

NOTATION VOTE

RESPONSE SHEET

RELEASED TO THE PDR

12/23/96

date

initials

TO: John C. Hoyle, Secretary

FROM: CHAIRMAN JACKSON

SUBJECT: SECY-96-193 - ABNORMAL OCCURRENCE REPORTS:
IMPLEMENTATION OF SECTION 208 ENERGY
REORGANIZATION ACT OF 1974; FINAL POLICY
STATEMENT

Approved ☒ subject to
attached comments Disapproved _____ Abstain _____

Not Participating _____ Request Discussion _____

COMMENTS:

John C. Hoyle
SIGNATURE

Release Vote ☒ /

October 18, 1996

DATE

Withhold Vote ☐ /

Entered on "AS" Yes ☒ No _____

240047

CHAIRMAN JACKSON'S COMMENTS ON SECY-96-193

I approve the final abnormal occurrence (AO) policy statement, to be published in the Federal Register, subject to the following:

1. On page 15 of the final policy statement, make the following changes: ~~"Because only minor changes have been made to the criteria since ACMUI's review, the Commission does not believe that it is necessary for ACMUI to further examine the criteria."~~
2. On page 19 of the final policy statement, reword in more general terms or eliminate the paragraph regarding Inspection Manual Chapter (IMC) 1360. IMC 1360 does not contain a list of physicians. Also, some of the information on NRC's review of the physician consultants' credentials may be private (such as conflict of interest information), so it is not appropriate to address NRC's review of the credentials.
3. Throughout the final policy statement, all uses of the term "nursing infant" should be replaced by "nursing child."

In addition to publishing the final policy statement in the Federal Register, the staff should take the following actions regarding the AO criteria:

- To rapidly disseminate significant incident information to the public, the staff should file information on potential AOs in the Public Document Rooms (PDRs) and make the information available to the public as soon as possible, but not later than 15 days after the staff determines that the incident may meet the revised AO criteria. The staff should not wait until an AO determination is made by the Commission, once a year, to make the information available to the public. Staff should focus on incidents that may not already be documented in the PDRs, such as those that did not receive Preliminary Notifications or press releases.
- The staff should begin to develop conforming changes to the final AO policy statement to cover fuel cycle facilities that may receive NRC certification, such as the gaseous diffusion plants (GDPs). These conforming changes should be in place if and when NRC accepts jurisdiction for the GDPs. The criteria in the final policy statement in SECY-96-193 state "fuel cycle licensees" and "license conditions."
- The staff should report to the Commission on how NRC will identify unintended medical radiation exposures to an embryo/fetus or a nursing child. At the present time, there is no reporting requirement for NRC licensees or Agreement States involving unintended medical exposures to an embryo/fetus or a nursing child, and rulemaking on this issue is on hold. If the staff does not recommend a mechanism to identify unintended medical radiation exposures to an embryo/fetus or a nursing child, the staff should recommend whether voluntary reporting of these types of incidents is sufficient, or address whether the final AO policy criteria should be revised at a later date to omit reference to these types of incidents.