



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
WASHINGTON, D.C. 20555-0001

December 7, 2021

Mr. André Ourso, MPH, JD, Center Administrator  
Center for Health Protection  
Public Health Division  
Oregon Health Authority  
800 NE Oregon Street, Suite 640  
Portland, OR 97232-2162

Dear Mr. Ourso:

On November 10, 2021, the Management Review Board (MRB), which consisted of U.S. Nuclear Regulatory Commission (NRC) senior managers and an Organization of Agreement States MRB member, met to consider the results of the Integrated Materials Performance Evaluation Program (IMPEP) review of the Oregon Agreement State Program. The MRB Chair in consultation with the MRB found the Oregon Agreement State Program adequate to protect public health and safety and compatible with the NRC's program.

The enclosed final report documents the IMPEP team's findings and summarizes the results of the MRB meeting including the closure of the recommendation from the 2017 IMPEP review and the introduction of a new recommendation related to the Technical Quality of Incidents and Allegation Activities performance indicator. Based on the results of the current IMPEP review, the MRB directed that the next periodic meeting take place in approximately 2.5 years and the next IMPEP review take place in approximately 5 years.

I appreciate the courtesy and cooperation extended to the IMPEP team during the review. I also wish to acknowledge your continued support for the Agreement State program. I look forward to our agencies continuing to work cooperatively in the future.

Sincerely,

A handwritten signature in cursive script that reads "Catherine Haney".

Signed by Haney, Cathy  
on 12/07/21

Catherine Haney  
Deputy Executive Director for Materials, Waste,  
Research, State, Tribal, Compliance, Administration,  
and Human Capital Programs  
Office of the Executive Director for Operations

Enclosure:  
Final Oregon Agreement State Program  
IMPEP Report

cc: Mr. David M. Howe, M.A., Program Director  
Radiation Protection Services  
Center for Health Protection  
Public Health Division

SUBJECT: FINAL OREGON AGREEMENT STATE PROGRAM INTEGRATED  
 MATERIALS PERFORMANCE EVALUATION PROGRAM REPORT  
 DATE – DECEMBER 7, 2021

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**OREGON AGREEMENT STATE PROGRAM  
INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM REVIEW**

**AUGUST 9-13, 2021**

**FINAL REPORT**

**Enclosure**

## EXECUTIVE SUMMARY

The results of the Integrated Materials Performance Evaluation Program (IMPEP) review of the Oregon Agreement State Program (Oregon) are discussed in this report. The review was conducted on site from August 9-13, 2021, by a team of technical staff members assembled from the U.S. Nuclear Regulatory Commission (NRC) and the States of Kansas and North Dakota. Three in-person inspector accompaniments were conducted on June 15-17, 2021.

The team found Oregon's performance to be satisfactory for all performance indicators:

- Technical Staffing and Training;
- Status of Materials Inspection Program;
- Technical Quality of Inspections;
- Technical Quality of Licensing Actions;
- Technical Quality of Incident and Allegation Activities; and
- Legislation, Regulations, and Other Program Elements.

The team made one new recommendation from its review of the Technical Quality of Incidents and Allegation Activities performance indicator and determined that the recommendation from the 2017 IMPEP review be closed. The new recommendation is:

- The team recommends that Oregon develop a process to ensure allegations and incidents are documented at inception, to ensure status updates are included in the log, and to ensure proper closure of incidents and allegations in a manner that all inspectors have access to maintain and update and ensuring that all information is comprehensive and consistent from one inspector to another. As part of this recommendation, Oregon will also perform a retrospective review of events from 2017 to present to ensure appropriate supporting information is documented in the log.

Accordingly, the team recommended, and the Management Review Board (MRB) Chair Agreed that the Oregon Agreement State Program be found adequate to protect public health and safety and compatible with the NRC's program. Since this was Oregon's second consecutive IMPEP review with all indicators found satisfactory, the team recommended and the MRB Chair agreed, that the next periodic meeting take place in approximately 2.5 years with the next full IMPEP review taking place in approximately 5 years.

## 1.0 INTRODUCTION

The Oregon Agreement State Program (Oregon) review was conducted in person from August 9-13, 2021, by a team of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the States of Kansas and North Dakota. Team members are identified in Appendix A. This review was conducted on site and in-person inspector accompaniments were conducted on June 15-17, 2021.

