

ENCLOSURE 2

U.S. NUCLEAR REGULATORY COMMISSION
REGION IV

Docket No.: 50-382
License No.: NPF-38
Report No.: 50-382/98-17
Licensee: Entergy Operations, Inc.
Facility: Waterford Steam Electric Station, Unit 3
Location: Hwy. 18
Killona, Louisiana
Dates: October 5-8, 1998
Inspector(s): J. Blair Nicholas, Ph.D., Senior Radiation Specialist
Plant Support Branch
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Plant Support Branch
Approved By: Blaine Murray, Chief, Plant Support Branch
Division of Reactor Safety
Attachment: Supplemental Information

EXECUTIVE SUMMARY

Waterford Steam Electric Station, Unit 3
NRC Inspection Report 50-382/98-17

This announced, routine inspection reviewed radiation protection program activities. Areas reviewed included: exposure controls, controls of radioactive material and contamination, surveying and monitoring, the program to maintain occupational exposure as low as is reasonably achievable (ALARA), radiation protection staff continuing training program, and quality assurance in radiation protection activities.

Plant Support

- The external exposure control program was effectively implemented. Radiation areas and high radiation areas were properly posted and controlled. Visual aids used to identify ALARA low dose waiting areas and radiological hot spots were program enhancements. Radiation work permits were clearly written. Proper dosimetry was worn by radiation workers. A good pre-job briefing for the removal of the chemical and volume control system filter was conducted. Housekeeping throughout the controlled access area was good (Section R1.1).
- An effective internal exposure program was in place. Respiratory equipment was properly stored and issued to qualified personnel. A proper air sampling program was implemented (Section R1.2).
- Radioactive material, laundry, and trash containers were properly labeled, posted, and controlled. An effective portable radiation survey instrument program, including the calibration and source response checks of instrumentation, was maintained (Section R1.3).
- A violation of 10 CFR 20.1501(a) was identified for the failure to survey an overhead work area prior to workers entering the area. The general work area dose rate was 20-22 millirems per hour (Section R1.3).
- An effective ALARA program was implemented. The 1998 exposure goal of 13 person-rem was aggressive. The station's 3-year exposure average of 109 person-rem for 1997 was below the industry average of 132 person-rem and continued to trend downward. The projected 3-year exposure average for 1998 is 62 person-rem. However, the ALARA committee was not fully supported by the training, instrument and controls, and system engineering departments. The lack of total station support for the ALARA committee had been previously identified in Inspection Report 382/98-04. The hot spot reduction program was effectively monitored; however, involving departments other than radiation protection could enhance the program (Section R1.4).
- A good radiation protection department training program was implemented. Lesson plans were comprehensive and included site and industry lessons learned. The

radiation protection department was appropriately involved in developing the training topics to help ensure that the practical and technical competence of the staff was maintained. Facilitated training critiques were a strength to the training assessment program. The two health physics technical training instructors had extensive technical and practical radiation protection experience and were qualified for their positions (Section R5.1).

- The new radiation protection superintendent (manager) satisfied the Technical Specification qualification requirements for his position (Section R5.2).
- An effective quality assurance audit, quality assurance surveillances, and radiation protection department self-assessment were completed. Timely, effective corrective actions were implemented in response to audit findings. No negative trends were identified during the review of radiological condition reports written since January 1998 (Section R7.1).
- A violation of Technical Specification 6.2.2(e) was identified for the failure to limit the hours worked by an acting health physics supervisor to 72 hours in a 7-day period. The acting health physics supervisor had worked 82 hours in a 7-day period. This is similar to a violation identified in Inspection Report 382/97-04 (Section R8.1).

Report Details

Summary of Plant Status

The plant operated at full power during the inspection.

IV. Plant Support

R1 Radiological Protection and Chemistry Controls

R1.1 External Exposure Controls

a. Inspection Scope (83750)

Selected radiation workers and radiation protection personnel involved in the external exposure control program were interviewed. A number of tours of the controlled access area was performed. The following items were reviewed:

- Controlled access area controls
- Control of high radiation areas
- Radiation work permits
- Personnel dosimetry
- Housekeeping in the controlled access area

b. Observations and Findings

The inspectors observed activities at the controlled access area entry/exit control point and noted that station workers used the personnel contamination monitoring and computerized log-in/out equipment properly. Radiation protection personnel present in this area provided timely response and direction to station workers who alarmed the personnel contamination monitors or needed assistance using the computerized log-in/out equipment.

