



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

September 3, 2024

James Boylan, Ph.D., Chief
Air Protection Branch
Environmental Protection Division
Georgia Department of Natural Resources
4244 International Parkway, Suite 120
Atlanta, GA 30354

SUBJECT: FINAL FY2024 GEORGIA IMPEP REPORT

Dear Dr. Boylan:

On August 15, 2024, the Management Review Board (MRB) met, which consisted of the U.S. Nuclear Regulatory Commission (NRC) senior managers and an Organization of Agreement States member, to consider the proposed final Integrated Materials Performance Evaluation Program (IMPEP) report on the Georgia Agreement State Program. The MRB Chair found the Georgia program adequate to protect public health and safety, and compatible with the NRC's regulatory program.

The enclosed final report documents the IMPEP team's findings and summarizes the results of the MRB meeting. Based on the results of the current IMPEP review, the next periodic meeting will take place in approximately 2.5 years with the next IMPEP review taking 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 black ink, appearing to be "J. Lubinski".

Signed by Lubinski, John
on 09/03/24

John W. Lubinski, Director
Office of Nuclear Material Safety
and Safeguards

Enclosure:

1. 2024 Georgia IMPEP Report
2. 2024 Georgia MRB Meeting Participants

cc: David Matos, Program Manager
Radiation Protection Programs
Shatavia Walker, Program Manager
Radioactive Materials Program Director



INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM
REVIEW OF THE GEORGIA AGREEMENT STATE PROGRAM

APRIL 29 – MAY 3, 2024

FINAL REPORT

EXECUTIVE SUMMARY

The results of the Integrated Materials Performance Evaluation Program (IMPEP) review of the Georgia Agreement State Program (Georgia) are discussed in this report. The review was conducted in-person from April 29 through May 3, 2024. In-person inspector accompaniments were conducted between March 25-27, 2024.

The team found Georgia's performance to be satisfactory for all six indicators reviewed.

There were no open recommendations from the 2020 IMPEP review for the team to consider. The team proposed two new recommendations. The first was intended to improve the markings for the distribution of sensitive information and the second was intended to improve Georgia's allegation procedure. The Management Review Board (MRB) Chair decided, and the IMPEP team agreed, that the first recommendation was not necessary and to retain the second recommendation, based on information provided during the MRB meeting.

The team also highlighted a good practice regarding Georgia's Continuous Recruitment process.

Accordingly, the MRB Chair found the Georgia radiation control program adequate to protect public health and safety and compatible with the NRC's program. Since this will be Georgia's second consecutive IMPEP review in which all performance indicators reviewed were found to be satisfactory, the MRB Chair determined that a periodic meeting take place in approximately 2.5 years with the next IMPEP review to take place in approximately 5 years.

1.0 INTRODUCTION

The Georgia Agreement State Program (Georgia) Integrated Materials Performance Evaluation Program (IMPEP) review was conducted on April 29 through May 3, 2024, by a team of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the State of New Jersey. Team members are identified in Appendix A. In-person inspector accompaniments were conducted between March 25-27, 2024. The in-person inspector accompaniments are identified in Appendix B. The review was conducted in accordance with the "Agreement State Program Policy Statement," published in the *Federal Register* on October 18, 2017 (82 FR 48535), and NRC Management Directive (MD) 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)," dated July 24, 2019. Preliminary results of the review, which covered the period of April 25, 2020, through May 3, 2024, were discussed with Georgia 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 Georgia on March 4, 2024. Georgia provided its response to the questionnaire on April 12, 2024. A copy of the questionnaire response is available in the NRC's Agencywide Documents Access and Management System Accession Number [ML24122C247](#).

The team issued a draft report to Georgia on June 11, 2024, for factual comment available in [ML24158A093](#). Georgia responded with no comments to the draft report and a status of recommended activities by letter dated July 9, 2024, from James W. Boylan, Chief, Georgia Department of Natural Resources, Environmental Protection Division available in [ML24201A066](#).

The Georgia Agreement State Program is administered by the Radiation Protection Programs Group. This Program is in the Air Protection Branch of the Environmental Protection Division of the Georgia Department of Natural Resources. Organization charts for Georgia are available in [ML24122C287](#).

At the time of the review, Georgia regulated 378 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 Georgia.

