



STATE OF WASHINGTON

DEPARTMENT OF HEALTH

OFFICE OF RADIATION PROTECTION

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September 3, 2024

John W. Lubinski, Director
Office of Nuclear Material Safety and Safeguards
United States Nuclear Regulatory Commission
Washington, D.C. 20555-0001

Dear Mr. Lubinski,

The Washington State Department of Health, Office of Radiation Protection (ORP), finds itself in a unique position of preparing for the second of two Management Review Board (MRB) meetings to discuss the Integrated Materials Performance Evaluation Program (IMPEP) review that was conducted in April 2024. In preparation for the second meeting, to be held on September 4, 2024, ORP wanted to be better prepared to speak to some unresolved questions and concerns that individuals on the MRB asked during the first MRB meeting that was held on July 25, 2024.

ORP is aware that the performance indicators reviewed during the July 25, 2024 MRB meeting will not be revisited and the outcome of those indicators will not be modified. However, we wanted to share the following critical information for the MRB to consider regarding our program status and our plans moving forward.

Culture Change

The Washington State ORP Radiation Materials (RadMat) Section was placed in Heightened Oversight in 2022, following a full IMPEP in April 2022. The RadMat Section has seen a high amount of staffing turnover in previous years which led to significant issues with staffing and training. ORP has determined this to be one of the root causes of the issues noted in the 2022 MRB final report. In an effort to address this root issue, ORP determined a need for increased focus on supporting the health and wellbeing of the team to increase staff retention. Culture change work is critical to our success, and we are committed to investing in the ORP team and be an employer of choice where the qualified team knows they are valued. Effectively changing culture is a long-term goal and is not accomplished quickly. The following are some of our accomplishments supporting culture change and staffing stability since the 2022 MRB designation of Heightened Oversight.

Immediately following the 2022 MRB, ORP worked with WA Department of Health (DOH) Human Resources to alter the standard position descriptions language to be more inclusive and flexible. Now, more life experience is considered over educational requirements for Radiation Health Physicists (RHP) in the position descriptions. Our goal was to potentially increase the candidate pool for job vacancies. While we have not seen an increase in the number of candidates with this change, we have seen and hired team members with relevant and alternative backgrounds, such as team members that

worked at the Puget Sound Naval Shipyard, who are committed to the WA program and the desire to achieve the qualifications necessary for a successful program.

ORP also made the decision to start an evaluation of the RHP salary and compensation. In 2023, ORP conducted a needs assessment for a review of the job classification for the RHP and the data collected revealed the following facts.

- ORP RHPs on average are paid 35% below market value compared to Health Physicists across the nation.
- ORP had a 34% staff turnover rate.
- RadMat Supervisor (RHP4) position has had 8 supervisors since 2018.
- On average, ORP receives 3 qualified candidates per job opening.
- Since the RadMat Section has been placed on Heightened Oversight, there has been decline in applicants and candidates applying to work for ORP.

As a result of this compelling information, WA DOH has prioritized the RHP salary and compensation package review for the entire agency to try to close the pay gap. WA DOH was required to work with the Washington State Office of Financial Management (OFM), a different state agency, to review the job classifications of the RHP. During the Summer of 2023, ORP began formally developing proposals for a compensation package. While we are seeing progress moving forward with the salary and compensation efforts for the RHP package, ultimately, implementation for a package does require the Governor's Office, OFM, and WA DOH Union Bargaining Units approval. If the package is successfully approved, adjusted salaries would be effective July 1, 2025. This is a significant milestone as the last time there was a review and modification for RHP's salary and compensation was in 2007.

Another current success is that although we experienced heavy turnover and loss of RadMat team members in 2018 through 2023, we are now fully staffed with the expectation of the hiring of a RadMat Section Manager within the next few months. This is a direct success to the effort and changes made around recruitment practices and culture change work, and the RHP salary and compensation package efforts will only increase the potential for future success in our staff retention and recruitment efforts.

