



May 7, 2025

Adelaide S. Giantelli, Chief
State Agreement and Liaison Programs Branch
Division of Materials Safety, Security, State, and Tribal Programs
Office of Nuclear Material Safety and Safeguards
United States Nuclear Regulatory Commission
Washington, D.C. 20555-0001

SUBJECT: NEBRASKA DRAFT IMPEP REPORT

Dear Ms. Giantelli,

We would like to express our sincere appreciation to the IMPEP team for the time, effort, and professionalism they demonstrated throughout the review process. We recognize the significant commitment required to perform such evaluations, and we value the constructive nature of the feedback provided.

Nebraska respectfully disagrees with the assigned finding of "Satisfactory, but Needs Improvement" for the performance indicator *Technical Quality of Incident and Allegation Activities*. Nebraska believes that a finding of "Satisfactory" is more appropriate, as the State has demonstrated that incident evaluations and responses were conducted in accordance with established procedures, and that public health and safety were consistently maintained throughout the review period.

In Section 3.5, *Technical Quality of Incident and Allegation Activities*, paragraph 1 of the discussion, it is noted that Nebraska did not conduct on-site follow-up inspections for any of the cases reviewed. In accordance with Radioactive Materials Inspection Procedure (RMPP) 3.01, the Manager, RPM, or designee, has the authority to determine whether an immediate inspection is warranted or if the issue should be addressed during the next scheduled inspection. In Bullet 1 of the Evaluation of the same section, Nebraska disagrees with the statement that incident response and allegation procedures are not in place and followed. As noted above, in the two cited instances, documentation for a reactive inspection was not generated because no inspection was conducted—consistent with Nebraska's procedures, which do not require such documentation when an inspection is not warranted.

In Section 3.5, *Technical Quality of Incident and Allegation Activities*, paragraph 2 of the discussion, the team found it difficult to assess whether Nebraska's evaluation of incident notifications and responses was thorough, as Procedure 4.02 does not require documentation of decision-making. However, NRC policy (SA-105) does not require Agreement States to

document decision-making for incident evaluations. Rather, SA-105 instructs IMPEP team members to verify that inquiries are conducted in accordance with the State's procedures. Nebraska follows its established procedures, including RMPP 3.01, as stated in the above paragraph, which authorizes the Manager, RPM, or designee, to determine if a reactive or special inspection is warranted, whether it should be performed promptly or can be included in the next routine inspection; and assigns an inspection, if appropriate. Additionally, RMPP 4.02 allows for closure of an event when there is no further risk to public health and upon approval by the Manager, RPM. By conducting staff interviews during the IMPEP evaluation, the IMPEP team was able to determine that Nebraska's evaluation and response to incidents were appropriate and that public health and safety were maintained throughout the process. In Bullet 2 of the Evaluation of the same section, the IMPEP team found that Nebraska's evaluation and response to incidents were effective and that public health and safety were maintained throughout the process. These conclusions indicate that the team was able to assess the adequacy of Nebraska's actions based on available documentation and staff interviews. Therefore, Nebraska believes the information provided was sufficient for evaluation, and the statement in Bullet 2 should be removed.

In Section 3.5, *Technical Quality of Incident and Allegation Activities*, paragraph 3 of the discussion, the team states that in two of the four incidents, Nebraska issued a Notice of Non-Compliance to the licensee but did not complete a narrative inspection report or field team notes as required by Radioactive Materials Procedure (RMP) 3.04. Nebraska believes this statement should be revised for accuracy. A Notice of Non-Compliance was issued for one incident and one allegation—not two incidents, as stated. Additionally, the assertion that Nebraska did not follow RMP 3.04 is incorrect. In both cases, the Manager of the Radioactive Materials Program (RPM), after consultation with staff, determined that an immediate inspection was not warranted. Follow-up actions were conducted via email, telephone, and written correspondence. As no inspections were performed, there would be no narrative inspection reports or field notes required under RMP 3.04.

In Section 3.5, *Technical Quality of Incident and Allegation Activities*, paragraph 4 of the discussion, the team noted that Nebraska did not record a second incident in its inspection history log and did not document confirmation that the licensee's corrective actions were complete and effective. While the incident was not recorded in the inspection history log, Nebraska procedures do not require this. The subsequent inspection report referenced the reported event and provided information on where the event details could be found, indicating to the RPM that the incident had been reviewed and closed during that inspection. Additionally, the NMED report narrative for the incident stated that the component causing the event had been replaced and that safety operations had returned to normal. Although one incident was not followed up at the next inspection, the licensee's corrective actions were ultimately reviewed and verified during the license renewal process, which occurred approximately six months after the incident, confirming the necessary measures were implemented and maintained. Nebraska acknowledges that its procedures for event reporting could be improved to provide clearer guidance on where documentation should be recorded and maintained to ensure consistent follow-up during future inspections. However, Nebraska believes this should be addressed as a recommendation rather than a contributing factor to the overall finding. Nebraska has revised this procedure to include where documentation of events is to be maintained in the licensee file.

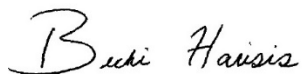
In Bullet 3 of the Evaluation, it is noted that one event involving lost material was not reviewed during the next inspection. While this is accurate, Management Directive 5.6 states that a finding of "Satisfactory, but Needs Improvement" is warranted when follow-up inspections are completed in more than a few, but less than most, of the cases reviewed. Nebraska had four incidents and two allegations during the review period, with only one event not reviewed at the subsequent inspection. Based on this, Nebraska does not believe this single instance justifies a "Satisfactory, but Needs Improvement" finding.

Please be advised that Charity Menefee, Director of the Division of Public Health, has submitted her resignation, effective May 9, 2025. Additionally, Russ Fosler, Administrator of Investigations and Environmental Health, has announced his retirement, effective May 23, 2025.

Until further notice, all future correspondence should be directed to Becky Wisell, Deputy Director of the Licensure and Environmental Health Section. Information regarding successors to these positions can be shared once available, if needed.

Thank you again for the IMPEP team's dedication to the review process and for the opportunity to provide these comments.

Respectfully,

A handwritten signature in cursive script that reads "Becki Harisis".

Becki Harisis
Program Manager, Radiation Control Program
Office of Radiation Control
Nebraska Department of Health and Human Services