



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

December 10, 1997

Mr. James Wiley, Interim Director  
Department of Regulation and Licensure  
Nebraska Health and Human Services System  
301 Centennial Mall South  
P.O. Box 95007  
Lincoln, NE 68509-5007

Dear Mr. Wiley:

Enclosed is the final report of the Follow-up IMPEP review of the Nebraska Radiation Control Program. The review of the Nebraska program was conducted by an interoffice team during the period September 16-18, 1997. The follow-up review covered the State's response to, and resolution of, 15 recommendations made during the July 15-19, 1996 IMPEP review.

The review team found the State's performance in responding to and resolving the 15 recommendations within the State's scheduled "Get-Well Plan" completion date of July 1, 1997, to be satisfactory with the exception of Recommendations 6 and 10. Recommendation 6 discussed the need for the State to develop comprehensive administrative and technical procedures. This area was identified as one of the primary root causes for the significant deficiencies found in the program during the previous 1996 IMPEP review. Recommendation 10 specifically discussed the need to develop procedures for responding to allegations. The team concluded that overly optimistic assumptions and inexperience by program management and staff in the Agreement State program contributed to the underestimate of the time and resources required to complete the "Get-Well Plan." Additionally, NRC recognizes the State's efforts to provide a timely response to two of the recommendations made by the team at the exit briefing with the State: (1) development of a new schedule for completion of the written procedures, to be provided within two weeks after the completion date of the onsite follow-up review, and (2) that the State provide monthly status reports by telephone. The State provided a new schedule for completion of the written procedures and other pending "Get-Well Plan" issues on October 1, 1997, and monthly teleconferences were scheduled and conducted on October 8, 1997 and November 5, 1997.

Based on the follow-up IMPEP review, the MRB finds that the Nebraska program remains adequate to protect public health and safety but needs improvement, and compatible with NRC's program.

Based on the results of the follow-up IMPEP review, the next IMPEP review will be scheduled within one year of the date of this follow-up review.

Section 5 on page 15 of the enclosed final report presents the follow-up IMPEP team's recommendations. We request your evaluation and response to Recommendations 2 through 5 within 30 days from the receipt of this letter.

I appreciate the courtesy and cooperation extended to the IMPEP team during the follow-up review.

Sincerely,

  
Hugh L. Thompson, Jr.  
Deputy Executive Director  
for Regulatory Programs

Enclosure:  
As stated

cc: Robert Leopold, Administrator  
Public Health Assessment Division  
Nebraska Health and Human Services System

Brian Hearty, Program Manager  
Radioactive Materials  
Nebraska Health and Human Services System

David P. Schor, M.D., M.P.H.  
State Liaison Officer

WILEY 10/11/97

James Wiley

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Sincerely,

Original Signed by  
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Deputy Executive Director  
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State Liaison Officer

bcc: Chairman Jackson  
Commissioner Dicus  
Commissioner Diaz  
Commissioner McGaffigan

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\*See previous concurrence.

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**INTEGRATED MATERIALS PERFORMANCE EVALUATION  
PROGRAM (IMPEP) FOLLOW-UP REVIEW  
OF THE NEBRASKA RADIATION CONTROL PROGRAM**

**SEPTEMBER 16-18, 1997**

**FINAL REPORT**

U. S. Nuclear Regulatory Commission

## 1.0 INTRODUCTION

This report presents the results of the follow-up review of the Nebraska radiation control program conducted September 16-18, 1997. The follow-up review was conducted by a review team comprised of technical staff members from the Nuclear Regulatory Commission (NRC). Team members are identified in Appendix A. The follow-up review was conducted in accordance with the "Policy Statement on Adequacy and Compatibility of Agreement State Programs," published in the *Federal Register* on September 3, 1997 (62 FR 46517), and the September 12, 1995, NRC Management Directive 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)." The follow-up review covered the State's response to, and resolution of, 15 recommendations made during the July 15-19, 1996 IMPEP review. The follow-up review also covered the status of the program during the following period of July 20, 1996 - September 12, 1997. Preliminary results were discussed with Nebraska management on September 18, 1997.

A draft of this report was issued to Nebraska for factual comment on October 10, 1997. The State of Nebraska responded in a letter dated October 31, 1997, from Robert Leopold, Administrator, Public Health Assessment Division, Department of Regulation and Licensure, Nebraska Health and Human Services System (Attachment 1). The State's comments have been incorporated into the final report. A copy of the final report was provided to the Management Review Board (MRB). The MRB considered and concurred in the team's overall recommendation and found the Nebraska radiation control program remains adequate to protect public health and safety but needs improvement, and compatible with NRC's program.

The Nebraska Department of Health and Human Services System (NHHS) is the agency within the State of Nebraska that regulates, among other public health issues, radiation hazards. The Director, NHHS, is appointed by and reports directly to the Governor. Within NHHS, the Nebraska radiation control program is administered by the Department of Regulation and Licensure, under the Public Health Assessment (PHA) Division. The program is coordinated within Consumer Health Services (CHS) under the Consumer Safety Protection Team. The CHS team was recently reorganized in May 1997 to consolidate all radiation programs including X-ray. The Department of Regulation and Licensure and the PHA Division organization charts are included as Appendix B. During the review period, the Nebraska program regulated 148 specific licenses which include three large commercial irradiators, one converted teletherapy research irradiator, manufacturers, broad academic, broad medical, radiopharmacy and radiographers. The State is also in the process of conducting a licensing review of a low-level radioactive waste disposal site. The low-level radioactive waste (LLRW) disposal regulatory program is jointly administered and managed by NHHS and the Nebraska Department of Environmental Quality (NDEQ) through a Memorandum of Understanding. In addition to its radioactive materials and low-level radioactive waste disposal programs, NHHS is responsible for the control of machine produced radiation, NARM, and emergency response planning for two nuclear power plants. The follow-up review focused on the materials program as it is carried out under the Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the State of Nebraska.

The review team's general approach for conduct of the follow-up review included:

(1) evaluation of the State's implementation of their "Get-Well and Stay-Well Plan," that was accepted by the MRB at the January 22, 1997 MRB meeting, (2) the status of the program during

the period of July 20, 1996 - September 12, 1997, (3) review of the status of applicable Nebraska statutes and regulations, (4) review of quantitative information from the radiation control program licensing and inspection database, (5) technical review of selected inspection program documentation for response to issues identified during the previous review, and (6) interviews with staff and management to answer questions or clarify issues. The team evaluated the information that it gathered against the IMPEP performance criteria for each common and non-common performance indicator and made a preliminary assessment of the radiation control program's performance.

## 2.0 STATUS OF PREVIOUS REVIEW

The previous routine IMPEP review, conducted on July 15-19, 1996, resulted in a finding for Nebraska that the radiation control program was "adequate to protect public health and safety but needs improvement, and compatible with NRC's program." Due to the significance and number of deficiencies found in the Nebraska program, which included a finding of unsatisfactory in one performance indicator, the review team recommended a period of probation for a duration to be established after consultation with the Nebraska radiation control program management. In consideration of the corrective actions taken, and actions planned, that were presented by the State at the January 22, 1997 MRB meeting, in a "Get-Well and Stay-Well Plan" to address and close out all recommendations by July 1, 1997, the review team revised their recommendation. The recommendation for probation was changed to a recommendation for a follow-up review of the State's radiation control program, to be conducted within one to one and one-half years from the date of the last IMPEP review, but not later than September 1997. The team also recommended that the State keep NRC apprised of the status of corrective actions and plans. The MRB concurred in the team's revised recommendation.

In the February 12, 1997 cover letter transmitting the final report of the July 1996 review, the State was also requested to provide NRC with (1) a copy of the actual Corrective Action Plan (Step I and II), and (2) a status report of resolution of the corrective actions and plans every two months.

By letter dated May 2, 1997, to Hugh L. Thompson, Jr., (Appendix C) then Acting Executive Director for Operations, and the Chairperson of the MRB, the State provided one response to the request for a status report every two months. The status report indicated that the corrective actions remained on schedule for completion by the July 1, 1997 "Get-Well Plan" end date. The report summarized the status of corrective actions and included information on the development of a major database program that could accommodate tracking and status of most of the program's information related to the State's material licensees. Attached to the report was a more definitive Gantt Chart that presented a schedule for completion of the various tasks. The schedule covered development of work on (1) the new database tracking system for inspections including reciprocity inspections, and procedures for inspection plans, including those completed by contractors, (2) a staff qualification manual drafted by a contractor, (3) completion of a licensing action prioritization procedure in January 1997 and continuing development of additional comprehensive administrative procedures, (4) annual supervisory accompaniments of inspectors, (5) use of NRC Manual Directive 8.8 for "Management of Allegations," (6) use of the draft "Handbook on Event Reporting in the Agreement States," and development of an event tracking database, (7) reporting on February 28, 1997 of all outstanding events identified during the 1996 IMPEP review, and the beginning of routine monthly event reporting on January 31, 1997, (8) compilation of all LLRW

training data for agency personnel, and (9) a revision to regulation 180 NAC 1-012.22, the State's Part 61 equivalent rule to low-level radioactive waste facilities that process or store waste, as well as disposal sites, with expected adoption by June 1997.

The State did not provide a bimonthly written status report for July 1997. During informal telephone discussions, the State continued to reiterate its expectation to complete the "Get-Well Plan" as scheduled. During discussion of the scheduling for the follow-up review, the team learned that several changes in management had occurred within the Department above the first line supervisor, and that procedures had not been completed. As part of the preparatory process for an IMPEP review, the team requested a written report of the current status of corrective actions and the changes in management. The State provided a status report on September 8, 1997 (Appendix C), that identified changes in management, staffing, and schedules. The September 8, 1997 status report is covered in greater detail in recommendation No. 6 of this report.

Results of the follow-up review of the State's response and resolution of the 15 recommendations encompassing the IMPEP common and non-common performance indicators are presented in Section 3 and Section 4. Section 5 summarizes the review team's findings and recommendations during the follow-up review.

### 3.0 COMMON PERFORMANCE INDICATORS

The IMPEP process uses five common performance indicators in reviewing both NRC Regional and Agreement State programs. These indicators are: (1) Status of Materials Inspection Program; (2) Technical Staffing and Training; (3) Technical Quality of Licensing Actions; (4) Technical Quality of Inspections; and (5) Response to Incidents and Allegations.

#### 3.1 Status of Pending Issues Identified under "Status of Materials Inspection Program"

During the September 1997 follow-up review, the review team focused on four of the five factors in this indicator: inspection frequency, overdue inspections, initial inspection of new licenses, and timely dispatch of inspection findings to licensees. To evaluate these issues, the review team interviewed program management and staff, reviewed automated data, and examined the State's responses to the recommendations in the final report of the 1996 IMPEP review, which resulted in a finding of satisfactory with recommendations for improvement. The final report contained three recommendations for this indicator. The results of the follow-up review team's evaluation of the State's response to the three recommendations are presented below:

##### Recommendation 1

The review team recommends that the managers responsible for the Nebraska Radioactive Materials Program establish an action plan or procedure to assure inspections are completed at the frequencies stated in the Nebraska Inspection Manual which is equal to the NRC's IMC 2800 and conduct reciprocity licensee inspections at the required frequencies stated in IMC 1220.

### Current Status

In the State's May 2, 1997 corrective action status report the State indicated that it had (1) updated its database system with the appropriate inspection frequencies equal to IMC 2800, (2) developed a database tracking system from which each inspector could generate a report on his or her computer showing inspections coming due, (3) developed an inspection tracking system that included reciprocity requests and that allows the inspector to generate a report indicating which licenses will be available for inspection, and (4) revised its process to assign reciprocity inspections in accordance with frequencies stated in IMC 1220. In the September 8, 1997 status report the State reported only one overdue inspection and all past due and routine inspections were scheduled into the third quarter of 1998.

During the review, the team evaluated the computer tracking system and found that the new system greatly improved the oversight capabilities of the inspection process. The following list provides selected examples of reports that could be generated from the system.

- Pending Inspections for Twelve Months through September 6, 1997
- Inspections Completed from July 1996 to Current Date
- Specific Licensee Reports
- Reciprocity Inspections by Priority

The team evaluated the automated status reports, discussed clarifying issues with the Program Manager for Radioactive Materials, and found that the Program Manager could now identify overdue, past due and missed inspections, and take the necessary actions to address the needs of the inspection program in a timely manner. Discussions with the staff determined that they were knowledgeable in the use of the computer tracking systems for inspections. The follow-up review team found there were no overdue inspections, and all inspections due for inspection by the third quarter of 1998 were scheduled and assigned to an inspector. The State had performed 11 reciprocity inspections out of a total of 25 since the 1996 IMPEP review. The team found that the State does have adequate written procedures equivalent to IMC 2800 and 1220. On September 12, 1997 the State issued Radioactive Materials Procedure (RMP) No. 7.03, "Program Management - Routine Oversight," which outlines the frequencies of internal audits to assure inspections are being performed and includes a notation regarding supervisory accompaniments.