Program Reconstruction

During the MRB meeting on July 25, 2024, there were several questions and concerns that WA DOH is not moving fast enough in addressing the issues noted in the 2022 IMPEP and MRB reports. As mentioned, true culture change takes time, and the MRB can be assured that the ORP program and team are in a very different place with a new talented and dedicated team as compared to two years ago. The ORP team in place for the 2022 IMPEP developed the initial Performance Improvement Plan (PIP) and completed many of the items that were identified in the PIP by summer of 2022. For example, the training and qualification requirements to ensure the essential objective in IMC 1248 was originally completed in 2022. However, ORP understood that more needed to be done to truly address the root cause of the issues, so in June of 2023, ORP leadership decided to reevaluate and make a plan to reconstruct the entire ORP RadMat program. Many of the items in the original PIP were revisited as

this additional internal review began. One specific item that led to the decision to redevelop the program was the See-One, Do-One, Lead-One training program for new staff, which was found to be inadequate by our internal review. The innovative decision to redevelop the program was an important decision that will have lasting impacts. This will ensure that the root causes of the issues are adequately addressed and the improvements we make in the program are sustained. The changes are and will continue to lead to enhanced team knowledge, experience, and will assist with confidence and effectiveness in licensing and inspection activities. This deeper dive into comprehensively reviewing and reconstructing the program is taking time, which is critical to ensuring that we are doing it well.

The tracking and management of our licensing and inspection data was identified as a root cause of some of the performance indicators being found SNI or UNSAT. Because of this, a key aspect of the program reconstruction includes the development of a new database that will more effectively track and retain licensing and inspection data. While WBL was considered, the database will be developed using a system already in place in the air emissions section which will allow for continuity across our sister programs within the Department. When implemented, this new database will offer increased efficiency and effectiveness of the core of our ORP activities. The official kickoff to this database project began on in June of 2024 and is expected to be completed by October of 2025.

In addition, the significant amount of Supervisor turnover was recognized as a potential issue that if not addressed will continue to prevent our successful program development. One potential root issue for this significant turnover is the fact that the Supervisors are faced with a large backlog of licensing and inspection activities to address, they also face significant process improvement assessments for items they may not have background experience with, they may require significant training for themselves and the staff they manage, and they are responsible for the general management of the daily activities of the ORP. ORP leadership noted all these tasks together can be overwhelming and could be a significant barrier to the success of a new supervisor joining and/or remaining on the team. ORP leadership team is committed to continue the primary management of the responsibilities of the program redevelopment and the ongoing resolution of PIP items. This will ensure that a new supervisor will have the ability to focus on implementation of the existing and newly implemented daily activities are maintained and provide adequate time for training to occur. All program activities will be transitioned as the new supervisor is able to fully integrate into the team.

Consultants

Because the fundamental changes in staffing and the extensive review and reconstruction of the program have been a focus over the past two years to address the root causes of the ORP issues, it became clear that ORP needed additional staffing capacity to stabilize the ongoing work. ORP has contracted and worked with multiple other states, individual contractors, and a consultant company for licensing, inspection, and training support to ensure public health protection is in place. Currently, there are three separate arrangements in place to support ongoing work, as well as to train, mentor, and qualify staff. It should be noted that these consultants are working alongside our WA ORP team with the goal of returning the program to a fully adequate and compatible state. Moving forward, we will continue to maintain these contracts with the consultants until the time that the ORP team is fully qualified for licensing and inspection and the more extensive program changes have been completed. Our consultants have been part of the program success and are a valuable asset to retain as a force

multiplier and resource for the upcoming years. This will ensure WA ORP will not slip back into a state where Heightened Oversight would become necessary.

Fee Work

The ORP RadMat Section is sustained fully by fees collected from licensees. As a result of the 2022 IMPEP and MRB findings, the ORP began a financial evaluation of the program in January of 2023 to ensure there is adequate revenue to support the section now and into the near future. The data from the evaluation indicated a fee increase is necessary and without an increase by 2025 the section revenue would not cover the anticipated costs necessary to maintain a successful program. A fee increase process is currently underway, and the new fee schedule is anticipated to be effective in October 2024. The increased fee revenue will be dedicated to the ongoing support of the contractors, support to maintain the current RadMat team without reductions in staffing, purchase of a new data base, and potential changes to the RHP salary and compensation package. Adequate funding is a key to team sustainability and the program moving forward, and the implementation of this new fee structure to keep up with necessary program needs is indication of WA ORP's commitment to ensuring a sustainable and adequate program.

