

APR - 1 1997

MEMORANDUM TO: Management Review Board Members:

Hugh Thompson, EDO  
Richard Baigart, CSP  
Carl Paperiello, NMSS  
Karen Cyr, OGC  
Denwood Ross, AEOD

FROM: Kathleen N. Schneider  
Senior Health Physicist  
Office of State Programs

Original signed by:  
K. N. Schneider

SUBJECT: FINAL MINUTES: JANUARY 22, 1997 MEETING

Attached are the final minutes of the Management Review Board (MRB) meeting,  
held on January 22, 1997. If you have any questions, please contact me at  
301-415-2320.

Attachment:  
As stated

cc: Roland Fletcher, MD  
Deb Thomas, NE  
Brian Hearty, NE

Distribution:

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JJohansen, RI  
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PDR (Yes ☒ No ☐)

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

April 1, 1997

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As stated

cc: Roland Fletcher, MD  
Deb Thomas, NE  
Brian Hearty, NE

## MINUTES: MANAGEMENT REVIEW BOARD MEETING OF JANUARY 22, 1997

These minutes are presented in the same general order as the items were discussed in the meeting. The attendees were as follows:

Hugh Thompson, EDO  
Carl Paperiello, NMSS  
Richard Bangart, OSP  
Brian Hearty, NE  
Paul Lohaus, OSP  
Patricia Larkins, OSP  
Jenny Johansen, RI  
Ralph Cady, RES  
Kathleen Schneider, OSP  
Charles Hackney, RIV  
Scott Moore, OCM  
Howard Larson, ACNW

Frank Congel, AEOD  
Karen Cyr, OGC  
Roland Fletcher, MD  
Deb Thomas, NE  
King Stablein, EDO  
Charles Mattson, CO  
Richard Blanton, OSP  
Don Cool, NMSS  
Ross Scarano, RIV  
Josie Piccone, NMSS  
Cathy Haney, NMSS

By telephone:

Burke Casari, NE  
Cheryl Rogers, NE

Jack Daniel, NE  
Jay Ringenberg, NE

1. **Convention.** Hugh Thompson, EDO, Chair of the Management Review Board (MRB), convened the meeting at 1:00 p.m. Introductions of the attendees were conducted.
2. **New Business. Nebraska Review Introduction.** Mrs. Patricia Larkins, OSP, led the Integrated Materials Performance Evaluation Program (IMPEP) team for the Nebraska review. The format for presenting the review team results was modified for this MRB meeting. The team proposed presenting its individual findings for each indicator. The State of Nebraska asked to make its presentation and then the team made its overall recommendation to the MRB.

Mrs. Larkins discussed how the review was conducted. Preliminary work included review of Nebraska's response to the IMPEP questionnaire. The onsite review was conducted July 15-19, 1996. The onsite review included an entrance interview, detailed audits of a representative sample of licensing and inspection files, and follow-up discussions with staff and management. The onsite portion of the review concluded with exit briefings with Nebraska management. Following the review, the team issued a draft report on October 16, 1996; received Nebraska's comments dated September 10, 1996, November 1, 1996 and December 13, 1996; and submitted a proposed final report to the MRB on January 17, 1997.

**Status of Items Identified in Previous Reviews.** Mrs. Larkins stated that there were no recommendations made during the 1994 routine review.