The review was conducted in accordance with the "Agreement State Program Policy Statement," published in the *Federal Register* (FR) on October 18, 2017 (82 FR 48535), and NRC Management Directive (MD) 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)," dated July 24, 2019. In addition, the team considered IMPEP Temporary Instruction 003, "Evaluating the Impacts of the COVID-19 Public Health Emergency as Part of Integrated Materials Performance Evaluation Program (IMPEP)," dated October 21, 2020, to evaluate the impact of the COVID-19 pandemic on the Program. Preliminary results of the review, which covered the period of August 12, 2017 to August 13, 2021, were discussed with the Oregon managers on the last day of the review.

In preparation for the review, a questionnaire addressing the common performance indicators and applicable non-common performance indicators was sent to Oregon on January 13, 2021. Oregon's June 21, 2021 response to the questionnaire is available in the NRC's Agencywide Documents Access and Management System (ADAMS) using the Accession Number [ML21256A258](#).

Oregon is administered by the Radiation Protection Services Section which is located within the Center for Health Protection (the Center). The Center is part of the Oregon Public Health Division (the Division). The Division is a part of the Oregon Health Authority. Organization charts for Oregon are available in ADAMS (Accession Number [ML21256A142](#)).

A draft of this report was issued to Oregon on September 22, 2021, for factual review and an opportunity to comment (ADAMS Accession No. [ML21256A172](#)). Oregon responded to the draft report with no comments via letter dated October 19, 2021, from David M. Howe, Program Director, Radiation Protection Services Section (ADAMS Accession No. [ML21293A021](#)). The Management Review Board (MRB) was convened on November 10, 2021, to discuss the team's findings and recommendations. This meeting was conducted remotely given travel restrictions imposed by the COVID-19 pandemic.

At the time of the review, Oregon regulated 276 specific licenses authorizing possession and use of radioactive materials. The review focused on the radiation control program as it is carried out under Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the State of Oregon.

The team evaluated the information gathered against the established criteria for each common and applicable non-common performance indicator and made a preliminary assessment of the Oregon's performance.

## 2.0 PREVIOUS IMPEP REVIEW AND STATUS OF RECOMMENDATIONS

The previous IMPEP review concluded on August 11, 2017. The final report is available in ADAMS (Accession No. [ML17304A423](#)). The results of the review are as follows:

Technical Staffing and Training: Satisfactory

Recommendation: None

Status of Materials Inspection Program: Satisfactory

Recommendation: None

Technical Quality of Inspections: Satisfactory

Recommendation: None

Technical Quality of Licensing Actions: Satisfactory

Recommendation: The MRB recommended that Oregon complete a quality assurance (QA) review of licenses to ensure their program code, description, and inspection frequency accurately reflect the authorizations on the license.

Status: The team noted that prior to the August 2019 periodic meeting, the Program completed a QA review of their licensing database. As a result of this QA review, the Program made corrections to the program codes, descriptions, and inspection frequencies, where necessary. The review team also noted that the Program developed a process to increase the integrity of the program by ensuring routine verification of program codes, descriptions, and inspection frequencies are accurately reflected in the licensing authorizations, prior to completing any licensing action or inspection. The team evaluated and discussed the changes with Oregon and concluded that the new process will achieve the expected outcome. Based on the results of the review, the team recommends that this recommendation be closed.

Technical Quality of Incident and Allegation Activities: Satisfactory

Recommendation: None

Legislation, Regulations and Other Program Elements: Satisfactory

Recommendation: None

Overall finding: Adequate to protect public health and safety and compatible with the NRC's program.

## 3.0 COMMON PERFORMANCE INDICATORS

Five common performance indicators are used to review the NRC and Agreement State radiation control programs. These indicators are: (1) Technical Staffing and Training, (2) Status of Materials Inspection Program, (3) Technical Quality of Inspections, (4) Technical Quality of Licensing Actions, and (5) Technical Quality of Incident and Allegation Activities.