Based on the follow-up review, the team considers this recommendation to be closed.

### Recommendation 2

The review team recommends that the managers establish an action plan or procedure for coordinating deviations from the inspection schedule between staff and management based on the risk of license operations, past performance and need to temporarily defer the inspections to address more urgent or critical priorities.

### Current Status

In the State's May 2, 1997 corrective action status report, the State noted that "the inspection scheduling and the upper management stay-well procedures will both establish methodologies for coordinating deviations from the inspection schedule and rescheduling of missed inspections."

The team evaluated the automated status reports, discussed clarifying issues with the Program Manager, and found that management can now identify and manage the deviations from the inspection schedule. The team found that the State does have written procedures equivalent to IMC 2800 and 1220 which allow for extending or reducing the frequency of inspections. RMP No. 7.03 outlines the frequencies of internal audits to assure inspections are being performed. The Program Manager indicated that following the written procedures and through the automated daily, weekly, monthly and quarterly inspection status reports, he is aware of the inspection program status and can assure coordination of the deviations from the inspection schedule and rescheduling of missed inspections in a timely manner.

Based on the follow-up review, the team considers this recommendation to be closed.

### Recommendation 3

The review team recommends that the managers organize a "Get-Well Plan" for rescheduling missed or deferred inspections, especially due to loss of senior staff; and establish a plan or methodology to assure initial inspections are performed within six months of issuance of the license, beginning licensed activities, or within one year of license issuance, whichever comes first, in accordance with the Nebraska Inspection Manual and NRC's IMC 2800.

### Current Status

The State's May 2, 1997 corrective action status report stated that all new licenses issued are assigned an inspection date of six months following issuance. The licenses are conditioned to require the licensee to notify the State prior to commencement of licensed operations.

The team reviewed a sample computer report of New Licenses Issued since the July 1996 review, and compared it to the information in the State's September 8, 1997 status report. The team found that initial inspections of four of the five newly issued licenses are scheduled for the third and fourth quarters of 1997, which is within six months of the issue date of the license. The team also found that the State had contracted out 29 inspections; the results of which had been completed and documented. The team found that on August 21, 1997, the State issued RMP No. 7.04, "Program Management - Upper Management Oversight," which addresses loss of staff, staff qualifications and unplanned or increased workloads. The team evaluated the procedure and found it adequately outlines a "Get-Well Plan" for rescheduling missed or deferred inspections, especially due to loss of senior staff. The team also found that the State does have written procedures equivalent to IMC 2800 which address scheduling of initial inspections.

Based on the follow-up review, the team considers this recommendation to be closed.

### 3.2 Status of Pending Issues Identified under “Technical Staffing and Training”

During the September 1997 follow-up review, the team considered all of the factors for this indicator: the radioactive materials program staffing level, staff training and qualification planning, management attention and review of program problems, and development of corrective action plans, when necessary. To evaluate these issues, the review team interviewed program management and staff, and considered the continuing backlog in licensing. The team also examined the State’s responses to the recommendations in the final report of the 1996 IMPEP review, which resulted in a finding of satisfactory with recommendations for improvement. The final report contained three recommendations for this indicator. The results of the follow-up review team’s evaluation of the State’s response to the three recommendations are presented below:

#### Recommendation 4

The team recommends that the qualifications of contractor personnel be tied to the contract as identified by the program manager or as accomplished by the LLRW program in NDEQ.

#### Current Status

In the State’s May 2, 1997 corrective action status report, the State informed NRC that the inspection contract included a requirement for qualifications of the inspectors, and for the submission of an inspection plan for agency approval prior to each inspection.

The team found that Nebraska had adopted a model contract (which implements the recommendation) for guidance in negotiating future contracts. The model contract comprises Attachment 7.04-1, entitled “Draft Inspection Contract,” to RMP No. 7.04, entitled “Program Management - Upper Management Oversight.” The subject procedure was approved by James A. Wiley, Interim Director, Department of Regulation and Licensure, effective August 4, 1997. The team finds the contract clause of inspector qualifications to be an acceptable implementation of the recommendation.

Based on the follow-up review, the team considers this recommendation to be closed.

#### Recommendation 5

The team recommends that a written program for staff qualification, including retaining training records, be developed.

#### Current Status

The State’s “Get-Well” corrective action plan stated that the recommendation had been adopted and that a qualification manual was in draft and would be implemented prior to July 1, 1997. The State’s May 2, 1997 status report did not report on this item. In the State’s September 8, 1997 status report, the State indicated that the manual had been completed and implemented effective September 3, 1997.

The team confirmed that the qualifications manual, RMP No. 6.01 was approved by James A. Wiley, Interim Director, Department of Regulation and Licensure, effective September 3, 1997. The Nebraska manual addresses basic training, advanced and specialized training, and continuing education, all by license category. A policy statement on training expresses the management position and commitment to technical staff training and qualification, and provides the general qualification procedure. Staff experience is addressed through a statement detailing the expected progress of technical staff in completing the training and qualification requirements.

RMP No. 6.02, also approved effective September 3, 1997, addresses training resources that may be used to complete the qualification requirements. An attachment to the RMP No. 6.02 incorporated the draft recommendations of the NRC/OAS Training Working Group. The team found that an adequate procedure for staff qualification and training has been adopted. The team recommends that the NRC review the results of the use of the new procedures at the next IMPEP review.

Based on the follow-up review, the team considers this recommendation to be closed.

#### Recommendation 6

The team recommends that the State develop comprehensive administrative procedures, sufficient to guide the day-to-day operation of the program in the event of another loss of senior staff. The procedures should include a formal process for bringing to the attention of upper management the increase of significant backlogs of licensing, inspection, or enforcement actions, or any other situation which increases the risk to public health and safety. Licensing procedures should include prioritization of licensing actions based upon identified factors, including health and safety significance, for new and previously received applications.

#### Current Status

The team noted that in the cover letter transmitting the final report of the 1996 IMPEP review, Nebraska was asked to report its progress in completing the corrective actions at bimonthly intervals. The first report was provided by the State on May 2, 1997. The State's May 2, 1997 corrective action status report reiterated that the State would develop and implement all procedures by July 1, 1997, as presented in the "Get-Well, Stay-Well" corrective action plan at the January 22, 1997 MRB meeting, and as adopted in the final report of the 1996 IMPEP review. In the status report the State indicated that:

"Comprehensive administrative procedures are in the development stage. Currently, relevant NRC and Agreement State procedures, policies, and guidance documents are being gathered for use as reference in the preparation of program procedures. A licensing action prioritization procedure was completed in January, and all pending licensing actions are assigned a priority when logged [into a recently developed database]."

The State did not provide a written bimonthly status report for July 1997. During informal telephone discussions prior to July 31, 1997, the State continued to reiterate its expectation to complete the "Get-Well Plan" as scheduled. During discussion of the scheduling for the follow-up

review, the team learned that several changes in management had occurred within the Department above the first line supervisor, and that procedures had not been completed. As part of the preparatory process for an IMPEP review, the team requested a written report of the current status of corrective actions and the changes in management. The State provided a status report on September 8, 1997, that identified changes in management, staffing, and schedules. The report informed NRC that a new NHHS interim director had been appointed in July 1997, and that a new coordinator for the reorganized CHS team had been appointed in May 1997. The State informed NRC that one vacancy had been created by the reassignment of the regulations and licensing reviewer to another department at the end of August 1997, and included a time-line schedule for filling the vacant position. The report also included the following information: (1) an inspection schedule, (2) weekly management oversight meetings were continuing, and (3) a completely new milestone schedule Gantt Chart. The new chart information did not correlate to the information that was included in the previous May 2, 1997 chart, which made it very difficult to compare the previous status of specific issues to the current status of issues. The new chart indicated a current backlog of only one inspection and stated that the licensing backlog has been reduced but not eliminated (78 licensing actions still pending), and that most of the pending procedures (totaling 27) would be completed by the end of the third quarter 1997, with all procedures to be completed by the end of the fourth quarter 1997. In the new chart the State reported that 18 procedures would be completed by the end of the third quarter 1997 and that the remaining 9 procedures would be completed by the end of the year (1997). Additionally, the State reported in the cover letter with the chart that "comprehensive procedures should be available for use by January 1998." The team found that the State had only completed 4 of the 27 procedures, one additional procedure was in draft, and work had begun on one other procedure. At the time of the follow-up review, the State had not developed a revised, realistic schedule as to when the remaining procedures would likely be completed.

Due to the team's concerns regarding the discrepancies between the team's findings and the status of "Get Well Plan" completion, inadequate communications, and the information provided by the State in their corrective action summary report, the team discussed the findings separately with the program manager, team coordinator, and acting division administrator. As a result of the discussions, the team concluded that the discrepancies were the result of (1) continuing changes in management that resulted in totally new management above the first level supervisor, (2) a relatively inexperienced first line-supervisor and staff, and (3) the State's assumption that they could not renegotiate the "Get-Well Plan" completion date based on the State's experience with other Federal agencies where any changes would most likely require public comment.

Based on the following observation, that nine of the 27 procedures were related to fees, billing and budgeting, and general licenses (as opposed to specific licenses), the team discussed a prioritization schedule for pending procedures. The team identified 18 procedures for actions supporting the technical elements of the materials program that address the problems which underlie the recommendation. In discussions with the Program Manager, the eight most critical of the remaining procedures (involving the review of applications for specific licenses, the conduct of materials inspections, and response to events) were identified.

The team also observed that effective procedures for the management of the licensing and inspection programs, centered around the computerized tracking system discussed elsewhere in this report, were in place and being used. The procedures, however, were not written down, even

in draft form. The State had thus not fully met its commitment to the NRC to complete and implement the procedures by July 1, 1997.

The team also found that the schedule for completion of the corrective actions as committed to at the MRB meeting was not achievable. The team believes this was due to overly optimistic assumptions and management inexperience in the Agreement State program, resulting in an underestimate of the time and resources required, rather than a continuation of the lack of upper management support identified during the July 1996 review. Current management support is demonstrated by the fact that the program received authorization for a new position and hired a new staff assistant, and is in the process of refilling a position opened by a personnel transfer on September 1, 1997, both despite the Department being over its authorized FTE limit and under a hiring freeze.

The team recommended at the exit briefing with the State that Nebraska develop a new schedule for the completion of the written procedures based on experience gained to date, to be provided within two weeks after the completion date of the onsite follow-up review.

NOTE: The State responded to Recommendation 6 above on October 1, 1997 (Appendix C), within the requested two-week time frame. The revised schedule indicated that all pending actions and procedures will be completed by December 31, 1998. The State and NRC also conducted a monthly telephone conference call on October 8 and November 5, 1997.

The team suggests that the State place a higher priority on procedures related to those items identified as most critical, followed by those procedures identified as supporting the technical elements of the program.

The team recommends that the State provide copies of the procedures to NRC as they are completed for review.

The team recommends that regular communications, both verbal and written, be scheduled and maintained during the completion period. The State is requested to provide monthly status reports by telephone. The State is also requested to continue to provide a corrective action status report every two months.

Based on these findings, the team considers this recommendation to remain open, with the above new suggestion and recommendations added.

### 3.3 Status of Pending Issues Identified under "Technical Quality of Licensing Actions"

The State was found to be satisfactory for this indicator and the review team did not identify any specific issues.

### 3.4 Status of Pending Issues Identified under "Technical Quality of Inspections"

During the September 1997 follow-up review, the review team focused on three of six factors in this indicator: supervisory accompaniment of inspectors, quality of inspection field notes and promptness of supervisory review, and timeliness and appropriate closure of inspections

performed by contractor inspectors. The team also reviewed the final report of the 1996 IMPEP review, which resulted in a finding of satisfactory with recommendations for improvement for this indicator. The final report contained three recommendations for improvement in this area. The results of the follow-up team's evaluation of the State's response to the three recommendations are presented below:

#### Recommendation 7

The review team recommends that the State consider for adoption a policy of annual supervisory accompaniments of all individuals who perform inspections for the Radioactive Materials Program.

#### Current Status

The State's May 2, 1997 corrective action status report stated "that annual supervisory accompaniments of inspection team members will be required in the qualifications manual that is being drafted."

The team discussed annual supervisory accompaniments of inspectors with the Program Manager. The Program Manager stated that he had accompanied two of the staff inspectors since July 1996, but had not made a formal written report of these accompaniments. The team noted in its review of the previously cited RMP No. 7.03, "Program Management - Routine Oversight," that supervisory accompaniments are noted in the procedure and as an indicator in the Upper Management Quarterly Report. During review of RMP No. 6.01, entitled "Qualifications and Training - Qualifications Manual," issued September 3, 1997, the team found that the procedure states, "The Program manager will... accompany each lead inspector at least annually."

The team recommends that in following RMP No. 6.01 "Qualifications and Training - Qualifications Manual," that documentation of the accompaniment or other means of tracking that the accompaniment occurred should be pursued.

Based on the follow-up review, the team considers this recommendation to be closed.