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

2.0 PREVIOUS IMPEP REVIEW AND STATUS OF RECOMMENDATIONS

The previous IMPEP review concluded on April 24, 2020. The final report is available in [ML20220A391](#). 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: None

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 experienced, knowledgeable, 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) [SA-103](#), "Reviewing the Common Performance Indicator: Technical Staffing and Training," and evaluated Georgia'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 the NRC Inspection Manual Chapter (IMC) [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.

b. Discussion

Georgia's Radiation Protection Programs Group is comprised of two Program Managers, one Team leader, and 10 technical staff members. Technical staff are split between the

Radioactive Materials Program (RMP) and the Environmental Radiation Program (ERP). The radiation control program for IMPEP purposes primarily consists of RMP and is allocated 10.75 full-time equivalents (FTE) when fully staffed, including 1.0 FTE of technical support from ERP, 0.5 FTE of support from an administrative assistant, and 0.25 FTE of support for rulemaking from the Air Branch Planning and Support Program.

There were no vacancies at the time of the on-site review. During the review period, six staff members left and five staff members were hired. One had also been hired prior to the review period as an over-hire for one of the six who retired during the review period. The positions were vacant from one to seven months. The team noted that Georgia's training and qualification program was compatible with the NRC's IMC 1248.

The team noted that Georgia had recently implemented a streamlined hiring process developed within the Air Protection Branch to significantly diminish the duration of its vacancies. Georgia already had a satisfactory vacancy fill rate of four to six months prior to implementing this process. After implementing this new process, Georgia has routinely been able to fill its vacancies in just four to six weeks. In addition, by evaluating candidates for their best fit across the entire Air Protection Branch, Georgia found that this process strengthened team cohesion and staff retention.

The team recommended and the Management Review Board (MRB) Chair agreed to acknowledge the following good practice:

- Georgia has recently implemented a streamlined hiring process in which it posts Continuous Recruitment positions to the Air Protection Branch and the formation of a monthly Standing Hiring Panel to conduct initial interviews and ratings of anyone applying to those positions. When a manager anywhere in the Branch then needed to fill a vacancy, the Standing panel already had a list of qualified candidates for the hiring manager, who could decide from that list who to call for a second interview. If a highly qualified candidate were identified by the panel but no vacancy existed at that time, the Panel could still recommend that candidate to a manager who could then call them for a second interview and discuss future opportunities and encourage sustained interest in working for Georgia.

c. Evaluation

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

d. MRB Discussion and Chair's Determination

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

3.2 Status of Materials Inspection Program

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 [SA-101](#), "Reviewing the Common Performance Indicator: Status of the Materials Inspection Program," and evaluated Georgia'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 (<https://www.nrc.gov/materials/miau/mat-toolkits.html>).
- 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

Georgia performed 246 priority 1, 2, 3 and initial inspections. The team found that three out of 213 priority 1, 2, 3 inspections and five out of 33 initial inspections were conducted overdue. Overall, the team determined that Georgia conducted 3.3 percent of Priority 1, 2, 3 and initial inspections overdue during the review period. All overdue inspections were the result of an error in their inspection database. The issue was discovered in July 2023 and promptly corrected. The overdue inspections were subsequently and expeditiously completed. Georgia had no overdue inspections at the time of the review.

Georgia's inspection frequencies are the same as, or more frequent for similar license types in IMC 2800. A sampling of 20 inspection reports indicated that only one inspection finding was communicated to the licensees beyond Georgia's goal of 30 days after the inspection exit or 45 days after the team inspection exit.

Georgia conducts reciprocity inspections in a performance-based, risk-informed manner in accordance with program-specific procedures. Although all reciprocity applicants are eligible for inspection, decisions concerning reciprocity inspections are risk-informed by the use of an equation to provide a relative score. Any score of eight or higher was given priority for inspection. The team found that during 2020, 2021, and 2022, the number of reciprocity inspections conducted was reduced after Georgia incorporated additional pandemic related risk factors into its reciprocity decisions. In 2023, Georgia resumed conducting reciprocity inspections at their pre-pandemic rate.

c. Evaluation

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

d. MRB Discussion and Chair's Determination

The MRB Chair agreed with the team's recommendation and found Georgia'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 [SA-102](#), "Reviewing the Common Performance Indicator: Technical Quality of Inspections," and evaluated Georgia'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 the NRC guidance.
- An adequate supply of calibrated survey instruments is available to support the inspection program.

b. Discussion

The team evaluated 20 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 nine of Georgia's inspectors and covered medical, industrial, commercial, academic, research, and service licenses.