### 3.1 Technical Staffing and Training

The ability to conduct effective licensing and inspection programs is largely dependent on having a sufficient number of experienced, knowledgeable, and well-trained technical personnel. Under certain conditions, staff turnover could have an adverse effect on the implementation of these programs and could affect public health and safety. Apparent trends in staffing must be assessed. Review of staffing also requires consideration and

evaluation of the levels of training and qualification. The evaluation standard measures the overall quality of training available to, and taken by, materials program personnel.

a. Scope

The team used the guidance in State Agreements procedure SA-103, "Reviewing the Common Performance Indicator: Technical Staffing and Training," and evaluated Oregon's performance with respect to the following performance indicator objectives:

- A well-conceived and balanced staffing strategy has been implemented throughout the review period.
- Any vacancies, especially senior-level positions, are filled in a timely manner.
- There is a balance in staffing of the licensing and inspection programs.
- Management is committed to training and staff qualification.
- Agreement State training and qualification program is equivalent to NRC Inspection Manual Chapter (IMC) 1248, "Formal Qualifications Program for Federal and State Material and Environmental Management Programs."
- Qualification criteria for new technical staff are established and are followed, or qualification criteria will be established if new staff members are hired.
- Individuals performing materials licensing and inspection activities are adequately qualified and trained to perform their duties.
- License reviewers and inspectors are trained and qualified in a reasonable period of time.

b. Discussion

When fully staffed Oregon is comprised of 15 staff members (9 technical staff members, 3 administrative staff members, 2 first line supervisors, and the Program Director) which equals 6.75 full-time equivalent. At the time of the review, Oregon had two vacancies; one technical position and one administrative position which have been approved by the Oregon program managers to fill. During the review period, four staff members left the Program, and three staff members were hired. The positions were vacant from 4 to 5 months. Recent legislation passed will allow Oregon to hire two additional technical positions in calendar year 2022.

Oregon has a well-documented training and qualification program that is compatible with the NRC's IMC 1248. The Oregon Program staff uses a Licensing and Inspection Training Journal to document competency. The journal contains completion of training, on the job training, qualifications, and continuing education. Full qualification requires approval by first line supervision and the Program Director. Oregon mentors' new employees in the field during inspections and performs peer reviews of all licensing actions.

c. Evaluation

The team determined that, during the review period, Oregon met the performance indicator objectives listed in Section 3.1.a. Based on the criteria in MD 5.6, the team recommended that Oregon's performance with respect to the indicator, Technical Staffing and Training, be found satisfactory.

d. MRB Chair's Determination

The MRB Chair agreed with the team's recommendation and found Oregon's performance with respect to this indicator satisfactory.

3.2 Status of Materials Inspection Program

Periodic inspections of licensed operations are essential to ensure that activities are being conducted in compliance with regulatory requirements and consistent with good safety and security practices. The frequency of inspections is specified in IMC 2800, "Materials Inspection Program," and is dependent on the amount and type of radioactive material, the type of operation licensed, and the results of previous inspections. There must be a capability for maintaining and retrieving statistical data on the status of the inspection program.

a. Scope

The team used the guidance in State Agreements procedure SA-101, "Reviewing the Common Performance Indicator: Status of the Materials Inspection Program," and evaluated Oregon's performance with respect to the following performance indicator objectives:

- Initial inspections and inspections of Priority 1, 2, and 3 licensees are performed at the prescribed frequencies prescribed in IMC 2800.
- Deviations from inspection schedules are normally coordinated between technical staff and management.
- There is a plan to perform any overdue inspections and reschedule any missed or deferred inspections, or a basis has been established for not performing any overdue inspections or rescheduling any missed or deferred inspections.
- Candidate licensees working under reciprocity are inspected in accordance with the criteria prescribed in IMC 2800 and other applicable guidance or compatible Agreement State Procedure.
- Inspection findings are communicated to licensees in a timely manner (30 calendar days, or 45 days for a team inspection), as specified in IMC 0610, "Nuclear Material Safety and Safeguards Inspection Reports."

b. Discussion

Oregon performed 98 Priority 1, 2, 3, and initial inspections during the review period. Oregon conducted two overdue inspections as a result of the COVID-19 pandemic. The team noted that Temporary Instruction 003, "Evaluating the Impacts of the COVID-19 Public Health Emergency as part of the Integrated Materials Performance Evaluation Program (IMPEP)," states, in part, that for inspections that exceed the scheduling window with overdue dates falling inside the defined timeframe of the COVID-19 pandemic, the number of overdue inspections should be noted in the report but should not be counted in the calculation of overdue inspections, provided that Oregon continues to maintain health, safety, and security. The team concluded that Oregon continued to maintain health, safety, and security during the pandemic and therefore, did not include these two inspections when performing the calculation. No other Priority 1, 2, 3 or initial inspections were conducted overdue during the review period.

