechnical Quality of Licensing Actions (Category I)

Sixteen license files and 23 termination files were reviewed during the November 1991 visit and this review. Overall, the quality of the licenses was good, and the problems found related to outdated procedures or licensing conditions. These were addressed in Enclosure 2. The list of files reviewed with case-specific comments can be found in Appendix D.

Licensing Procedures (Category II)

Enclosure 2 addresses problems found in the State's standard licensing conditions. The staff pointed out that their conditions are the same as the standard conditions distributed by the NRC, and last updated in 1986. We discussed the need to keep the conditions current with changing technology and regulatory practice, and ways by which individual NRC reviewers change conditions as necessary.

During the staff meeting, it was suggested the State modify the licensing check list to verify review of the licensee's compliance history before licensing actions are approved. It was difficult to determine from reviewing the files whether past compliance actions had been considered.

6. COMPLIANCEInspector's Performance and Capability (Category I)

The following accompaniments were made:

DATE	NRC REP	LICENSEE	LICENSE NO. TYPE	INSPECTOR
6/3,4	JWH	John C. Lincoln Hospital	7-96 Medical Type A	J. Wilson
6/5	JWH	Phoenix Baptist Hospital and Medical Center	7-146 Group Medical	P. Harvey
6/10	JM	Radiation Safety Engineering	7-192	J. Geringer



Comments included the need to tie findings to regulations, the need to clearly explain probable items of non-compliance, and the importance of citing items of non-compliance rather than declaring items of concern. Overall, however, the inspectors were all knowledgeable, knew the regulations, observed good health physics practices and performed the inspections in a professional manner.

#### Responses to Incidents and Alleged Incidents (Category I)

All incident files for the review period were reviewed. The response to major incidents (such as the contaminated fence products from India) has been exemplary. The files appear, with few exceptions, complete and closed out. Where appropriate, surveys and wipes have been taken and the assays posted to the files. Photographs included in some files are especially useful and valuable. Minor suggestions were made in improving the file labeling and logging systems.

#### Inspection Procedures (Category II)

The State uses draft inspection procedures and forms which appear to be working well. These documents should be reviewed for changes in regulatory requirements and new technology and then finalized. We commended the State on their new medical inspection form.

#### Inspection Reports (Category II)

Eighteen compliance files were reviewed and we found significant improvement in the inspection reports. With the exception of downgrading items of non-compliance (see Enclosure 2, Enforcement Procedures), the compliance actions were appropriate and well documented. For the most part, the reports were clear and complete in describing the scope of the inspection, and problems with adequate documentation found during the last visit and last review appear to have been resolved. A list of files reviewed with case-specific comments can be found in Appendix E.

### 7. SUPPLEMENTAL INFORMATION

#### Visits to State Licensed Facilities

On June 9, 1992, William Wright, James Myers and Jack Hornor visited the University of Arizona to evaluate their two broad scope type A radiation safety programs. The morning was spent discussing the radiation safety program with the RSO, Dr. Charles Sondhaus, and staff. The first part of the afternoon was used to review permit evaluations, training, birth-to-death handling of RAM, and the entire low-level waste problem. The remainder of the day was used to tour typical labs for observation and interviews, and to tour the waste handling area. Both the State and the NRC reviewers were impressed with the work the University has done in implementing an excellent radiation safety program.

#### State Summary of Actions in Response to Previous NRC Comments

As explained in Enclosure 2 of the June 1990 review report, the only comment requiring a response was the issue of the bankruptcy rule. The

State, however, responded to the Reviewer's Explanatory Comments, both by a letter to C. Kammerer dated September 11, 1990, and in Appendix A of this report. Although a written response was not necessary in either case, we were pleased to find our observations made in the explanatory comments were helpful in improving the program.

## APPENDIX D

### LICENSE FILE REVIEW

- a. Sixteen license files were reviewed during the November 1991 visit and the June 1992 review meeting.