Team members accompanied five Georgia inspectors on four accompaniments during the week of March 25-27, 2024. No performance issues were noted during the accompaniments. The team found that inspectors were well-prepared and thorough, and assessed the impact of licensed activities on health, safety, and security. Previous violations were reviewed to ensure corrective actions were adequately implemented by licensees. Inspectors observed the use of radioactive materials when possible and interviewed licensee staff. Inspectors used open ended questions and were able to develop a basis of confidence that radioactive materials were being used safely and securely. Any findings observed were brought to attention of the licensee at the time of inspection and again to their management during the inspection closeout. Inspection reports and compliance letters to the licensees for those reports reviewed by the team, were completed within 30 days and

clearly stated what was observed that needed correction by the licensee. All compliance letters with violations are signed by Program management. Compliance letters without violations are signed by the inspector. The inspector accompaniments are identified in Appendix B.

Supervisory accompaniments were conducted annually for inspectors with two exceptions. One inspector was not accompanied in 2022 and one inspector was not accompanied in 2023. The inspector who was not accompanied in 2022 left the program in early 2023 before an accompaniment could be performed that year. The inspector who was not accompanied in 2023 was new in 2021, accompanied in 2022, and accompanied again in early 2024. Overall, the team did not identify any performance or program issues related to the missed supervisory accompaniments.

The team verified that Georgia maintained a wide variety of appropriately calibrated survey instruments to support the inspection program, and to respond to radioactive materials incidents and emergency situations. Calibration records for the instruments were maintained on file. Detection instruments were available for gamma, beta, and alpha contamination, as well as dose rates. Georgia also had portable multi-channel analyzers for assessing and identifying unknown sources.

During the review, the team noted two practices that benefited inspectors conducting inspections. First, Georgia requires all licensees that are authorized for temporary job sites to notify them of upcoming field work within their jurisdiction. This enabled staff to adequately schedule and perform a field inspection as part of the routine inspection. Second, inspectors retained a copy each licensee's inventory during the inspection for inclusion in the licensee's file. This enabled the next inspector to determine if any changes have been made since the previous inspection. It also enabled Georgia to know the materials present if a licensee was to abandon the material.

c. Evaluation

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

d. MRB Discussion and Chair's Determination

The MRB Chair agreed with the team's recommendation and found Georgia'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 Georgia 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 [SA-104](#), “Reviewing the Common Performance Indicator: Technical Quality of Licensing Actions,” and evaluated Georgia’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 of the *Code of Federal Regulations* (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 (RSRM) 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, Georgia performed 1,463 radioactive materials licensing actions. The team evaluated 15 of those licensing actions. The licensing actions selected for review included three new applications, five amendments, three renewals, two terminations, and two notifications of transfers of control. The team evaluated casework which included the following license types and actions: broad scope, medical diagnostic and therapeutic, commercial manufacturing and distribution, industrial radiography, veterinary, academic, nuclear pharmacy, gauges, calibration sources, and financial assurance. The casework sample represented work from 12 license reviewers.

All licensing actions were peer-reviewed, and supervisors reviewed complex actions. The team found the actions to be thorough, complete, consistent, and of high quality. Deficiency letters clearly stated regulatory positions and were used at the proper time. License tie-down conditions were clearly stated and were supported by information contained in the electronic license file. Review of renewal applications included a thorough analysis of the licensee’s inspection and enforcement history. Appropriate financial assurance instruments were submitted when required.

The team found that staff properly implemented the NRC’s Pre-Licensing Guidance and RSRM checklist when applicable. Documents containing sensitive security information were properly marked; however, reviewers did not fully follow Georgia’s licensing procedure when transmitting this information via email. The RMP Licensing Procedure indicates that emails containing sensitive information must be marked in the subject line with the words “Sensitive Information.” The team reviewed a license file that contained an email transmitting an unencrypted license authorizing RSRM which did not have this marking in the subject line. Five additional files were reviewed and none of the emails’ subject lines included any such markings. Georgia acknowledged that additional files were likely to be missing these

markings in their transmittal emails. The team noted, however, that the license documents themselves were marked appropriately and in each case were transmitted only to authorized individuals with a need to know. Georgia management immediately sent a memo to staff to remind them of the procedural requirement to mark the subject lines of emails containing sensitive information or attachments and implemented additional controls (encryption) for transmission of sensitive information immediately after the review.

