

December 30, 1998

Ms. Gina Dunning, 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 Ms. Dunning:

On December 17, 1998, the Management Review Board (MRB) met to consider the proposed final Integrated Materials Performance Evaluation Program (IMPEP) report on the Nebraska Agreement State Program. The MRB found the Nebraska program adequate to assure public health and safety and compatible with NRC's program. The MRB also acknowledged Nebraska's efforts to address earlier recommendations and to strengthen its program over the past two years.

Section 5.0, page 17, of the enclosed final report presents the IMPEP team's recommendations and suggestions. We received your November 23, 1998 letter which described the actions taken in response to the team's recommendations. We request no additional information at this time. We look forward to receiving copies of your procedures as they are completed and the schedule for their preparation (See Recommendation Number 2).

Based on the results of the current IMPEP review, the next full review will be in approximately four years.

I appreciate the courtesy and cooperation extended to the IMPEP team during the review and your support of the Radiation Control Program. I look forward to our agencies continuing to work cooperatively in the future.

Sincerely, */RA/*

Frank J. Miraglia, Jr.
Deputy Executive Director
for Regulatory Programs

Enclosure:
As stated

cc: See next page

cc: Bob Leopold, Director
Public Health Assurance Division
Department of Regulation and Licensure

Cheryl K. Rogers, Program Manager
Radioactive Materials

Randolph Wood, Director
Department of Environmental Quality (DEQ)

Jay Ringenberg, Manager
Low-Level Radioactive Waste Program, DEQ

Gerald Allen, Environmental Program Specialist, DEQ

David P. Schor, State Liaison Officer

Gina Dunning

- 2 -

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* See previous concurrence.

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INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

REVIEW OF NEBRASKA AGREEMENT STATE PROGRAM

SEPTEMBER 21-25, 1998

FINAL REPORT

U.S. Nuclear Regulatory Commission

1.0 INTRODUCTION

This report presents the results of the review of the Nebraska radiation control program. The review was conducted during the period September 21-25, 1998, by a review team comprised of technical staff members from the Nuclear Regulatory Commission (NRC) and the Agreement State of Georgia. Review team members are identified in Appendix A. The review was conducted in accordance with the "Implementation of the Integrated Materials Performance Evaluation Program and Rescission of a Final General Statement of Policy," published in the Federal Register on October 16, 1997, and the November 25, 1997, revised NRC Management Directive 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)." Preliminary results of the review, which covered the period July 20, 1996 to September 25, 1998, were discussed with Nebraska management on September 25, 1998.

A draft of this report was issued to Nebraska for factual comment on October 28, 1998. The State responded in a letter dated November 23, 1998 (Attachment 1). Nebraska's factual comments were considered by the team and accommodated in the report. The Management Review Board (MRB) met on December 17, 1998 to consider the proposed final report. The MRB found the Nebraska radiation control program was adequate to protect public health and safety and compatible with NRC's program.

The Nebraska Health and Human Services, Department of Regulation and Licensure (HHS R&L), is the State agency that is responsible for managing the agreement materials program. Within HHS R&L, the Radioactive Materials Program (RMP) and Low-Level Radioactive Waste Programs are administered by the Division of Public Health Assurance, Consumer Health Services Section. Organization charts for the Radioactive Materials and Low-Level Radioactive Waste Programs, and the Consumer Health Services Section are included as Appendix B.

At the time of the review, the RMP regulated 135 specific licenses, including limited and broad scope medical institutions, academic institutions, industrial radiography, fixed and portable gauge units, nuclear pharmacy licensees, and commercial pool irradiators. The State is also the host state for the Central Interstate Low-Level Radioactive Waste Compact which includes the States of Arkansas, Kansas, Oklahoma, and Louisiana. The Low-Level Radioactive Waste (LLRW) disposal regulatory program is jointly administered and managed by HHS R&L and the Nebraska Department of Environmental Quality (NDEQ) through a Memorandum of Understanding. In addition to its agreement materials and LLRW programs, HHS R&L is responsible for the control of machine produced radiation, natural occurring radioactive materials, and nuclear power plant environmental surveillance and emergency response.

The review focused on the materials program as it is carried out under a Section 274b (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the State of Nebraska, including the LLRW program.

In preparation for the review, a questionnaire addressing the common and non-common performance indicators was sent to the State on July 14, 1998. The State provided a response to the questionnaire on August 28, 1998. During the review, discussions with State staff resulted in the responses being further developed. A copy of their final response is included in Appendix F to the draft report.

The review team's general approach for conduct of this review consisted of: (1) examination of Nebraska's response to the questionnaire; (2) review of applicable Nebraska statutes and regulations; (3) analysis of quantitative information from the licensing and inspection data base; (4) technical review of selected licensing and inspection actions; (5) field accompaniments of four RMP inspectors; and (6) interviews with staff and management to answer questions or clarify issues. The review team evaluated the information that it gathered against the IMPEP criteria for each common and applicable non-common performance indicator and made a preliminary assessment of the State's performance.

Section 2 below identifies the five recommendations resulting from the follow-up review conducted on September 16-18, 1997. The previous full IMPEP review was conducted on July 15-19, 1996, contained 14 recommendations and one suggestion, and the MRB directed that a follow-up review be conducted not later than September 1997. The 1997 follow-up review closed all but two of the previous recommendations from the 1996 review, found that the program remained adequate to protect public health and safety, but needs improvement, and was compatible with NRC's program. Another review was scheduled for one year after the follow-up review. Results of the current review for the IMPEP common performance indicators are presented in Section 3. Section 4 discusses results of the applicable non-common performance indicators, and Section 5 summarizes the review team's findings, recommendations, and suggestions. Recommendations made by the review team are comments that relate directly to program performance by the State. A response is requested from the State to all recommendations in the final report. Suggestions are comments that the review team believes could enhance the State's RMP. The State is requested to consider suggestions, but no response is requested.

2.0 STATUS OF ITEMS IDENTIFIED IN PREVIOUS REVIEWS

During the previous follow-up review, which concluded on September 18, 1997, five recommendations were made which included two open items, concerning the development of administrative and technical procedures. The status of these recommendations is discussed as follows:

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.

Current Status: A new schedule was provided following the 1997 review. At the time of the 1997 follow-up review, the State's 23 procedures had not been developed. Since the 1997 review the NRC has received one procedure, and four additional procedures have been drafted. In addition, six more procedures have been contracted for completion in January of 1999. This recommendation will be revised as a new recommendation below. Therefore, this recommendation is closed.

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

Current Status: As noted above, one final procedure was received by NRC during the review period. This recommendation will be combined with recommendation 1 above as a new recommendation below. Therefore, this recommendation is closed.

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.

Current Status: The team believes that the regular communications have been beneficial. The team has noted that performance has significantly improved in the common indicator areas. The State and Region IV have committed to continue quarterly communication in place of the previously recommended monthly status report and bimonthly written report. This recommendation is closed.

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.

Current Status: The revised documentation of inspector accompaniments was provided as an attachment to the current IMPEP questionnaire response. The accompaniments are being maintained in each individual's training file. This recommendation is closed.

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.

Current Status: This procedure had been drafted at the time of the review, but the procedure had not become final and the staff needs to be trained on the final procedure. This recommendation will be combined with recommendation 1 above as a new recommendation below. Therefore, this recommendation is closed.

Because of the importance of the development and implementation of critical procedures relative to the performance of the staff and the performance indicators, the team recommends that the State initiate appropriate actions needed to complete the development and implementation of the previously identified procedures that are critical to the performance of the program. The State should provide the revised schedule to NRC and copies of the procedures as they are completed.

3.0 COMMON PERFORMANCE INDICATORS

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

3.1 Status of Materials Inspection Program

The review team focused on four factors in reviewing this indicator: (1) inspection frequency, (2) overdue inspections of licenses, (3) initial inspections of new licenses, and (4) timely dispatch of inspection findings to the licensee and corrective action. The review team's evaluation is based on Nebraska's questionnaire responses relative to this indicator, data gathered independently from the State's licensing and inspection data tracking system, the examination of completed inspection casework, and interviews with the RMP manager, and inspection and licensing staff.

The RMP manager related that the program policy is to utilize the same inspection frequencies as found in the NRC Inspection Manual Chapter (IMC) 2800 for program codes and inspection priorities. The review noted that the State utilizes only one category for broad medical licenses that are inspected at a one year frequency, and the State utilizes only one category for academic broad licenses that are inspected every two years. These broad license inspection frequencies are compatible with the most restrictive frequencies utilized by NRC for category A broad medical licenses (one year) and category A broad academic (two years) inspections. During the review, the RMP approved a draft revised procedure "Scheduling of Inspections" Procedure No. 3.01, that revises the license categories and inspection frequencies to make them the same as the frequencies in NRC IMC 2800.

In response to the questionnaire, Nebraska indicated that as of August 28, 1998, only four core licensees were overdue for inspection. A review of the files indicated that all of the inspections had been completed and that none of the inspections had exceeded the NRC's 25% criteria for overdue inspections. The review of the materials database also confirmed that the State has not experienced any overdue inspections since the 1997 follow-up review.

The RMP manager related that current initial inspection policy is to follow the guidance in IMC 2800, which states that new licenses are inspected within six months of issuance of the license. The RMP manager also related that the initial inspection can be extended to one year in cases where the licensee does not receive material or initiate licensed activities. A review of the data files and discussions with RMP staff confirmed that there have only been three new licenses issued since the 1997 follow-up review that required an initial inspection, and the records show that the initial inspections were all performed on a timely basis and in accordance with IMC 2800 guidance.

An internally generated monthly report to management tracks inspections that are completed and overdue. All licenses are entered into the RMP database and a computer query allows an easy determination of the status of inspections at a given time period.