**Common Performance Indicators.** Mr. Blanton presented the findings regarding Technical Staffing and Training. His presentation corresponded to Section 3.2 of the IMPEP report. Mr. Blanton reported that the IMPEP review team found that Nebraska's performance with respect to the indicator to be "unsatisfactory." Mr. Blanton stated that the review team found two root causes for this finding: (1) the failure of Nebraska Department of Health (NDOH) management to effectively address the reduced level of program performance; and (2) lack of current written program procedures or the failure of staff to follow those procedures. The team made four recommendations. The team recommended that the qualifications of contractor personnel be tied to the contract as identified by the program manager or as accomplished by the Low-Level Radioactive Waste (LLRW) Program in the Nebraska Department of Environmental Quality (NDEQ). The team recommended that a written program for staff qualification, including retaining training records, be developed. The team recommended that the State develop comprehensive administrative procedures, sufficient to guide the day-to-day operation of the program in the event of another loss of senior staff. The procedures should include a formal process for bringing to the attention of upper management the increase of significant backlogs of licensing, inspection, or enforcement actions, or any other situation which increases the risk to public health and safety. Licensing procedures should include prioritization of licensing actions based upon identified factors, including health and safety significance, for new and previously received applications. The team recommended that the program be observed with increased attention to the effects of the further reorganization. As discussed earlier, the MRB did not reach a consensus on each individual indicator until Nebraska staff made their presentation.

Ms. Johansen discussed the finding for the common performance indicator - Status of the Materials Inspection Program. Her presentation corresponded to Section 3.1 of the IMPEP report. The review team found Nebraska's performance with respect to this indicator "satisfactory with recommendations for improvement." Mr. Hearty asked a question on recommendations 1 and 5 in the proposed final report. He noted that the changes to the report as outlined in NRC Response to Comments provided by the State of Nebraska, Attachment 4, of the January 17, 1997 memorandum to the MRB had not been reflected in the proposed final report. Mrs. Larkins stated that was an oversight and that five comments will be deleted from the final report as noted in Attachment 4. Also, Ms. Johansen noted, on page 5, first paragraph that the date "May 26, 1996" should be "June 26, 1996." The review team recommended that the managers responsible for the Nebraska Radioactive Materials Program establish an action plan or procedure to assure inspections are completed at the frequencies stated in the Nebraska Inspection Manual which is equivalent to the NRC's IMC 2800 and conduct reciprocity licensee inspections at the required frequencies stated in IMC 1220. The review team recommended that the managers establish an action plan or procedure for coordinating deviations from the inspection schedule between staff and management based on the risk of license operations, past performance and need to temporarily defer the inspections to address more urgent or critical priorities. Also, the review team recommended that the managers organize a "get well" plan for rescheduling missed or deferred inspections, especially due to loss of senior staff;

and establish a plan or methodology to assure initial inspections are performed within 6 months of issuance of the license in accordance with the Nebraska Inspection Manual and NRC's IMC 2800.

Mr. Mattson discussed the indicator - Technical Quality of Licensing Actions. He summarized findings in Section 3.3 of the report, which found Nebraska's licensing actions to be generally thorough, complete, consistent, and of acceptable quality with health and safety issues properly addressed. The IMPEP team found Nebraska's performance to be "satisfactory" for this indicator.

Ms. Johansen led the discussion of indicator - Technical Quality of Inspections, which summarized Section 3.4 of the report. The team found that Nebraska's performance on this indicator was "satisfactory with recommendations for improvement," and made three recommendations. The review team recommended that the State consider for adoption a policy of annual supervisory accompaniments of all individuals who perform inspections for the Radioactive Materials Program. The review team recommended that the State develop a plan or procedure to assure that field notes, reports, and enforcement letters are promptly reviewed, signed and dated by a supervisor within the recommended 30-day time frame for issuance of inspection findings. The review team recommended that the State perform an immediate review of all contractor field notes and draft enforcement letters in order to finalize and issue the findings of the remaining 22 inspections to the licensees involved.

The final common performance indicator assessed Nebraska's response to incidents and allegations. Mrs. Larkins led the discussion in this area. As discussed in Section 3.5 of the report, the team found Nebraska's performance relative to this indicator to be "satisfactory with recommendations for improvement" and made four recommendations. The review team recommended revising the allegations procedures to incorporate key areas, i.e. documentation of any communications with the alleged, documentation of the inspection findings, interviewing techniques, etc., identified in NRC Manual Directive 8.8, Management of Allegations. The review team recommended that the staff use the draft "Handbook on Event Reporting in the Agreement States (Handbook)," published March 1995, for review and reporting of material events to NRC. The review team recommended establishment of comprehensive procedures for tracking, follow up and close out of events involving the use of radioactive material covered under the Atomic Energy Act. Finally, the review team recommended that the State immediately begin reporting current material events to NRC and send in information on the three events identified during the review as reportable, that were not previously reported to NRC.