#### Recommendation 8

The review team recommends that the State develop a plan or procedure to assure that field notes, as well as, reports, and enforcement letters are promptly reviewed, signed and dated by a supervisor within the recommended 30 day time frame for issuance of inspection findings.

### Current Status

In the State's May 2, 1997 corrective action status report, the State indicated that the new database system allows tracking of each aspect of the inspection from due date to acknowledgment of licensee's response to a notice of violation. A database report is available at any time to program management showing the time line of each open inspection. The inspection procedures will outline the time line requirements that are coded into the database system and outline the management oversight necessary to ensure that these goals are met.

The team evaluated a sampling of inspection documentation in ten inspection cases. The team found documentation of a supervisory review in the field notes and that issuance of a letter forwarding the results of the inspections had been completed and issued on average within 30 days of the inspection. Inspection milestone dates were tracked in the new automated database tracking system. A sample database report covering Pending Inspection Completions, September 16, 1997, indicated that as of September 16, 1997 there were 23 inspections awaiting final completion. The team found that the State does not consider the inspection closed until either an inspection letter is sent, in the case of a clear inspection, or an acknowledgment letter is sent in response to the licensee's letter documenting corrective actions in the case of enforcement letters with a notice of violation or recommendation. The team noted that the quality of inspection documentation and the timeliness in issuance of inspection results has greatly improved.

Based on the follow-up review, the team considers this recommendation to be closed. (See Recommendation 3, page 16 of this report, for further guidance.)

### Recommendation 9

The review team recommends that the State perform an immediate review of all contractor field notes and draft enforcement letters in order to finalize and issue the findings of the remaining 22 inspections to the licensees involved.

### Current Status

In the May 2, 1997 corrective action status report, the State noted that the inspections were completed as previously indicated in correspondence to NRC.

The team reviewed several of the contractor inspections performed prior to the July 1996 review and confirmed that these inspections had been reviewed by the Program Manager and completed. The team also reviewed a sample of the 29 contractor inspections performed since January 1997 and found that these were completed in a timely manner.

Based on the follow-up review, the team considers this recommendation to be closed.

### 3.5 Status of Pending Issues Identified under "Response to Incidents and Allegations"

During the September 1997 follow-up review, the review team focused on six of the seven factors in this indicator: responsiveness, investigative procedures, corrective actions, follow up, compliance and notifications, as necessary. To evaluate this indicator, the team interviewed

program management and staff, evaluated sample case work and reviewed the State's response to the final report of the 1996 IMPEP review, which resulted in a finding of satisfactory with recommendations for improvement. The final report contained four recommendations for this indicator. The results of the follow-up review team's evaluation of the State's response to the four recommendations are presented below:

#### Recommendation 10

The review team recommends revising the allegations procedures to incorporate key areas, i.e. documentation of any communications with the alleged, documentation of the inspection findings, interviewing techniques, etc., identified in NRC Manual Directive 8.8, Management of Allegations.

#### Current Status

The State's May 2, 1997 corrective action status report stated that "the program has used the key ideas of Management Directive 8.8 in dealing with recent allegations. These ideas will be incorporated into program allegation procedures."

The follow-up review team found that the Program Manager for Radioactive Materials is using the guidance contained in NRC Management Directive 8.8 in dealing with recent allegations. The Program Manager indicated that they plan to incorporate key ideas from Management Directive 8.8 into their own procedure, which has not yet been drafted. An evaluation of a few case files indicated that the State is using the guidance contained in Management Directive 8.8 to improve the quality of communicating, interviewing and documenting allegations. The State needs to complete development and implementation of a written procedure.

The team recommends that the State continue development and implementation of procedures to manage allegations and provide staff training so that all inspectors are knowledgeable in those procedures.

Based on these finding, the team considers this recommendation to remain open, with the above new recommendation added.

#### Recommendation 11

The review team recommends that the staff use the draft "Handbook on Event Reporting in the Agreement States (Handbook)," published March 1995, for review and reporting of material events to NRC.

#### Current Status

The State's May 2, 1997 corrective action status report stated that the "Handbook on Event Reporting in the Agreement States" is currently being used by program staff and will be incorporated into the event reporting procedures."

The follow-up review team found that the Program Manager for Radioactive Materials is using the event reporting guidance contained in the NRC "Handbook," and was in the process of incorporating the "Handbook," and instructions for using the Nuclear Materials Events Database (NMED) into their own procedures. The staff had developed RMP No. 402, "Radioactive Material Events," which will provide guidance on monitoring and tracking of material events and will incorporate NRC's event reporting guidance. The proposed procedure was undergoing internal review.

Based on the follow-up review, the team considers this recommendation to be closed. (See Recommendation 3, page 16 of this report, for further guidance).

#### Recommendation 12

The review team recommends establishment of comprehensive procedures for tracking, follow-up and close out of events involving the use of radioactive material covered under the Atomic Energy Act.

#### Current Status

The State's May 2, 1997 corrective action status report stated that "the program created an event database to track all possible material events. The event procedures will establish event follow up and close out procedures."

The follow-up review team found that the State has created a satisfactory database to track receipt, follow up, and close out material events. The database is a subset of a primary master database developed with Microsoft Access that can accommodate tracking most of the information related to the State's material licensees.

Based on the follow-up review, the team considers this recommendation to be closed.

#### Recommendation 13

The review team recommends that the State immediately begin reporting current material events to NRC and send in information on the three events identified during the review as reportable, that were not previously reported to NRC.

#### Current Status

The State's May 2, 1997 corrective action status report stated that the "program began routine monthly reporting on January 31, 1997 and reported all previous reportable events on February 28, 1997."

The follow-up review team found that on February 28, 1997, the State did provide NRC information on three events that had been identified during the 1996 IMPEP review as not having been reported. The team also found that the State is continuing to provide information on the occurrence of any reportable events on a monthly basis in accordance with NRC guidance.

Based on the follow-up review, the team considers this recommendation to be closed.

#### 4.0 **NON-COMMON PERFORMANCE INDICATORS**

The team reviewed two non-common performance indicators that applied to the Nebraska program, Legislation and Regulations and Low-Level Radioactive Waste Disposal Program.

##### 4.1 Status of Pending Issues Identified Under Legislation and Regulations

During the September 1997 follow-up review, the team focused on a regulation issue related to compatibility. The final report had one recommendation.

##### Recommendation 14

In accordance with the State's commitment, the team recommends that Nebraska amend 180 NAC 1-012.22 to remove its applicability to waste treatment and storage facilities.

##### Current Status

In response to the team's request for clarification regarding application of the public dose limits in the State's equivalent regulations to 10 CFR Part 61, the State responded in a letter dated December 13, 1996, that they did not currently have any brokers, treatment facilities, or storage facilities to which this regulation applied. In accordance with the Division 1 compatibility requirement designation (now Category A ) the Department expressed its intent to amend the regulation. The State included a copy of the proposed amendment.

It was determined by NRC that if the draft rule were adopted without change, it would be compatible. At the MRB meeting on January 22, 1997, the State reported that the revision to the regulation was "in process." In the May 2, 1997 status report, the State reported that the proposed rule received no negative comment at public hearing. The rule was expected to be adopted in June 1997.

The team found that the rule was adopted without change and became effective on September 17, 1997. The team found that the delay in adoption from June to September was due to the politically sensitive nature of the rule, resulting in heightened concern by the Governor as the promulgating official.

Based on the follow-up review, the team considers this recommendation to be closed.

##### 4.2 Status of Pending Issues Identified Under Low-Level Radioactive Waste Disposal Program

During the 1997 follow-up review, the team focused on the documentation of the qualifications of the technical staff and contractors. The team reviewed the final report of the 1996 IMPEP review which resulted in a finding of satisfactory for this indicator. The final report had one suggestion.

### Recommendation 15

The team suggested that the LLRW program assemble training documentation for individual staff and contractors and develop a consolidated training record to enable assessment of the progress of training across the entire program.

### Current Status

The State's May 2, 1997 corrective action status report stated that "the LLRW program has compiled all the training it provided to the consultant review team members. The LLRW program staff will be gathering training data for Agency personnel to be included and maintained in one training documentation spreadsheet."

The team found that the State had compiled a training history for State staff members. A computer database had been established and the training records for the staff had been entered. There was, however, no information in the database related to contractor personnel. During discussion with the LLRW program managers, it was agreed that adding the detailed training records of the contractor personnel to the database would be of limited value since most of the contractor work is completed. The NDEQ and CHS program managers agreed to add information to the database showing contractor personnel attendance at training sessions sponsored by the State. The team notes that the complete training records for individual contractor personnel remain available in the contractor personnel files.

Based on the follow-up review, the team considers this suggestion to be closed.

## **5.0 SUMMARY**

The follow-up review team found the State's performance in responding to and resolving the 15 recommendations by the planned scheduled completion date of July 1, 1997, to be satisfactory with the exception of Recommendation 6 and 10. Recommendation 6 discussed the need for the State to develop comprehensive administrative and technical procedures. This area was identified as one of the primary root causes for the significant deficiencies found in the program during the previous 1996 IMPEP review. Recommendation 10 discussed the need to develop procedures for responding to allegations. The team found that the inspection backlog had been eliminated, the licensing backlog had been reduced but not eliminated (78 actions pending), and the State had implemented a computerized tracking system that provides much needed support to the overall materials program, and had received one additional FTE during a hiring freeze. However, the team also found that a significant number of procedures (23 out of 27) identified by the State for development had not been written, completed and signed off. The staff had not developed an estimated schedule for completion of the remaining 23 procedures at the time of the review. Although the team found that the State did not adequately communicate the status of the resolution of corrective actions, the team concluded that overly optimistic assumptions and Agreement State program inexperience by program management and staff contributed to the underestimate of the time and resources required to complete the "Get-Well Plan," rather than a continuation of the lack of upper management support as seen during the 1996 review. The team found the current staff is qualified, but the team observed that the program has a relatively

inexperienced staff, a heavy reliance on the first-level supervisor, lack of written procedures for guidance, and totally new management above the first-level supervisor.

The follow-up review team recommended, and the MRB concurred, that the Nebraska program remains adequate to protect public health and safety but needs improvement, and compatible with NRC's program.

Due to the fact that Recommendation 6 and 10 remain open, and that Recommendation 6 was identified as especially significant during the 1996 IMPEP review, and the fact that the Nebraska radiation control program staff and management have a few years or less of Agreement State program experience, the team recommended that an IMPEP review be scheduled within one year of the date of this follow-up review. The MRB considered and concurred with the review team's recommendation.

Below is a summary list of recommendations and one suggestion, as mentioned earlier in the report, for consideration by the State and NRC.

Recommendations:

1. The team recommended at the exit briefing with the State that Nebraska develop a new schedule for the completion of the written procedures based on experience gained to date, to be provided within two weeks after the completion date of the onsite follow-up review. (Section 3.2)
2. The team recommends that the State provide copies of the procedures to NRC as they are completed for review. (Section 3.2)
3. The team recommends that regular communications, both verbal and written, be scheduled and maintained during the completion period. The State is requested to provide monthly status reports by telephone. The State is also requested to continue to provide a corrective action status report every two months. (Section 3.2)
4. The team recommends that in following RMP No. 6.01 "Qualifications and Training-Qualifications Manual," that documentation of the accompaniment or other means of tracking that the accompaniment occurred should be pursued. (Section 3.4)
5. The team recommends that the State continue development and implementation of procedures to manage allegations and provide staff training so that all inspectors are knowledgeable in those procedures. (Section 3.5)

Suggestion:

1. The team suggests that the State place a higher priority on procedures related to those items identified as most critical, followed by those procedures identified as supporting the technical elements of the program. (Section 3.2)

NRC:

The team recommends that the NRC review the results of the use of the new procedures at the next IMPEP review. (Section 3.2)

## **LIST OF APPENDICES**

Appendix A	IMPEP Review Team Members
Appendix B	NHHS Organizational Chart
Appendix C	Nebraska Status Reports, May 1997, September 1997 and October 1997
Attachment 1	Nebraska's Response to Follow-up Review Findings

## APPENDIX A

### IMPEP REVIEW TEAM MEMBERS

<b>Name</b>	<b>Area of Responsibility</b>
Patricia M. Larkins, OSP	Team Leader Technical Quality of Licensing Actions Response to Incidents and Allegations
Jenny Johansen, RI	Status of Materials Inspection Program Technical Quality of Inspections
Richard Blanton, OSP	Technical Staffing and Training Legislation and Regulations Low Level Radioactive Waste