During tours of the controlled access area, the inspectors observed that high radiation areas were properly controlled and posted. All Technical Specification required locked high radiation area doors were locked and posted, and flashing lights operated properly and were used where appropriate. Radiological postings and survey maps displayed at the entry to the rooms specified radiological conditions within the room. All radiological postings were clearly and conspicuously posted. However, the inspectors observed that there were no radiological postings which would indicate the general area dose rates and contamination levels in the hallways. This observation was discussed with the licensee during the exit meeting. The radiation protection superintendent agreed to review and evaluate the inspectors' observation.

ALARA low dose waiting areas throughout the plant were clearly identified with bright green signs and a green light that were activated by motion detectors. Hot spot

identification was enhanced by amber lights activated by motion detectors. These visual aids were considered a program enhancement.

Radiation work permits (RWPs) were clearly written. The RWPs were subdivided into specific tasks that helped workers to clearly understand the radiological controls and monitoring required for each task.

All radiation workers observed wore their dosimetry properly. Radiation protection job coverage was appropriate for radiological work observed.

The inspectors attended a pre-job ALARA briefing for the removal of the chemical and volume control system filter. The briefing was conducted in an effective manner by a health physics supervisor, who was assisted by the ALARA coordinator. The briefing provided the workers with radiological conditions in the work area, the expected radiological conditions while the filter was being removed from the system, stop work radiator levels, and RWP requirements. However, the inspectors noted that copies of radiator survey maps and the RWP were not distributed or displayed to the workers so that they could actually follow along and review them during the briefing. A video of a previously performed chemical and volume control system filter changeout was shown to illustrate and discuss lessons learned. A mockup of an improved rope and clip arrangement to be attached to the top of the filter for filter removal was demonstrated by the ALARA coordinator as an improvement from a previously encountered problem. However, the inspectors noted that the mechanics assigned to perform the filter removal were not given an opportunity to practice using the mockup prior to performing the job. This item was discussed with the licensee during the exit meeting, and radiation protection department management acknowledged that the inspectors' observation would be given consideration during future briefings.

The inspectors observed that housekeeping throughout the controlled access area was good.

c. Conclusions

The external exposure control program was effectively implemented. Radiation protection personnel at the controlled access area entry/exit control point provided timely response and direction to station workers who alarmed the personnel contamination monitor or needed assistance using the computerized log-in/out equipment. Radiation areas and high radiation areas were properly posted and controlled. Visual aids used to identify ALARA low dose waiting areas and radiological hot spots were program enhancements. Radiation work permits were clearly written. Proper dosimetry was worn by radiation workers. A good pre-job briefing was conducted. Housekeeping throughout the controlled access area was good.

R1.2 Internal Exposure Controls

a. Inspection Scope (83750)

Selected radiation protection personnel involved with the internal exposure control program were interviewed. The following items were reviewed:

- Respiratory protection program
- Continuous air sampling
- Portable air sampling

b. Observations and Findings

The inspectors noted that respiratory equipment was properly stored. Only two full-faced, negative-pressure respirators were issued for radiological work during 1998. From a review of the respirator issue log, the inspectors determined that respirators were only issued to qualified individuals. Additionally, proper total effective dose equivalent/as low as is reasonably achievable (TEDE/ALARA) evaluations were completed to justify respiratory use.

Continuous air monitors and portable air samplers used for job coverage were properly placed to evaluate airborne radiological conditions during work evolutions. Air sampling was implemented properly.

c. Conclusions

An effective internal exposure program was in place. Respiratory equipment was properly stored and issued to qualified personnel. Air sampling was effectively implemented.

R1.3 Control of Radioactive Materials and Contamination; Surveying and Monitoring

a. Inspection Scope (83750)

Areas reviewed included:

- Control of radioactive material
- Portable instrumentation calibration and performance checking programs
- Adequacy of the surveys necessary to assess personnel exposure

b. Observations and Findings

During tours of the controlled access area, the inspectors noted that all radioactive material containers were properly labeled, posted, and controlled. All laundry and trash containers were properly maintained. Contaminated areas were appropriately posted and clearly identified. Independent radiological survey measurements performed during the tours of the controlled access area confirmed that area radiological postings

reflected general radiological conditions in the rooms and were in compliance with regulatory requirements.

The inspectors reviewed the portable radiation survey instrument program, including the calibration and source response checks of instrumentation. All instrumentation observed in use in the controlled access area was properly calibrated, and source response checked in accordance with station procedures.