Performance Indicators

Durning the July 25, 2024 MRB meeting, these following performance indicators were reviewed. ORP is providing additional information regarding the progress, accomplishments within the program and additional clarity on the plan moving forward.

3.1 Technical Staffing and Training

We continue to have staff attend and successfully complete required NRC training courses. In addition to required training courses we also have a contract in place with Brain Goretzki from Arizona, to provide training to staff in all inspection modalities leading to documented qualifications for some staff members. An updated tracking list of completed courses and interim qualifications for staff has been created and is being updated and maintained consistently.

3.2 Status of Materials Inspection Program

There were seven inspections which were performed in late 2023 and early 2024 which were not submitted into the data base and as a result were not included in the IMPEP team review. After an in-depth review of the data, there were seven Priority 1, 2, and 3 inspections that were completed on time and appeared to the IMPEP team to be overdue. The additional seven inspections that were completed modified the overdue inspections from 51% to 41% based on the calculation in SA-101 Appendix A.

This issue of incomplete information for the IMPEP team stems more directly from issues with the database, which has been determined to be inadequate in tracking of inspections, than the overall status of the inspections performed. This has been identified as described above and is a priority for our overall program redevelopment.

Since the IMPEP, we have completed 22 inspections and all Priority 1, 2 and 3 inspections have been completely in a timely manner. ORP has two Priority 1, 2, and 3 inspections due before the end of the

calendar year, one in October and one in December. Currently, we have 10 overdue Priority 1, 2 and 3 inspections. We have the staffing capacity in place to complete these inspections as per the required frequency and can concentrate on the 10 inspections that are currently overdue. Our goal is to have the inspections completed by the end of the year.

Moving forward, the ORP will hold an inspection planning meeting in January of each year. During this meeting, all inspections from the prior year will be assessed to ensure they are complete and a review of all inspections due in the upcoming year will then be assigned. This will ensure that all staff clearly know what inspections are needed and provides management a roadmap by which the status of the inspection program can be continuously monitored.

3.3 Technical Quality of Inspections

Four of ORP team members were accompanied by NRC inspectors in September 2023 and February 2024. All accompaniments were satisfactory according to the NRC.

Accompaniments have continued by ORP Management, and one was completed after IMPEP 2024. The remaining accompaniments of staff will be completed by the end of the calendar year.

3.4 Technical Quality of Licensing Actions

We are continuing to work with SummitET to provide support to organize and clear up the backlog of licensing actions (LA). SummitET licensing support is providing license review, QA of licenses, and development of new licensing templates as needed based on the format recommended in initial templates provided by the NRC. The NRC provided seven new templates to WA ORP and since January 2024, all LAs are translated over to the new licenses template before being issued, with the exception of one that required a rapid turnaround of an amendment request.

WA ORP has worked with SummitET licensing support to develop and document a workflow process that outlines the entire lifecycle of the licensing process. This workflow is being translated into job aids for the new staff to use as they begin to qualify and take over the licensing actions. These workflows will also be incorporated into our licensing procedure and database.

To address the previously identified root cause of inadequate tracking of information in the database, WA ORP has developed a single tracking spreadsheet used by both WDOH and SummitET to log all the existing and any new licensing actions and track the current status from the initial receipt of LA to issuance and closing.

The backlog of LAs began with 153 open LAs and with significant efforts by both SummitET licensing support and WA ORP staff since December 2023 has resulted in the completion or near completion of over 50% of the backlog. The following tables provide a detailed breakdown of this progress, and the goal is to have the backlog of licenses caught up by December 2024 with WA ORP staff beginning to handle new LAs with mentorship and QA performed by SummitET.