The RMP maintains a database on all reciprocity requests that are received. The applicant is contacted initially by letter and the appropriate information is obtained and maintained in a file. The licensees normally call or fax notification to RMP prior to working within the State. The database tracks the licensee name, address, phone numbers, home State's license number, license type, and expiration date. The listing also tracks each authorized entry into the State, location of a temporary job site, date that the licensee left the State and the dates of any inspections. The authorization is compatible with the NRC reciprocity requirements and the State

assesses a reciprocity fee as published in the regulations which allows the licensee to enter the State on an unlimited number of days during any year based on the initial date of entry. A review of the questionnaire and database printouts shows that the RMP has 33 reciprocity license files in the database, of which 15 different licensees have requested reciprocity during the review period. The State has conducted 17 reciprocity inspections since the database was established following the 1996 review. The review determined that all reciprocity licensees were inspected in accordance with the State procedures and the NRC IMC 2800 procedures. A comparison of the database with the license files and the reciprocity inspections performed during the review period identified some minor discrepancies between the database and the information provided during the review for reciprocity licenses REC0189 and REC0101. These discrepancies were satisfactorily resolved.

The RMP reports all inspection findings to the licensee by letter following the inspection. The letter outlines any specific violations, requires a written response, and requires posting by the licensee. If no violations or recommendations were identified during the inspection, then a clear letter is sent to the licensee confirming the results of the inspection. In general, the issuance of inspection findings is timely with letters to the licensee being sent within 30 days of the inspection. From the casework reviewed, eleven inspection letters were sent within 30 days of the inspection, one was sent within 33 days, one was sent within 37 days and two were sent within 75 days. The last two inspections had experienced processing difficulties due to staff turnover.

Based on the IMPEP evaluation criteria, the review team recommends that Nebraska's performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

3.2 Technical Quality of Inspections

The team reviewed inspection reports, enforcement documentation, inspection field notes, and interviewed inspectors for 15 materials inspections conducted during the review period. The casework included all of the State's materials inspectors, including two consultants, and covered: institutional medical with high dose rate (HDR) applicators; mobile medical; medical teletherapy; institutional medical broad A; nuclear pharmacy; research and development (non-human use); portable/fixed gauges and gas chromatographs; industrial radiography; academic other; pool irradiator; self-contained irradiator; and reciprocity inspections. A review team member performed accompaniments of four State inspectors on four separate inspections of licensed facilities. Appendix C lists the completed inspection casework reviewed for completeness and adequacy with case-specific comments as well as the results of the accompaniments.

All enforcement letters reviewed were written in appropriate regulatory language. Follow up to enforcement letters was evident and complete. Enforcement cases were generally resolved promptly. The inspections were generally performance based inspections. The technical quality of the reports demonstrated that each inspector was competent in the various type of inspections conducted. The enforcement letters generally would include an attachment with the items of

noncompliance (violations) and/or the recommendations made. In some of the recommendations, a regulation requirement was referenced which is an indication that the licensee should be cited for a violation, rather than a recommendation. The review team suggests that the RMP establish guidance to assist the inspectors when making a decision whether to issue a recommendation versus an item of noncompliance (violation).

A total of 90 inspections were performed of Nebraska licensees, and 17 reciprocity inspections were conducted during the review period. The RMP utilizes the Inspection Manual and Enforcement Manual that was provided to the program by a contract consultant. The RMP is in the process of developing written procedures for Enforcement and Escalated Enforcement, Scheduling Inspections, Inspection Preparation, Performance Based Inspection, and Documentation of Inspection Results. The team reviewed the inspection field notes and found them to be comparable with the types of information and data collected under NRC Inspection Procedure (IP) 87100 and thorough with all items checked and written comments where necessary. The inspection field notes provided documentation of the licensee's program including: posting; storage and use of radioactive material; receipt, transfer, and disposal of radioactive material; inventory; leak tests; radiation protection program; personnel monitoring; training; independent measurements; and inspection findings. The team also noted the inspectors observed licensed operations or had operations demonstrated whenever possible.

The RMP management policy is to conduct unannounced inspections whenever possible. Twelve of the inspections reviewed were unannounced and three were announced. Announced inspections usually involve initial, special or reciprocity inspections. Inspection reports were signed by management. The RMP manager was aware of inspection findings through debriefing by the inspector. In response to the questionnaire and through discussions with the RMP manager, the State reported the number and type of supervisory accompaniments performed during the review period. Four inspectors were accompanied annually.

The RMP has an adequate supply of survey instruments to support the current inspection program. Two survey kits are maintained for responding to incidents. The RMP has access to instrumentation in order to identify and quantify isotopes through a contract lab or the Butte Health Physics Assessment Facility. The program has adequate instrumentation for the collection of air and environmental samples, and all instruments are calibrated by a contract calibration service or returned to the manufacturer for service or calibration as appropriate. Fixed and portable instruments are also available at the laboratory facility located at the LLRW proposed site.

Four inspectors were accompanied by the review team leader during the period of August 25-27, 1998. One inspector was accompanied during an early morning unannounced inspection of a nuclear pharmacy facility, and another inspector was accompanied on an unannounced inspection of an institutional nuclear medicine facility with brachytherapy and a High Dose Rate (HDR) unit on August 25, 1998. The third inspector was accompanied during an unannounced inspection of a mega-curie pool irradiator on August 26, 1998. The fourth inspector was accompanied on an unannounced inspection of an industrial radiography licensee at two different locations on August 27, 1998. These accompaniments are also identified in Appendix C. During the accompaniments, the Nebraska inspectors demonstrated appropriate performance type inspection techniques and

knowledge of the regulations. The inspectors were well prepared and thorough in their reviews of the licensees' radiation safety programs. Overall, the technical performance of the inspectors was excellent, and their inspections were adequate to assess radiological health and safety at the licensed facilities.

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Based on the IMPEP evaluation criteria, the review team recommends that Nebraska performance with respect to the indicator, Technical Quality of Inspections, be found satisfactory.

3.3 Technical Staffing and Training

Issues central to the evaluation of this indicator include the radioactive materials program reorganization, staffing level, staff turnover, technical qualifications of the staff, and training. To evaluate these issues, the review team examined the State's questionnaire responses relative to this indicator, interviewed program management and staff, and considered any possible workload backlogs.

Since the last program review in 1996, there have been two reorganizations. The first occurred in January 1997, shortly after the IMPEP review and is described in the 1997 final report. The last reorganization was completed in March 1998 following the resignation of the RMP manager. The 1998 reorganization involved the reassignment of the LLRW program manager to acting RMP manager, and the assignment of the Consumer Health Services Section Administrator to an administrative management role for the RMP. The RMP is organized under the Consumer Health Services Section for administrative purposes as noted in the organizational charts. Emergency response activities are divided between both the RMP and LLRW programs.

At the time of the review, Nebraska's radioactive materials program was staffed by the RMP manager, the administrative manager, and three full time technical staff. In addition, because of the lull in Low-Level Radioactive Waste (LLRW) program activities, two technical staff from that program have been cross-trained and are assisting in inspection and licensing activities in the RMP. The administrative management of technical staff (Health Physicists) has enabled both RMP staff and HHS R&L management to remain cognizant of materials licensing and inspection workloads.

The team considered the reorganization along with staff turnover and found that three members of the RMP staff left during the review period. The turn-over included the resignation of the RMP manager in March 1998. A staff assistant (computer support) left the program to resume his education in September 1998, and the position is being temporarily filled by other staff. One RMP inspector/license reviewer left the program in October 1997 and the vacant position was filled in January 1998 with a qualified individual from the X-Ray program. The current organization shows one vacant technical position in LLRW and one vacant support position in Radioactive Materials. These vacancies were discussed with the Division Director and he related that he had authority to

fill the positions, but filling the vacancies would depend upon the outcome of the staffing needs for the LLRW program. The review team considered the reasons for the staff turnover, the resulting reorganization and changes in technical staffing, the impacts of these staffing changes on the performance of the other indicators, and determined that the program staffing is adequate to administer the current regulatory program.

The qualifications of the staff were determined from the questionnaire, training records, and interviews of personnel. All of the technical staff have bachelor degrees. One person hired since the previous review has a B.S. degree in mechanical engineering and the transferee from the X-Ray program has a B.S. degree in nuclear medicine. All technical staff are required to have basic health physics training, and the program manager identified five core courses for inspectors and license reviewers. These courses are licensing, inspection, nuclear medicine, industrial radiography, and transportation. Waivers from specific courses may be granted, at the manager's discretion, for individuals with extensive work experience and education in a specific topic area. The review team confirmed that all individuals who perform licensing and inspection functions have completed the five core courses. New staff are assigned to review State regulations and procedures and to accompany senior license reviewers/inspectors, then are assigned increasingly complex licensing duties under the direction of senior staff and accompany experienced inspectors during increasingly complicated inspections. Before a new inspector is authorized to conduct independent inspections, an initial supervisory accompaniment is performed (annually thereafter) to review their competence. After the accompaniments, the RMP manager determines the priority level of inspection that the inspector is capable of performing.

The review team examined the State's training procedure Radioactive Materials Procedure No. 6.01, "Qualifications and Training - Qualifications Manual" dated September 3, 1997. The procedure describes the training requirements for basic training and specialized training for the technical staff. The RMP manager stated that the procedure is very thorough; however, the procedure is being revised to simplify the record keeping documents. A Microsoft Access database program has been implemented to maintain training records; however, because of the complexity of the training procedure and the detailed information required, the database records have not been kept up-to-date. The review team found records of attendance at various NRC, DOE, and FEMA courses in individual employee training files, including records demonstrating successful completion of the five RMP identified core courses.

During the review of the training procedures and records, the team noted that the core courses did not include the teletherapy and brachytherapy course as outlined in NRC's Manual Chapter 1246 for materials license reviewers and inspectors, and that only two staff members have completed the course. The team believes that all technical staff performing brachytherapy licensing or inspections would benefit from the teletherapy and brachytherapy course or equivalent training. Also, only one staff member has completed the NRC irradiator course and the State currently has three licensed pool irradiator facilities. Currently, any member of the technical staff can license or inspect the pool irradiators. Although the irradiator course is a supplementary or specialized course, the team believes that backup training in this area is needed and that all staff performing licensing actions or inspection activities on pool irradiators should have the irradiator course or

equivalent training. The staff has been informally qualified to perform both types of inspections. The team recommends that staff who conduct independent inspections and/or license reviews of pool irradiators, teletherapy and brachytherapy complete the irradiator course and teletherapy and brachytherapy courses.