A sampling of five inspection reports indicated that the inspection findings were communicated to the licensees within Oregon's goal of 30 days after the inspection exit or 45 days after the team inspection exit. Inspectors provide an inspection report which details the findings of the inspection to the licensee at the inspection exit meeting.

Each year of the review period, Oregon performed greater than 20 percent of candidate reciprocity inspections. In the future, Oregon plans to perform 10 percent of candidate reciprocity inspections, which is consistent with guidance in NRC IMC 2800.

c. Evaluation

The team determined that, during the review period, Oregon met the performance indicator objectives listed in Section 3.2.a. Based on the criteria in MD 5.6, the team recommended that Oregon's performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

d. MRB Chair's Determination

The MRB Chair agreed with the team's recommendation and found Oregon's performance with respect to this indicator satisfactory.

3.3 Technical Quality of Inspections

Inspections, both routine and reactive, provide reasonable assurance that licensee activities are carried out in a safe and secure manner. Accompaniments of inspectors performing inspections and the critical evaluation of inspection records are used to assess the technical quality of an inspection program.

a. Scope

The team used the guidance in State Agreements procedure SA-102, "Reviewing the Common Performance Indicator: Technical Quality of Inspections," and evaluated Oregon's performance with respect to the following performance indicator objectives:

- Inspections of licensed activities focus on health, safety, and security.
- Inspection findings are well-founded and properly documented in reports.
- Management promptly reviews inspection results.
- Procedures are in place and used to help identify root causes and poor licensee performance.
- Inspections address previously identified open items and violations.
- Inspection findings lead to appropriate and prompt regulatory action.
- Supervisors, or senior staff as appropriate, conduct annual accompaniments of each inspector to assess performance and assure consistent application of inspection policies.
- For Programs with separate licensing and inspection staffs, procedures are established and followed to provide feedback information to license reviewers.
- Inspection guides are compatible with NRC guidance.
- An adequate supply of calibrated survey instruments is available to support the inspection program.

b. Discussion

The team evaluated 26 inspection reports and enforcement documentation, and interviewed inspectors involved in materials inspections conducted during the review period. The team reviewed casework for inspections conducted by eight current and former Oregon inspectors and covered medical, industrial, commercial, academic, research, and service licenses.

Team members accompanied three inspectors on June 15-17, 2021. The inspector accompaniments were conducted in person. The inspector accompaniments are identified in Appendix B of this report. No performance issues were noted during the inspector accompaniments. The inspectors were well-prepared, thorough, and appropriately assessed the impact of licensed activities on health, safety, and security. The inspectors clearly communicated the inspection findings to licensees at the exit meeting.

Supervisory accompaniments were conducted annually for all inspectors.

Because of travel restrictions in place due to the COVID-19 pandemic, the Oregon Program performed virtual inspections between March-August 2020.

The team found that inspection results were well documented with respect to health, safety, and security. The team also found that cited violations were supported by the State of Oregon regulations and that inspection findings led to appropriate and prompt regulatory actions. Oregon's inspection documentation included the closure of previous violations and the documenting of open items.

The team noted that Oregon holds monthly Materials Program staff meetings. Items discussed during these meetings included open licensing actions, status of inspections, open inspection reports, open incidents, reciprocity status and staff training. The Oregon Program uses this information to keep staff updated, remain current in their actions, and prioritize workload.

The team determined that Oregon has a sufficient supply of calibrated radiation survey instruments to support the inspection program. Records indicate that all survey instrumentation is calibrated on an annual basis.

c. Evaluation

The team determined that, during the review period, Oregon met the performance indicator objectives listed in Section 3.3.a. Based on the criteria in MD 5.6, the team recommended that Oregon's performance with respect to the indicator, Technical Quality of Inspections be found satisfactory.

d. MRB Chair's Determination

The MRB Chair agreed with the team's recommendation and found Oregon's performance with respect to this indicator satisfactory.