**Non-common Performance Indicators.** Mr. Blanton led the discussion of the non-common indicator on Legislation and Regulations, which summarized Section 4.1 of the report. Mr. Blanton noted that the State's regulations were not compatible with those of the NRC at the time of the review due to the failure to adopt regulations equivalent to 10 CFR Part 36 by July 1, 1996. At the time of the review, the team found that Nebraska's performance with respect to this indicator be



"unsatisfactory." Subsequent to the review, the State informed the team that Section 019 of the Nebraska Code, "Licenses and Radiation Safety Requirements for Irradiators," was adopted effective October 30, 1996. In response to the State's adoption of 10 CFR Part 36 equivalent regulations, the team, based on additional information, is recommending that Nebraska's performance with respect to this indicator be found "satisfactory." The team made one recommendation. In accordance with the State's commitment, the team recommended that Nebraska amend 180 NAC 1-012.22 to remove its applicability to waste treatment and storage facilities.

Mr. Cady led the discussion of the indicator, Low-Level Radioactive Waste Disposal Program, which was based on Section 4.2 of the report. The team found Nebraska's performance relative to this indicator to be "satisfactory" and made one suggestion for enhancement of the program. The team suggested that the LLRW Program assemble training documentation for individual staff and contractors and develop a consolidated training record to enable assessment of the progress of training across the entire program.

Mrs. Larkins stated the team's overall recommendations at the time of the draft report was that Nebraska's program was adequate, but needs improvement and not compatible. The team had recommended probation at that time. Based on the actions taken by the State, the finding at the time of the MRB meeting was that the State was compatible. The team wanted to defer on the recommendation for probation until the State had completed their presentation.

3. **Report from the State of Nebraska.** Attached are the briefing slides presented by the State, which address the State's present organization and the corrective action plan put into place to address the deficiencies and weaknesses NRC identified. Ms. Deb Thomas, Director, Department of Regulation and Licensure, and Mr. Brian Hearty, Materials Program Manager, represented Nebraska during the MRB meeting. The Department of Regulation and Licensure is a newly created cabinet level Department. The Nebraska radiation control program has been moved into this new department from its traditional place in the Department of Health. Ms. Thomas believes that the radiation control program will benefit in this organization where the focus is narrowed to licensing and registration versus the responsibilities of a State Department of Health. Ms. Thomas' position is a cabinet level position and is appointed by the governor. Nebraska has formulated a two step corrective action plan which has a get-well plan and stay-well plan. The State has scheduled to complete its get-well plan by July 1997 and will have in place the necessary actions including high level management involvement to maintain a quality program. In summary, Ms. Thomas stated that it was the State's position that they did not disagree with the team's findings in July 1996, but that the program has improved to date. She believes that probation is unnecessary and would take resources away from the corrections that Nebraska has undertaken. Ms. Thomas believes that they have accomplished the tasks to improve the program without the need for probation.

During both the review team's presentation and Nebraska's presentation, the MRB asked clarifying questions.