The review team also noted that the State has not developed individual training plans for the technical staff which could be utilized for projecting training needs and as a career enhancement tool. Accordingly, the review team suggests that training plans be developed for each staff member to ensure the completion of the State's qualifications program.

Based on the IMPEP evaluation criteria, the review team recommends that Nebraska's performance with respect to the indicator, Technical Staffing and Training, be found satisfactory.

3.4 Technical Quality of Licensing Actions

The review team examined licensing casework, interviewed the RMP manager and other license reviewers, and evaluated the licensing process for 13 specific licenses. Licensing actions were reviewed for completeness, consistency, proper radioisotopes and quantities authorized, qualifications of authorized users, adequate facilities and equipment, and operating and emergency procedures sufficient to establish the basis for licensing actions. Licenses were reviewed for accuracy, appropriateness of the license and its conditions, and overall technical quality. The casework was reviewed for timeliness, adherence to good health physics practices, reference to appropriate regulations, review of product certifications or other supporting documents, consideration of enforcement history, pre-licensing visits, supervisory review as indicated, and proper signature authorities. The files were checked for retention of necessary documents and supporting data including terminated licenses.

The licensing casework was selected to provide a representative sample of licensing actions which had been completed during the review period. The cross-section sampling focused on the State's core licenses in priorities 1, 2, and 3; new licenses issued; renewals; and licenses terminated during the review period. The sample included the following licensing types: broadscope academic; broadscope medical; research and development; pool type irradiator; industrial radiography; portable/fixed gauges, institutional nuclear medicine; mobile nuclear medicine; therapy; and nuclear pharmacy. Licensing actions reviewed included 2 new, 6 renewals, 4 amendments (including a change of ownership) and 1 termination. A listing of the casework licenses evaluated with case specific comments can be found in Appendix D.

Licenses are renewed on a 5 year frequency. Licenses that are under timely renewal are amended as necessary to assure that public health and safety issues are addressed during the period that the license is undergoing the renewal process. Each licensing action receives an initial review by one individual, then a second technical review by a senior health physicist. All licenses are signed by the RMP manager or the Consumer Health Services Section Administrator.

The review team found that the licensing actions were generally very thorough, complete, of high quality, and with health and safety issues properly addressed. The licensee's compliance history is taken into account when reviewing renewal applications and amendments as determined from documentation in the license files and discussions with the license reviewers and inspectors.

Comments made on the casework are identified in Appendix D. Following the team's discussion of these comments, the RMP manager initiated actions to resolve the comments.

The casework review also confirmed that, with one exception, the materials staff uses bi-weekly radioactive materials meetings, reading files, and its computerized licensing system - ACCESS, as well as the State licensing regulatory guides, which have been patterned after the NRC guides, and NRC Consolidated Guidance NUREG series 1556, as references for materials licensing actions. Technical quality of the licensing program can be enhanced through the completion of the State's procedures as noted in the recommendation in Section 2.0. The one exception noted that is inconsistent with NRC guidance involved two licenses, one for a fixed gauge and one for a portable gauge, which did not have a license condition for periodic inventory of sealed sources as utilized as standard practice by NRC and other Agreement States. The review team understands that this condition is being automatically added to applicable licenses by ACCESS as requests for unrelated actions occur. However, the review team recommends that the State add the inventory license condition to all applicable licenses, within the next year.

All licensing actions were signed by management. Deficiencies are addressed by letters almost exclusively and use appropriate regulatory language. Telephone inquiries are only used when an issue can be addressed that same day and are not documented as telephone inquiries but as licensee letters.

The State provided a listing of 37 licenses that have been terminated since the last review. A review of termination actions over the period showed that most of the terminations were for licensees possessing only sealed sources and/or for uses of radiopharmaceuticals with short half lives. The termination file selected for review did not involve residual contamination. The terminated licensing action was well documented, showing appropriate records.

Based on the IMPEP evaluation criteria, the review team recommends that Nebraska's performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

3.5 Response to Incidents and Allegations

In evaluating the effectiveness of the State's actions in responding to incidents, the review team examined the State's response to the questionnaire regarding this indicator, reviewed selected incidents reported for Nebraska in the "Nuclear Material Events Database" (NMED) against those contained in the Nebraska files, and reviewed the casework and supporting documentation for eight materials incidents and five allegations including one allegation referred to the State by NRC. A list of selected incident files examined along with case specific comments is contained in Appendix E.

The review team interviewed the RMP manager and staff to discuss the State's incident and allegation process, file documentation, Freedom of Information Act, NMED, and notification of incidents to the NRC Operations Center.

The RMP manager is familiar with NRC's "Handbook on Nuclear Event Reporting in the Agreement States" and Procedure Number: SA-300, "Reporting Material Events," dated February 1998. A copy of the manual is maintained in the State's NMED files. Reports have been submitted appropriately for NMED entry. In addition, the State has provided event status updates to the NRC through the NMED system.

The review team found that the State's actions in response to incidents and allegations were appropriate. The RMP manager usually directs the initial response and evaluates the need for an on-site investigation. Initial responses were prompt and well-coordinated, and the level of effort was commensurate with the health and safety significance. Inspectors were dispatched for onsite investigations in four of the eight incidents reviewed. Of those four onsite investigations, two were conducted on the same day of the notification. When appropriate, the State took suitable enforcement action that required corrective measures by the licensee.

During the review period, there was one allegation referred to the State by NRC, and there were four allegations that the State handled directly. The State promptly conducts an inspection when appropriate. The State maintains a complete chronology of their actions from the first contact to completion of the investigation. In addition, allegation closure memos are maintained in the files. The closure memos contained information on the allegations and investigation activities, but did not always clearly state the bases for the findings or clearly state the outcome of the investigation, (i.e., substantiated or unsubstantiated). Also, it was noted that the alleged is usually not informed of the outcome of the investigation. Although the State's responses to allegations were satisfactory, the review team recommends that the allegation records clearly state the basis for the findings and outcome of the investigation, and that the alleged be informed of the outcome of the investigation.

Based on the IMPEP evaluation criteria, the review team recommends that Nebraska's performance with respect to the indicator, Response to Incidents and Allegations, be found satisfactory.

4.0 NON-COMMON PERFORMANCE INDICATORS

IMPEP identifies four non-common performance indicators to be used in reviewing Agreement State programs: (1) Legislation and Program Elements Required for Compatibility; (2) Sealed Source and Device Evaluation Program; (3) Low-Level Radioactive Waste Disposal Program; and (4) Uranium Recovery Program. Nebraska's Agreement does not include uranium recovery program authority, so only the first three non-common performance indicators were applicable.

4.1 Legislation and Program Elements Required for Compatibility

4.1.1 Legislation

Along with their response to the questionnaire, the State provided the review team with the opportunity to review copies of legislation that affect the radiation control program. The currently effective statutory authority for the HHS R&L is contained in Nebraska Radiation Control Act 71-3501 to 71-3520. The Health and Human Services, Department of Regulation and

Licensure is the State's radiation control agency. The review team noted that no legislation affecting the radiation control program was passed during the review period.

4.1.2 Program Elements Required for Compatibility

The Nebraska Regulations for Control of Radiation, Title 180, Nebraska Administrative Code, applies to all ionizing radiation. Nebraska requires a license for possession and use of all radioactive material including naturally occurring materials, such as radium, and accelerator-produced radionuclides. Nebraska also requires registration of all equipment designed to produce x-rays or other ionizing radiation.

The review team examined the State's administrative rulemaking process and found that the process takes four to eight months from the development stage to the final filing with the Secretary of State, after which the rules become effective in five days. The process includes the development stage, public hearing stage, approval stage, and the filing stage. All rules and regulations for adoption must be adopted in accordance with the Administrative Procedures Act, Section 84-901 et seq. of the Nebraska Revised Statutes, signed by the Governor, then filed with the Secretary of State. The public, the NRC, other agencies, and all potentially impacted licensees and registrants are offered an opportunity to comment during the process. Comments are considered and incorporated as appropriate before the regulations are finalized. The State cannot adopt other agency regulations by reference; however, the State can adopt other requirements such as 10 Code of Federal Regulations (CFR) by attaching the specific regulation (with the effective date) to the State's proposed regulations during the adoption process. The State has the authority to issue legally binding requirements (e.g., license conditions) in lieu of regulations until compatible regulations become effective.

The team evaluated Nebraska's responses to the questionnaire and reviewed the status of regulations required to be adopted by the State during the review period. No regulations have been adopted by the State since September 17, 1997. The review team noted during the onsite review that Nebraska had prepared the following regulations for adoption, and the RMP staff related that the final versions were in the Attorney General's Office for approval, and the RMP staff projected that the regulations would become effective in November of 1998. The final regulations adopted on December 14, 1998, are as follows:

- ! "Frequency of Medical Examinations for Use of Respiratory Protection Equipment," 10 CFR Part 20 amendment (60 FR 7900) that became effective March 13, 1995.
- ! "Low-Level Waste Shipment Manifest Information and Reporting," 10 CFR Parts 20 and 61 amendments (60 FR 15649 and 25983) that became effective March 1, 1998. The Agreement States are to promulgate their regulations no later than March 1, 1998 so that NRC and the State would require this national system to be effective at the same time.
- ! "Radiation Protection Requirements: Amended Definitions and Criteria," 10 CFR Parts 19 and 20 amendments (60 FR 36038) that became effective August 14, 1995.
- ! "Compatibility with the International Atomic Energy Agency," 10 CFR Part 71 amendment (60 FR 50248) that became effective April 1, 1996.