File No. 1

Licensee: Syncor International  
Location: Mesa  
License Type: Nuclear Pharmacy  
Type of Licensing Action: Renewal

License No.: 7-284  
Amendment No.: 22

File Reviewed on: 11/20/91

File No. 2

Licensee: Samaritan Health Services  
Location: Phoenix  
License Type: Broad Medical  
Type of Licensing Action: New

License No.: 7-364

File Reviewed on: 11/20

File No. 3

Licensee: U S Testing  
Location: Joseph City  
License Type: Industrial Radiography  
Type of Licensing Action: Renewal

License No.: 15-37  
Amendment No.: 18

File Reviewed on: 11/21/91

File No. 4

Licensee: Desert Samaritan  
Location: Mesa  
License Type: Medical Type A  
Type of Licensing Action: Renewal

License No.: 7-106  
Amendment No.: 38

File Reviewed on: 11/21/91

File No. 5

Licensee: Honeywell-Sperry  
Location: Phoenix  
License Type: Broad Manufacturing & Distribution  
Found during compliance file review

License No.: 7-320

File Reviewed on: 11/19/91

File No. 6

Licensee: Honeywell, Inc.  
Location: Phoenix  
License Type: Broad Industrial  
Found during compliance file review

License No.: 7-316

File Reviewed on: 11/19/91

File No. 7

Licensee: Syncor  
Location: Phoenix  
License Type: Nuclear Pharmacy  
Type of Licensing Action: New and amendments

License No.: 7-363  
Amendment No.: 1,2

File Reviewed on: 6/8/92



File No. 8	
Licensee: Northwest Imaging Center	License No.: 7-303
Location: Phoenix	Amendment No.: 10
License Type: Medical	
Type of Licensing Action: Renewal	File Reviewed on: 6/8/92
File No. 9	
Licensee: Tempe St. Luke's Hospital	License No.: 7-172
Location: Tempe	Amendment No.:
License Type: Medical	
Type of Licensing Action: Renewal	File Reviewed on: 6/8/92
File No. 10	
Licensee: Salt River Project	License No.: 7-285
Location: Phoenix	Amendment No.: 13
License Type: Industrial Radiography	
Type of Licensing Action: Renewal	File Reviewed on: 6/10/92
File No. 11	
Licensee: MQS Inspections, Inc.	License No.: 15-44
Location: Phoenix	Amendment No.: 10
License Type: Industrial Radiography	
Type of Licensing Action: Renewal	File Reviewed on: 6/8/92
File No. 12	
Licensee: Capitol Castings, Inc.	License No.: 7-10
Location: Tempe	Amendment No.: 20
License Type: Industrial Radiography	
Type of Licensing Action: Renewal	File Reviewed on: 6/10/92
File No. 13	
Licensee: University of Arizona, Tucson	License No.: 10-44
Location: Tucson	Amendment No.: 31
License Type: Broad A Medical	
Type of Licensing Action: Renewal	File Reviewed on: 6/10/92
File No. 14	
Licensee: University of Arizona, Tucson	License No.: 10-24
Location: Tucson	Amendment No.: 46
License Type: Broad A Academic	
Type of Licensing Action: Renewal	File Reviewed on: 6/10/92
File No. 15	
Licensee: Mayo Clinic Scottsdale	License No.: 7-354
Location: Scottsdale	
License Type: Bio Med R&D	
Found during compliance file review	
File No. 16	
Licensee: TLS Systems Inc.	License No.: 10-86
Location: Tucson	
License Type: Broad Industrial	
Found during compliance file review	

<u>Comment</u>	<u>File No.</u>
1. No supervisory review	1
2. Problem with application resolved but not documented	2
3. Copy of licensee's operating and emergency procedures not legible	3
4. License would be clearer if applicant re-submitted all information: tie-downs to previous applications confusing	4
5. Broad licensee has no committee	5,6,16
6. Licensee did not clearly outline their procedures, unclear if all procedures were approved	7
7. Standard license condition places responsibility for QA on radiopharmaceuticals on hospital rather than pharmacy	8
8. License condition for validation of calicheck on lineators needs revision. Requirement should read "inspected for damage before each use" and "intercompared with the decay method if damaged"	8
9. Application commits licensee to 10% deviation from prescribed doses without regard to diagnostic or therapy doses, resulting in two violations and one civil penalty. License should be amended to reflect current regulatory policy.	9
10. No worksheet for renewal in file	11,12
11. Standard license condition 14B does not include "with appropriate survey meter..."	13,14
12. Standard license condition 35A exempts metal foil use from bioassay requirement.	13,14
13. New license type did not fit any established category on priority list, so incorrect type entered on license.	15
b. Twenty-three termination files were reviewed during the November 1991 visit and the June 1992 review meeting.	