During a tour of the controlled access area on October 5, 1998, the inspectors noted that a scaffolding platform had been erected in the "A" shutdown cooling heat exchanger room. The inspectors determined that the scaffolding was erected on September 9, 1998. On September 10 and September 24, 1998, operations personnel used the scaffolding platform to perform filling and venting of the chemical volume control system. Radiation surveys of an overhead work area were not performed and documented prior to operations personnel entering the area. At the request of the inspectors on October 6, 1998, the licensee performed a radiation survey of the overhead work area. The survey indicated that dose rates on the scaffolding platform were as high as 36 millirems per hour on contact and 20-22 millirems per hour general area. 10 CFR 20.1501(a) requires each licensee make or cause to be made, surveys that may be necessary for the licensee to comply with the regulations in 10 CFR Part 20 and are reasonable under the circumstances to evaluate the extent of radiation levels, concentration or quantities of radioactive material, and the potential radiological hazards that could be present. 10 CFR 20.1003 defines a survey as a means of evaluation of the radiological conditions and potential hazards incident to the production, use, transfer, release, disposal, or presence of radioactive material or other sources of radiation. The failure to perform surveys that were necessary to determine and evaluate the radiation levels and potential radiological hazards that could be present in the overhead work area is a violation of 10 CFR 20.1501(a) (358/9817-01).

On October 7, 1998, the licensee documented this issue in Condition Report CR-WF3-1998-1314. Corrective actions documented in CR-WF3-1998-1314 were (1) a cc-mail (e-mail) messages were distributed to all radiation protection personnel on October 20 and 21, 1998, reinforcing the expectations for performing and documenting overhead and scaffolding surveys, and (2) a training request (TR-980642) was submitted on October 16, 1998, to provide guidance in Radiation Worker Training on the need to ensure that a health physics scaffold tag is in place prior to using the scaffolding.

The inspectors reviewed the licensee's immediate and proposed long-term corrective actions pertaining to this event and determined that, if implemented, they will likely prevent a similar occurrence. The inspectors determined that the licensee's corrective actions were appropriate to address this issue.

c. Conclusions

Radioactive material, laundry, and trash containers were properly labeled, posted, and controlled. An effective portable radiation survey instrument program, including the calibration and source response checks of instrumentation was maintained. A violation was identified for the failure to survey an overhead work area prior to workers entering the area.

R1.4 Maintaining Occupational Exposure As Low As is Reasonably Achievable (ALARA)

a. Inspection Scope (83750)

Radiation protection personnel involved with the ALARA program were interviewed. The following areas were reviewed:

- Exposure goal establishment and status
- Hot spot reduction program
- ALARA suggestion program

b. Observations and Findings

The inspectors determined that the 1998 normal operation exposure goal of 13 person-rem was aggressive and established using the station's best past performance. Additionally, the exposure goal was being properly tracked and trended monthly by the ALARA coordinator. Exposure status was distributed to, and monitored by, station departments. The inspectors noted that the station's 3-year exposure average of 109 person-rem for 1997 was below the industry average of 132 person-rem and continued to trend downward. The station's projected 3-year exposure average for 1998 is 62 person-rem.

ALARA committee meeting minutes for the four meetings conducted since January 1, 1998, were reviewed. The inspectors noted that the meetings were conducted at the suggested frequency. However, training, instrument and controls, and system engineering departments had attended only 50 percent of the meetings. The lack of total station support for the ALARA committee was previously identified in Inspection Report 382/98-04. The inspectors commented that total station support was needed to maintain a successful ALARA program. The licensee acknowledged the inspectors' comment.

Since January 1, 1998, 12 ALARA suggestions were submitted. All ALARA suggestions were properly tracked and evaluated. As of October 1, 1998, six of the ALARA suggestions were closed, and five of the six were implemented.