The State has not adopted the following regulations:

- ! "Quality Management Program and Misadministrations," 10 CFR Part 35 amendment (56 FR 34104) that became effective January 27, 1992.
- ! "Performance Requirements for Radiography Equipment," 10 CFR Part 34 (60 FR 28323) that became effective June 30, 1995. (Note that this regulation has been drafted.)
- ! "Resolution of Dual Regulation of Airborne Effluents of Radioactive Materials; Clean Air Act," 10 CFR Part 20 amendment (61 FR 65119) that became effective January 9, 1997.
- ! "Recognition of Agreement State Licenses in Areas Under Exclusive Federal Jurisdiction Within an Agreement State," 10 CFR Part 150 amendment (62 FR 1662) that became effective February 27, 1997.
- ! "Licenses for Industrial Radiography and Radiation Safety - Requirements for Industrial Radiography Operations," 10 CFR Parts 30, 34, 71, 150 amendments (62 FR 28947) that became effective June 27, 1997.
- ! "Radiological Criteria for License Termination," 10 CFR Parts 20, 30, 40, 70 amendments (62 FR 39057) that became effective August 20, 1997.

The RMP has plans to draft the above rules which require adoption through 2000, by late 1999. The review team recommends that RMP management effect rulemaking activities to ensure that NRC rule changes are adopted within the specified 3 year time period.

It is noted that Management Directive 5.9, Handbook, Part V, (1)(C)(III) provides that the above regulations should be adopted by the State as expeditiously as possible, but not later than 3 years after the September 3, 1997 effective date of the Commission Policy Statement on Adequacy and Compatibility, i.e., September 3, 2000.

Based on the IMPEP evaluation criteria, the review team recommends that Nebraska's performance with respect to the indicator, Legislation and Program Elements Required for Compatibility, be found satisfactory.

4.2 Sealed Source and Device (SS&D) Evaluation Program

With regard to the Sealed Source and Device program, Nebraska reported that the State had not licensed any sealed sources or devices since the State became an Agreement State. The State does not have any SS&D manufacturers. Therefore, this non-common indicator was not reviewed. During the exit meeting with program managers, the team discussed the options available to the State should the State receive an application for a sealed source or device review under State jurisdiction. These options included: (1) develop an in-house capability for State reviews of SS&D's; (2) have the review performed by a third party having the qualifications and resources to perform reviews; (3) request the NRC to perform the SS&D review with appropriate

reimbursement in accordance with NRC policies; and (4) request the turnback of the SS&D program to the Commission with a formal letter from the Governor.

4.3 Low-Level Radioactive Waste Disposal Program

In the process of evaluating this non-common performance indicator, the review team evaluated the State's responses to the questionnaire; compared selected portions of the Nebraska LLRW statutes and regulations with those of the NRC; evaluated changes in the technical staff and contractors since the last review in July 1996; reviewed the State's written procedures and plans; examined parts of the LLRW disposal facility license application, interrogatories, safety evaluation report, and documentation that tracked and evaluated both public comments and responses of the applicant to interrogatories; and interviewed staff and managers assigned to the LLRW program.

The State of Nebraska received a License Application from U.S. Ecology on July 27, 1990, to operate a LLRW facility in the State. The State has been conducting a license application review since that time. In the last year, the State has issued several major review documents that describe in detail the results of its review and the conclusions to date. In October 1997, the State published a Draft Safety Evaluation Report (SER) and Draft Environmental Impact Analysis (EIA) for public comment. The State held public hearings to receive more comments in February 1998. In August 1998, the State published a SER and EIA for public comment, along with a document that analyzed their responses to public comments received earlier in the year. The State also issued a Proposed Licensing Decision announcing its intent to deny U.S. Ecology's license application based on seven specific issues. Five of these issues are generally related to groundwater and surface water at the site, one concerns U.S. Ecology's financial qualifications, and one concerns design basis accidents at the facility during the operational phase. The State environmental review process and documentation, such as the EIA, was not included in this IMPEP review.

The Intent to Deny the application is a preliminary decision, and the public and license applicant, U.S. Ecology, have the opportunity to provide more information before a final decision is made. There is a 90-day public comment period, and public hearings have been scheduled for early November. Nebraska also has in place a provision that allows for an aggrieved person to file a petition contesting the decision. A contested case hearing would be conducted in accordance with the NDEQ's rules of practice and procedure.

Regulation of LLRW disposal in the State is a shared responsibility between the HHS R&L and NDEQ. Each Agency has regulations applicable to the U.S. Ecology license application. Those of NDEQ are promulgated and codified in Title 194 of the Nebraska Administrative Code, and those of HHS R&L are found in Title 180 of the same code. Both have previously been found to be compatible with NRC's regulations. In the team's review of the Agreement State program for LLRW, both organizations were evaluated.

4.3.1 Status and Technical Quality of Low-Level Radioactive Waste Disposal Inspections

Because the program is in the license application review stage, inspections are not applicable. The State has a program of Quality Assurance (QA) audits and surveillances, both internal and

external, however, and these are discussed in Section 4.3.3, "Technical Quality of Licensing Actions."

4.3.2. Technical Staffing and Training

In the last IMPEP review in July 1996, there was one recommendation concerning the training documentation for staff and contractors. That recommendation was evaluated and closed in the follow-up review contained in NRC's February 5, 1998, letter to the State. As noted in the IMPEP report at that time, "Staff and contractors are all highly qualified for their responsibilities in the LLRW program. . ." The focus in this review was therefore changes in staffing. There have been several since the last review. A new LLRW program manager in HHS R&L was selected in June 1998 and spends 50% of his time in this role. The previous LLRW program manager still spends 10% of her time in LLRW, but most of her time is devoted to the position of acting RMP manager. Other staff in HHS R&L in LLRW have remained stable, with the exception of one HP II who retired in June 1997. He is now a consultant to the LLRW program. The LLRW Program in HHS R&L also has one vacancy, for a Health Physicist II, but program personnel stated that this position may not be filled, depending upon the outcome of the licensing process. If the State makes a final decision that the license application is to be denied, additional staff may not be necessary. In the NDEQ, staffing has remained stable since the last review.

The team examined the qualification and training records for LLRW program staff. The computer data bases and training records that the team examined in the last review continue to be updated as staff complete training and no problems were identified.

4.3.3 Technical Quality of Licensing Actions

The review team examined the preparation of the draft SER, published in October 1997, the resolution of public comments on the draft SER, and the preparation of the SER published in August 1998. Because of the Intent to Deny by the State, a final SER supporting a final decision will be published in the future.

During the July 1996 IMPEP review, the team reviewed the tracking and resolution of comments on the U.S. Ecology application. During this review, the team verified that open items that could not be resolved with U.S. Ecology were tracked and subsequently documented in the draft SER published in October 1997. The State has a number of different reports and internal documents that were used for tracking and resolving comments and ensuring that the findings in the draft SER were supported. They include the following:

- ! Technical Comment Tracking Document
- ! Worksheets for the Final Round Technical Review
- ! The Working Copy of the Final Round Technical Comments
- ! The Final Evaluation Findings

- ! Application Review Documentation (ARD) (All documents which will be retained in order to document the technical review process.)
- ! A formal "Response to Public Comments"

The team considers the licensing process to be generally thorough and systematic and documented in internal procedures. A list of these procedures is as follow:

- ! LP-8, Technical Review of the Safety Analysis Report
- ! LP-9, ARD
- ! LP-10, Agency Consultation and Public Comment Process
- ! LP-11, Assembly and Availability of the draft SER
- ! LP-24, Notice of License Denial

In this review, the team found no instances in which the State had not followed these procedures for the preparation of the draft SER of October 1997.

At the time of the review in September 1998 the documentation of the internal review process for the August 1998 SER was not in the ARD file. Some of the records were available during the review, however, and found to be satisfactory. Subsequent to the review, the State provided information that the records had been placed in the ARD file. Also, although a draft procedure was available for preparing the August 1998 SER, it had not been formally issued. For the final SER, however, a procedure was issued and used for its preparation.

The team reviewed portions of the State's SER addressing the types, kinds, and quantities of waste (Section 6.1.1 of the SER). This section evaluates U.S. Ecology's projections of waste for the facility over the 30 year operating life, and the limits proposed by the applicant for the facility. Two radionuclides that are important in the performance assessment of the site, because they can contribute significantly to the long-term dose, are technetium-99 and iodine-129. Both are long-lived and highly mobile. A complicating factor in analyzing the performance of a facility is that the information reported on shipping manifests by generators for these two isotopes typically overestimates their amounts significantly because lower-limits of detection are reported.

In its application, U.S. Ecology relied on an approach that estimates the amounts of these two radionuclides using reactor fuel performance data provided by utility waste generators. The information is processed using a computer program, "3R-STAT," that was reviewed and approved by NRC in its Topical Report program. The Nebraska LLRW Program staff and contractors were very familiar with this code and involved with its development and its use and provided detailed requests for information from the applicant. The State efforts in its review of this area have been thorough and the team did not identify any concerns.

As reported in the last IMPEP review, the State has a well organized QA program that covers both internal and external activities. In 1997, 4 surveillances and 3 audits were conducted of license

application organizations (i.e, external QA). For the internal program, 13 surveillances and 4 audits were conducted. The team reviewed one audit of the U.S. Ecology pre-operational monitoring program at the Boyd County site. The audit appeared to be thorough with a 72 item checklist that was completely filled out. No non-conformances were issued in the audit report.

The team also examined the documentation for an internal audit of HDR Engineering, conducted on April 25,1997. As above, the audit team had a complete checklist and appeared to perform a thorough review of the HDR Engineering's program. Two non-conformances were issued.

In 1998, many of the originally planned QA audits and surveillances have not been implemented because of the higher priority work of preparing the SER and EIA. In August 1998, the State "deauthorized" (i.e., canceled) 12 audits and surveillances that had originally been planned for the year. Given the intention of the State to deny the license application, it is not clear at this time what the future level of effort should be for the audit and surveillance program.

4.3.4 Response to Incidents and Allegations

The team evaluated the management of allegations in both HHS R&L and NDEQ. As discussed in the materials program evaluation, HHS R&L has a procedure for evaluating allegations. However, NDEQ does not have such a procedure. NDEQ staff provided a procedure entitled "Confidentiality of Documents" that describes how certain documents such as citizen complaints will be kept from public disclosure, but it covers only one aspect of allegations management. The team recommends that NDEQ prepare, or adopt by reference, a procedure for managing allegations.