The team originally proposed a recommendation to improve the markings for the distribution of sensitive information. However, based on additional controls Georgia implemented immediately after the IMPEP review and verified by the team during the IMPEP, the MRB Chair determined, and the IMPEP team agreed, that the recommendation was no longer necessary.

c. Evaluation

The team determined that, during the review period, Georgia met the performance indicator objectives listed in Section 3.4.a, except for:

- Documents containing sensitive security information are not properly marked, handled, controlled, and secured.

Specifically, emails transmitting sensitive information were not marked in accordance with licensing procedures.

The team considered recommending a finding of satisfactory but needs improvement for this indicator based on Section III.E.2 of MD 5.6, which states that “consideration should be given to a finding of satisfactory but needs improvement when a review demonstrates the presence of one or more of the following conditions” including:

- Reviewers are not consistently following the criteria specified in the NUREG-1556 series, as applicable, and SA-104 or compatible Agreement State procedures in more than a few, but less than most, of the actions reviewed.

The team determined that the missing markings did not suggest a performance concern regarding the use of procedures. As discussed above, reviewers consistently followed applicable guidance and procedures otherwise and no sensitive information was improperly handled. Therefore, based on the IMPEP evaluation criteria in MD 5.6, the team recommends that Georgia’s performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

d. MRB Discussion and Chair’s Determination

The MRB Chair agreed with the team’s recommendation and found Georgia’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 [SA-105](#), "Reviewing the Common Performance Indicator: Technical Quality of Incident and Allegation Activities," and evaluated Georgia'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 the NRC.
- Incidents are reported to the Nuclear Material Events Database 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, 46 incidents were reported to the State of Georgia. The team evaluated 15 radioactive materials incidents which included five lost gauges, two damaged gauges, one stolen gauge, four medical events, two improper disposals, and one leaking source. Georgia dispatched inspectors for on-site follow-up for five of the cases reviewed.

Upon receiving notification of an incident, Georgia management and staff met to discuss the incident and determine the appropriate level of response, which can range from an immediate response to reviewing the incident during the next routine scheduled inspection. Incidents were entered into Georgia's dashboard which provided an easily accessible and efficient method to review and retain incident records. Program responses are based on both the circumstances and the health and safety significance of the incident. The team found that Georgia's evaluation of incident notifications and its response to those incidents was thorough, well balanced, complete, and comprehensive. Notably, Georgia effectively elicited licensee corrective and preventative actions in response to incidents reported during the review period.

The team also evaluated Georgia's incident reporting to the NRC's Headquarters Operations Officer (HOO). The team noted that in each case requiring HOO notification, Georgia reported the incidents within the required time frame. The team also evaluated whether Georgia had not reported any required incidents to the HOO. The team did not identify any missed reporting requirements.

Georgia received three allegations during the review period, including three potential allegations referred by the NRC. Each was determined not to meet Georgia's allegation criteria and was closed accordingly. One potential allegation indicated that a company was working within the state without filing reciprocity, yet the company was authorized under a Georgia license to perform the activity. The remaining two potential allegations were reviewed by Georgia staff and determined to describe activities outside of Georgia's regulatory jurisdiction.

In addition to the formal Allegations program, the team found that Georgia administered a separate, less formal program called “complaints” to document the review, evaluation, and response to allegations of potential impropriety involving radiation or radioactive material which did not directly or definitively involve Georgia Radioactive Materials licensees. The complaint program was administered consistent with Georgia’s Allegations program screening, tracking and investigation process. The team reviewed 15 of the 19 complaints tracked during the review period and found that Georgia’s complaint program was responsive to members of the public. In each complaint reviewed, Georgia carefully evaluated the concerns raised and, when warranted, conducted site investigations by individuals trained and qualified to perform radiation surveys. The team reviewed the complaints to ensure that no allegations were missed.

The team reviewed Georgia’s program guidance for the administration of its allegations and complaint programs, which involved following [SA-300](#), “Handbook on Nuclear Material Event Reporting in the Agreement States,” and an established procedure on processing allegations. The team noted that although Georgia’s allegation program was effectively implemented, documented guidance to staff did not include details on allegation-specific matters such as intake, protection of identity, response to overriding safety issues, standards for program documentation, guidance for referrals to other organizations, and staff training requirements. As a result, the team is proposing the following recommendation:

- Revise the allegation procedure to include additional guidance for staff on allegation-specific matters, and provide training to staff on any changes.

c. Evaluation

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

- Incident response and allegation procedures are in place and followed.