Eighteen hot spots were located throughout the controlled access area. Hot spots were properly updated, tracked, and trended by the ALARA coordinator. However, a priority for eliminating hot spots had not been established. Additionally, the amount of contributing dose to station personnel from these hot spots was not known. The inspectors commented that this information was important to determine the need to

eliminate any of the hot spots. The inspectors observed that the hot spot reduction program was the sole responsibility of the ALARA coordinator. The inspectors commented that involving other departments, such as operations, in the removal of hot spots had proven to be successful in reducing hot spots at other nuclear power facilities. The licensee acknowledged the inspectors' comment.

c. Conclusions

An effective ALARA program was implemented. The 1998 exposure goal of 13 person-rem was aggressive. The station's 3-year exposure average of 109 person-rem for 1997 was below the industry average of 132 person-rem and continued to trend downward. The projected 3-year exposure average for 1998 is 62 person-rem. The ALARA committee was not fully supported by the training, instrument and controls, and system engineering departments. The lack of total station support for the ALARA committee had been previously identified in Inspection Report 382/98-04. The ALARA coordinator had properly tracked and evaluated the ALARA suggestions submitted in 1998. The hot spot reduction program was effectively monitored; however, involving departments other than radiation protection could enhance the program.

R5 Staff Training and Qualification

R5.1 Radiation Protection Staff Training

a. Inspection Scope (83750)

Personnel involved with radiation protection training were interviewed. The following items were reviewed:

- Radiation protection department training program
- Radiation protection instructor qualifications

b. Observations and Findings

The radiation protection department's training program included appropriate topics to ensure that the radiation protection staff maintained practical and technical competence. The training schedule showed that training was provided to the radiation protection staff during two 5-week cycles scheduled during the year. The radiation protection training review group meeting minutes revealed that training requests were reviewed and evaluated. The inspectors noted that the membership of the radiation protection training review group included appropriate radiation protection management and staff who were involved in developing the training topics. Lesson plans were comprehensive and included site and industry lessons learned.

Facilitated training critiques submitted by radiation protection personnel following training presentations provided the training staff with critical feedback of training course material. The inspectors considered these critiques a strength to the training program.

Through interviews and a review of the two training department health physics instructors' resumes, the inspectors determined that both instructors had strong technical and operational radiation protection backgrounds, including a number of years of applied radiation protection experience. Both instructors were registered by the National Registry of Radiation Protection Technologists. The inspectors determined that both individuals were qualified for their positions. Additionally, to maintain technical competence and remain current with station procedures and radiation protection practices, the two training department instructors worked for the radiation protection staff during outages. However, the inspectors noted that the training instructors did not follow up their training presentations by going into the plant to evaluate the training effectiveness. The licensee acknowledged the inspectors' observation.

c. Conclusions

A good radiation protection department continuing training program was implemented. Lesson plans were comprehensive and included site and industry lessons learned. The radiation protection department was appropriately involved in developing the continuing training topics to help ensure that the practical and technical competence of the staff was maintained. Facilitated training critiques were a strength to the training program. The two training department health physics instructors had extensive technical and applied radiation protection experience and were qualified for their positions.

R5.2 Radiation Protection Staff Qualifications

a. Inspection Scope (83750)

The inspectors reviewed the qualifications of the new radiation protection superintendent.

b. Observations and Findings

Due to a recent staff change, a new individual was designated to fill the radiation protection superintendent position. Technical Specification 6.3.1.b requires that the individual filling the position of radiation protection superintendent (manager) meet or exceed the qualifications of USNRC Regulatory Guide 1.8, September 1975. From a review of the new radiation protection superintendent's resume, the inspectors determined that this individual satisfied the requirements of USNRC Regulatory Guide 1.8, September 1975.

c. Conclusions

The new radiation protection superintendent (manager) satisfied the requirements of USNRC Regulatory Guide 1.8, September 1975.

R7 Quality Assurance in Radiological Protection and Chemistry Activities

R7.1 Quality Assurance Audits and Surveillances, and Radiation Department Self-Assessments and Radiological Condition Reports

a. Inspection Scope (83750)

Selected personnel involved with the performance of quality assurance audits, quality assurance surveillances, and radiation protection department self-assessments were interviewed. The following items were reviewed:

- Quality assurance audit performed since January 1, 1998
- Quality assurance surveillances performed since January 1, 1998
- Radiation protection department self-assessment performed since January 1, 1998
- Radiological condition reports written since January 1, 1998

b. Observations and Findings

Quality Assurance Audit and Surveillance Reports

The two primary quality assurance auditors involved in the oversight of the radiation protection program had a number of years of practical radiation protection experience, and one of the auditors was registered by the National Registry of Radiation Protection Technologists. The inspectors determined that the quality assurance auditors assigned to assess the radiation protection program were properly qualified.

One audit (SA-98-014.1) was performed since the last inspection of this area in March 1998. The audit evaluated the effectiveness of the radiological respiratory protection and contamination control programs. No problems were noted during the review of the audit plan and checklist used to perform the audit. The audit identified four findings and two recommendations. The findings were properly documented in condition reports. Timely, effective corrective actions were implemented in response to audit findings. The inspectors determined that the auditors who conducted the audit were also involved in reviewing the closure of the findings.

