

# Marijuana

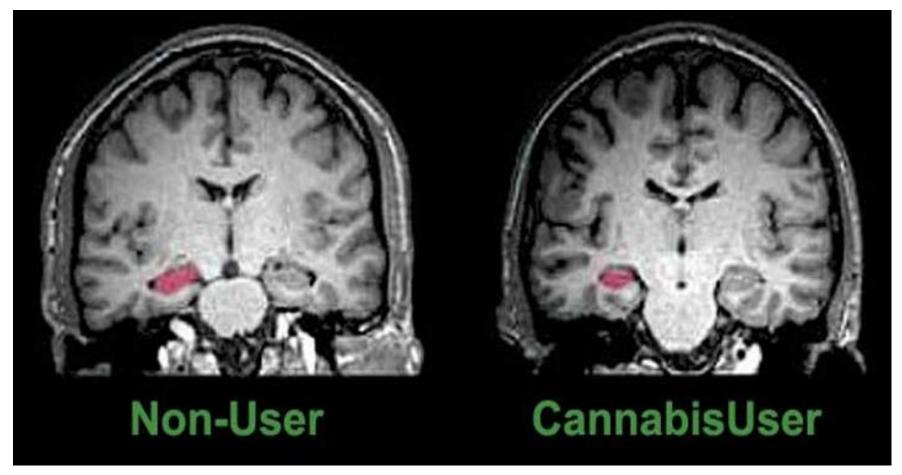
# The Impact on Fitness for Duty and other Regulatory Programs

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#### Marijuana – The Supporters and Promoters 🧐



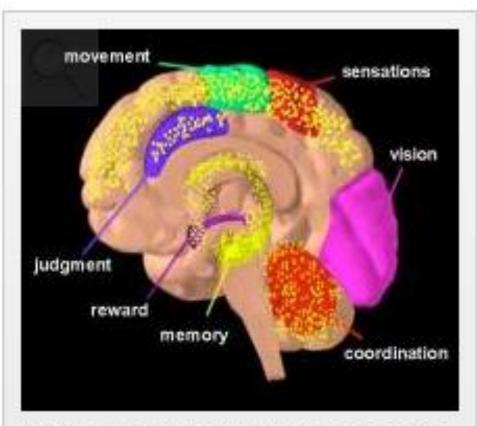


www.trueactivist.com

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#### Marijuana – The Adverse Effects





THC acts on numerous areas (in yellow) in the brain.

www.drugabuse.gov

https/www.sciencedirect.com/science/article/pii/S0376871615003142

https://www.youtube.com/watch?v=VrLSr\_O7e0Y &feature=player embedded

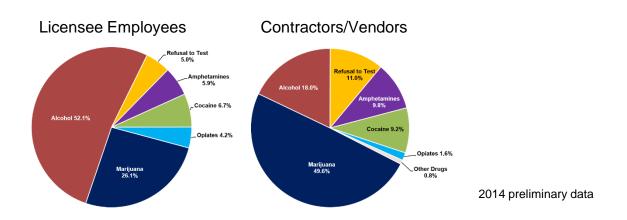


#### Marijuana Use in the Industry



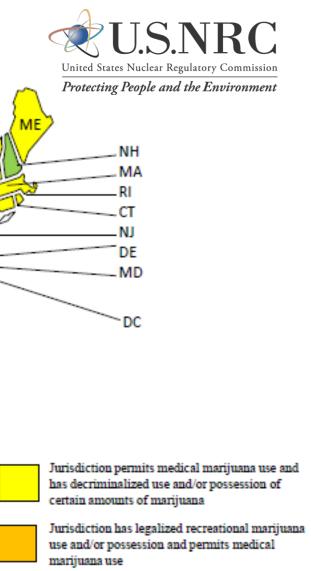
Marijuana has a proportionately strong presence in the commercial nuclear industry.

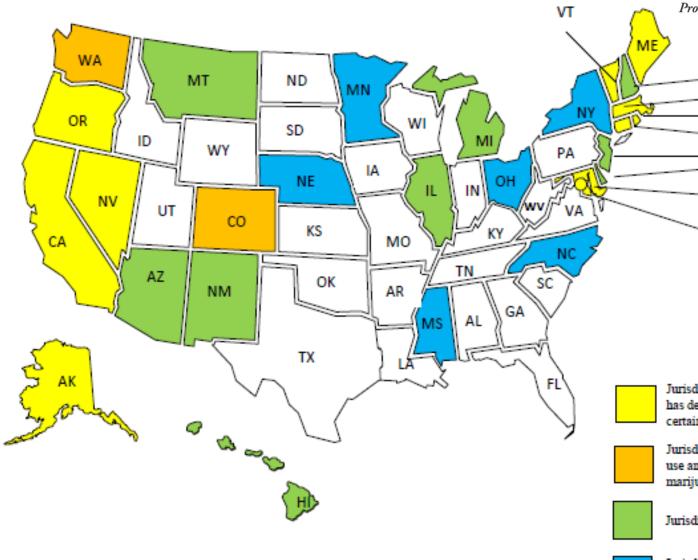
- a) 1st most used illicit substance of choice for contractor/vendors, followed by alcohol
- b) 2nd most used illicit substance by licensee employees, being led by alcohol
- c) Marijuana use results in 24-hour reportable events
- d) The NRC staff still believes that with improved licensee communications and training, marijuana use (and alcohol abuse) within the industry can be reduced



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### Marijuana in the United States\*





Jurisdiction permits medical marijuana use

\* As of August 2014



Jurisdiction has decriminalized use and/or possession of certain amounts of marijuana

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## Marijuana and NRC-regulated Facilities\*