Medical

Total:	76	
Completed:	31	41%
Underway:	11	14%
Total Addressed:	42	55%
Awaiting work:	34	45%

Industrial

Total:	55	
Completed:	22	40%
Underway:	3	5%
Total Addressed:	25	45%
Awaiting work:	30	55%

Laboratory

Total:	26	
Completed:	12	46%
Underway:	1	4%
Total Addressed:	13	50%
Awaiting work:	13	50%

During the upcoming MRB meeting set for September 4, 2024, the following indicators will be reviewed.

3.5 Technical Quality of Incidents and Allegations

Since the IMPEP in 2022, we are continuing to make progress with the recommendations from the MRB. ORP completed all documentation related to the University of Washington contamination incident and the recommendation from the 2022 IMPEP has been closed. With the support and guidance from the NRC Assessment team visit in the Fall of 2023, ORP completed a cross reference of all allegations and the current data base, followed up with the allegers, wrote reports including a checklist for documenting, and worked with the NRC to complete tracking and identify all missing

records for allegations. During the 2024 IMPEP, it was noted that each case requiring NRC Headquarters Operations Officer (HOO) notification reported the incidents within the required time frame.

Following the IMPEP of 2022 and the NRC Assessment team visit in Fall of 2023, the Incident and Allegation Procedures were updated and reviewed by the NRC Assessment team prior to approval. The two procedures approved are compatible with NRC procedures and directives to guide adequate completion and consideration for follow-up. However, it has been noted that these implemented procedures have not been used consistently across the section. ORP has been actively conducting the necessary actions, including on-site response as needed, during incidents and allegations to ensure worker safety and public health is being protected. It also remains clear that the follow-up documentation of the actions taken has been lacking. ORP has identified that the root cause of this is due to an absence of management involvement and an adequate database with a current workflow. Both initially and at the completion of an incident or allegation, better tracking is necessary to ensure adequate documentation of follow-up actions and the closeout of an event is logged in the database.

We have developed and initiated a workflow review to ensure all roles and responsibilities are identified. The results of that review will help to identify any necessary clarifications to our existing team and will provide a basis for the creation of additional job aids to assist staff in adherence to the updated procedures. These updated procedures will be developed into a workflow that also include proceduralizing of management involvement and responsibilities throughout the investigation and reporting process. Ultimately, this workflow will be part of the new database and be a part of our solution moving forward.

While we are working through these official procedure review and processes updates, we have instituted a new temporary process to ensure we are adequately addressing all incidents and allegations. All open incidents and allegations are reviewed weekly at the RHP3 Program Lead meeting, which includes management, and the program leads, as well as at each weekly staff meeting that includes all staff. This ensures that we will not be relying on a single person for dealing with incidents and allegations and promotes learning and consistency as the workflow and procedure updates are documented.

All open actions have been investigated to ensure public and worker health and safety is protected. The majority of the open items were the result of unexpected and unidentified radioactive material and required a DOT Special Permit for return to the sender. The documentation for the remaining items are being finalized, reviewed and tracked by management to ensure complete records are present prior to closure, and all required items have been logged into NMED. Since the IMPEP review, four new incidents have been reported to NMED, those items are being tracked and followed by management through to closure.

Moving forward, there will be a continued and an increased level of management oversight until the new and updated Incidents and Allegations procedures are in place and trained on, and the new database is operating with a workflow. The weekly meetings with the RHP2 Program Lead will continue and the implementation of the new data base will bring final alignment for workflows and ensure that current

procedures are followed. The next updated Incident and Allegations procedures will be completed by the end of the year and the new database is scheduled for October 2025 implementation.

ORP is also continuing to audit the location of all allegation's records received and assess whether appropriate closure action was taken, determine that the files are complete, and that there is accurate and complete documentation in the data base. While this was completed in the Fall 2023 for all allegations, there are some additional gaps that need to be addressed with the final documentation and verify the files are complete. Our goal is to have an audit for quality control completed the end of the year with external contracting support.

4.1 Legislation, Regulations, and Other Program Elements

There has been much progress towards meeting the essential objectives since the 2022 IMPEP. The backlog of regulation amendments was eliminated and amendments for future adoption have been completed. No amendments are overdue for State adoption.