3.4 Technical Quality of Licensing Actions

The quality, thoroughness, and timeliness of licensing actions can have a direct bearing on public health and safety, as well as security. An assessment of licensing procedures,

implementation of those procedures, and documentation of communications and associated actions between the Oregon licensing staff and regulated community is a significant indicator of the overall quality of the licensing program.

a. Scope

The team used the guidance in State Agreements procedure SA-104, "Reviewing the Common Performance Indicator: Technical Quality of Licensing Actions," and evaluated Oregon's performance with respect to the following performance indicator objectives:

- Licensing action reviews are thorough, complete, consistent, and of acceptable technical quality with health, safety, and security issues properly addressed.
- Essential elements of license applications have been submitted and elements are consistent with current regulatory guidance (e.g., pre-licensing guidance, Title 10 *Code of Federal Regulation* (10 CFR) Part 37, financial assurance, etc.).
- License reviewers, if applicable, have the proper signature authority for the cases they review independently.
- License conditions are stated clearly and can be inspected.
- Deficiency letters clearly state regulatory positions and are used at the proper time.
- Reviews of renewal applications demonstrate a thorough analysis of a licensee's inspection and enforcement history.
- Applicable guidance documents are available to reviewers and are followed (e.g., NUREG-1556 series, pre-licensing guidance, regulatory guides, etc.).
- Licensing practices for risk-significant radioactive materials are appropriately implemented including the physical protection of Category 1 and Category 2 quantities of radioactive material (10 CFR Part 37 equivalent).
- Documents containing sensitive security information are properly marked, handled, controlled, and secured.

b. Discussion

During the review period, Oregon performed 743 radioactive materials licensing actions. The team evaluated 16 of those licensing actions which were selected based on the guidance in SA-104. The licensing actions selected for review included five new applications, eight amendments, two renewals, and one termination. The team evaluated casework which included the following license types and actions: source material manufacturer, portable gauge, nuclear pharmacy, nuclear medicine, Type A broad scope, temporary job site industrial radiography, radiopharmaceutical therapy and Y-90 microspheres, mobile positron emission tomography imaging, and self-shielded irradiators. The casework sample represented work from four current and former license reviewers.

In each of the licensing actions reviewed, the team found the casework completed in accordance with the current NUREG-1556 series guidance and followed sound health physics principles. The team observed that the most current Pre-Licensing Guidance and Risk-Significant Radioactive Material checklists were used by the license reviewers. Oregon's equivalent to 10 CFR Part 37 security licenses were marked and stored appropriately.

In March 2020, Oregon implemented process improvements to track licensing correspondence (from both Oregon and the licensees), licensing action tracking sheets, and licenses in an electronic database.

Oregon also instituted a 90-day metric to complete all licensing actions. This metric is reviewed during the supervisor monthly meetings. The team observed that Oregon assigns a licensing action tracking sheet that provides a chronology of each licensing action from receipt to issuance of the licensing action.

The team verified that Oregon ensured that licensees that were required to demonstrate financial assurance submitted the appropriate financial assurance instrument.

c. Evaluation

The team determined that, during the review period, Oregon met the performance indicator objectives listed in Section 3.4.a. Based on the criteria in MD 5.6, the team recommended that Oregon's performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

d. MRB Chair's Determination

The MRB Chair agreed with the team's recommendation and found Oregon's performance with respect to this indicator satisfactory.

3.5 Technical Quality of Incident and Allegation Activities

The quality, thoroughness, and timeliness of response to incidents and allegations of safety concerns can have a direct bearing on public health, safety, and security. An assessment of incident response and allegation investigation procedures, actual implementation of these procedures, internal and external coordination, timely incident reporting, and investigative and follow-up actions, are a significant indicator of the overall quality of the incident response and allegation programs.

a. Scope

The team used the guidance in State Agreements procedure SA-105, "Reviewing the Common Performance Indicator: Technical Quality of Incident and Allegation Activities," and evaluated Oregon's performance with respect to the following performance indicator objectives:

- Incident response and allegation procedures are in place and followed.
- Response actions are appropriate, well-coordinated, and timely.
- On-site responses are performed when incidents have potential health, safety, or security significance.
- Appropriate follow-up actions are taken to ensure prompt compliance by licensees.
- Follow-up inspections are scheduled and completed, as necessary.
- Notifications are made to the NRC Headquarters Operations Center for incidents requiring a 24-hour or immediate notification to the Agreement State or NRC.
- Incidents are reported to the Nuclear Material Events Database (NMED) and closed when all required information has been obtained.
- Allegations are investigated in a prompt, appropriate manner.
- Concerned individuals are notified within 30 days of investigation conclusions.
- Concerned individuals' identities are protected, as allowed by law.

b. Discussion

During the review period, 50 radioactive materials incidents were reported to Oregon. The team evaluated 13 of those incidents: two leaking sources, two lost sources, two found sources, one potential overexposure, four medical events, one missing shipment, and one broken device. Oregon reviews all cases with regard to public health and safety and will dispatch inspectors for on-site follow-up on a case-by-case basis. Those cases not followed-up on with on-site visits are closed out with phone calls and reviewed during their next inspection.

The team also evaluated Oregon's reporting of incidents to the NRC's Headquarters Operations Center (HOC). The team noted that in each case requiring HOC notification, Oregon reported the incidents within the required timeframe. The team also evaluated whether Oregon had failed to report any required incidents to the HOC and did not identify any missed reports.

Oregon received 14 allegations related to radioactive materials. The team evaluated 13 allegations, including the 4 allegations that the NRC referred to the State, during the review period. The one remaining allegation that the team did not review, was provided to Oregon just prior to the IMPEP review.

Oregon's allegation process allows for confidentiality. Investigators are well-trained and knowledgeable. The Oregon Program also has a good rapport with major hospitals in the State of Oregon that enables them to investigate problems in a constructive and open manner.

As a result of the COVID-19 pandemic, the protocols for documenting incidents and allegations became a challenge for the Oregon Program because the staff were working remotely and the logbooks for incidents and allegations resided in the office. The team identified that the documentation needed for auditing of allegations was sometimes found only on inspectors' individual e-mail accounts or through interviews. The logbook designated for this information required under Oregon Protocol 606 was not consistently used. The team had difficulty ensuring that all documentation related to an incident was present. During the IMPEP review, inspectors were available to help find this documentation; however, this may not be the case in the future when investigators retire. Oregon is aware of this and is currently developing the ability to save documents directly to their online incident database.

The team noted that documentation was lacking for the following cases: a large hospital event in 2018, a potential unlicensed neutron generator referred to the Oregon Program by the NRC in 2019, and an NMED reportable event concerning a found tritium exit sign in 2020. In each of the cases, follow-up investigation was performed according to interviews with the inspector, but documentation about the investigation was not present in the report. Oregon informed the team that the lack of written documentation was caused by a database software issue that is in the process of being fixed. Other documentation issues can be traced to a time when there were a limited number of inspectors available who were qualified to handle a growing number of incidents and allegations leading to rushed work. Oregon has hired staff to address this issue and is in the process of hiring additional staff in this area. Based on interviews with the inspectors involved, the team concluded that these cases were completed to the satisfaction of the Oregon Program to protect public health and safety. However, these issues, which were clerical in nature, were only found in the three cases discussed above, and do not warrant that the Oregon Program be found less than satisfactory for this indicator.

The team noted that the Program's monthly Materials Program staff meetings discussed reviews of incidents and allegations, which keeps the staff aware of issues in the State even for those not directly involved. The Oregon Program is also active in supporting and investigating community concerns, as evidenced by incidents reported by concerned citizens.

The team noted that actions taken were appropriate, with effort commensurate to the potential safety concern. Procedures concerning health and safety of the public or allers were followed, follow-up occurred on corrective actions, the NRC was notified appropriately when required for all incidents and allegations, and NMED information was submitted properly. Allers received information where applicable.

c. Evaluation

The team determined that during the review period Oregon met the performance indicator objectives listed in Section 3.5.a, except for:

- Allegation procedures are in place but not followed consistently.
- One record did not include a coordinated follow-up inspection.
- Three allegations did not include follow-up inspections and did not meet completeness requirements for investigation records.