**APPENDIX B**

**NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM**

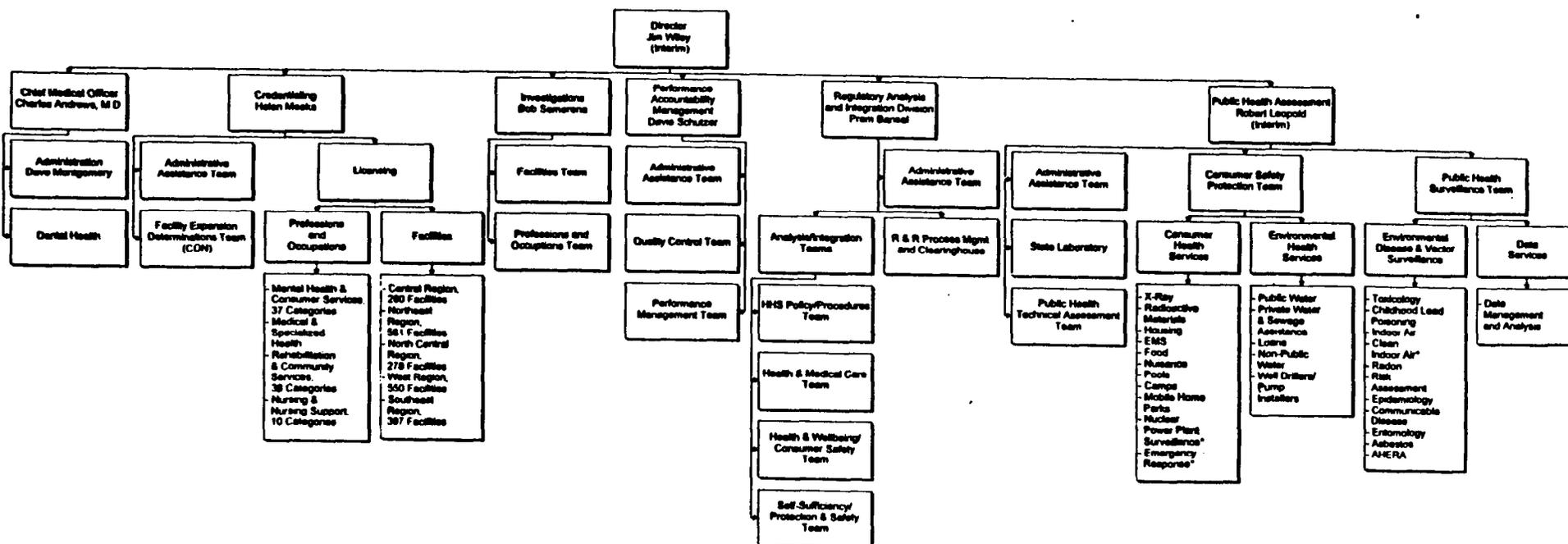
**DEPARTMENT OF REGULATION AND LICENSURE**

**AND**

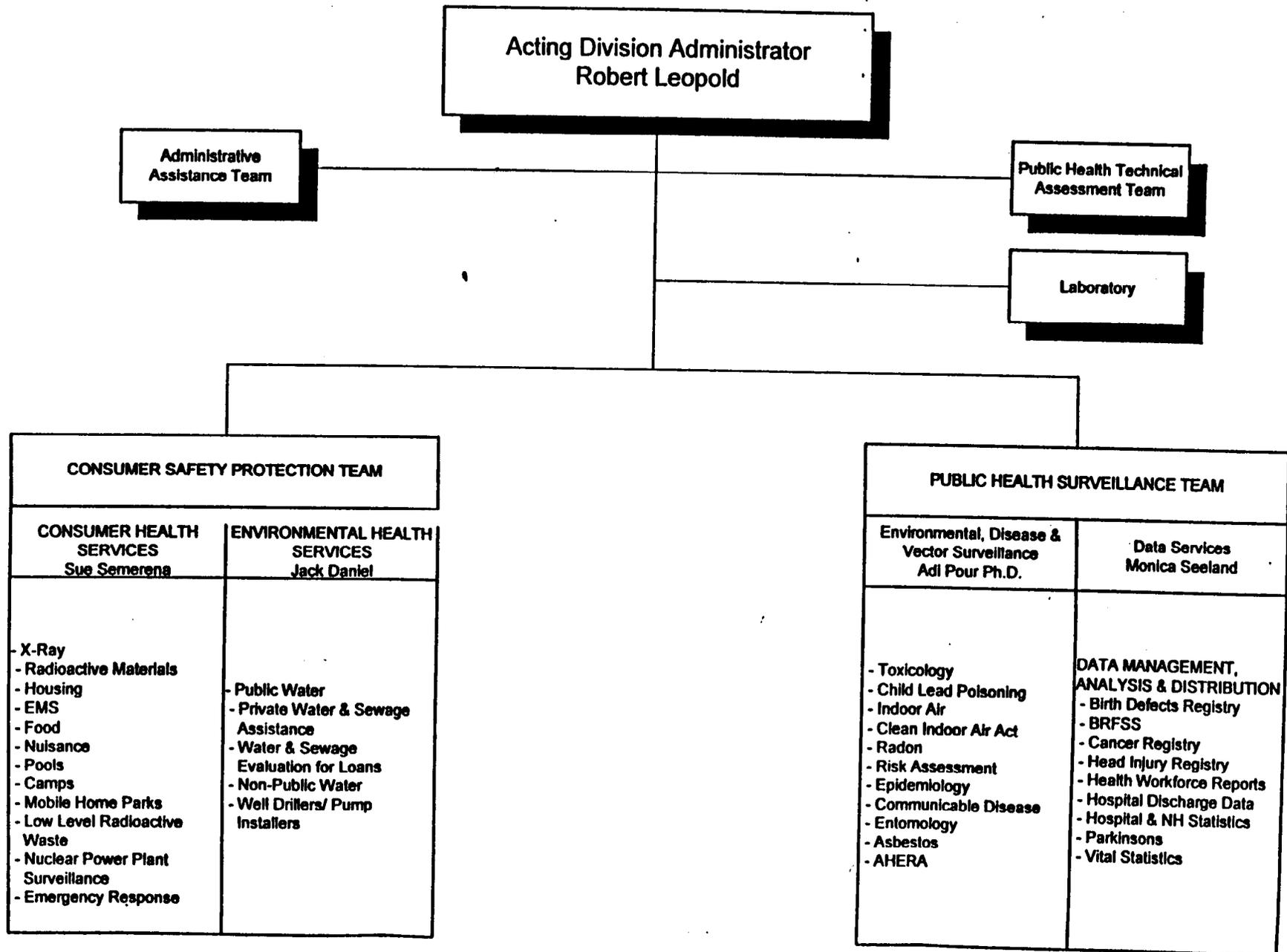
**PUBLIC HEALTH ASSESSMENT DIVISION**

**ORGANIZATION CHART**

## Nebraska Health and Human Services System Regulation and Licensure



# Public Health Assessment Division



**APPENDIX C**

**NEBRASKA STATUS REPORTS  
MAY 2, 1997, SEPTEMBER 8, 1997,  
AND OCTOBER 1, 1997**



May 2, 1997

U.S. Nuclear Regulatory Commission  
Office of State Programs  
Mail Stop 3D23  
Washington, DC 20555

Attn: Hugh L. Thompson, Jr.  
Acting Executive Director for Operations

Dear Mr. Thompson:

This letter is to provide you a copy of our most current corrective action plan, and to update you on the status of corrective actions taken in response to the review team's recommendations.

The enclosed chart shows the timelines and resource allocations for all the tasks of the corrective action plan. Milestones are represented as diamonds and show the date a major task or goal was met. Each task bar shows the individual(s) assigned and the finish date if completed. The progress of each task is represented by a solid bar corresponding to the percent of the task completed. For example, the progress bars for Task IDs 78 and 79 represent the 70% of the 108 licensing actions pending at the time of the review and the 75% of the 158 licensing actions received since that have been completed.

The current status of the corrective action taken on each of the review team recommendations is as follows:

1. The program has updated its new database system with the appropriate inspection frequencies equal to IMC 2800. Each inspector can generate a report on his computer showing which materials inspections are coming due. Reciprocity requests are logged into the database and inspectors can generate a report showing which licensees will be available for inspection. Reciprocity inspections are being assigned to staff in accordance with the inspection frequencies of IMC 1220. The use and maintenance of the inspection database will be addressed in the inspection scheduling procedure.
- 2.&3. The inspection scheduling and the upper management stay-well procedures will both establish methodologies for coordinating deviations from the inspection schedule and rescheduling of missed inspections. Regarding initial inspections, all new licensees are issued an inspection date of 6 months from the license issuance. Each new license also includes a condition requiring the licensee to notify our Agency prior to the commencement of licensed operations.

Hugh L. Thompson, Jr.  
May 2, 1997  
Page 2

4. The current inspection contract includes a qualifications review requirement and the contractor has submitted training documentation for Agency Approval prior to allowing additional staff to perform inspections. Contract inspectors are also required to complete an inspection plan for Agency approval prior to each inspection.
5. A staff qualification manual was drafted by a contractor. The draft manual is being updated to include the NRC/OAS Training Working Group information and the NRC's policy on successful completion of training outlined in SP-96-118.
6. Comprehensive administrative procedures are in the development stage. Currently, relevant NRC and Agreement State procedures, policies, and guidance documents are being gathered for use as references in the preparation of program procedures. A licensing action prioritization procedure was completed in January, and all pending licensing actions are assigned a priority when logged into the tracking database.
7. Annual supervisory accompaniments of inspection team members will be required in the qualifications manual that is being drafted.
8. The new database system allows tracking of each aspect of the inspection, from due date to our acknowledgment of the licensee's response to a notice of violation. A database report is available at any time to program management showing the timeline of each open inspection. The inspection procedures will outline the timeline requirements that are coded into the database system and outline the management oversight necessary to ensure that these goals are met.
9. Completed as previously indicated.
10. The program has used the key ideas of Management Directive 8.8 in dealing with recent allegations. These ideas will be incorporated into program allegation procedures.
11. The "Handbook on Event Reporting in the Agreement States" is currently being used by program staff and will be incorporated into the event procedures.
12. The program created an event database to track all possible materials events. The event procedures will establish event follow up and close out procedures.
13. The program began routine monthly reporting on January 31, 1997 and reported all previous reportable events on February 28, 1997.

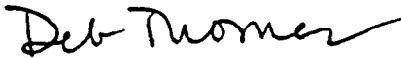
Hugh L. Thompson, Jr.  
May 2, 1997  
Page 3

14. The proposed revision of 180 NAC 1-012.22 has been to public hearing without negative comment and should be adopted in June 1997.
15. The LLRW program has compiled all the training it has provided to the consultant review team members. LLRW program staff will be gathering training data for Agency personnel to be included and maintained in one training documentation spreadsheet.

You will receive further reports of our continued progress on the corrective action plan, especially our completion and implementation of comprehensive program procedures over the next two months.

If you have any other questions, please feel free to contact Brian Hearty or Cheryl Rogers at (402) 471-2168.

Sincerely,



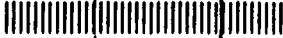
Deb Thomas, Director  
HHS Regulation and Licensure

DT/BPH

Enclosure

xc: Patricia M. Larkins, Health Physicist  
IMPEP Team Leader

**Nebraska Health and an Services System  
Department of Regulation and Licensure  
IMPEP Corrective Action Plan**

ID	Task Name	1996			1997				1998				1		
		Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
1	<b>Materials Program Oversight</b>														
2	<b>Program Management Meeting</b>														
42	<b>Upper Management Briefing</b>														
43	Upper Management Briefing 1														
44	Upper Management Briefing 2														
45	Upper Management Briefing 3														
46	Upper Management Briefing 4														
47	Upper Management Briefing 5														
48	Upper Management Briefing 6														
49	<b>Radiation Advisory Council</b>														
50	Radiation Advisory Council														
51	Radiation Advisory Council														
52	Radiation Advisory Council														
53	Radiation Advisory Council														
54	<b>Materials Inspection</b>														
55	<b>Inspection Backlog</b>														
56	Thiele Geotech														
57	Nucletron-Oldelft Corp														
58	Immanuel Medical Center														
59	Nebraska Methodist Hospital														