4. **MRB Consultation/Comments on Issuance of report.** At the conclusion of the State's presentation, the review team took a short recess to consider the information presented by the State before making their final recommendation to the MRB on the overall findings for the Nebraska program and whether the team would still recommend probation. Mrs. Larkins concluded, based on the presentation by Nebraska, actions taken to date, and discussion among the IMPEP review team, the review team did not recommend at this time that Nebraska be placed on probation. The review team did recommend that the next IMPEP review be scheduled in 1-1 1/2 years from the July 1996 review. The MRB directed that finding for Technical Staffing and Training be changed to "satisfactory, with recommendations for improvements" in view of the actions taken by the State and the commitments made by State management. The MRB concurred in the remaining individual team findings for the performance indicators and the overall program finding that Nebraska's program was adequate to protect public health and safety, but needs improvement and compatible. The MRB also concurred in the recommendation that Nebraska be scheduled for its next IMPEP review in 1-1 1/2 years and that NRC should remain in contact with the State and receive periodic information as to the actions taken by the State in response to the 1996 IMPEP review.
5. **Comments from the State of Nebraska.** Ms. Thomas stated that she is an advocate for peer review and that the process does not need to be adversarial. She believes the IMPEP process was such a review and it was time well spent by the State and the NRC.
6. **Old Business. Approval of the Iowa and Region II MRB Minutes.** At the completion of the New Business, the Region II and Iowa draft MRB minutes were offered for the MRB approval. Mr. Thompson discussed with Mrs. Schneider the need to revise the process of approval for draft minutes of MRB meetings that occurred four months previously. Mrs. Schneider stated that she had begun discussions with her management and NMSS to offer the draft minutes and ask for approval within a month either by mail or scheduled MRB meeting. Mr. Thompson directed the staff to proceed with a revised process. The Region II and Iowa draft minutes, as written, were approved as circulated with one minor editorial change to the Iowa minutes.  
  
Mr. Thompson also directed the staff to streamline both the reports and the MRB presentations by the IMPEP team. Mrs. Schneider committed to work with the IMPEP review teams to accomplish streamlining of both items, especially the MRB presentations.
7. **Status of Remaining Reviews.** Mrs. Schneider reported on the status of the remaining IMPEP reviews and reports. Status charts as directed by the MRB were distributed. Mrs. Schneider discussed some difficulties encountered in timeliness of the teams' draft reports and some preliminary plans to sequester the review teams following the reviews to enable timely completion of draft reports.

8. **Adjournment.** The meeting was adjourned at approximately 3:45 pm.

Attachment:  
Nebraska Briefing Slides



mtg  
copy

# **Nebraska Health and Human Services System**

**Department of Regulation and Licensure**

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**Deb Thomas, Director**

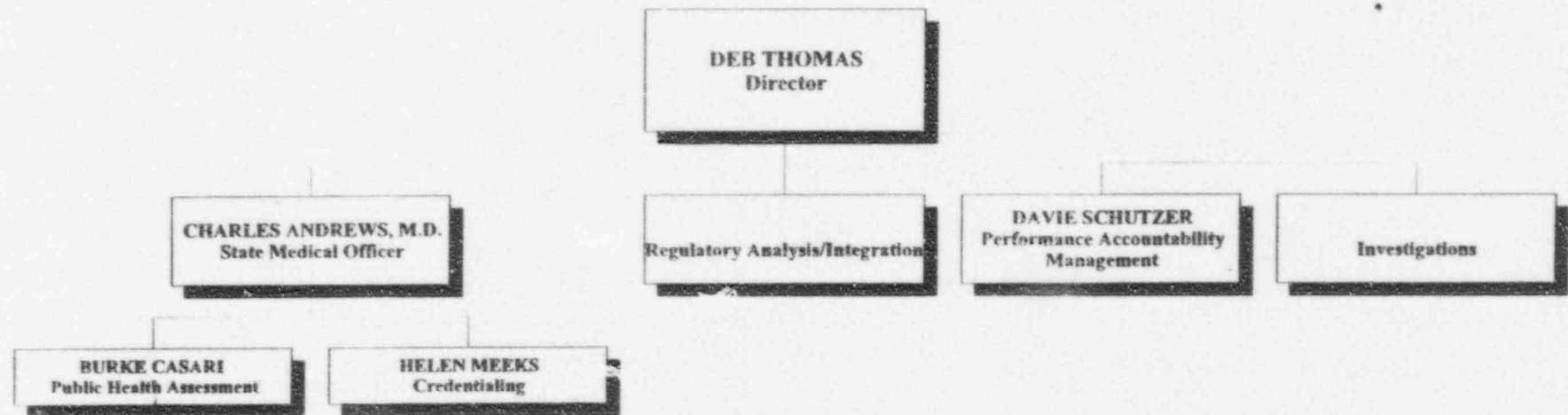
**Brian Hearty, Materials Program Manager**