	P-Rx Sites	Complex D Sites	<u>ISFSI</u>	<u>RTR</u>	Cat 1, 2, 3	<u> Uranium Recovery</u>	Agreement (NRC/State)
Alaska							No - 64/0
Arizona	1		1				Yes – 12/366
California	1	2	4	3			Yes - 57/1852
Colorado		1	1			State Authority	Yes - 20/366
Connecticut	1	1	2				No – 180/0
Delaware							No – 52/0
Hawaii		2					No – 60/0
Illinois	6	3	6		1	State Authority	Yes - 32/711
Maine		0	1				Yes – 2/125
Maryland	1	1	1	3			Yes – 84/598
Massachusetts*	* 1	1	1	2			Yes – 25/500
Michigan	3	1	3	1			No – 501/0
Montana							No – 89/0
Nevada							Yes - 3/237
New Jersey	3	1	3				Yes - 39/638
New Mexico				1	2	4 – NRC-licensed	Yes - 14/198
New York*	4	1	4	1			Yes - 22/1403
Oregon			1	2			Yes - 5/35
Rhode Island				1			Yes – 1/49
Vermont		1	1	2			No – 34/0
Washington	1	0	1	1	1	State Authority	Yes – 15/405
Washington, DC	<u>-</u>						NA

<sup>\*</sup> As of August 2014

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#### Radioactive Waste Transportation





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#### **Key Messages**



- 1) Overall positive rates are low; however, marijuana represents a disproportionate number of positives within the scope of 10 CFR Part 26 drug testing.
- 2) Marijuana use is indicative of an individual who is unlikely to be trustworthy and reliable.
- If DOJ/DEA reschedules marijuana or if recreational use becomes wide spread, rulemaking and guidance will be necessary
- 4) There are very few scientifically-established, peer-reviewed, clinical trials that have correlated marijuana use to impairment. See NIDA Science Spotlight, June 23, 2015.
- Regardless of scheduling, the current staff position is that marijuana use will continue to be prohibited

#### Potential Rule Impacts



Access Authorization Part 73.56 (background and criminal investigations)

Behavioral Observation Part 26.33, 73.55(i)(5), and 73.56(f)

Certified Fuel Handlers Parts 50 and 72

Construction Part 26, Subpart K

Clearances Parts 10, 11, and 25

Emergency Preparedness Part 26.4, TSC and EOF

Fitness for Duty Part 26 drug testing, sanctions, fitness determinations, etc.

Insider Mitigation Part 73.55(b)(9)

Licensed Operators Part 55.53(i), (j), & (k) medical quals/exams and drug use

MC & A Part 74

Physical Protection & Security Part 73, prohibited from OCA/PA (like alcohol?)

Research & Test Reactors Part 55.53(i) & (k), biennial medical & voluntary drug program

Security Officers Part 73, App B, medical qualifications and exams

Transportation Parts 26 and 73, and DOT & DOE

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### The Staff Marijuana Strategy



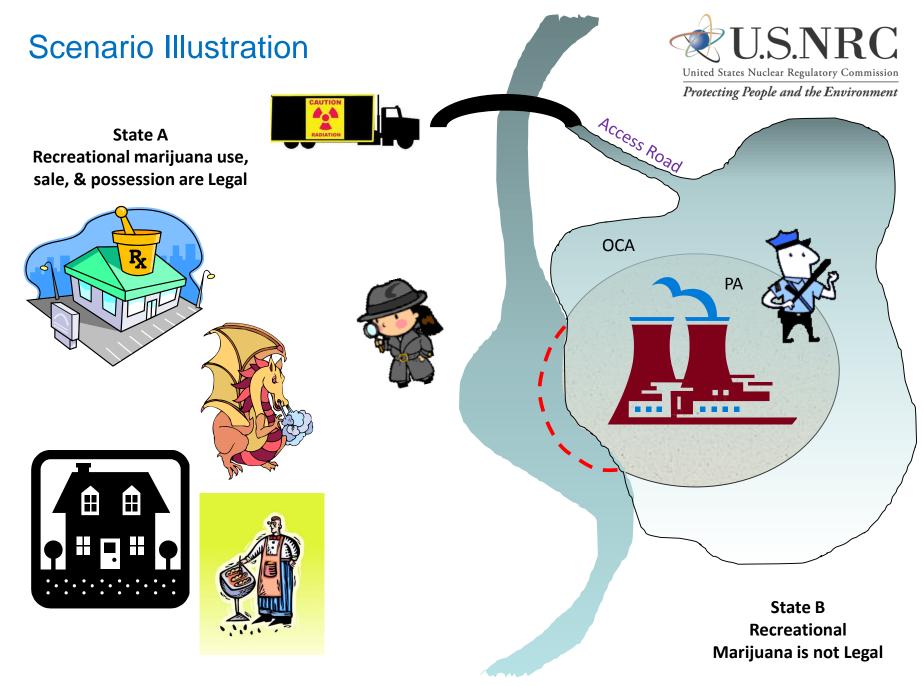
#### **Initial Positions**

- Rulemaking will be necessary
- Pending studies to the contrary, marijuana will be considered as a medicallydisqualifying drug (MDD)

#### **Execution Steps**

- 1. Develop a Regulatory Basis that marijuana is a MDD
- 2. If marijuana is MDD, what about all the other impairing substances?
- 3. If defining MDDs, what about "permissive/exempt prescription drugs (PPD)"?
- 4. Implement a pro-active regulatory framework, by requiring:
  - a) Announce all prescription medications, with exceptions
  - b) MRO or nurse review of prescriptions based on job function? Or access?
  - c) Enable MRO access to State Prescription Databases
- 5. Identify all sections in Part 26 and other Parts that will be affected
- 6. Fully vet HIPAA, ADA, and other privacy considerations
- 7. Inform the industry and public early and often public meetings

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