Because there is no operating LLRW facility, there were no incidents to evaluate.

Based on the IMPEP evaluation criteria, the review team recommends that Nebraska's performance with respect to the indicator, Low-Level Waste Disposal Program be found satisfactory.

5.0 SUMMARY

As noted in Sections 3 and 4 above, the review team found Nebraska's performance for all of the common and non-common performance indicators to be satisfactory. Accordingly, the review team recommended and the MRB concurred in finding the Nebraska Agreement State Program to be adequate to protect public health and safety and compatible with NRC's program.

Below is a summary list of recommendations and suggestions, as mentioned in earlier sections of the report, for implementation and evaluation, as appropriate, by the State.

RECOMMENDATIONS:

1. Because of the importance of the development and implementation of critical procedures relative to the performance of the staff and the performance indicators, the team recommends that the State initiate appropriate actions needed to complete the development and implementation of the previously identified procedures that are critical to

- the performance of the program. The State should provide the revised schedule to NRC and copies of the procedures as they are completed. (Section 2.0)
2. The team recommends that staff who conduct independent inspections and/or license reviews of pool irradiators, teletherapy and brachytherapy complete the irradiator course and teletherapy and brachytherapy courses. (Section 3.3)
 3. The review team recommends that the State add the inventory license condition to all applicable licenses, within the next year.(Section 3.4)
 4. The review team recommends that the allegation records clearly state the basis for the findings and outcome of the investigation, and that the alleged be informed of the outcome of the investigation. (Section 3.5)
 5. The review team recommends that RMP management effect rulemaking activities to ensure that NRC rule changes are adopted within the specified 3 year time period. (Section 4.1.2)
 6. The team recommends that NDEQ prepare, or adopt by reference, a procedure for managing allegations. (Section 4.3.4)

SUGGESTIONS:

1. The review team suggests that training plans be developed for each staff member to ensure the completion of the State's qualifications program. (Section 3.3)
2. The review team suggests that the RMP establish guidance to assist the inspectors when making a decision whether to issue a recommendation versus an item of noncompliance (violation). (Section 3.2)

LIST OF APPENDICES AND ATTACHMENTS

Appendix A	IMPEP Review Team Members
Appendix B	Nebraska Organization Charts
Appendix C	Inspection Casework Reviews
Appendix D	License Casework Reviews
Appendix E	Incident Casework Reviews
Attachment 1	State's Response to Draft Report dated November 23, 1998.

APPENDIX A

IMPEP REVIEW TEAM MEMBERS

Name	Area of Responsibility
Richard L. Woodruff, Region II	Team Leader Status of Inspection Program Legislation and Program Elements Required for Compatibility
Linda McLean, Region IV	Technical Staffing and Training Response to Incidents and Allegations
Cynthia Sanders, Georgia	Technical Quality of Inspections
Anthony S. Kirkwood, NMSS/IMNS	Technical Quality of Licensing
James E. Kennedy, NMSS/DWM	Low-Level Waste Radioactive Waste Program

APPENDIX B

State of Nebraska

HEALTH AND HUMAN SERVICES
DEPARTMENT OF REGULATION AND LICENSURE
RADIOACTIVE MATERIALS AND LOW-LEVEL RADIOACTIVE WASTE

ORGANIZATION CHARTS

Radioactive Materials & LLRW Programs



Health and Human Services System

Department of Regulation and Licensure
Gina Dunning
Director

Public Health Assurance Division
Bob Leopold
Division Director

Consumer Health Services
Sue Samerena
Section Administrator

Radioactive Materials and LLRW Programs
Cheryl Rogers
Program Manager (Acting - Rad Mat)

Jim DeFrein
Health Physicist

Bryan Miller
Health Physicist

Brent Friesen
Health Physicist

Radioactive Materials

Jay Noble
Staff Support
RAD MAT

Catherine Walton
Staff Support
LLRW

Dev Spang
Staff Support
LLRW & ER

Mont Larsen
Staff Support
LLRW

Andy Agans
Staff Support
LLRW

Dawn Dordin
Staff Support
LLRW

Lori Sedivy
Staff Support
LLRW

Staff Support

Howard Sherman
Health Physicist

Trudy Hill
Rad Health Spec

John Fassel
Health Physicist

Deb Larsen
Lab Scientist

Low Level Radioactive Waste

NO. 343 P. 2/2

NDCH ENV HEALTH (402) 471 0163

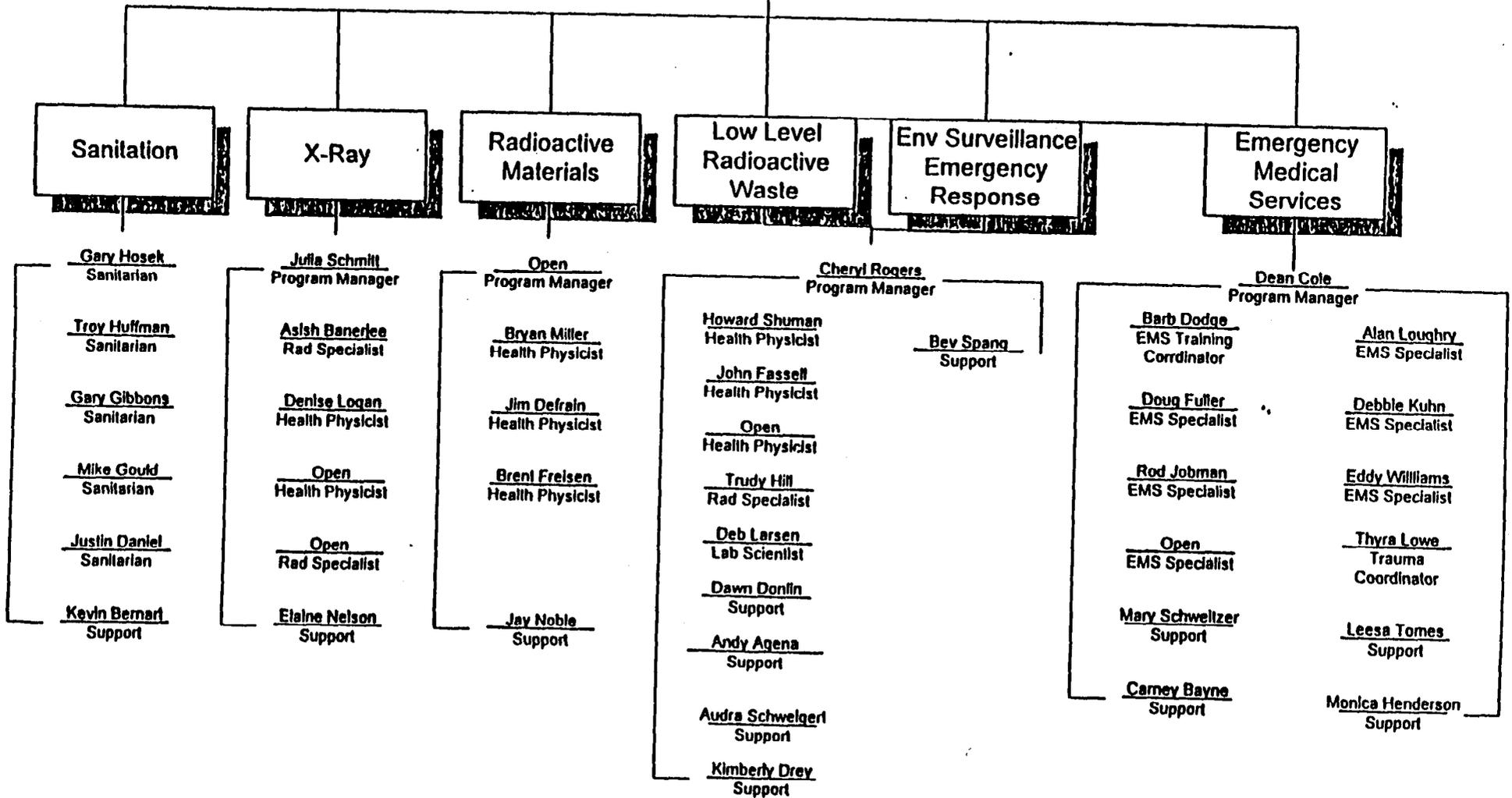
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Consumer Health Services