**IMPEP Management Review Board, January 22, 1997**

# Regulation and Licensure

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## Upper Management Organizational Chart

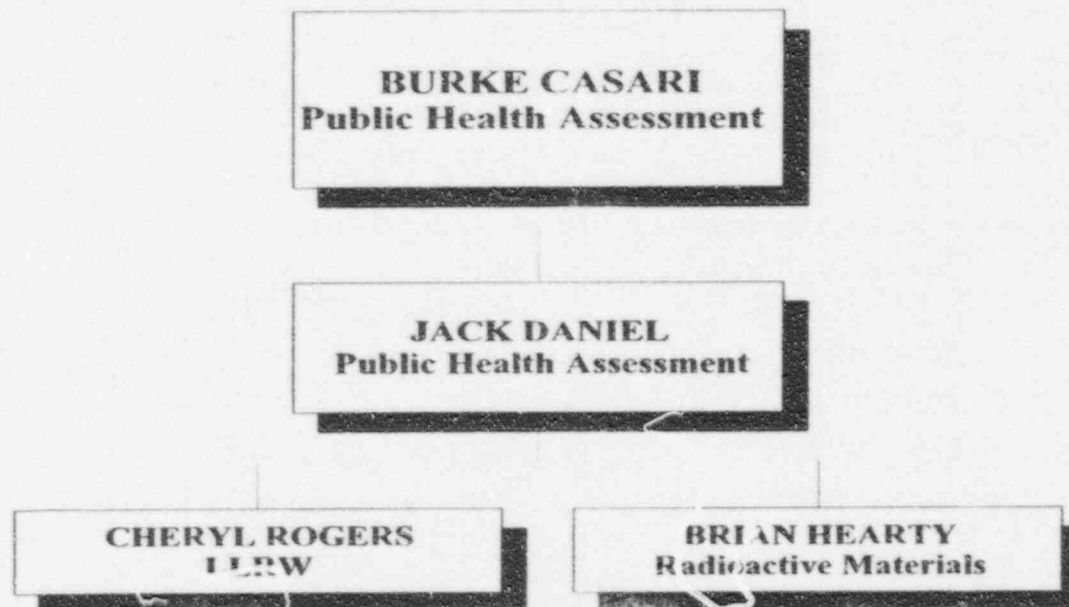


DIV.

# Public Health Assessment

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## Program Management Organizational Chart



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## Corrective Action Plan

IMPEP Review July 15-19, 1996

### Two Step Corrective Action Plan

- I. Get-Well Plan
- II. Stay-Well Plan

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## I. Get-Well Plan

Goals

- A. Eliminate Backlogs
- B. Adopt Compatible Regulations
- C. Address Administrative Concerns
- D. Plan Completed by July 1997

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### A. Eliminate Backlogs

Get-Well Plan Actions Taken

- 1. Developed a Project Management Plan
  - a. Identified and Assigned Staff To Pending Inspection, Event and Licensing Actions

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### A. Eliminate Backlogs

Get-Well Plan Actions Taken

- 1. Developed a Project Management Plan
    - b. Created a Gantt Chart to Show Project Timeline and Task Linkages
-

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## A. Eliminate Backlogs

Get-Well Plan Actions Taken

### 2. Implemented a Task Monitoring System

- a. Materials Staff Performance Plan Forms Rewritten to Coincide With Project Management Plan

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## A. Eliminate Backlogs

Get-Well Plan Actions Taken

### 2. Implemented a Task Monitoring System

- b. Assignment Log Used to Monitor Staff Performance of Individual Tasks Within the Project Management Plan