While Georgia followed both SA-300 and an established procedure to administer its allegations and complaints programs, documented guidance to staff did not include detail on allegation-specific matters.

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

d. MRB Discussion and Chair’s Determination

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

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 (UR) Program. The NRC retains regulatory authority for SS&D Evaluation and UR Program; therefore, only the first and third non-common performance indicators 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 the 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 [SA-107](#), "Reviewing the Non-Common Performance Indicator: Legislation, Regulations, and Other Program Elements," and evaluated Georgia'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 of 1954, 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](#), "Compatibility Categories and Health and Safety Identification for NRC Regulations and Other Program Elements," that have been designated as necessary for maintenance of an adequate and compatible program, have been adopted and implemented within 6 months of the 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

Georgia's current effective statutory authority is contained in the Official Code of Georgia Annotated, Title 31, Chapter 13, of the Georgia Statutes. The Department is designated as the State's radiation control agency. No legislation affecting the radiation control program was passed during the review period.

Georgia's administrative rulemaking process takes approximately nine months from drafting to finalizing a rule. The public, the NRC, other agencies, and potentially impacted licensees and registrants are offered an opportunity to comment during the process. Comments were considered and incorporated, as appropriate, before the regulations were finalized and

approved by the Board of the Department of Natural Resources. The team noted that the State's rules and regulations were not subject to "sunset" laws. Georgia's rulemaking process decreased from one year to nine months since the last IMPEP in 2020. They streamlined their rulemaking procedures and decreased the time for review and approval of regulations.

During the review period, Georgia submitted no proposed regulation amendments, 12 final regulation amendments, and no legally binding requirements or license conditions to the NRC for a compatibility review. None of the amendments were overdue for adoption at the time of their submission.

At the time of this review, no amendments were overdue for adoption.

c. Evaluation

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

d. MRB Discussion and Chair's Determination

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

4.2 LLRW Disposal Program

In 1981, the NRC amended its Policy Statement, "Criteria for Guidance of States and NRC in Discontinuance of NRC Regulatory Authority and Assumption Thereof by States Through Agreement," to allow a State to seek an amendment for the regulation of LLRW as a separate category. Although, the Georgia Agreement State Program has authority to regulate a LLRW disposal, the NRC has not required States to have a program for licensing a disposal facility until such time as the State has been designated as a host State for a LLRW disposal facility. When an Agreement State has been notified or becomes aware of the need to regulate a LLRW disposal facility, it is expected to put in place a regulatory program that will meet the criteria for an adequate and compatible LLRW disposal program. There are no plans for a LLRW disposal facility in Georgia. Accordingly, the team did not review this indicator.

5.0 SUMMARY

The team found Georgia's performance to be satisfactory for all six indicators reviewed.

There were no open recommendations from the 2020 IMPEP review for the team to consider. The team proposed two new recommendations. The first is intended to improve the markings for the distribution of sensitive information and the second is intended to improve Georgia's allegation procedure. The MRB Chair decided, and the IMPEP team agreed, that the first recommendation was not necessary and to retain the second recommendation, based on information provided during the MRB meeting. The team also highlighted a good practice regarding Georgia's Continuous Recruitment process.

Accordingly, the MRB Chair found the Georgia radiation control program adequate to protect public health and safety and compatible with the NRC's program. Since this was Georgia's second consecutive IMPEP review in which all performance indicators reviewed were found to

be satisfactory, the MRB Chair determined that a periodic meeting take place in approximately 2.5 years with the next IMPEP review to take place in approximately 5 years.