Six operational radiation protection quality assurance surveillances were completed. One of these surveillances reviewed the requirements of a radiation work permit for containment power entry, two were involved with radiation protection activities associated with the spent resin spill recovery, and the other three surveillances involved walkdowns of various areas within the plant. Observations in the radiation protection program areas were corrected in a timely manner.

The quality assurance audit and surveillances provided management with good assessments of the radiation protection program areas reviewed.

Department Self-Assessments

One radiation protection department self-assessment was performed since January 1998. The self-assessment was conducted in February 1998 and reviewed the effectiveness of radiological postings and tagging/labeling of radioactive material. The inspectors noted that this self-assessment was performed by two technical specialists from other Entergy nuclear power facilities. Thirty observations were identified during the assessment. Many of the observations were corrected immediately during the assessment. The inspectors determined that the self-assessment provided management with a good evaluation of the radiation protection program areas reviewed.

Radiological Condition Reports

The inspectors reviewed selected radiological condition reports written since January 1, 1998. The review revealed that the licensee identified items at the proper threshold to provide management with a good overview of radiological program areas. Corrective actions to prevent a recurrence appeared to be effective to resolve the problem addressed in the condition report and, in general, condition reports were closed in a timely manner. The inspectors identified no negative trends during this review.

c. Conclusions

A good quality assurance audit program was maintained. One audit and six operational radiation protection quality assurance surveillances were completed since January 1998 and provided management with a good assessment of the areas reviewed. The department self-assessment provided management with an effective assessment of the program areas reviewed. Timely, effective corrective actions were implemented in response to audit findings. No negative trends were identified during the review of radiological condition reports written since January 1998.

R8 Miscellaneous Radiological Protection and Chemistry Issues

- R8.1 On October 7, 1993, the inspectors reviewed the time sheets for the radiation protection personnel involved with the spent fuel pool re-rack job. The review of hours worked by an acting health physics supervisor revealed that between August 24 and September 5, 1998, the individual worked 82 hours in a 7-day period. Technical Specification 6.2.2(e) requires, in part, that administrative procedures be developed and implemented to limit the working hours of individuals of the nuclear plant operating staff. Section 5.1.1 of Procedure UNT-005-005, "Working Hour Policy for Nuclear Safety-Related Work," Revision 5, states, in part, working hours policies are listed below and are applicable for members of the Waterford-3 plant staff. This includes, but not limited to, health physics technicians and their supervisors. Section 5.1.1.1 of this procedure states, in part, an individual shall not work more than 72 hours in a 7-day period. The failure to limit the hours worked by an acting health physics supervisor in a 7-day period is a violation of

Technical Specification 6.2.2(e) (382/9817-02). This violation is similar to a violation cited in Inspection Report 382/97-04 which identified numerous examples of the failure to comply with the Technical Specification requirements for use of overtime. Specifically, six individuals exceeded 72 hours in a 7-day period.

On October 7, 1998, the licensee issued Condition Report CR-WF3-1998-1309 in response to violation 382/9817-02. Corrective actions addressed in CR-WF3-1998-1309 included: (1) the individual violating the work hour policy was counseled, and (2) the condition report and the details of the work hour policy will be discussed with radiation protection personnel at the monthly training session on October 16, 1998. During the review of the condition report, the inspectors determined that the above corrective actions were narrowly focused on the radiation protection department and did not address the potential process control/management oversight problems in light of a previous identified violation.

The inspectors reviewed the licensee's corrective actions in response to violation 50-382/9704-01. The corrective actions included the following: (1) briefing station departments, including the radiation protection department, on the root cause of the violation and resultant corrective actions; (2) implementation of Revision 5 to Procedure UNT-005-005 to clarify the working-hour policy; (3) the quality assurance department had incorporated an evaluation of department compliance with the working-hour policy into their audit program; and (4) the quality assurance department had audited the operations and radiation protection departments and found these departments in compliance with the working-hour policy guidelines. However, the inspectors determined that the corrective actions for the violation identified during inspection 382/97-04 were not effective in preventing a similar occurrence.

R8.2 (Closed) Violation 50-382/9804-01: Failure to perform adequate surveys

The inspectors verified the corrective actions described in the licensee's response letter dated April 2, 1998, were implemented. No similar radiological survey problems were identified.