## File No. T1

Licensee: Central Arizona Testing Labs

License No.: 11-9

Location: Casa Grande

Amendment No.: 3

License Type: Portable Gauge

Type of Licensing Action: Termination

File Reviewed on: 11/18/91

## File No. T2

Licensee: BLH Farms

License No.: 11-12

Location: Queen Creek

Amendment No.: 3

License Type: Portable Gauge

Type of Licensing Action: Termination

File Reviewed on: 11/18/91

File No. T3	
Licensee: International Rubber, Inc.	License No.: 7-202
Location: Chandler	Amendment No.: 5
License Type: Fixed Gauge	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T4	
Licensee: D.L. Van Horn	License No.: 14-20
Location: Yuma	Amendment No.: 2
License Type: Portable Gauge	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T5	
Licensee: Amerind Agrotech Labs	License No.: 11-10
Location: Sacaton	Amendment No.: 4
License Type: Portable Gauge	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T6	
Licensee: Aquilla Valley Farms	License No.: 7-189
Location: Aquilla	Amendment No.: 4
License Type: Portable Gauge	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T7	
Licensee: Harry C. Watters	License No.: 7-333
Location: Mesa	Amendment No.: 2
License Type: Bone Mineral Analyzer	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T8	
Licensee: Arizona Public Service	License No.: 7-332
Location: Phoenix	Amendment No.: 1
License Type: Gas Chromatograph	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T9	
Licensee: Chem-Northern, Inc.	License No.: 7-315
Location: Phoenix	Amendment No.: 3
License Type: Portable Gauges	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T10	
Licensee: Black Rock Construction	License No.: 9-9
Location: Holbrook	Amendment No.: 1
License Type: Portable Gauge	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T11	
Licensee: Cytogam	License No.: 7-358
Location: Chandler	Amendment No.: 2
License Type: R&D Bio Lab	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91



File No. T12	
Licensee: Office of State Mine Inspector	License No.: 7-105
Location: Phoenix	Amendment No.: 10
License Type: Gas Chromatograph	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T13	
Licensee: Phoenix Endocrinology Clinic	License No.: 7-112
Location: Phoenix	Amendment No.: 12
License Type: Medical Clinic	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T14	
Licensee: Sergeant, Hauskins & Beckwith Engineering	License No.: 7-148
Location: Phoenix	Amendment No.: 31
License Type: Industrial Radiography	
Type of Licensing Action: Termination	File Reviewed on: 11/18/91
File No. T15	
Licensee: Brown & Root	License No.: 15-47
Location: Springfield	Amendment No.: 12
License Type: Industrial Radiography	
Type of Licensing Action: Termination	File Reviewed on: 11/19/91
File No. T16	
Licensee: ICB Arizona	License No.: 7-356
Location: Tempe	Amendment No.: 2
License Type: Possession (smoke detectors) under E license distribution	
Type of Licensing Action: Termination	File Reviewed on: 6/2/92
File No. T17	
Licensee: ASARCO Inc.	License No.: 10-47
Location: Mariana	Amendment No.: 19
License Type: Fixed Gauge	
Type of Licensing Action: Termination	File Reviewed on: 6/2/92
File No. T18	
Licensee: Institute for Biogerontology Research	License No.: 7-322
Location: Sun City	Amendment No.: 5
License Type: Bio-Med Laboratory	
Type of Licensing Action: Termination	File Reviewed on: 6/4/92
File No. T19	
Licensee: Consolidated Medical Services	License No.: 7-330
Location: Phoenix	Amendment No.: 2
License Type: Bio-Med (RIA)	
Type of Licensing Action: Termination	File Reviewed on: 6/4/92

File No. T20	License No.: 7-331
Licensee: Metpath of Arizona	Amendment No.: 3
Location: Phoenix	
License Type: Special Industrial (RIA)	
Type of Licensing Action: Termination	File Reviewed on: 6/6/92

File No. T21	License No.: 11-14
Licensee: Ensco Waste Treatment Division	Amendment No.: 2
Location: Maricopa	
License Type: Portable Gauge	
Type of Licensing Action: Termination	File Reviewed on: 6/6/92

File No. T22	License No.: 14-11
Licensee: Red Mountain Farming Co.	Amendment No.: 5
Location: Dateland	
License Type: Portable Gauge	
Type of Licensing Action: Termination	File Reviewed on: 6/6/92

File No. T23	License No.: 14-13
Licensee: Gowan Company	Amendment No.: 5
Location: Yuma	
License Type: Gas Chromatograph	
Type of Licensing Action: Termination	File Reviewed on: 6/6/92

<u>Comment</u>	<u>File No.</u>
1. Close-out not completed	T16, T17, T23
2. Close-out inspection was requested by RCP management, never completed	T16
3. Final disposition of RAM not verified	T16, T20
4. New jurisdiction not notified of RAM to be shipped into their State	T21
5. Freight bill was in file, but no verification by receiving party	T21
6. Inspector, reviewer, supervisor not identified in file	T23
7. Phone calls not documented	T23

## APPENDIX E

### COMPLIANCE FILE REVIEW

Eighteen compliance files were reviewed during the November 1991 visit and the June 1992 review meeting.