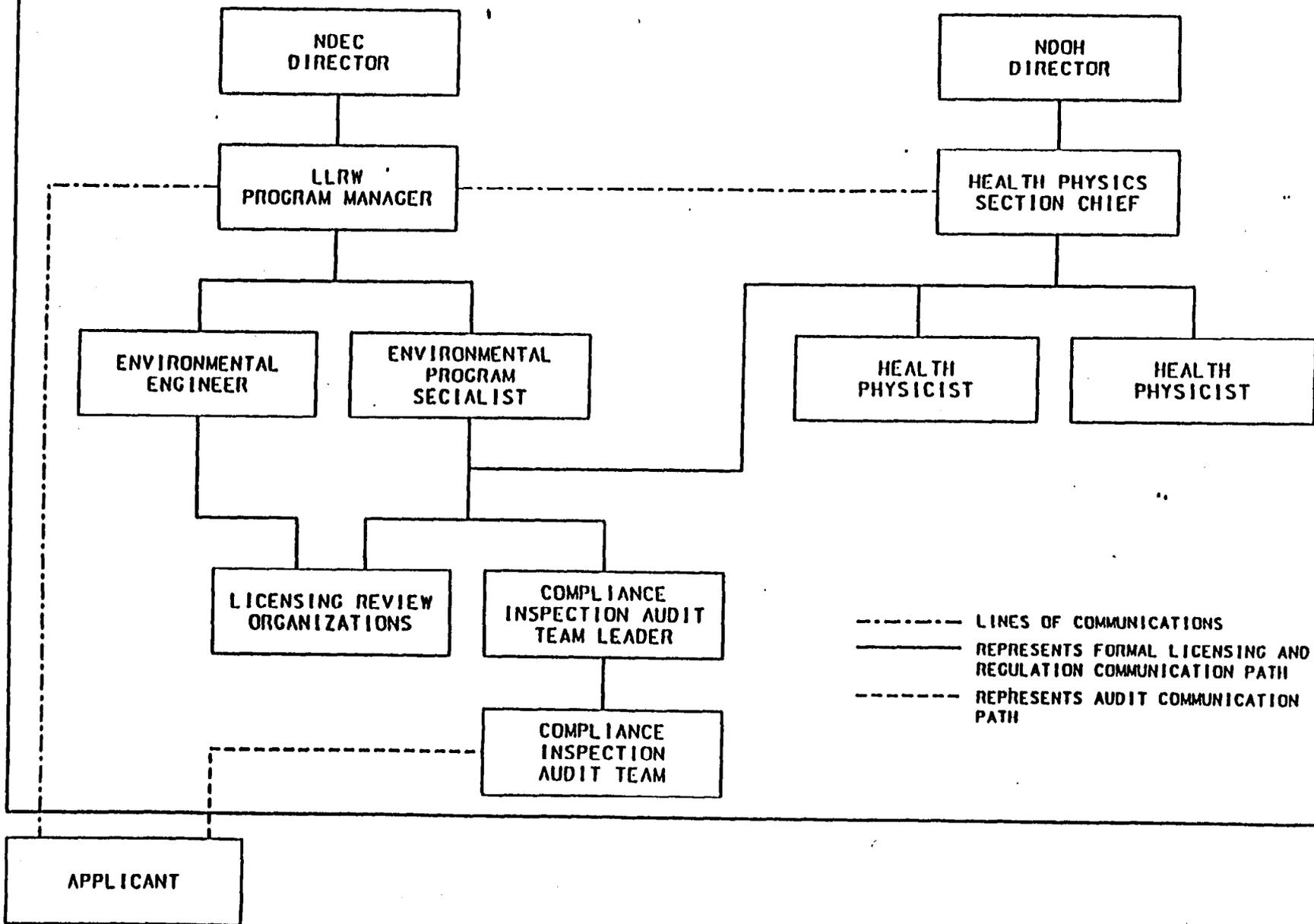
April 28, 1998

Sue Semerena
Team Coordinator

Susan Farnsworth
Administrative Assistant



State of Nebraska
 LLRW PROGRAM
 ORGANIZATION FOR REVIEW OF LICENSE
 APPLICATION & OVERSIGHT OF LICENSING PROCESS





November 23, 1998

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

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

Dear Mr. Bangart:

This letter is in regards to the draft report received in our office on October 29, 1998 which details the findings and recommendations of the IMPEP team from the review conducted September 21-25, 1998. The draft report was reviewed for factual correctness by the appropriate program managers, and any corrections, clarifications, or proposed revisions are attached.

We are currently addressing the recommendations identified in the report, and we will continue to keep you informed on our progress. Nebraska has shown its commitment to developing a strong radiation control program in our recent progress, and will continue to maintain a program that assures public health and safety will be protected.

If you have any other questions prior to issuing the final report, please feel free to contact Cheryl Rogers at 402-471-6430 or the LLRW Program at 402-471-3380 as appropriate.

Sincerely,

Charles Andrews, M.D.

for Gina Dunning, Director
Health and Human Services Regulation and Licensure

Enclosure

98 NOV 30 PM 2:48

OSP

Nebraska's 1998 IMPEP-Comments on Draft

1. Global comment; (see 1.0 Introduction, second paragraph)

The correct name of the Department is Health and Human Services Regulation and Licensure. It can be abbreviated as HHS R&L or HHS Regulation and Licensure.

2. 1.0 Introduction

Page 1, 2nd paragraph, 2nd sentence; Suggest the following rewording:
"Within HHS R&L, the Radioactive Materials and LLRW Programs are administered by Division of Public Health Assurance, Consumer Health Services Section."

3. 2.0 Status of Items Identified in Previous Review

Page 3, 3.0, Current Status, 3rd sentence; Suggest the following rewording:
"The State and Region IV have committed to continue quarterly communication"

Page 3, 4.0, Current Status, 2nd sentence; Suggest the following rewording:
"The accompaniments are being maintained in each individual's training file."

NOTE: They will be tracked in the computer file once the database has been updated.

4. 3.1 Status of Materials Inspection Program

Page 4, paragraph on Reciprocity, 6th sentence; Suggest the following rewording:

"...which allows the licensee to enter the State on an unlimited number of days during any year based on initial date of entry."

Page 5, paragraph on Reciprocity, 10th & 11th sentences; Suggest the following rewording:

"A comparison of the data-base with the license files and the reciprocity inspections performed during the review period identified some minor discrepancies between the database and the information provided during the review for reciprocity licenses REC0189 and REC0101. These discrepancies were satisfactorily resolved." (Delete the last sentence which is a suggestion).

NOTE: These licenses were licensees who converted to/from specific licenses.

Page 5, paragraph on Inspection Findings, 2nd to last sentence; Suggest the following rewording:

Use "From the casework reviewed" as the lead-in phrase.

Page 5, paragraph on Inspection Findings, last sentence; Suggest the following rewording:

“The last two inspections had experienced processing difficulties due to staff turnover.”

5. 3.2 Technical Quality of Inspections

Page 5, paragraph referencing 90 inspections, 3rd sentence; Suggest the following rewording:

“The RMP is in the process of developing written procedures for Enforcement and Escalated Enforcement, Scheduling Inspections, Inspection Preparation, Performance Based Inspections, and Documentation of Inspection Results.”

Page 6, paragraph on survey kits, 2nd sentence; Suggest the following rewording:

“Two survey kits are maintained for responding to incidents. The RMP has access to instrumentation in order to identify and quantify isotopes through a contract lab or the Butte Health Physics Assessment Facility.”

NOTE: We do not have a portable gamma spectroscopy instrument as part of the survey kit.

6. 3.3 Technical Staffing and Training

Page 7, paragraph beginning “at the time of the review”, 1st sentence; Suggest the following rewording:

“At the time of the review, Nebraska’s radioactive materials program was staffed by the RMP manager, the administrative manager, and three full time technical staff.”

NOTE: The current status of the full time administrative staff member is “Vacant”.

Page 7, paragraph beginning “the team considered”, 3rd sentence; Suggest the following rewording:

“Currently, there are three individuals handling duties from this position: a Radiological Health Specialist I from the LLRW Program, a Staff Assistant II from Emergency Response and LLRW Programs, and an Administrative Assistant I from Consumer Health Services Section. The Program Manager meets periodically with these individuals to review work activities and determine if additional assistance is needed.”

Page 8, paragraph beginning “the review team examined”, 2nd to last sentence; Suggest the following rewording:

“The responsibility to update the training database is assigned to the Administrative Assistant I.”

7. 3.4 Technical Quality of Licensing Actions

Page 9, paragraph beginning “Licenses are renewed”, last sentence;
Suggest the following rewording:

“All licenses are signed by the RMP Manager or the Section Administrator of Consumer Health Services.”

Page 9, paragraph beginning “The casework review”, Whole paragraph; Suggest the following rewording:

“The casework review also confirmed that, with one exception, the RMP is consistent with NRC guidance. The materials staff uses its computerized licensing system-ACCESS, the State licensing regulatory guides, (which have been patterned after the NRC guides), and NRC Consolidated Guidance NUREG Series 1556, as references for materials licensing actions. The RMP manager uses bi-weekly meetings and a reading file as tools in order to inform staff and manage the program. The State and NRC guidance are referred to in general terms in the licensing procedures, however, individual guidance is not referred to by title or number. The staff is directed to obtain and utilize the most recent guidance-including the consolidated guidance coming out as volumes of NUREG 1556. The latest guidance available is determined from: recent attendance at the NRC’s Licensing Course, review of the NRC web-site, and via transmittals of the latest NUREG 1556 guidance from being named on the mailing list. If Nebraska specific guidance is not available, then the NRC guidance is sent to the licensee and any additional specific information needed is identified to the licensee during the review process. Technical quality of the licensing program can be enhanced through the completion of the State’s procedures as noted in the recommendation in Section 2.0. The one exception notes that is inconsistent with NRC guidance involved two licenses, one for a fixed gauge and one for a portable gauge, which did not have a license condition for periodic inventory of sealed sources as utilized as standard practice by NRC and other Agreement States. The review team understands that this condition is being automatically added to applicable licenses by ACCESS as requests for unrelated actions occur. However, the review team recommends that the State add the inventory condition to all applicable licenses as soon as possible.”

NOTE: Page 9, paragraph beginning “The casework review”, last sentence; We strongly disagree with the urgency implied by the use of “expeditiously” and “without waiting for a licensee request for amendment or renewal”. These phrases should be deleted from the recommendation. We note that this urgency was not expressed in the formal exit meeting. As discussed with your staff, the rationale for not utilizing these conditions was that a 6 month leak test condition is also an occasion to perform an inventory, so in fact, the inventory condition is redundant. We have inventoried the licenses in question and have identified about 27 that are lacking this requirement. It is estimated that it would take about 40-50

hours of staff time to update these licenses, but we would prefer to handle this within the course of processing amendment requests or renewals, at least until the backlog of other licensing actions can be further reduced.

8. 4.1.2 Program Elements Required for Compatibility

Page 12, 5th bullet under “The State has not adopted the following regulations”;

The State has adopted “Criteria for the Release of Individuals Administered Radioactive Material”, effective September 17, 1997. Note that two definitions associated with this rule, occupational dose and public dose, are located in Section 001.

9. 4.3 Low Level Radioactive Waste Program

Page 13, last paragraph is repeated at top of page 14.

10. 4.3.3 Technical Quality of Licensing Actions

Page 15, Bullet 5 under “different reports and internal documents”; Suggest the following rewording:

Application Review Documentation (ARD) (All documents which will be retained in order to document the technical review process.)

11. 5.0 Summary, Recommendation Number 4

See Number 7, final issue for suggested rewording of this recommendation.

12. Appendix C

File No.: 4 Correct name of this licensee is Becton-Dickinson Vacutainer Systems. Inspector is JGF.

File No.:9 Correct license number is 01-85-01.