R8.3 (Closed) Violation 50-382/9804-03: Failure to initiate a condition report

The inspectors verified the corrective actions described in the licensee's response letter dated April 2, 1998, were implemented. No similar problems were identified.

R8.4 (Closed) Violation 50-382/9807-01: Failure to perform radiological surveys

The inspectors verified the corrective actions described in the licensee's response letter dated April 13, 1998, were implemented. No similar radiological survey problems were identified.

V. Management Meetings

X1 Exit Meeting Summary

The inspectors presented the inspection results to members of licensee management at an exit meeting on October 8, 1998. The licensee acknowledged the findings presented. No proprietary information was identified.

ATTACHMENT

PARTIAL LIST OF PERSONS CONTACTED

Licensee

C. Dugger, Vice President, Operations
A. Bergeron, Superintendent, Chemistry/Environmental
R. Burski, Director, Site Support
L. Dausat, Supervisor, Radiation Protection
C. DeDeaury, Supervisor, Licensing
R. Douet, Manager, Maintenance
E. Ewing, Director, Nuclear Safety and Regulatory Affairs
C. Fugute, Superintendent, Operations
A. Harris, Manager, Plant Engineering
P. Kelly, Supervisor, Radiation Protection
T. Leonard, General Manager, Plant Operations
T. Lett, Superintendent, Radiation Protection
B. Matherne, Supervisor, Technical Training
D. Miller, ALARA Specialist, Radiation Protection
D. Newman, Quality Specialist, Quality Assurance
J. Noehl, Radiation Protection Instructor, Technical Training
J. O'Hern, Director, Training and Emergency Planning
G. Pierce, Director, Quality Assurance
D. Rieder, Quality Assurance Engineer, Quality Assurance
R. Sebring, Acting Supervisor, Radiation Protection
G. Scott, Licensing Engineer, Licensing
M. VanDerHorst, Radiation Protection Instructor, Technical Training
A. Wrape, Director, Design Engineering
D. Young, Lead Licensing Engineer, Licensing

NRC

J. Keeton, Resident Inspector

INSPECTION PROCEDURE USED

83750

Occupational Radiation Exposure

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

50-382/9817-02 VIO Excessive overtime hours
50-382/9817-01 VIO Failure to survey an overhead work area created by scaffolding

Closed

50-382/9804-01 VIO Failure to survey adequately
50-382/9804-03 VIO Failure to initiate a condition report
50-382/9807-01 VIO Failure to perform radiological surveys

LIST OF DOCUMENTS REVIEWED

ORGANIZATION CHART

Radiation Protection Department

QUALITY ASSURANCE AUDIT, SURVEILLANCES, AND DEPARTMENTAL
SELF-ASSESSMENT

Audit Report SA-98-014.1, "Radioactive Contamination/Respiratory Control," conducted June 26 through August 6, 1998

Surveillance Report QS-98-004, "Quality Assurance Plant Walkdowns," conducted January 1-14, 1998

Surveillance Report QS-98-009, "Review of Containment Power Entry and Radiation Work Permit (RWP) 98-0037," conducted February 4, 1998

Surveillance Report QS-98-019, "Radiation Protection Activities Associated with the Spent Resin Spill Recovery," conducted February 5 through March 9, 1998

Surveillance Report QS-98-022, "Quality Assurance Plant Walkdowns," conducted March 26 through April 8, 1998

Surveillance Report QS-98-033, "Radiation Protection Activities During Spent Resin Spill Recovery (5/26/98)," conducted May 26-29, 1998

Surveillance Report QS-98-041, "Quality Assurance Plant Walkdowns," conducted June 25 through July 8, 1998

Radiation Protection Departmental Self-Assessment, "Radiological Postings Tagging/Labeling Radioactive Material," conducted February 24 - 25, 1998

PROCEDURES

UNT-001-016	Radiation Protection Manual, Revision 0
UNT-005-022	Controlled Access Area Entry/Exit, Revision 11
HP-001-107	High Radiation Area Access Control, Revision 12
HP-001-110	Radiation Work Permits, Revision 17
HP-001-117	Hot Spot Identification/Action Report, Revision 3
HP-001-152	Radioactive Material Control, Revision 13
HP-001-160	Use of Respiratory Protection Equipment, Revision 15
HP-001219	Radiological Posting Requirements, Revision 15

OTHER

Selected radiological Condition Reports (01/01/98 - 10/01/98)