---

## A. Eliminate Backlogs

Get-Well Plan Actions Taken

### 2. Implemented a Task Monitoring System

- c. Updated Licensing and Inspection Databases to Allow for Better Tracking

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## A. Eliminate Backlogs

Get-Well Plan Actions Taken

### 2. Implemented a Task Monitoring System

- d. Created an Event Log to be Used With the Nuclear Materials Events Database
-



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## A. Eliminate Backlogs

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Get-Well Plan Actions Taken

3. Increased Materials Program Oversight
  - a. Weekly Program Management Meeting with Burke Casari, Jack Daniel, and Brian Hearty to Assess Tasks Assigned and Completed

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## A. Eliminate Backlogs

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Get-Well Plan Actions Taken

3. Increased Materials Program Oversight
  - b. Monthly Upper Management Briefing with Deb Thomas, Burke Casari, Jack Daniel, and Brian Hearty to Report on Plan Progress

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## A. Eliminate Backlogs

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Get-Well Plan Actions Taken

3. Increased Materials Program Oversight
  - c. Quarterly Status Report to the Governor's Radiation Advisory Council

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## A. Eliminate Backlogs

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Get-Well Plan Actions Taken

4. Increased Materials Program Support
  - a. Contracted With Stan Huber Consultants to Perform 29 Radioactive Material Inspections January to June 1997

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## A. Eliminate Backlogs

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Get-Well Plan Actions Taken

4. Increased Materials Program Support
  - b. Inspection and Licensing Activities Supplemented by Qualified Agency Staff
    - i. LLRW Staff Have Performed Seven Inspections (Four Priority 1, One Priority 2, One Priority 3, and One Priority 5) and Completed Two Licensing Actions

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## A. Eliminate Backlogs

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Get-Well Plan Actions Taken

4. Increased Materials Program Support
  - c. Full Time Staff Assistant to Support Radioactive Materials Program Activities

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## B. Adopt Compatible Regulations

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Get-Well Plan Actions Taken

1. Compatible Irradiator Regulations Adopted October 30, 1996

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## B. Adopt Compatible Regulations

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Get-Well Plan Actions Taken

2. Implemented a Task Monitoring System
    - a. Regulation Change Log to Track and Assign Resources to Changes in Program Regulation and Guidance
-

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## B. Adopt Compatible Regulations

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### Get-Well Plan Actions Taken

3. Increased Materials Program Support
  - a. Division Staff Support Assisting With Program Regulation Changes
    - i. Drafted Regulatory Guide 19.0 for Irradiators and is Drafting Regulatory Guide 7.0 for Medical Use

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## C. Address Administrative Changes

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### Get-Well Plan Actions Taken

1. Implemented Materials Program Policy Changes
  - a. Licensing Actions Submitted Directly for Supervisory Review and Signature Without Peer Review

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## C. Address Administrative Changes

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### Get-Well Plan Actions Taken

1. Implemented Materials Program Policy Changes
  - b. Legible Handwritten Inspection Field Notes can be Submitted for Supervisory Review and Used as Final Documentation

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## C. Address Administrative Changes

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### Get-Well Plan Actions Taken

1. Implemented Materials Program Policy Changes
  - c. NRC Inspection Field Notes for Remote Afterloader and Broad Scope Licensees Converted and Used by Staff

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## C. Address Administrative Changes

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### Get-Well Plan Actions Taken

1. Implemented Materials Program Policy Changes
  - d. Implemented Inspection Plan Forms to be Used During Inspection Review

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## C. Address Administrative Changes

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### Get-Well Plan Actions Taken

2. Developed a Project Management Plan
  - a. Identified and Assigned Staff To Required Procedure and Manual Changes

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## C. Address Administrative Changes

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### Get-Well Plan Actions Taken

3. Increased Materials Program Support
  - a. Contractor Prepared Draft Program Inspection Procedures and Qualifications Manual for Review

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## I. Get-Well Plan

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### Plan Summary

The Plan Addresses Both Primary Root Causes Identified in the Report by Increasing Management Oversight and Identifying Comprehensive Procedures to be Implemented by July 1997