Project: Project Management Plan  
Date: 5/2/97

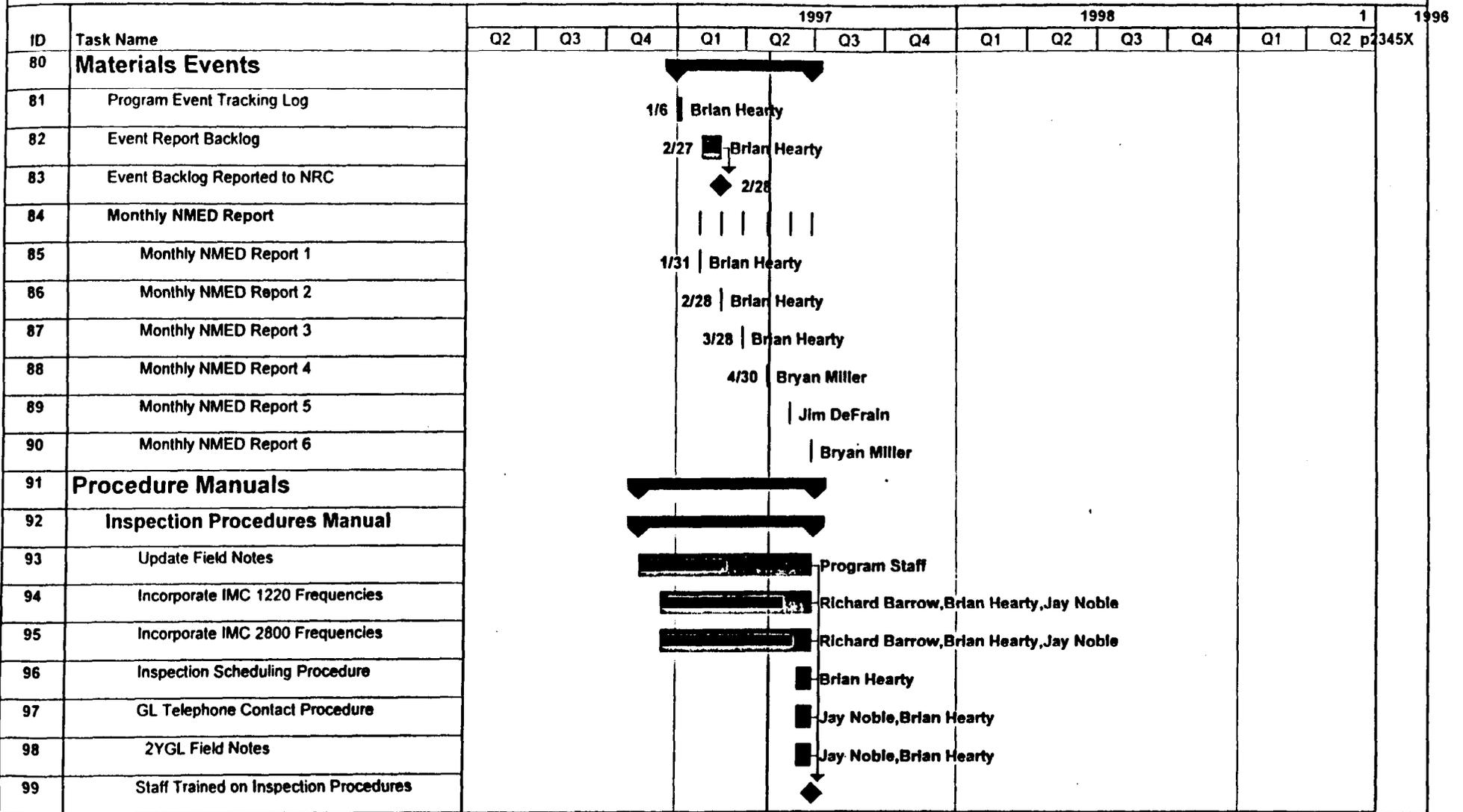
Task  Summary  Rolled Up Progress   
 Progress  Rolled Up Task   
 Milestone  Rolled Up Milestone 

**Nebraska Health and Human Services System  
Department of Regulation and Licensure  
IMPEP Corrective Action Plan**

ID	Task Name	1996			1997				1998				1999	
		Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
60	Stanley Jaeger				11/7									
61	Lincoln General Hospital				11/13									
62	Bergan Mercy Medical Center				11/14									
63	UNMC				12/6									
64	Overdue Inspections Completed				◆ 12/6									
65	<b>Routine Inspections</b>				████████████████████									
66	Lincoln General Teletherapy				11/13									
67	Wayne State				1/16									
68	UNL				3/7									
69	29 Routine Inspections				████████████████████ Stan Huber Consultants									
70	<b>Reciprocity Inspections</b>				████████████████████									
71	Edwards Pipeline				12/10									
72	Maxim				1/16									
73	Midwest Industrial X-ray				1/16									
74	EA Engineering													
75	MQS Inspection													
76	<b>Materials Licensing</b>				████████████████████									
77	<b>Licensing Backlog</b>				████████████████████									
78	Licensing Actions Before 7/19/96				████████████████████ Program Staff									
79	Licensing Actions After 7/19/96				████████████████████ Program Staff									

Project: Project Management Plan Date: 5/2/97	Task	████████████████████	Summary	████████████████████	Rolled Up Progress	████████████████████
	Progress	████████████████████	Rolled Up Task	████████████████████		
	Milestone	◆	Rolled Up Milestone	◇		

**Nebraska Health and Human Services System  
Department of Regulation and Licensure  
IMPEP Corrective Action Plan**



Project: Project Management Plan Date: 5/2/97	Task		Summary		Rolled Up Progress	
	Progress		Rolled Up Task			
	Milestone	◆	Rolled Up Milestone	◇		

**Nebraska Health and an Services System  
Department of Regulation and Licensure  
IMPEP Corrective Action Plan**

ID	Task Name	1996			1997				1998				1	
		Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
100	<b>Allegation and Event Procedures</b>				[Task Bar]									
101	Review and Incorporate MD 8.8					[Task Bar]								
102	Incorporate Reporting Handbook					[Task Bar]								
103	Write Allegation and Event Procedures					[Task Bar]								
104	Staff Trained on A & E Procedures					[Milestone]								
105	<b>Licensing Procedures Manual</b>				[Task Bar]									
106	<b>General Licensing</b>					[Task Bar]								
107	Distributor Notification Procedure					[Task Bar]								
108	General vs Specific Procedure					[Task Bar]								
109	GL Billing Procedure					[Task Bar]								
110	GL Termination Procedure					[Task Bar]								
111	Assemble GL Procedures					[Task Bar]								
112	<b>Specific Licensing</b>					[Task Bar]								
113	Action Prioritization Procedure					[Task Bar]								
114	Assemble Licensing Guidance					[Task Bar]								
115	Write Licensing Procedures					[Task Bar]								
116	Staff Trained on Licensing Procedures					[Milestone]								
117	<b>Stay-Well Plan</b>					[Task Bar]								
118	Upper Management Procedure					[Task Bar]								
119	Program Management Procedure					[Task Bar]								

Project: Project Management Plan  
Date: 5/2/97

Task	[Task Bar]	Summary	[Task Bar]	Rolled Up Progress	[Task Bar]
Progress	[Task Bar]	Rolled Up Task	[Task Bar]		
Milestone	[Milestone]	Rolled Up Milestone	[Milestone]		

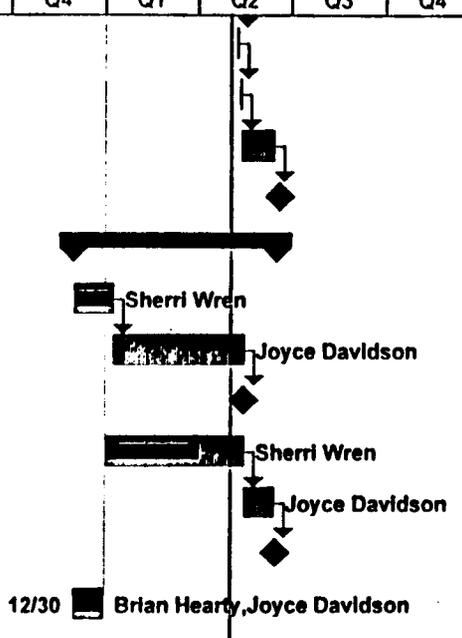
**Nebraska Health and an Services System  
Department of Regulation and Licensure  
IMPEP Corrective Action Plan**

ID	Task Name	1996			1997				1998				1	
		Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
120	Management Trained on Procedures						◆							
121	<b>Qualifications Manual</b>													
122	Draft Manual													
123	Incorporate NRC/OAS Working Group													
124	Review and Finalize Manual													
125	Manual Implemented													
126	<b>LLRW Training Records</b>													
127	Assemble Consultant LLRW Training													
128	Assemble Staff LLRW Training Records													
129	Create Documentation Spreadsheet													
130	<b>Regulations and Guidance</b>													
131	<b>Regulations</b>													
132	019 Adopted													
133	001,003,012, 015 Approved by RAC													
134	007 Reviewed by RAC													
135	007 Revised													
136	Proposed Changes Approved by RAC													
137	Proposed Changes to PRO													
138	Public Hearing													
139	Public Hearing Comments Incorporated													

Project: Project Management Plan Date: 5/2/97	Task		Summary		Rolled Up Progress	
	Progress		Rolled Up Task			
	Milestone	◆	Rolled Up Milestone	◇		

**Nebraska Health and Human Services System  
Department of Regulation and Licensure  
IMPEP Corrective Action Plan**

ID	Task Name	1996			1997				1998				1999	
		Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
140	Final Draft Approved by RAC													
141	Final Draft Approved by Board of Health													
142	Final Draft to Atty General													
143	Final Draft Adopted													
144	<b>Guidance</b>													
145	Reg Guide 19.0 Drafted													
146	Reg Guide 19.0 Reviewed and Finalized													
147	Reg Guide 19.0 Issued													
148	Reg Guide 7.0 Drafted													
149	Reg Guide 7.0 Reviewed and Finalized													
150	Reg Guide 7.0 Issued													
151	Create and Implement Regulation Change Log													
152														



Project: Project Management Plan  
Date: 5/2/97

Task		Summary		Rolled Up Progress	
Progress		Rolled Up Task			
Milestone		Rolled Up Milestone			



September 8, 1997

U.S. Nuclear Regulatory Commission  
Office of State Programs  
Mail Stop 3D23  
Washington, DC 20555

Attn: Hugh L. Thompson, Jr.  
Acting Executive Director for Operations

Dear Mr. Thompson:

This letter is to provide you a copy of our latest corrective action plan, and to update you with a current organizational chart for the Department. There have been three changes in the program upper management since the MRB meeting in January 1997. On July 1, the Radioactive Materials and LLRW Programs were moved under the supervision of the Consumer Health Services Team Coordinator, M. Sue Semerena. Robert Leopold was named Acting Administrator of the Public Health Assessment Division following Burke Casari's retirement on July 8. James A. Wiley was named Interim Director of the Regulation and Licensure Department following the resignation of Deb Thomas in July. Routine oversight meetings between the Radioactive Materials Program Manager and the Team Coordinator and Division Administrator have been held on a weekly basis since July 9. The Department Director was briefed on his oversight responsibilities and on the status of the corrective action plan on August 18.

The enclosed Gantt chart shows the time lines and resource allocations for the tasks of the corrective action plan. Milestones are represented as diamonds and show the date a major task or goal was met. Each task bar shows the individual(s) assigned and the finish date if completed. The progress of each task is represented by a solid bar corresponding to the percent of the task completed. For example, the progress bar for Task ID 78 indicates that 50% of the 78 currently pending licensing actions that have received an initial review by Program License Reviewers.

The current corrective action plan was developed to ensure that program performance will be maintained at, or improved to, a satisfactory level on all IMPEP indicators by October 1998. The time frame of the corrective action plan extends to the end of the current NRC fiscal year to take into account the training courses required by Technical Staff members as outlined in our Qualifications Manual. A time line for filling the Health Physicist I position vacated by Joyce Davidson on September 1, 1997 is included in the plan.

Hugh L. Thompson, Jr.  
September 8, 1997  
Page 2

All radioactive materials inspections due in the next twelve months have been scheduled and Inspectors assigned. The inspections are scheduled to minimize the number of past due inspections, be in accordance with Inspector training, and ensure supervisory accompaniments. The only currently overdue inspection is a radiography licensee that had not performed sealed source radiography since 1994, and was subsequently authorized for storage only. The licensee had provided information on the transfer of their sources, and requested termination of the license only to abandon that request after the inspection overdue date. An inspection is scheduled prior to renewing the license for use. Because a majority of our inspections are conducted unannounced, we request that you do not provide the attached corrective action plan as public information.

The status of proposed rulemaking has been updated to include compatibility items that will be required to be adopted within the time frame of the plan.

Radioactive Materials Program procedures are being drafted and implemented in accordance with the recommendations of the IMPEP Team. Comprehensive procedures should be available for use by January 1998.

We look forward to meeting with your review team during the week of September 15-19.

If you have any other questions, please feel free to contact Brian Hearty or Cheryl Rogers at (402) 471-2168.

Sincerely,



Robert Leopold, Administrator  
Public Health Assessment Division

RL/BPH

Enclosure

FAX Copy: Patricia M. Larkins, Health Physicist  
IMPEP Team Leader



E. Benjamin Nelson  
Governor

State of Nebraska  
Health and Human Services Regulation and Licensure Department  
Public Health Assessment Division  
Radioactive Materials Program  
301 Centennial Mall South  
P.O. Box 95007  
Lincoln, Nebraska 68509-5007

Phone: 402-471-2168

FAX No.: 402-471-0169

DELIVER TO: Pat Larkins, Health Physicist

Location: NRC Office of State Programs

FAX No.: (301) 415-3502

Subject: Copy of Corrective Action Plan and Organizational Charts

SENT BY: Brian P. Hearty, Manager

Location: Radioactive Materials Program

Total Number of Pages (including cover page): 14

Comments: Original sent by mail to Hugh Thompson.

Call me if you have any other questions prior to your visit.

