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Tuesday, August 07, 2018

NRC Region III Office
ATTN: Christine A. Lipa
2443 Warrensville Road, Suite 210
Lisle, IL 60532-4352

RE: Response to the Apparent Violation in NRC Inspection Report No. 03035988/2018001(DNMS); EA-18-069

Mrs. Lipa,

In regard to the above referenced apparent violation that was identified during our April inspection we offer the following response.

As noted, a portable gauge was left unattended and unsecured by an operator at a non storage site. When interviewed the operator stated that they were unaware that the gauge could not be left unsecured provided they were in a reasonable proximity to the device. This particular operator was approximately one hundred feet from the gauge, but had no clear view of the gauge or the access points of where it was located. Upon further review of this matter with all of our authorized users, it has become apparent that there was not a correct understanding of what constitutes proper security and safety measures for an unattended device.

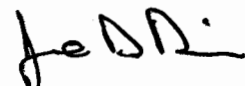
To address this program deficiency, we have implemented an annual radiation safety and gauge security training program. This program will specifically address this incident and the correct protocols for gauge security and safety. This training class will be conducted annually as part of our corporate safety program.

Additionally, to improve management oversight of our radiation safety program; we have implemented a program audit process that will be carried out by our RSO at multiple locations each quarter. The findings of these internal audits will be reviewed by the RSO and myself. From these reviews we will identify areas we are deficient in meeting program requirements, and corrective actions necessary to insure compliance with all of our license conditions.

We believe that implementation of this process coupled with our focused annual training will allow us to prevent issues similar to this apparent violation in the future.

If we can provide additional information regarding this matter or if further investigation is needed, please contact me at the number provided above.

Sincerely,



Joe D. Davis
Technical Services Manager

Friday, August 3rd, 2018

U.S Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington DC 20555-0001

RE: Reply to a Notice of Violation, License No. 24-32390-01

To whom it may concern,

In regard to the above referenced notice of violation we are currently offering the following responses to the five noted violations;

- A. This violation occurred because, the technicians were not aware that while a gauge is not under direct surveillance of an authorized user, the gauge must be locked with 2 physical barriers to prevent unauthorized or accidental removal of the sealed source from its shielded position. To correct the violation, we have retrained all authorized users. Additionally, we have implemented an internal auditing program to be carried out quarterly to further ensure compliance. Full corrective actions were implemented on April 20th, 2018.
- B. This violation occurred because, the licensee gauge operators were not fully aware of the requirement, and the licensee was not accurately tracking which users had current dosimetry badges. To correct the violation, we have implemented an annual refresher training class and are addressing it in our quarterly internal auditing. Full corrective actions were implemented on April 27th, 2018.
- C. This violation occurred because, the licensee was unaware of the requirement to have access to a radiation survey meter. To correct the violation, the licensee purchased a radiation survey meter. Full corrective actions were implemented on April 25th, 2018.
- D. This violation occurred because, the licensee was unaware of the requirements in the License Application that requires the operator to maintain possession of the listed documentation with the gauge at all times. To correct the violation, we have implemented an annual refresher training class and are addressing it in our quarterly internal auditing. Full corrective actions were implemented on April 20th, 2018.
- E. This violation occurred because, the licensee was unaware of the requirements. To correct the violation, a Radiation Safety Program Audit was created and will be implemented quarterly at random. Full corrective actions were implemented on April 25th, 2018.

If additional information is needed to address the above violations, please contact me by email at rnesmeyer@capitalmaterialsno.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Rachel Nesmeyer", with a long, sweeping horizontal line extending to the right.

Rachel Nesmeyer
Radiation Safety Officer

CAPITAL