The issues associated with documentation of incidents and allegations had the potential for the Oregon Program to not meet performance indicator objectives. However, these issues which were clerical in nature and were only found in the three cases discussed above. The team concluded that this performance does not warrant recommending a less than satisfactory rating for this indicator.

Because Oregon is able to add supporting documentation and assign Notices of Violation for both investigations and inspections, the team considers the above exceptions to have been corrected.

The team also made one new recommendation from its review of the Technical Quality of Incidents and Allegation Activities performance indicator:

- The team recommends that Oregon develop a process to ensure allegations and incidents are documented at inception, to ensure status updates are included in the log, and to ensure proper closure of incidents and allegations in a manner that all inspectors have access to maintain and update and ensuring that all information is comprehensive and consistent from one inspector to another. As part of this recommendation, Oregon will also perform a retrospective review of events from 2017 to present to ensure appropriate supporting information is documented in the log.

Based on the IMPEP evaluation criteria in MD 5.6, the team recommended that Oregon's performance with respect to the indicator, Technical Quality of Incident and Allegation Activities, be found satisfactory.

d. MRB Chair's Determination

The MRB Chair agreed with the team's recommendation and found Oregon's performance with respect to this indicator satisfactory. The MRB Chair also agreed with the recommendation associated with the Technical Quality of Incidents and Allegation Activities performance indicator.

4.0 NON-COMMON PERFORMANCE INDICATORS

Four non-common performance indicators are used to review Agreement State programs: (1) Legislation, Regulations, and Other Program Elements, (2) Sealed Source and Device (SS&D) Evaluation Program, (3) Low-Level Radioactive Waste (LLRW) Disposal Program, and (4) Uranium Recovery Program. The NRC retains regulatory authority for SS&D Evaluation, LLRW Disposal, and Uranium Recovery Programs; therefore, only the first non-common performance indicator applied to this review.

4.1 Legislation, Regulations, and Other Program Elements

State statutes should authorize the State to establish a program for the regulation of agreement material and provide authority for the assumption of regulatory responsibility under the State's agreement with the NRC. The statutes must authorize the State to promulgate regulatory requirements necessary to provide reasonable assurance of adequate protection of public health, safety, and security. The State must be authorized through its legal authority to license, inspect, and enforce legally binding requirements, such as regulations and licenses. The NRC regulations that should be adopted by an Agreement State for purposes of compatibility or health and safety should be adopted in a time frame so that the effective date of the State requirement is not later than 3 years after the effective date of the NRC's final rule. Other program elements that have been designated as necessary for maintenance of an adequate and compatible program should be adopted and implemented by an Agreement State within 6 months following NRC designation. A Program Element Table indicating the Compatibility Categories for those program elements other than regulations can be found on the NRC Web site at the following address: <https://scp.nrc.gov/regtoolbox.html>.

a. Scope

The team used the guidance in State Agreements procedure SA-107, "Reviewing the Non-Common Performance Indicator: Legislation, Regulations, and Other Program Elements," and evaluated Oregon's performance with respect to the following performance indicator objectives. A complete list of regulation amendments can be found on the NRC website at the following address: <https://scp.nrc.gov/regtoolbox.html>.

- The Agreement State program does not create conflicts, duplications, gaps, or other conditions that jeopardize an orderly pattern in the regulation of radioactive materials under the Atomic Energy Act, as amended.
- Regulations adopted by the Agreement State for purposes of compatibility or health and safety were adopted no later than 3 years after the effective date of the NRC regulation.
- Other program elements, as defined in SA-200 that have been designated as necessary for maintenance of an adequate and compatible program, have been adopted and implemented within 6 months of NRC designation.

- The State statutes authorize the State to establish a program for the regulation of agreement material and provide authority for the assumption of regulatory responsibility under the agreement.
- The State is authorized through its legal authority to license, inspect, and enforce legally binding requirements such as regulations and licenses.
- Sunset requirements, if any, do not negatively impact the effectiveness of the State's regulations.

b. Discussion

Oregon's current effective statutory authority is contained in volume 11, Chapter 453, of the Oregon Revised Statutes. The Oregon Health Authority is designated as the State's radiation control agency. One legislative amendment affecting the radiation control program was passed during the review period.