Date: 09/08/97

Sent by: BPH

**HHS REGULATION AND ENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
1	<b>Status of Materials Inspection Program</b>											
2	Overdue Inspections											
3	01-22-01, Maxim Technologies, Inc.				Jim DeFrain							
4	Past Due Inspections											
5	03-02-01, Beatrice Community Hospital and Health C				Jim DeFrain							
6	01-07-02, Nebraska Methodist Hospital				Jim DeFrain, Bryan Miller							
7	01-09-02, Bergan Mercy Medical Center				Bryan Miller, Jim DeFrain							
8	01-50-01, University of Nebraska Medical Center				Jim DeFrain, Bryan Miller, New Hire, Brian Hearty							
9	09-04-01, University of Nebraska at Kearney					Jim DeFrain, New Hire						
10	99-37-01, Nordion International, Inc.					Jim DeFrain						
11	14-04-01, Hastings Utilities						Bryan Miller					
12	14-04-02, Hastings Utilities						Bryan Miller					
13	14-08-01, City of Hastings						Bryan Miller					
14	Routine Inspections											
15	02-44-01, Dobson Brothers Construction Company				Jim DeFrain							
16	01-85-01, Nebraska Analytical Testing Laboratories				Bryan Miller							
17	01-12-03, Bishop Clarkson Memorial Hospital				Bryan Miller							
18	29-01-01, Cargill Incorporated				Bryan Miller							
19	59-01-01, Midlands Community Hospital				Jim DeFrain							
20	17-02-01, York General Hospital				Bryan Miller							
21	01-07-06, Nebraska Methodist Hospital - Pathology				Bryan Miller							
22	01-07-07, Nebraska Methodist Hospital - Pathology				Jim DeFrain							
23	02-06-03, Lincoln General Hospital				Jim DeFrain, Bryan Miller							

**HHS REGULATION A LICENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
24	07-05-01, Faith Regional Health Services - Lutheran C					Bryan Miller						
25	07-01-01, Our Lady of Lourdes Hospital					Bryan Miller						
26	14-03-01, Mary Lanning Memorial Hospital					Jim DeFrain						
27	14-03-02, Mary Lanning Memorial Hospital					Jim DeFrain						
28	08-09-01, St. Francis Memorial Health Center					Bryan Miller						
29	08-03-01, Grand Island Radiology Associates					Bryan Miller						
30	01-08-02, Professional Service Industries, Inc.					Jim DeFrain, Brian Hearty						
31	01-08-03, Professional Service Industries, Inc.					Jim DeFrain						
32	02-01-08, University of Nebraska					Bryan Miller						
33	02-37-01 Syncor International Corporation					Cheryl Rogers, Brian Hearty						
34	01-78-01, EndoTech, Inc.					Bryan Miller, Brian Hearty						
35	16-01-01, Southeast Community College - Milford					Jim DeFrain, New Hire						
36	01-77-01, Anderson Excavating and Wrecking Co.					Bryan Miller						
37	01-45-01, Douglas County Health Department					Bryan Miller						
38	01-75-01, Omaha Housing Authority					Bryan Miller						
39	01-88-01, Great Plains Testing Laboratories, Inc.					Bryan Miller						
40	02-18-01, HWS Consulting Group, Inc.					Howard Shuman, Brian Hearty						
41	01-65-02, P.E.T. Net Pharmaceutical Services, LLC					Brian Hearty						
42	01-48-01, University of Nebraska at Omaha					John Fassell, Brian Hearty						
43	01-48-02, University of Nebraska at Omaha - Biology					John Fassell, Brian Hearty						
44	08-11-01, Filter Specialists, Inc.					Jim DeFrain, New Hire						
45	21-01-03, Regional West Medical Center					Jim DeFrain, New Hire						
46	37-03-01, Becton Dickinson					Jim DeFrain						

**HHS REGULATION AND INSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
47	04-01-01, Becton Dickinson Vacutainer Systems						Jim DeFraim					
48	07-02-01, Sherwood - Davis & Geck						Jim DeFraim					
49	01-52-01, Radiology Nuclear Medicine						Jim DeFraim, New Hire					
50	02-20-02, State of Nebraska - Department of Health						New Hire, Brian Hearty					
51	01-59-01, Great Plains Nuclear Services, Inc.						Bryan Miller					
52	02-10-02, Harris Laboratories						Bryan Miller					
53	Reciprocity Inspections Available											
54	REC0156, EA Engineering, Science & Technology, Inc.				Bryan Miller							
55	REC0131, Edwards Pipeline Testing, Inc.				Jim DeFraim							
56	<b>Technical Staffing and Training</b>											
57	Staffing Vacant Materials Health Physicist I											
58	Receive Authorization to Fill Position			9/3	Jim Wiley							
59	Post Internally and Externally				Brian Hearty							
60	Screen Applications				Brian Hearty							
61	Interview Candidates				Brian Hearty							
62	New HP I Hired				◆							
63	Basic Training											
64	Introductory Health Physics								Trudy Hill			
65	Inspection Procedures								New Hire			
66	Licensing Practices and Procedures								New Hire, John Fassell			
67	Licensing Practices and Procedures								Howard Shuman			
68	Transportation of Radioactive Material								Bryan Miller, New Hire			
69	Specialized Training											

**HHS REGULATION AND CENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
70	Diagnostic and Therapeutic Nuclear Medicine						Bryan Miller					
71	Diagnostic and Therapeutic Nuclear Medicine								New Hire			
72	Teletherapy and Brachytherapy						Bryan Miller, Brian Hearty					
73	Teletherapy and Brachytherapy								New Hire			
74	Safety Aspects of Industrial Radiography						Bryan Miller, John Fassett					
75	Safety Aspects of Industrial Radiography								Brian Hearty			
76	Safety Aspects of Well Logging						Jim DeFrain, Bryan Miller					
77	Irradiator Technology						Brian Hearty, Jim DeFrain, (Date to be Determined)					
78	Advanced Training											
79	Health Physics Technology						Cheryl Rogers					
80	Environmental Monitoring for Radioactivity								JD Edwards			
81	Inspecting for Performance - Materials						Cheryl Rogers, Howard Shuman, (Date to be Determined)					
82	<b>Materials Licensing Program</b>											
83	Licensing Backlog											
84	Pending Licensing Actions (76)											50 % of initial reviews completed
85	<b>Response to Incidents and Allegations</b>											
86	Radioactive Materials Allegations											
87	Allegation Identifier NE-97-001 Special Inspection						Brian Hearty					
88	Radioactive Materials Events											
89	NE970001008 24 hr Report Received											
90	NE970001008 24 hr Report Evaluated						9/4 Jim DeFrain, Brian Hearty					
91	NE970001008 Reported to NRC						9/5 Jim DeFrain, Brian Hearty					
92	Nuclear Materials Events Database Reporting											

**HHS REGULATION AND LICENSURE DEPARTMENT  
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ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
93	Monthly NMED Report											
115	<i>Legislation and Regulations</i>											
116	Regulation Changes to 001, 003, 004, 007, 009, 012, an											
117	Pre-Rule											
118	Proposed Changes Drafted											
119	Approved by RAC											
120	Proposed Changes Reviewed by PRO											
121	Proposed Rule											
122	Notice of Rulemaking Hearing											
123	Public Hearing											
124	Post-hearing Analysis and Revisions											
125	Final Rule											
126	Agency Review and Approval											
127	Attorney General Review and Approval											
128	Governor's Review and Approval											
129	Proposed Changes Adopted											
130	Regulation Changes to 004, 005, 010, and 012											
131	Pre-Rule											
132	Proposed Changes Drafted											
133	Approved by RAC											
134	Proposed Changes Reviewed by PRO											
135	Proposed Rule											
136	Notice of Rulemaking Hearing											

**HHS REGULATION AND INSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
137	Public Hearing											
138	Post-hearing Analysis and Revisions											
139	Final Rule											
140	Agency Review and Approval											
141	Attorney General Review and Approval											
142	Governor's Review and Approval											
143	Proposed Changes Adopted											
144	Regulatory Guidance											
145	Regulatory Guide 19.0											
146	Proposed Guidance Drafted											
147	Approved by Program Manager											
148	Regulatory Guide 7.0											
149	Proposed Guidance Drafted											
150	Approved by Program Manager											
151	Regulatory Guide 7.1											
152	Proposed Guidance Drafted											
153	Approved by Program Manager											
154	<b>Materials Program Procedures</b>											
155	General Licensing											
156	RMP No. 1.01, Certain Measuring, Gauging, and Con											
157	RMP No. 1.02, Depleted Uranium											
158	RMP No. 1.03, In Vitro Testing											
159	RMP No. 1.04, Reciprocal Recognition of an Out-of-S											

**HHS REGULATION A LICENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
160	RMP No. 1.05, Billing			■ Jay Noble								
161	RMP No. 1.06, License File Inactivation			■ Jay Noble								
162	Specific Licensing											
163	RMP No. 2.01, Request for Application			■ Jay Noble								
164	RMP No. 2.02, Review of an Application or Amendme			■ Brian Hearty, Program Staff								
165	RMP No. 2.03, Renewal of Licenses			■ Brian Hearty								
166	RMP No. 2.04, Billing			■ Jay Noble								
167	RMP No. 2.05, License Termination			■ Brian Hearty								
168	RMP No. 2.06, Prioritization of Licensing Actions			■ Brian Hearty								
169	Inspections											
170	RMP No. 3.01, Scheduling of Inspections			■ Brian Hearty								
171	RMP No. 3.02, Inspection Preparation			■ Brian Hearty								
172	RMP No. 3.03, Performance Based Inspection			■ Brian Hearty								
173	RMP No. 3.04, Documentation of Inspection Results			■ Brian Hearty, Program Staff								
174	Allegations and Events											
176	RMP No. 4.01, Management of Allegations			■ Brian Hearty								
176	RMP No. 4.02, Radioactive Material Events			■ Brian Hearty								
177	RMP No. 4.03, Emergency Response			■ Brian Hearty								
178	Legislation, Regulation and Guidance Development											
179	RMP No. 5.01, Tracking and Scheduling			■ Brian Hearty								
180	RMP No. 5.02, Revision and Implementation			■ Brian Hearty								
181	Qualifications and Training											
182	RMP No. 6.01, Qualifications Manual			9/3 ■ Brian Hearty, Sue Semerana, Bob Leopold, Jim Wiley								

**HHS REGULATION AND ENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1997				1998				1999		
		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3
183	RMP No. 6.02, Training Resources Availability and Ed			9/3	Brian Hearty							
184	Program Management											
185	RMP No. 7.01, Budgeting				Brian Hearty							
186	RMP No. 7.02, Fee Calculation				Brian Hearty							
187	RMP No. 7.03, Routine Program Oversight			7/31	Brian Hearty							
188	RMP No. 7.04, Upper Management Oversight			8/22	Brian Hearty, Sue Semerens, Bob Leopold, Jim Wiley							

SEP. 8.1997 9:25:11 FROM ENV HEALTH (402) 412 0105 IN:014 F.11/14

HHS REGULATION LICENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM

**RADIOACTIVE MATERIALS PROGRAM CORRECTIVE ACTION PLAN**

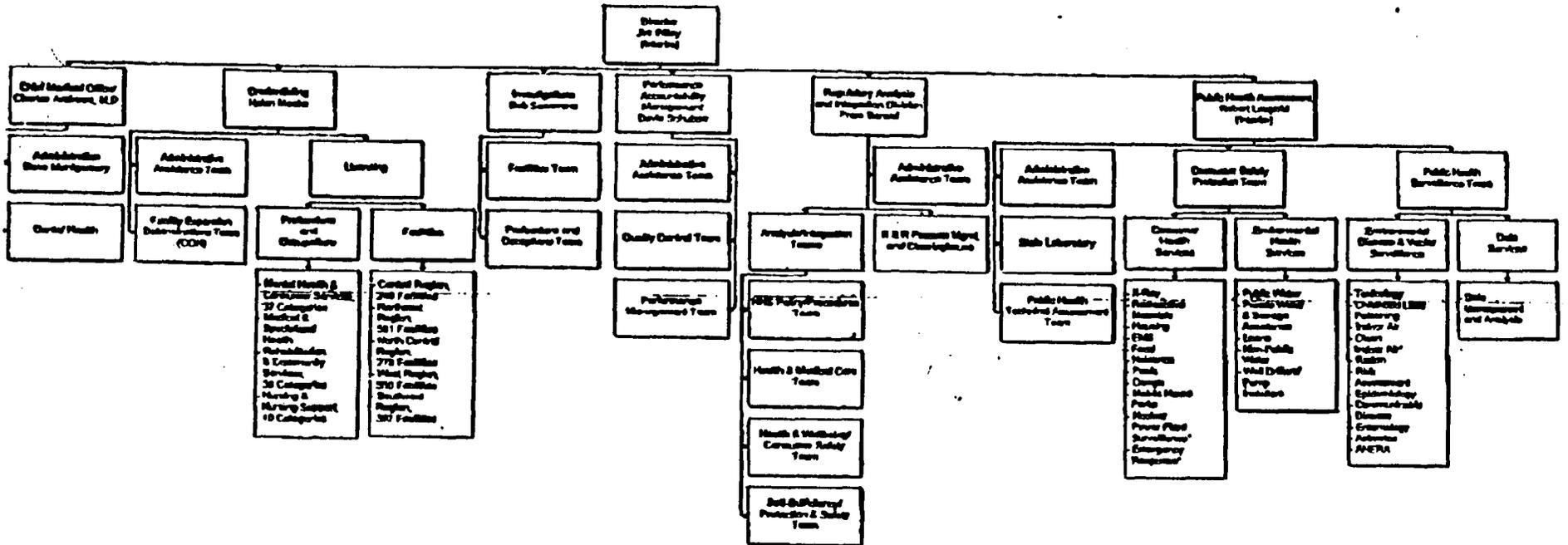
Approved by Division Administrator:

Revised: Mon 9/8/97

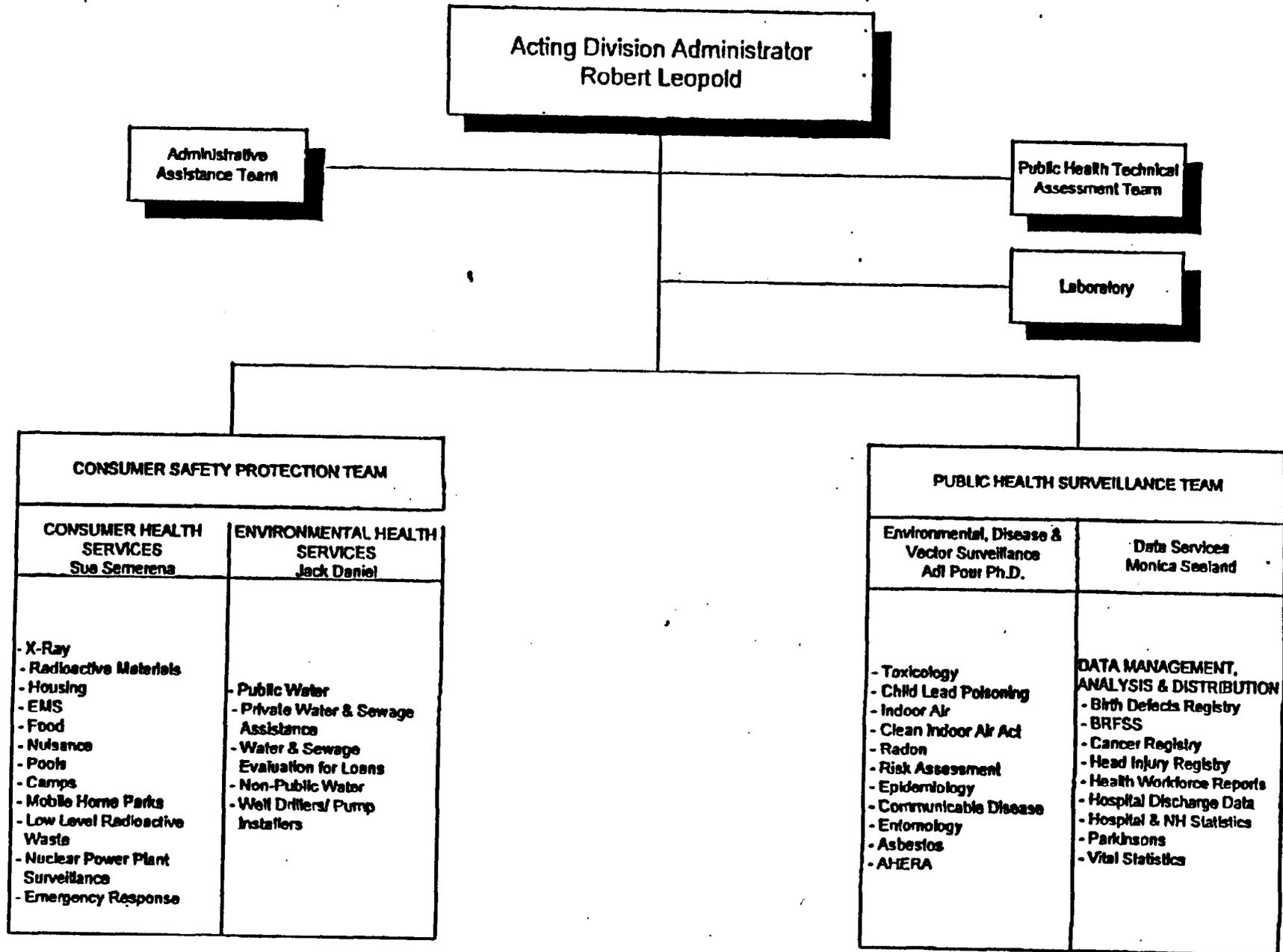


Task   
Progress   
Milestone   
Summary  
Rolled Up Task   
Rolled Up Milestone   
Rolled Up Progress 

## Nebraska Health and Human Services System Regulation and Licensure



# Public Health Assessment Division



97 OCT -6 PM 3:37  
NSP

October 1, 1997

U.S. Nuclear Regulatory Commission  
Office of State Programs  
Mail Stop 3D23  
Washington, DC 20555

Attn: Richard L. Bangart, Director  
Office of State Programs

Dear Mr. Bangart:

As you requested in our meeting on September 18, 1997, this letter is to provide you a copy of our latest corrective action plan, and to update you with a current status of our program.

The enclosed Gantt chart shows the time lines and resource allocations for the tasks of the corrective action plan. Milestones are represented as diamonds and show the date a major task or goal was met. Each task bar shows the individual(s) assigned and the finish date if completed. The progress of each task is represented by a solid bar corresponding to the percent of the task completed unless otherwise identified in this report.

Status of Materials Inspection Program:

Eight inspections have been performed since the September 8, 1997 progress report was provided to you. The one overdue inspection, Task ID 3, was completed September 9 and currently there are no overdue inspections. One past due inspection was completed September 25 and three routine inspections were also performed. Three reciprocity inspections were performed in September.

Two routine inspections were rescheduled into October, Task IDs 16 and 19, to provide the flexibility to perform the needed reciprocity inspections. One routine inspection was added to the Gantt chart, Task ID 23, after a review of pending inspections. One reciprocity inspection was also scheduled.

Materials Licensing Program:

The materials licensing section of the Gantt Chart has been redesigned to provide a clearer picture of the program status. The total number of pending actions is provided in Task ID 86. The actions are then broken into three categories. Task IDs 87-89 correspond to the actions received prior to the initial IMPEP review in July 1996, the actions that have been received since that date but are overdue, and the actions that are not overdue. The progress bars correspond to the percentage of the actions in that category that have received an initial review and had a deficiency letter sent.

Richard L. Bangart, Director  
October 1, 1997  
Page 2

Response to Incidents and Allegations:

Task IDs 97 and 98 have been added. Brian Hearty has been working with Brian Smith of NRC in regards to this event and Charles Hackney has requested that a follow-up report be provided to NRC.

Legislation and Regulations:

The proposed regulations that were previously provided to your office were signed by the Governor and became effective September 17, 1997. As indicated in your exit meeting, Nebraska is compatible with NRC regulations.

Regulatory Guide 7.1, equivalent to NRC RG 8.39, has been approved and sent to medical use licensees. Regulatory Guide 19.0 for irradiator licensees has been drafted. Work on Regulatory Guide 7.0 for medical licensees is progressing and should be completed by a meeting with our largest medical licensing consultant on October 22. This meeting will facilitate future medical licensing and decrease the number of deficiency letters currently required.

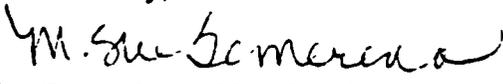
Materials Program Procedures:

Radioactive Materials Program Procedure No. 4.02, Radioactive Material Events, has been issued and a copy is enclosed for your review. Attachments 1 and 3 are not included since you have access to them already.

The procedure scheduling has been changed to reflect discussions with the review team regarding the priority of the pending procedures. The licensing and inspection program procedures that will be used daily by the technical staff have been given the highest priority.

If you have any other questions, please feel free to contact me, Sue Semerena, or Brian Hearty at (402) 471-2168.

Sincerely,

  
for Robert Leopold, Administrator  
Public Health Assessment Division

RL/BPH

Enclosure

FAX Copy: Patricia M. Larkins, Health Physicist  
IMPEP Team Leader

**HHS REGULATION AND ENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	96		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
1	<b>Status of Materials Inspection Program</b>														
2	<b>Overdue Inspections</b>														
3	01-22-01, Maxim Technologies, Inc.						9/9	Jim DeFrain							
4	<b>Past Due Inspections</b>														
5	03-02-01, Beatrice Community Hospital and Health C						9/25	Jim DeFrain							
6	01-07-02, Nebraska Methodist Hospital							Jim DeFrain, Bryan Miller							
7	01-09-02, Bergan Mercy Medical Center							Bryan Miller, Jim DeFrain							
8	01-50-01, University of Nebraska Medical Center							Jim DeFrain, Bryan Miller, New Hire, Brian Hearty							
9	09-04-01, University of Nebraska at Kearney							Jim DeFrain, New Hire							
10	99-37-01, Nordion International, Inc.							Jim DeFrain							
11	14-04-01, Hastings Utilities							Bryan Miller							
12	14-04-02, Hastings Utilities							Bryan Miller							
13	14-06-01, City of Hastings							Bryan Miller							
14	<b>Routine Inspections</b>														
15	02-44-01, Dobson Brothers Construction Company						9/23	Jim DeFrain							
16	01-85-01, Nebraska Analytical Testing Laboratories							Bryan Miller							
17	01-12-03, Bishop Clarkson Memorial Hospital						9/16	Bryan Miller							
18	29-01-01, Cargill Incorporated						9/18	Bryan Miller							
19	59-01-01, Midlands Community Hospital							Jim DeFrain							
20	17-02-01, York General Hospital							Bryan Miller							
21	01-07-06, Nebraska Methodist Hospital - Pathology							Bryan Miller							
22	01-07-07, Nebraska Methodist Hospital - Pathology							Jim DeFrain							
23	01-04-01, Immanuel Medical Center							Brian Hearty, Bryan Miller							

◇ = Milestones Met

■ = Taskbar + Finish Date, if Completed

**HHS REGULATION AND ENSURE DEPARTMENT  
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ID	Task Name	96		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
24	02-06-03, Lincoln General Hospital							Jim DeFrain	Bryan Miller						
25	07-05-01, Faith Regional Health Services - Lutheran C							Bryan Miller							
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30	08-03-01, Grand Island Radiology Associates							Bryan Miller							
31	01-08-02, Professional Service Industries, Inc.							Jim DeFrain, Brian Hearty							
32	01-08-03, Professional Service Industries, Inc.							Jim DeFrain							
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34	02-37-01 Syncor International Corporation							Cheryl Rogers, Brian Hearty							
35	01-76-01, EndoTech, Inc.							Bryan Miller, Brian Hearty							
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38	01-45-01, Douglas County Health Department							Bryan Miller							
39	01-75-01, Omaha Housing Authority							Bryan Miller							
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43	01-48-01, University of Nebraska at Omaha							John Fassell, Brian Hearty							
44	01-48-02, University of Nebraska at Omaha - Biology							John Fassell, Brian Hearty							
45	08-11-01, Filter Specialists, Inc.							Jim DeFrain, New Hire							
46	21-01-03, Regional West Medical Center							Jim DeFrain, New Hire							

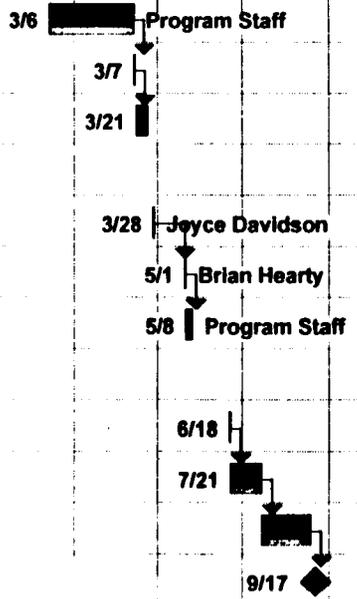
**HHS REGULATION AND ENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	96		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
47	37-03-01, Becton Dickinson														
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68	Inspection Procedures														
69	Licensing Practices and Procedures														



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ID	Task Name	1996		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
93	<b>Radioactive Materials Events</b>														
94	NE970001008 24 hr Report Received														
95	NE970001008 24 hr Report Evaluated														
96	NE970001008 Reported to NRC														
97	30 day Written Report Received														
98	NE970001008 Follow-up Report to NRC														
99	<b>Nuclear Materials Events Database Reporting</b>														
100	<b>Monthly NMED Report</b>														
122	<b>Legislation and Regulations</b>														
123	Regulation Changes to 001, 003, 004, 007, 009, 012, and														
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125	Proposed Changes Drafted														
126	Approved by RAC														
127	Proposed Changes Reviewed by PRO														
128	<b>Proposed Rule</b>														
129	Notice of Rulemaking Hearing														
130	Public Hearing														
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134	Attorney General Review and Approval														
135	Governor's Review and Approval														
136	Proposed Changes Adopted														