During the 2022 and 2024 IMPEP, non-standard licensing conditions were identified, and a comprehensive review continues to be underway. The majority of the licensing templates, before 2022, were not consistent with the NRC's standard as found in the NUREG-1556 series. Since the IMPEP 2022, and in partnership with SummitET, we have worked to adopt new templates that are consistent with the guidance in NUREG-1556. Since January 2024, as licensees seek amendments or renewals, their licenses are being transitioned to these new licensing templates and additional templates are being drafted as other license types are presented. With the use of these new templates, we don't anticipate needing a significant number of non-standard license conditions as was the case in the old templates.

Moving Forward

We recognize there has been a significant amount of change both with staffing and procedures due to the constant issue of staffing turnover for the past several years. In 2023 we decided we needed to take a good hard look at where we were at and make sure we were setting up our program and procedure updates on a strong base. Today, we have a solid staff of individuals in ORP who are committed and working diligently to get qualified in all inspection and licensing modalities. Our goal is for the program to be self-supporting and conducting all our own licensing actions and inspections by December 2025 with the ability to train and qualify our own staff without the need to rely on contractors and other Agreement States. Procedurally we know we have work ahead but also recognize that we have made key improvements that put us on track for lasting change in our program status. We continue to work to address recommendations from the IMPEP team, as well as refining our own licensing and inspection processes. Many of the findings from the April 2024 IMPEP can be traced back to a need for more follow through and management oversight to ensure that new and existing process are clearly communicated and followed through to completion. In the last several months we have instituted several changes to ensure management oversight is maintained. Additionally, management is focused on resolving the root cause of ongoing issues and identifying roadblocks that need to be removed in order to successfully resolve these issues. This is being accomplished through several mechanisms we have initiated:

- Weekly RHP3 Program Lead meetings to review the status all open Licensing Actions, Inspections, and Incidents and Allegations. Additionally, these meetings will look at workload across the sections to ensure no one person or modality is falling behind so management can adjust resources as necessary to support the work.
- Weekly staff meetings have an additional review of open items, giving all staff the ability to identify concerns or issues with completing necessary license actions, inspections and incidents and allegations responses.
- We are taking the time to walk through our procedures and create actual workflows, to better clarify roles and responsibilities. (We have completed the licensing workflow and are currently working on the incident and allegations workflow). These workflows can then be used to strengthen our procedures or create job aids to clarify who is responsible for the various actions whether that is a health physicist, our administrative assistant, our database manager or the supervisor. A critical piece is that the workflows will also be used to develop the business requirements for our new database.
- We will be starting to look ahead and preplanning inspections. In September 2024 management and the program leads will start by looking at the inspections due in the final quarter of 2024 and ensure they are assigned to a qualified inspector to complete. Initially we will be focused on ensuring that no priority 1, 2, and 3 inspections go overdue and then we will work to eliminate our current backlog. We expect to have all Priority 1, 2 and 3 inspections for 2024 completed on time. The remaining 10 past due Priority 1, 2 and 3 inspection are being scheduled with the goal to complete them by December 31, 2024. In 2025, we will look at all inspections due for the upcoming calendar year and assign them to qualified staff to complete on a prescribe timeline throughout the year to ensure that no inspections go overdue. Additional oversight from management will ensure that all inspection documentation is completed timely and properly stored for recordkeeping.
- We are continuing to work with our contractors to address the backlog of inspections and licensing actions. As those backlogs have decreased and are continuing to decrease, we are shifting to more of a training focus where qualified contractor personnel are able to train and help to qualify our staff to conduct all licensing actions and inspections by ourselves.

WA ORP agrees with the 2024 IMPEP team recommendation that WA DOH be found adequate to protect public health and compatible with the NRC's program. We hope you will see from this letter, the IMPEP report, and discussions with WA ORP leadership that significant and key program improvements have been completed. The IMPEP team noted that 4 of the 6 performance indicators are improving, highlighting traction and success since 2022. As the MRB Chair, we understand that you review the MRB members' recommendations and make the final determination regarding the status of the WA DOH program. We sincerely hope that this letter and the additional information we provided for the second portion of our MRB meeting will be helpful to you in making this decision.

John Lubinski, Director
September 3, 2024
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Sincerely,



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