13. Appendix D

File No.: 4 Suggest deleting comment b) as use of a sodium iodide instrument is the standard approach for performing accurate, quantitative bioassay measurements when using I-131 and this was confirmed in comment a).

PITL
RLB
PML

RKS
R. W. ...
X. ...

August 14, 1998

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:

Inspections are current and on schedule. License No. 37-03-01 scheduled for 2nd quarter is scheduled this month. This facility will be inspected during the NRC accompaniment surveys. License No. 02-20-02 has been removed from the Gantt chart. This facility is not due until 2001. It was originally on the schedule due to questions concerning the license which have been satisfactorily answered.

Technical Staffing and Training:

Staffing is stable at this time. Additionally, staff from the Low Level Radioactive Waste Program continue to assist the Radioactive Materials Program. All training classes scheduled have been completed or will be. Staff has been enrolled.

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 84. The actions are then broken into three categories. Task IDs 85-87 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.

Response to Incidents and Allegations:

Four reports have been sent to your office this month.

Rec'd - 8/17/98 by JAF.

SP-AG-16

53 AUG 21 11 08 AM '98

U.S. Nuclear Regulatory Commission
Page 2

Legislation and Regulations:

Proposed regulations, Task ID 141, are in the final stages of review prior to being sent to the Attorney General's Office.

Materials Program Procedures:

The contract individual is on schedule. All interviews with staff have taken place. Two draft procedures have been received for our review.

If you have any other questions, please feel free to contact me, Bob Leopold, or Cheryl Rogers at (402) 471-0928.

Sincerely,



M. Sue Semerena
Administrator
Consumer Health Services
Public Health Assurance Division
Regulation and Licensure
(402) 471-0928

MSS/sf

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

ID	Task Name	1996				1997				1998				1999	
		Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1		
1	Status of Materials Inspection Program														
2	Overdue Inspections														
3	01-22-01, Maxim Technologies, Inc.					9/9	Jim DeFraim								
4	02-01-09, University of Nebraska							3/20	Bryan Miller						
5	Past Due Inspections														
6	03-02-01, Beatrice Community Hospital and Health C					9/25	Jim DeFraim								
7	01-07-02, Nebraska Methodist Hospital					10/17	Jim DeFraim, Bryan Miller								
8	01-04-01, Immanuel Medical Center					12/30	Howard Shuman, John Fassell								
9	02-06-03, Lincoln General Hospital					1/2	Cheryl Rogers, John Fassell								
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16	09-04-01, University of Nebraska at Kearney					4/30	Jim DeFraim, Brent Friesen								
17	14-04-01, Haslings Utilities					5/26	Bryan Miller								
18	14-04-02, Haslings Utilities					5/27	Bryan Miller								
19	14-06-01, City of Haslings					5/28	Bryan Miller								
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ID	Task Name	1996				1997				1998				1999			
		Qtr 2	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	29-01-01, Cargill Incorporated																
25	59-01-01, Midlands Community Hospital					9/18 Bryan Miller											
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47	08-11-01, Filter Specialists, Inc.																		
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54	01-59-01, Great Plains Nuclear Services, Inc.																		
55	02-10-02, Harris Laboratories																		
56	01-22-01 Maximum Technologies, inc.																		
57	Reciprocity Inspections Available																		
58																			
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63																			
64	Technical Staffing and Training																		
65	Staffing Vacant Materials Health Physicist I																		
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9/3 | Jim Wiley
 10/3 | Brent Friesen
 11/17 | Brent Friesen
 11/25 | Brent Friesen, Bob Leopold

**HHS REGULATION AND LICENSURE DEPARTMENT
PUBLIC HEALTH ASSESSMENT DIVISION
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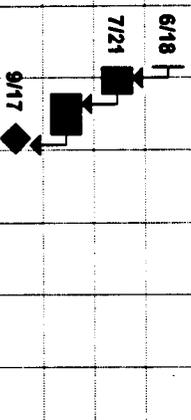
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72	Introductory Health Physics																
73	Inspection Procedures																
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85	Inspecting for Performance - Materials																
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87	Total Number of Pending Licensing Actions (76)																
88	Actions Received Prior to 7/96 (4)																
89	Actions Received After 7/96 that are Overdue (27)																
90	Actions Not Overdue (7)																
91	Response to Incidents and Allegations																
92	Radioactive Materials Allegations																

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93	Allegation Identifier NE-97-001 Special Inspection																
94	Radioactive Materials Events																
95	NE970001008 24 hr Report Received					◆ 9/4											
96	NE970001008 24 hr Report Evaluated					9/4 Jim DeFraln, Brent Friesen											
97	NE970001008 Reported to NRC					9/5 Jim DeFraln, Brent Friesen											
98	30 day Written Report Received					◆ 10/6											
99	NE970001008 Follow-up Report to NRC					12/1 Brent Friesen											
100	NE970001009 Report Received					◆ 10/8											
101	NE970001009 Report Evaluated					10/8 Brent Friesen											
102	NE970001009 Investigation Performed					10/8 Brent Friesen, Bryan Miller											
103	NE970001009 Reported to NRC					12/1 Brent Friesen											
104	Nuclear Materials Events Database Reporting																
105	Monthly NMEED Report																
127	Legislation and Regulations																
128	Regulation Changes to 001, 003, 004, 007, 009, 012, an																
129	Pre-Rule																
130	Proposed Changes Drafted																
131	Approved by RAC																
132	Proposed Changes Reviewed by PRO																
133	Proposed Rule																
134	Notice of Rulemaking Hearing																
135	Public Hearing																
136	Post-hearing Analysis and Revisions																

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137	Final Rule																		
138	Agency Review and Approval																		
139	Attorney General Review and Approval																		
140	Governor's Review and Approval																		
141	Proposed Changes Adopted																		
142	Regulation Changes to 004, 010, and 012																		
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154	Governor's Review and Approval																		
155	Proposed Changes Adopted																		
156	Regulatory Guidance																		
157	Regulatory Guide 19.0																		
158	Proposed Guidance Drafted																		
159	Approved by Program Manager																		



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160	Regulatory Guide 7.0																
161	Proposed Guidance Drafted																
162	Revised by Working Group																
163	Approved by Program Manager																
164	Regulatory Guide 7.1																
165	Proposed Guidance Drafted																
166	Approved by Program Manager																
167	Regulatory Guide 3.4																
168	Proposed Guidance Drafted																
169	Approved by Program Manager																
170	Materials Program Procedures																
171	General Licensing																
172	RMP No. 1.01, Certain Measuring, Gauging, and Con																
173	RMP No. 1.02, Depleted Uranium																
174	RMP No. 1.03, In Vitro Testing																
175	RMP No. 1.04, Reciprocal Recognition of an Out-of-S																
176	RMP No. 1.05, Billing																
177	RMP No. 1.06, License File Inactivation																
178	Specific Licensing																
179	RMP No. 2.01, Request for Application																
180	RMP No. 2.02, Review of an Application or Amendme																
181	RMP No. 2.03, Renewal of Licenses																
182	RMP No. 2.04, Billing																

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183	RMP No. 2.05, License Termination																
184	RMP No. 2.06, Prioritization of Licensing Actions																
185	Inspections																
186	RMP No. 3.01, Scheduling of Inspections																
187	RMP No. 3.02, Inspection Preparation																
188	RMP No. 3.03, Performance Based Inspection																
189	RMP No. 3.04, Documentation of Inspection Results																
190	RMP No. 3.05, Enforcement																
191	Allegations and Incidents																
192	RMP No. 4.01, Management of Allegations																
193	RMP No. 4.02, Radioactive Material Events																
194	Legislation, Regulation and Guidance Development																
195	RMP No. 5.01, Tracking and Scheduling																
196	RMP No. 5.02, Revision and Implementation																
197	Qualifications and Training																
198	RMP No. 6.01, Qualifications Manual																
199	RMP No. 6.02, Training Resources Availability and Ed																
200	Program Management																
201	RMP No. 7.01, Budgeting																
202	RMP No. 7.02, Fee Calculation																
203	RMP No. 7.03, Routine Program Oversight																
204	RMP No. 7.04, Upper Management Oversight																

8/22 Brent Friesen, Sue Semerena, Bob Leopold, Jim Wiley

7/31 Brent Friesen

Brent Friesen

Brent Friesen

9/3 Brent Friesen

9/3 Brent Friesen, Sue Semerena, Bob Leopold, Jim Wiley

Brent Friesen, R.A.I.D.

Brent Friesen, Sue Semerena

9/26 Brent Friesen

Brent Friesen

Brent Friesen

Brent Friesen, Program Staff

Brent Friesen

Brent Friesen

Brent Friesen

Brent Friesen

Brent Friesen

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

RADIOACTIVE MATERIALS PROGRAM CORRECTIVE ACTION PLAN

Approved by Division Administrator: *M. Sue Demaree*

Revised: 8/17/98

Task

██████████

Progress

██████████

Milestone



Summary

██████████

Rollled Up Task

Rollled Up Milestone



Rollled Up Progress

██████████

D&D(SPOS)

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DEPARTMENT OF SERVICES • DEPARTMENT OF REGULATION AND LICENSURE
DEPARTMENT OF FINANCE AND SUPPORT

STATE OF NEBRASKA
E. BENJAMIN NELSON, GOVERNOR

April 3, 1998

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 provides 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.

Division Update:

Effective April 1, 1998, the name of our division was changed from Public Health Assessment Division to Public Health Assurance Division.

Upper Management Update:

Robert Leopold has been permanently assigned as the Public Health Assurance Division Administrator position.

Status of Materials Inspection Program:

9 inspections were performed since the last update report. 1 overdue and 8 routine. Several past due inspections had to be canceled due to weather. These are being rescheduled.

In the last update, we told you we would be reviewing all facility files to confirm proper inspection dates. This review has been completed. No further "missed" inspections were discovered.

COPIES - 6
PHL: SL
RLE

8-2-98

Richard L. Bangart, Director
April 3, 1998
Page 2

Technical Staffing and Training:

Staff are being enrolled in the various NRC training programs described in our corrective action plan.