LIST OF APPENDICES

Appendix A	IMPEP Review Team Members
Appendix B	Inspector Accompaniments

APPENDIX A

IMPEP REVIEW TEAM MEMBERS

Name	Areas of Responsibility
Ryan Craffey, Region III	Team Leader Technical Staffing and Training Inspector Accompaniments
Latischa Hanson, Region IV	Team Leader in Training
Shawn Seeley, Region I	Status of Materials Inspection Program Technical Quality of Inspections Inspector Accompaniments
Karen Flanigan, State of New Jersey	Technical Quality of Licensing Actions
Randolph Ragland, Region I	Technical Quality of Incident and Allegation Activities
Vanessa Cox, NMSS	Legislation, Regulations, and Other Program Elements

APPENDIX B

INSPECTOR ACCOMPANIMENTS

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

Accompaniment No.: 1	License No.: GA-1928-1
License Type: Industrial Radiography	Priority: 1
Inspection Date: 03/25/24	Inspector's initials: JH/AB

Accompaniment No.: 2	License No.: GA-1664-1
License Type: Medical Limited Scope (radiopharmaceuticals, HDR)	Priority: 2
Inspection Date: 03/26/24	Inspector's initials: SA/KN

Accompaniment No.: 3	License No.: GA-1319-1
License Type: Medical Limited Scope (radiopharmaceuticals, microspheres, HDR)	Priority: 2
Inspection Date: 03/26/24	Inspector's initials: AF/JH

Accompaniment No.: 4	License No.: GA-1369-1
License Type: Industrial Radiography	Priority: 1
Inspection Date: 03/27/24	Inspector's initials: AB/SA

GEORGIA MANAGEMENT REVIEW BOARD ATTENDANCE
August 15, 2024, 1:00 p.m. – 3:00 p.m. EST, via Microsoft Teams

Management Review Board:

- John Lubinski, Director, Office of Nuclear Material Safety and Safeguards (NMSS), Acting MRB Chair;
- Jessica Bielecki, Assistant General Counsel for Rulemaking, Agreement States and Fee Policy;
- Robert Lewis, Deputy Director, NMSS;
- Mohammed Shuaibi, Deputy Regional Administrator, NRC Region III; and
- Steve Seeger, Organization of Agreement States representative to the MRB, from the Commonwealth of Tennessee.

Georgia Program Management and Staff (via Teams):

- James Boylan, Chief, Air Protection Branch, Environmental Protection Division, Georgia Department of Natural Resources;
- DeAnna Oser, Assistant Branch Chief, Air Protection Branch
- Dave Matos, Program Manager, Radiation Protection Programs;
- Shatavia Walker, Program Manager, Radioactive Materials Program;
- Anastasia Bennett, Radioactive Materials Program:
- John Hays, Radioactive Materials Program;
- Kaamilya Najeeullah, Radioactive Materials Program; and
- Heather Pittman, Radioactive Materials Program.

IMPEP Team:

- Ryan Craffey, Region III;
- Latischa Hanson, Region IV;
- Shawn Seeley, Region I;
- Randolph Ragland, Region I;
- Vanessa Cox, NMSS; and
- Karen Flanigan, State of New Jersey.

NRC and OTHER MEMBERS OF THE PUBLIC:

- Kevin Williams, NMSS;
- Dafna Silberfeld, NMSS;
- Jacob Zimmerman, Region I;
- Adelaide Giantelli, NMSS;
- Rhex Edwards, Region III;
- Jackie Cook, Region IV
- Robert Johnson, NMSS;
- Lisa Forney, Region I
- Karen Meyer, NMSS;
- Kevin Kunder, State of Florida;
- Keisha Cornelius, State of Oklahoma;
- Amy Ford, State of Tennessee

FINAL FY2024 GEORGIA IMPEP REPORT DATE September 4, 2024

DISTRIBUTION:

KWilliams, NMSS/MSST

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PKrohn, R-I/DRS

JZimmerman, NMSS/DFM

AGiantelli, NMSS/MSST/SMPB

RCraffey, R-III/DNMS/MIB

LHanson, R-IV/DNMS/MLDB

SSeeley, R-I/DNMS/MLAB

RRagland, R-I/DNMS/CIRAB

VCox, NMSS/REFS/MRPB

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OFFICE	NMSS/MSST/SLPB	R-III/DNMS/MIB	R-IV/DNMS/MLDB	NMSS/MSST/SMPB
NAME	RJohnson <i>RJ</i>	RCraffey <i>RC</i>	LHanson <i>LH</i>	AGiantelli <i>AG</i>
DATE	Aug 16, 2024	Aug 16, 2024	Aug 16, 2024	Aug 18, 2024
OFFICE	NMSS/MSST	NRR/DNRL	NMSS	
NAME	KWilliams <i>KW</i>	ABilloch <i>AB</i>	JLubinski <i>JL</i>	
DATE	Aug 29, 2024	Aug 30, 2024	Sep 3, 2024	

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