During the 2021 legislative assembly, Oregon Radiation Protection Services (RPS) proposed a 2021-2023 Legislative Concept which was accepted and became House Bill 2075 and a Policy Options Package 448 to increase all RPS program user-fees including x-ray and tanning registration fees by statute, and the Radioactive Material Licensing fees by administrative rule, respectively. Both completed the legislative process and were passed by the Oregon Legislature on June 26, 2021 and enacted by the Governor on July 19, 2021.

Oregon's administrative rulemaking process takes approximately 30 months from drafting to finalizing a rule. The public, NRC, other agencies, and potentially impacted licensees and registrants are offered an opportunity to comment during the rulemaking process. Comments are considered and incorporated, as appropriate, before the regulations are finalized and approved by the Oregon Secretary of State. The team noted that the State's rules and regulations are not subject to "sunset" laws. However, Oregon's regulations are subject to administrative review on a 5-year period. During the review period, Oregon submitted eight final regulation amendments and three proposed regulation amendments to the NRC for a compatibility review. All of the final regulation amendments were adopted by Oregon during the review period. At the time of this review, no amendments were overdue. The program is very responsive in addressing NRC comments on proposed and final regulations.

c. Evaluation

The team determined that, during the review period, Oregon met the performance indicator objectives listed in Section 4.1.a. Based on the criteria in MD 5.6, the team recommended that Oregon's performance with respect to the indicator, Legislation, Regulations, and Other Program Elements, be found satisfactory.

d. MRB Chair's Determination

The MRB Chair agreed with the team's recommendation and found Oregon's performance with respect to this indicator satisfactory.

## 5.0 SUMMARY

Oregon's performance was found to be satisfactory for all performance indicators reviewed. The team made one new recommendation based on the review of the Technical Quality of Incidents and Allegation Activities performance indicator and determined that the recommendation from the 2017 IMPEP review be closed. The new recommendation is:

- The team recommends that Oregon develop a process to ensure allegations and incidents are documented at inception, to ensure status updates are included in the log, and to ensure proper closure of incidents and allegations in a manner that all inspectors have access to maintain and update and ensuring that all information is comprehensive and consistent from one inspector to another. As part of this recommendation, Oregon will also perform a retrospective review of events from 2017 to present to ensure appropriate supporting information is documented in the log.

Accordingly, the team recommended, and the MRB Chair agreed that Oregon be found adequate to protect public health and safety and compatible with the NRC's program. The MRB Chair also agreed that the recommendation from the 2017 IMPEP review be closed and with the new recommendation associated with the Technical Quality of Incidents and Allegation Activities performance indicator. Since this was Oregon's second consecutive IMPEP review with all indicators being found satisfactory, the team recommended and the MRB Chair agreed that the next periodic meeting take place in approximately 2.5 years with the next full IMPEP review taking place in approximately 5 years.

## LIST OF APPENDICES

Appendix A	IMPEP Review Team Members
Appendix B	Inspector Accompaniments

## APPENDIX A

### IMPEP REVIEW TEAM MEMBERS

<b>Name</b>	<b>Areas of Responsibility</b>
Stephen Poy, NMSS	Team Leader Status of Materials Inspection Program Legislation, Regulations, and Other Program Elements Inspector Accompaniments
Joe O'Hara, NMSS	Technical Staffing and Training
David Stradinger, North Dakota	Technical Quality of Inspections Inspector Accompaniments
Jackie Cook, Region IV	Technical Quality of Licensing Actions
James Uhlemeyer, Kansas	Technical Quality of Incident and Allegation Activities

APPENDIX B

INSPECTOR ACCOMPANIMENTS

The following inspector accompaniments were performed prior to the on-site IMPEP review:

Accompaniment No.: 1	License No.: ORE-90800
License Type: Medical Imaging and Localization	Priority: 5
Inspection Date: 06/15/2021	Inspector's initials: BH

Accompaniment No.: 2	License No.: ORE-91190
License Type: Portable Gauge	Priority: 4
Inspection Date: 06/16/2021	Inspector's initials: JE

Accompaniment No.: 3	License No.: ORE- 90529
License Type: Portable Gauge	Priority: 4
Inspection Date: 06/17/2021	Inspector's initials: RW