File No. 1	
Licensee: Honeywell-Sperry	License No.: 7-320
Location: Phoenix	
License Type: Broad Manufacturing & Distribution	File Reviewed on: 11/19/91
File No. 2	
Licensee: Honeywell, Inc.	License No.: 7-316
Location: Phoenix	
License Type: Broad Industrial	File Reviewed on: 11/19/91
File No. 3	
Licensee: Salt River Project	License No.: 7-194
Location: Phoenix	
License Type: Portable Gauge	File Reviewed on: 11/19/91
File No. 4	
Licensee: University of Arizona	License No.: 10-24 & 10-44
Location: Tucson	
License Type: Broad A Academic and Medical	File Reviewed on: 11/19/91
File No. 5	
Licensee: Phoenix Memorial Hospital	License No.: 7-77
Location: Phoenix	
License Type: Medical Type A Hospital	File Reviewed on: 11/20/91
File No. 6	
Licensee: Syncor International	License No.: 7-123
Location: Phoenix	
License Type: Nuclear Pharmacy	File Reviewed on: 11/20/91
File No. 7	
Licensee: John C. Lincoln Hospital	License No.: 7-96
Location: Phoenix	
License Type: Medical Type A	File Reviewed on: 6/3/92
File No. 8	
Licensee: Phoenix Baptist Hospital & Med. Center	License No.: 7-146
Location: Phoenix	
License Type: Medical, Group I-IV	File Reviewed on: 6/5/92
File No. 9	
Licensee: Siemens Medical Systems	License No.: 7-323
Location: Mesa	
License Type: Service, Calibration, Leak Tests	File Reviewed on: 6/5/92



File No. 10	License No.: 7-199
Licensee: Fisher Medical Physics	
Location: Tempe	
License Type: Consultant	File Reviewed on: 6/4/92
File No. 11	License No.: 10-84
Licensee: Syncor International	
Location: Tucson	
License Type: Nuclear Pharmacy	File Reviewed on: 6/4/91
File No. 12	License No.: 3-24
Licensee: Earth Engineering Associates	
Location: Cottonwood	
License Type: Portable Gauge	File Reviewed on: 6/6/92
File No. 13	License No.: 8-4
Licensee: Kingman Regional Medical Center	
Location: Kingman	
License Type: Medical Type B	File Reviewed on: 6/6/92
File No. 14	License No.: 10-119
Licensee: Cyprus Sierrita Corp.	
Location: Green Valley	
License Type: Secondary Uranium Recovery	File Reviewed on: 6/7/92
File No. 15	License No.: 7-76
Licensee: St. Luke's Medical Center	
Location: Phoenix	
License Type: Medical Type A	File Reviewed on: 6/8/72
File No. 16	License No.: 7-354
Licensee: Mayo Clinic Scottsdale	
Location: Scottsdale	
License Type: Materials R&D	File Reviewed on: 6/8/92
File No. 17	License No.: 10-86
Licensee: TLS Systems, Inc.	
Location: Tucson	
License Type: Broad Industrial	File Reviewed on: 6/8/92
File No. 18	License No.: 7-192
Licensee: Radiation Safety Engineering	
Location: Tempe	
License Type: Special Industrial	File Reviewed on: 6/10/92

<u>Comment</u>	<u>File No.</u>
1. Documentation not adequate in close-out of previous items of non-compliance, worker interviews, exit meeting	4
2. Team inspection form incomplete: missing data on disposal, leak tests, RSC minutes, security, internal audits, procurement procedures	4

### E.3

- |     |   |        |
|-----|---|--------|
| 3.  | Repeat violations noted but not escalated because of severity of State's civil penalty rule                   | 11, 17 |
| 4.  | Licensee with serious problems took over 2 months to respond; State did not press for timely action           | 12     |
| 5.  | Typo in letter gave wrong date  | 13     |
| 6.  | Licensee changed operation to storage only; State changed inspection frequency without documenting it in file | 14     |
| 7.  | No record of ancillary interviews   | 15     |
| 8.  | Licensee was cited for not making swipes; inspector should have made them, did not                            | 16     |
| 9.  | No documentation of observation of use  | 16     |
| 10. | Licensee's equipment not checked against SS&D sheet to verify device had not been changed since approval      | 17     |