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## II. Stay-Well Plan

### Goals

- A. Maintain a Quality Program That is Continually Improving
- B. Program Anticipates and Responds to Changes While Maintaining Adequacy and Compatibility

## A. Maintain Quality

### Stay-Well Plan Actions to be Taken

- 1. Maintain Program Oversight
  - a. Routine Meetings with Upper and Program Management to Assess Performance

## A. Maintain Quality

### Stay-Well Plan Actions to be Taken

- 1. Maintain Program Oversight
  - b. Quarterly Status Report to the Governor's Radiation Advisory Council

*9 rules, appointed by Gov.  
Industry + gov't reps.*

## A. Maintain Quality

### Stay-Well Plan Actions to be Taken

- 2. Use Available Resources to Improve Program Quality
  - a. Identify What NRC and Other States Do Right and Incorporate Into Program



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## A. Maintain Quality

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Stay-Well Plan Actions to be Taken

### 2. Use Available Resources to Improve Program Quality

- b. Bring Lessons Learned at National Meetings Into Program Quicker

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## B. Respond to Change

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Stay-Well Plan Actions to be Taken

### 1. Procedural Controls

- a. Implement a Procedure to be Used by Upper Management in the Event of Loss of Program Staff

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## B. Respond to Change

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Stay-Well Plan Actions to be Taken

### 1. Procedural Controls

- b. Implement a Procedure to be Used by Program Management to Identify and Implement New Administrative Changes

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## II. Stay-Well Plan

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Plan Summary

The Plan Builds on the Successes of the Get-Well Plan to Ensure the Program Will Maintain and Improve its Ability to Protect Public Health and Safety

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## IMPEP Final Report

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### Review Team Findings

- A. Team Identified Eight Difficulties During the Review
- B. Team Made 15 Recommendations to the State

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## A. Difficulty Identified

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### IMPEP Review Team Final Report

- (1) Backlog of Nine Core Inspections  
Eight Inspections Have Been Performed and one is Awaiting Termination and Will not Require an Inspection

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## A. Difficulty Identified

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### IMPEP Review Team Final Report

- (2) 22 Inspections Pending Supervisory Review and Notification of Findings  
Review and Notification Completed August 5, 1996

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## A. Difficulty Identified

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### IMPEP Review Team Final Report

- (3) Inspection Reports Were Incomplete  
Incomplete Reports Have Been Identified and Assigned in the Task Monitoring System

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## A. Difficulty Identified

IMPEP Review Team Final Report

### (4) A Backlog of 101 Licensing Actions

Pending Actions Have Been Prioritized and Assigned in the Task Monitoring System

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## A. Difficulty Identified

IMPEP Review Team Final Report

### (5) No Incident Reporting to NRC since June 1995

Routine Monthly Event Reporting Using NMED to Begin January 1997

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## A. Difficulty Identified

IMPEP Review Team Final Report

### (6) Incomplete Documentation of Incident Response and Response to Allegations

Prior Events are Being Documented in Accordance With the Reporting Handbook and Will be Provided to NRC in February 1997

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## A. Difficulty Identified

IMPEP Review Team Final Report

### (7) Regulations Required for Compatibility not Adopted in a Timely Fashion

Program is Currently Compatible and Better Monitoring Will Ensure it is Maintained

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## A. Difficulty Identified

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IMPEP Review Team Final Report

### (8) No Get-Well Plan

A Get-Well Plan has Been Formalized as Part of the Corrective Action Plan

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## B. Recommendations

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IMPEP Review Team Final Report

### 2. Establish an Action Plan or Procedure to Ensure Inspections are Conducted at Proper Frequencies

Inspection Frequencies Have Been Updated in the Inspection Log Database and in the Draft Inspection Procedures

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## B. Recommendations

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IMPEP Review Team Final Report