**HHS REGULATION AND INSURE DEPARTMENT  
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RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	96		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
137	Regulation Changes to 004, 005, 010, and 012														
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153	Proposed Guidance Drafted														
154	Approved by Program Manager														
155	Regulatory Guide 7.0														
156	Proposed Guidance Drafted														
157	Approved by Program Manager														
158	Regulatory Guide 7.1														
159	Proposed Guidance Drafted														

9/22 [redacted] Sherri Wren, Joyce Davidson, Bob Leopold

Brian Hearty

[redacted] Sherri Wren, Joyce Davidson, Sue Semerena

Brian Hearty

9/26 [redacted] Sherri Wren, Susan Farnsworth, Sue Semerena

**HHS REGULATION AND LICENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	1996		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
160	Approved by Program Manager					9/29	Brian Hearty								
161	<b>Materials Program Procedures</b>														
162	<b>General Licensing</b>														
163	RMP No. 1.01, Certain Measuring, Gauging, and Con														
164	RMP No. 1.02, Depleted Uranium														
165	RMP No. 1.03, In Vitro Testing														
166	RMP No. 1.04, Reciprocal Recognition of an Out-of-S														
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177	RMP No. 3.01, Scheduling of Inspections														
178	RMP No. 3.02, Inspection Preparation														
179	RMP No. 3.03, Performance Based Inspection														
180	RMP No. 3.04, Documentation of Inspection Results														
181	RMP No. 3.05, Enforcement														
182	<b>Allegations and Incidents</b>														

**HHS REGULATION AND INSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM**

ID	Task Name	96		1997				1998				1999			
		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
183	RMP No. 4.01, Management of Allegations									■	Brian Hearty				
184	RMP No. 4.02, Radioactive Material Events					9/26	■	Brian Hearty							
185	<b>Legislation, Regulation and Guidance Development</b>														
186	RMP No. 5.01, Tracking and Scheduling									■	Brian Hearty,Sue Semerena				
187	RMP No. 5.02, Revision and Implementation									■	Brian Hearty,R.A.I.D.				
188	<b>Qualifications and Training</b>														
189	RMP No. 6.01, Qualifications Manual					9/3	■	Brian Hearty,Sue Semerena,Bob Leopold,Jim Wiley							
190	RMP No. 6.02, Training Resources Availability and Eq					9/3	■	Brian Hearty							
191	<b>Program Management</b>														
192	RMP No. 7.01, Budgeting										■	Brian Hearty			
193	RMP No. 7.02, Fee Calculation										■	Brian Hearty			
194	RMP No. 7.03, Routine Program Oversight					7/31	■	Brian Hearty							
195	RMP No. 7.04, Upper Management Oversight					8/22	■	Brian Hearty,Sue Semerena,Bob Leopold,Jim Wiley							

HHS REGULATION AND LICENSURE DEPARTMENT  
PUBLIC HEALTH ASSESSMENT DIVISION  
RADIOACTIVE MATERIALS PROGRAM

**RADIOACTIVE MATERIALS PROGRAM CORRECTIVE ACTION PLAN**

Approved by Division Administrator:

Revised: Wed 10/1/97



Task   
Progress   
Milestone   
Summary  
Rolled Up Task   
Rolled Up Milestone   
Rolled Up Progress 

# STATE OF NEBRASKA HEALTH AND HUMAN SERVICES REGULATION AND LICENSURE DEPARTMENT

## Radioactive Materials Procedure No. 4.02

### Allegations and Incidents - Radioactive Material Events



Approved by: Brian P. Hearty

Date: 9/26/97

## 1.0 PURPOSE

### 1.1 Applicability

This procedure outlines the tracking, investigation, reporting, and documentation of radioactive material events. It incorporates the U.S. Nuclear Regulatory Commission's "Handbook on Nuclear Material Event Reporting in the Agreement States" and provides instructions on using the Nuclear Materials Events Database.

### 1.2 References

- 1.2.1 NRC, Office of State Programs, "Handbook on Nuclear Material Event Reporting in the Agreement States", Published as Draft for Comment March 1995
- 1.2.2 NRC, Idaho National Engineering Laboratory, "Nuclear Materials Events Database User Guide", Published as Draft 09/05/96
- 1.2.3 RMP No. 4.01, Allegations and Incidents - Management of Allegations
- 1.2.4 ERP No. 1.03 - Emergency Response Non-Specific Locations

### 1.3 Computer Based Letters, Forms, and Reports

- 1.3.1 Microsoft Access 2.0  
R:\RAMDATA\EVENT.MDB  
*Report: Event Log Report*  
*Report: Pending Radioactive Materials Events*  
*Form: Event Log*
- 1.3.2 Microsoft Access 2.0  
R:\NMED\_LOC\LOC\_PROG.MDB  
*Report: Event Details*
- 1.3.3 Microsoft Access 2.0  
R:\NMED\_NRC\NRC\_PROG.MDB

### 1.4 Hardcopy Files

- 1.4.1 Event Documentation Files

## 1.4.2 Radioactive Materials License Files

### 1.5 Definitions

Abnormal Occurrence	An unscheduled incident or event which the NRC has determined to be significant from the standpoint of public health and safety. NRC has established specific criteria to evaluate the significance of an event as a potential AO.
Reportable Event	An event involving licensed radioactive material that is required by regulation to be reported to the Agency by the licensee. Attachment 4.02-1, Table 2, lists the NRC regulatory citations which require reports, and Attachment 4.02-2, lists the equivalent 180 NAC 1 citations.
Routine Event	An event involving radioactive material that does, will, or may lead to, or may be part of a pattern that could pose a health and safety risk. This category of events includes events that are required to be reported within 30 days such as 180 NAC 1-005.13A.
NMED	The Nuclear Materials Events Database that was developed and is maintained by INEL for the NRC, and is used to provide information on reportable radioactive materials events for both NRC and Agreement State licensees.
Significant Event	An event involving radioactive material that does, will, or may impact public health and safety risk. Events in this category should be reported to the Agency within 24 hours such as 180 NAC 1-004.52A and B, 003.25A and B, and 007.13A1.
Special Inspection	An inspection that is in response to an incident or allegation that is performed outside of the normal inspection frequency.

## 2.0 RESPONSIBILITIES

### 2.1 Technical Staff Member

Technical Staff shall use this procedure when receiving a report of, logging,

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investigating, reporting, and documenting a radioactive material event.

## 2.2 Radioactive Materials Program Manager

The Program Manager shall work with the Technical Staff member to determine if the risk to public health may require an emergency response or special inspection, the Agency and NRC reporting requirements, and the event close-out requirements.

## 3.0 PROCEDURES

### 3.1 Event Logging

#### 3.1.1 Radioactive Materials Program Event Log

The Event Log is a database for tracking and documenting possible radioactive material events. The log shall be used by the Technical Staff member that becomes aware of an event either by a required notification from a licensee, on inspection, or by an allegation. The Technical Staff member shall immediately enter all known information on the event into the appropriate fields of the *Event Log* form. If the event is discovered on inspection, the Inspector may call back to the office for assistance in logging the event and initiating any required reports. Written or verbal allegations shall also be tracked and documented in accordance with RMP No. 4.01. Immediately after the initial information has been logged, the Technical Staff member shall inform the Radioactive Materials Program Manager of the event and begin assessing the risk to public health and safety.

### 3.2 Event Investigation

#### 3.2.1 Emergency Response

If the event is on-going and harm to public health and safety is imminent, the Emergency Response Team shall be activated in accordance with ERP No. 1.03. Once the emergency response is terminated a special inspection shall be performed.

#### 3.2.2 Special Inspection

A special inspection shall be performed as soon as possible within 30 days if the event may have resulted a significant exposure to an individual or the public, be a generic device defect, or have been

caused by a violation of a regulation or license condition. A special inspection should also be performed when the information available is not complete enough to make a determination of the above situations. The special inspection shall be performed by a qualified Lead Inspector and documented in accordance with RMP No. 3.04.

### **3.3 Event Reporting**

#### **3.3.1 Reports to NRC**

Events shall be reported in accordance with Attachment 4.02-1, NRC, Office of State Programs, "Handbook on Nuclear Material Event Reporting in the Agreement States", Published as Draft for Comment March 1995. Attachment 4.02-2 provides the 180 NAC 1 regulatory citations which require Agency notification that are equivalent to the NRC citations listed in Table 2, Reportable Events, page 16 of the Handbook.

#### **3.3.2 NMED Database**

The NMED database system shall be used to generate *Event Details* reports for documentation of the event and transmittal to NRC, if required. Attachment 4.02-3, NRC, Idaho National Engineering Laboratory, "Nuclear Materials Events Database User Guide", Published as Draft 09/05/96 is available for reference when using the NMED database.

#### **3.3.3 Electronic Reporting to NRC**

NMED is capable of generating transfer file reports in an electronic format that can be sent to the NRC on disk or over the internet for easier input into the national database. Attachment 4.02-3 provides instructions on creating the transfer file.

#### **3.3.4 Confirmation of Final NMED Report**

After an NMED update is received from the NRC and NRC\_PROG.MDB is revised, each recently reported event should be reviewed to ensure the event details were properly transferred.

### **3.4 Event Close-Out**

An event may be considered closed when:

- 3.4.1 There is no further risk to public health from this event. If this is a generic device defect or common use of material, the existence of similar circumstances in the State shall be determined and the likelihood of a repeat event estimated prior to closure.
- 3.4.2 All required written reports and, if applicable, replies to a Notice of Noncompliance generated from a special inspection have been reviewed and the corrective action accepted.
- 3.4.3 Events shall be closed upon approval of the Radioactive Materials Program Manager.

## 4.0 RECORDS

### 4.1 Hardcopy

- 4.1.1 *Event Log* reports and *NMED Event Details* reports shall be maintained in chronological order in the Event Documentation Files. Copies of the event reporting fax cover sheet provided to the NRC shall be maintained with the appropriate reports.
- 4.1.2 Copies of the *Event Log* and *Event Details* report shall be maintained with the inspection results in the appropriate licensee file.
- 4.1.3 Special inspection reports should be maintained with the inspection results in the appropriate licensee file.

### 4.2 Computer Based

- 4.2.1 The Event Log and NMED databases shall be maintained for access by program Technical Staff.

## 5.0 ATTACHMENTS TO RMP No. 4.02

- 4.02-1 NRC, Office of State Programs, "Handbook on Nuclear Material Event Reporting in the Agreement States", Published as Draft for Comment March 1995
- 4.02-2 180 NAC 1 Regulatory Citations Requiring Agency Notification
- 4.02-3 INEL "Nuclear Materials Events Database Users Guide", Draft 09/05/96

**Attachment 4.02-1**

**NRC, Office of State Programs, "Handbook on Nuclear Material Event Reporting in the Agreement States", Published as Draft for Comment March 1995**

This attachment contains a copy of the handbook to be used when reporting events the NRC.

<u>The following pages are attached:</u>	<u># Pages</u>
Cover Page	1
Abstract	1
Table of Contents	2
Preface	2
Section I	4
Section II	19
Appendix	18

**Attachment 4.02-2**

**180 NAC 1 Regulatory Citations Requiring Agency Notification**

This attachment contains the citations equivalent to Table 2 in Attachment 4.02-1.

The following pages are attached:  
Regulatory Citations

# Pages  
1

## REPORTABLE EVENTS

Typical items covered under reporting requirements include the following:

180 NAC 1-003.25	Reporting of events involving:  Prevention of immediate protective action, Unplanned contamination restricting access > 24 hours, Safety equipment failed or disabled, Unplanned medical treatment of contaminated person, Fire, explosion affecting integrity of material or container.
180 NAC 1-004.51	Reports of theft or loss of licensed material.
180 NAC 1-004.52	Immediate and 24 hour notification criteria for materials events.
180 NAC 1-004.53	Radiation exposures, releases or concentrations of radioactive material that exceed the limits.
180 NAC 1-005.13	Radiation safety reporting requirements for radiographic operations.
180 NAC 1-007.17	Notifications, records, and reports of misadministrations.
180 NAC 1-014.24	Notification of incidents and lost sources, abandonment procedures for irretrievable sources.
180 NAC 1-019.29	Notification of incidents involving irradiators.

**Attachment 4.02-3**

**. INEL "Nuclear Materials Events Database User Guide", Draft 09/05/96**

This attachment contains a copy of the instructions for use of the NMED database.

**The following pages are attached:**

	<b><u># Pages</u></b>
Cover Page	1
Table of Contents	1
Purpose	1
Instructions	13
Appendix A Event Descriptions	8
Appendix B Data Dictionary	7
Appendix C Data Table Relationship	1

# Public Health Assessment Division