Since Brian Hearty left on February 13, 1998, the management of the Radioactive Materials Program has been split between Cheryl Rogers, for technical issues, and Sue Semerena, for administrative issues. In addition, LLRW staff are assisting where needed.

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 84. The actions are then broken into three categories. Task IDs 85-87 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.

Response to Incidents and Allegations:

The allegation investigation, Task ID 90, has been rescheduled as a separate inspection. Originally, it had been linked with Task ID 4 and Task ID 34. However, these license types do not really match the allegation. The allegation is against the Broad scope license which is not due for inspection until April of 1999.

Legislation and Regulations:

Proposed regulations, Task ID 141, have been drafted. Enclosed is a copy for your review. The Radiation Advisory Council approved on March 6, 1998. The public hearing for the regulations will be held on April 16, 1998. There is an area of these regulations, on which I would like some advice. In Part 71, do 71.22 and 71.24 apply to Agreement states? These sections did not appear in the CRCPD Suggested State Regulations. I have not included them in this revision of the regulations.

Task ID 141 has been amended to remove HHS Section 005 from this revision. These regulations are the updated regulations for industrial. Since our Section 005 also includes

Richard L. Bangart, Director
April 3, 1998
Page 3

industrial X-ray, drafting of these regulations was too time consuming to include in this revision. We continue to work on Section 005.

Regulatory Guide 7.0, Task ID beginning at 157 is in final draft.

Materials Program Procedures:

Since Brian Hearty left, we are reevaluating the methods used to develop and implement procedures. We are evaluating the CRCPD's procedures as well as considering the use of an outside contractor to assist us.

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

Sincerely,



Robert Leopold, Administrator
Public Health Assessment Division

RL/MSS

Enclosure

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

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1	Status of Materials Inspection Program																	
2	Overdue Inspections																	
3	01-22-01, Maxim Technologies, Inc.								9/9	Jim DeFrain								
4	02-01-09, University of Nebraska									3/20 Bryan Miller								
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56	Reciprocity Inspections Available																
57	REC0156, EA Engineering, Science & Technology, In																
58	REC0116, TN Technologies, Inc.																
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◆ 9/4

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98	NE970001009 Report Evaluated						10/8											
99	NE970001009 Investigation Performed						10/8	Bryan Miller										
100	NE970001009 Reported to NRC						12/1											
101	Nuclear Materials Events Database Reporting																	
102	Monthly NMED Report																	
124	Legislation and Regulations																	
125	Regulation Changes to 001, 003, 004, 007, 009, 012, an																	
126	Pre-Rule																	
127	Proposed Changes Drafted					3/6		Program Staff										
128	Approved by RAC					3/7												
129	Proposed Changes Reviewed by PRO					3/21												
130	Proposed Rule																	
131	Notice of Rulemaking Hearing						3/28	Joyce Davidson										
132	Public Hearing						5/1											
133	Post-hearing Analysis and Revisions						5/8	Program Staff										
134	Final Rule																	
135	Agency Review and Approval																	
136	Attorney General Review and Approval						6/18											
							7/21											

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

ID	Task Name	1996			1997				1998				1999			
		Qtr 2	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	Governor's Review and Approval															
138	Proposed Changes Adopted															
139	Regulation Changes to 004, 005, 010, and 012															
140	Pre-Rule															
141	Proposed Changes Drafted															
142	Approved by RAC															
143	Proposed Changes Reviewed by PRO															
144	Proposed Rule															
145	Notice of Rulemaking Hearing															
146	Public Hearing															
147	Post-hearing Analysis and Revisions															
148	Final Rule															
149	Agency Review and Approval															
150	Attorney General Review and Approval															
151	Governor's Review and Approval															
152	Proposed Changes Adopted															
153	Regulatory Guidance															
154	Regulatory Guide 19.0															
155	Proposed Guidance Drafted															
156	Approved by Program Manager															
157	Regulatory Guide 7.0															
158	Proposed Guidance Drafted															
159	Revised by Working Group															

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

ID	Task Name	1996			1997				1998				1999			
		Qtr 2	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															
161	Regulatory Guide 7.1															
162	Proposed Guidance Drafted					9/26										
163	Approved by Program Manager						9/29									
164	Regulatory Guide 3.4															
165	Proposed Guidance Drafted															
166	Approved by Program Manager															
167	Materials Program Procedures															
168	General Licensing															
169	RMP No. 1.01, Certain Measuring, Gauging, and Con															
170	RMP No. 1.02, Depleted Uranium															
171	RMP No. 1.03, In Vitro Testing															
172	RMP No. 1.04, Reciprocal Recognition of an Out-of-S															
173	RMP No. 1.05, Billing															
174	RMP No. 1.06, License File Inactivation															
175	Specific Licensing															
176	RMP No. 2.01, Request for Application															
177	RMP No. 2.02, Review of an Application or Amendme															
178	RMP No. 2.03, Renewal of Licenses															
179	RMP No. 2.04, Billing															
180	RMP No. 2.05, License Termination															
181	RMP No. 2.06, Prioritization of Licensing Actions															
182	Inspections															

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

ID	Task Name	1996			1997				1998				1999					
		Qtr 2	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	Qtr 1	
183	RMP No. 3.01, Scheduling of Inspections																	
184	RMP No. 3.02, Inspection Preparation																	
185	RMP No. 3.03, Performance Based Inspection																	
186	RMP No. 3.04, Documentation of Inspection Results																	
187	RMP No. 3.05, Enforcement																	
188	Allegations and Incidents																	
189	RMP No. 4.01, Management of Allegations																	
190	RMP No. 4.02, Radioactive Material Events																	
191	Legislation, Regulation and Guidance Development																	
192	RMP No. 5.01, Tracking and Scheduling																	
193	RMP No. 5.02, Revision and Implementation																	
194	Qualifications and Training																	
195	RMP No. 6.01, Qualifications Manual																	
196	RMP No. 6.02, Training Resources Availability and Ed																	
197	Program Management																	
198	RMP No. 7.01, Budgeting																	
199	RMP No. 7.02, Fee Calculation																	
200	RMP No. 7.03, Routine Program Oversight																	
201	RMP No. 7.04, Upper Management Oversight																	

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

RADIOACTIVE MATERIALS PROGRAM CORRECTIVE ACTION PLAN
Approved by Division Administrator:
Revised: 4/1/98

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

WHL/DTR

Ms. Gina Dunning, Director
HHS Regulation and Licensure
Nebraska Health and Human Services System
301 Centennial Mall South
P.O. Box 95007
Lincoln, NE 68509-5007

FEB 05 1998

Dear Ms. Dunning:

Thank you for your letter dated January 10, 1998, responding to our request for an evaluation and response to Recommendations 2 through 5 of the final report on the July 1997 follow-up IMPEP review of the Nebraska Radiation Control Program. We appreciate the positive actions you are taking to keep NRC informed of the status of corrective actions through monthly telephone conferences and bi-monthly written status reports. We look forward to receiving copies of your procedures as they are completed. We note that you plan to create an evaluation form to document annual supervisory reviews of inspectors in response to Recommendation 4, and plan to complete allegation management procedures by the second quarter of 1998, in response to Recommendation 5.

We look forward to a continuing timely exchange of information on the status of your program and to our agencies continuing to work cooperatively in the future.

Sincerely,

Original Signed By
RICHARD L. BANGART
Richard L. Bangart, Director
Office of State Programs

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

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**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

WASHINGTON, D.C. 20555-0001

February 5, 1998

Ms. Gina Dunning, Director
HHS Regulation and Licensure
Nebraska Health and Human Services System
301 Centennial Mall South
P.O. Box 95007
Lincoln, NE 68509-5007

Dear Ms. Dunning:

Thank you for your letter dated January 10, 1998, responding to our request for an evaluation and response to Recommendations 2 through 5 of the final report on the July 1997 follow-up IMPEP review of the Nebraska Radiation Control Program. We appreciate the positive actions you are taking to keep NRC informed of the status of corrective actions through monthly telephone conferences and bi-monthly written status reports. We look forward to receiving copies of your procedures as they are completed. We note that you plan to create an evaluation form to document annual supervisory reviews of inspectors in response to Recommendation 4, and plan to complete allegation management procedures by the second quarter of 1998, in response to Recommendation 5.

We look forward to a continuing timely exchange of information on the status of your program and to our agencies continuing to work cooperatively in the future.

Sincerely,

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

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



January 10, 1998

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:

This is in regards to the final report on the follow-up IMPEP review of the Nebraska Radiation Control Program dated December 10, 1997 signed by Hugh L. Thompson, Jr. As requested in the cover letter, we have reviewed and evaluated the recommendations and suggestion contained in Section 5 of the report. Our response to recommendations 2 through 5 is as follows:

2. Copies of procedures will be sent to your office for review as they are completed. RMP No. 4.02 was previously submitted to your office and is included in the final report. A schedule for procedure development is included in our status reports.
3. Monthly telephone conferences have been held since the follow-up review and will continue through completion the corrective action plan. Written status reports have been provided every two months since the follow-up review and will continue through completion the corrective action plan.
4. We will create an evaluation form to document the annual supervisory review of each inspector prior to performing our first accompaniment this year. The training database contains a field for "last inspection accompaniment" which allows us to track when accompaniments need to be performed.
5. A procedure to manage allegations is scheduled to be completed in the second quarter of 1998. Staff training on the new procedure will be provided in conjunction with its issuance.

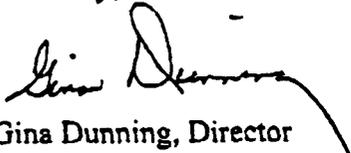
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Richard L. Bangart, Director
January 10, 1998
Page 2

If you have any questions, please contact me, Bob Leopold, Sue Semerena or Brian Hearty at
(402) 471-2168.

Sincerely,

A handwritten signature in black ink, appearing to read "Gina Dunning". The signature is fluid and cursive, with a long, sweeping underline that extends to the right.

Gina Dunning, Director
HHS Regulation and Licensure

RL/SS/BH

Enclosure

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