### 3. Establish an Action Plan or Procedure for Coordinating Deviations From the Inspection Schedule

Inspection Scheduling Will be Addressed in the Revised Inspection Procedures and in the Upper Management Stay-Well Procedure

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## B. Recommendations

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IMPEP Review Team Final Report

### 4. Organize a Get-Well Plan for Rescheduling Missed or Deferred Inspections and Initial Inspections

Inspection Scheduling Will be Addressed in the Revised Inspection Procedures and in the Upper Management Stay-Well Procedure

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## B. Recommendations

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IMPEP Review Team Final Report

6. Incorporate Qualifications of Contractor Personnel in Each Contract  
Qualification Requirements and Agency Approval Were Tied Into the Current Inspection Contract

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## B. Recommendations

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IMPEP Review Team Final Report

7. Develop a Written Program for Staff Qualification and Training Records  
A Qualifications Manual has Been Drafted and Will be Implemented When Finalized

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## B. Recommendations

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IMPEP Review Team Final Report

8. Develop Comprehensive Administrative Procedures  
Procedures Required for Licensing, Inspection, and Upper Management Notification Have Been Identified in the Project Management Plan

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## B. Recommendations

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IMPEP Review Team Final Report

12. Perform Annual Supervisory Accompaniments of Inspection Staff  
Accompaniments Will be Required in the Qualifications Manual and Performed Annually
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## B. Recommendations

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IMPEP Review Team Final Report

13. Develop a Procedure to Ensure  
Timely Completion of Inspection  
Documentation

Inspection Documentation Requirements are  
Addressed in the Task Monitoring System

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## B. Recommendations

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IMPEP Review Team Final Report

14. Review Contractor Inspection  
Field Notes and Issue Findings  
Review Completed August 5, 1996

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## B. Recommendations

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IMPEP Review Team Final Report

15. Revise Allegation Procedures to  
Incorporate Key Ideas of Management  
Directive 8.8

The Allegation Section of the Program  
Inspection Manual Will be Revised to  
Incorporate MD 8.8

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## B. Recommendations

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IMPEP Review Team Final Report

16. Use the Draft Handbook on Event  
Reporting for Reporting Events to NRC  
The Allegation Section of the Program  
Inspection Procedures Will be Revised to  
Reference the Handbook and Make It An  
Attachment to the Manual

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## B. Recommendations

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IMPEP Review Team Final Report

### 17. Establish Procedures for Tracking, Follow up and Close out of Events

An Event Tracking Log has Been  
Implemented for Tracking of all Possible  
Materials Events and Will be Used With  
NMED and the Allegation Procedures

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## B. Recommendations

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IMPEP Review Team Final Report

### 18. Begin Reporting Current Events and Report Past Events Immediately

Routine Reporting Will Begin January 1997  
and Past Events are Being Documented in  
Accordance With the Reporting Handbook  
and Will be Provided to NRC in February

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## B. Recommendations

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IMPEP Review Team Final Report

### 19. Amend 180 NAC 1-012.22 to Remove Applicability to Waste Treatment and Storage Facilities Regulation Revision in Process

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## B. Recommendations

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IMPEP Review Team Final Report

### 20. Develop a Consolidated Training Record for the LLRW Program

The State of Nebraska LLRW Program (Comprised of  
Both HHS Regulation & Licensure and NDEQ) Will set  
up an Administrative Procedure to Keep Track of Staff  
Training and Training Specifically Provided by the  
LLRW Program

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## Recommendation Status

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### Summary of Actions Taken

6. and 14. Completed  
2.-4., 7.-8., 12.-13., 15.-20. To be  
Completed Prior to July 1997

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## Findings Status

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### IMPEP Review Team Draft Report

Draft Report: October 16, 1996

1 Satisfactory  
4 Satisfactory With Recommendations  
2 Unsatisfactory

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## Findings Status

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### IMPEP Review Team Final Report

Final Report: January 14, 1997

3 Satisfactory  
3 Satisfactory With Recommendations  
1 Unsatisfactory

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