May 19, 2014

David J. Allard, CHP, Director  
Bureau of Radiation Protection  
Department of Environmental Protection  
P.O. Box 8469  
Harrisburg, PA  17105-8469

Dear Mr. Allard:

On April 3, 2014, the Management Review Board (MRB) met to consider the proposed final Integrated Materials Performance Evaluation Program (IMPEP) report on the Pennsylvania Agreement State Program. The MRB found the Pennsylvania program adequate to protect public health and safety and compatible with the U.S. Nuclear Regulatory Commission’s (NRC) program.

Section 5.0, page 11 of the enclosed final report contains a summary of the IMPEP team’s findings and recommendations. The review team determined that the performance recommendation from the 2009 IMPEP regarding the Commonwealth’s incident response program remains open. Based on the results of the current IMPEP review, the next full review of the Pennsylvania Agreement State Program will take place in approximately 5 years, with a periodic meeting tentatively scheduled for April 2015. The Pennsylvania Agreement State Program received an extension of 1 year for the next IMPEP review based on two consecutive IMPEP reviews with satisfactory findings for all the performance indicators reviewed.

I appreciate the courtesy and cooperation extended to the IMPEP team during the review. I also wish to acknowledge your continued support for the Agreement State program. I look forward to our agencies continuing to work cooperatively in the future.

Sincerely,

/RA/

Michael F. Weber  
Deputy Executive Director for Materials, Waste, Research, State, Tribal and Compliance Programs  
Office of the Executive Director for Operations

Enclosure:  
Pennsylvania Final IMPEP Report

cc: Patricia Gardner, New Jersey Organization of Agreement States Liaison to the MRB
INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

REVIEW OF THE PENNSYLVANIA AGREEMENT STATE PROGRAM

JANUARY 13–17, 2014

FINAL REPORT
This report presents the results of the Integrated Materials Performance Evaluation Program (IMPEP) review of the Pennsylvania Agreement State Program. The review was conducted during the period of January 13 - 17, 2014, by a review team composed of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the State of Alabama.

Based on the results of this review, Pennsylvania’s performance was found satisfactory for all six indicators reviewed. The review team did not make any new recommendations. However, the review team determined that the recommendation from the 2009 IMPEP review, regarding the strengthening of Pennsylvania’s incident response program should be kept open. Progress has been made regarding Pennsylvania’s review and followup of incidents, but issues remain in thorough followup and timely reporting of incidents.

Accordingly, the review team recommended, and the Management Review Board (MRB) agreed, that the Pennsylvania Agreement State Program is adequate to protect public health and safety and is compatible with the NRC’s program. This review is the second consecutive review for Pennsylvania with all performance indicators found satisfactory. Therefore, the review team recommended, and the MRB agreed, that the next IMPEP review take place in approximately five years and a periodic meeting in one year.
1.0 INTRODUCTION

This report presents the results of the review of the Pennsylvania Agreement State Program. The review was conducted during the period of January 13 - 17, 2014, by a review team composed of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the State of Alabama. 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 Final General Statement of Policy,” published in the Federal Register on October 16, 1997, and NRC Management Directive 5.6, “Integrated Materials Performance Evaluation Program (IMPEP),” dated February 26, 2004. Preliminary results of the review, which covered the period of November 21, 2009 to January 17, 2014, were discussed with Pennsylvania managers on the last day of the review.

A draft of this report was provided to Pennsylvania for factual comment on February 18, 2014. The Commonwealth responded to the findings and conclusions by email dated March 19, 2014. A copy of the Commonwealth’s response is included as an Attachment to this report along with a comment resolution document. A Management Review Board (MRB) met on April 3, 2014, to consider the proposed final report. The MRB found the Pennsylvania Agreement State Program adequate to protect public health and safety, and compatible with the NRC’s program.

The Pennsylvania Agreement State Program is administered by the Bureau of Radiation Protection (the Bureau). The Bureau is part of the Department of Environmental Protection (the Department). The compliance part of the Agreement State Program resides in three Regional Offices within the Commonwealth. Organization charts for the Department and the Bureau are included as Appendix B.

At the time of the review, the Pennsylvania Agreement State Program regulated 677 specific licenses authorizing possession and use of radioactive materials. The review focused on the radioactive materials program as it is carried out under the Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the Commonwealth of Pennsylvania.

In preparation for the review, a questionnaire addressing the common and applicable non-common performance indicators was sent to the Bureau on May 6, 2013. The Bureau provided its initial response to the questionnaire on September 20, 2013. Due to the federal government shutdown in October 2013, the IMPEP review originally scheduled for October 7 - 11, 2013, was postponed until January 13 - 17, 2014. Consequently, the questionnaire was updated and resubmitted by the Commonwealth on January 28, 2014. A copy of the updated questionnaire response can be found in the NRC’s Agencywide Documents Access and Management System (ADAMS) using the Accession Number ML14031A068.

The review team's general approach for conduct of this review consisted of (1) examination of the Bureau's response to the questionnaire, (2) review of applicable Pennsylvania statutes and regulations, (3) analysis of quantitative information from the Bureau's database, (4) technical review of selected regulatory actions, (5) field accompaniments of seven inspectors, and (6) interviews with staff and managers. The review team evaluated the information gathered against the established criteria for each common and the applicable non-common performance
indicator and made a preliminary assessment of the Pennsylvania Agreement State Program’s performance.

Section 2.0 of this report covers the Commonwealth’s actions in response to the recommendation made during the previous review.

Results of the current review of the common performance indicators are presented in Section 3.0. Section 4.0 details the results of the review of the applicable non-common performance indicators, and Section 5.0 summarizes the review team's findings.

2.0 STATUS OF ITEMS IDENTIFIED IN PREVIOUS REVIEWS

During the previous IMPEP review, which concluded on November 20, 2009, the review team made one recommendation regarding the Pennsylvania Agreement State Program’s performance. The status of the recommendation is as follows:

“The review team recommends that the Commonwealth strengthen its incident response program to ensure that incidents are appropriately investigated and are promptly reported to NRC, as appropriate.” (Section 3.5 of the 2009 IMPEP Report)

Status: Since the November 2009 IMPEP review, one staff member has been assigned to track incidents and ensure that reporting requirements are met and are timely. The 2014 IMPEP review indicated that, while timeliness has improved overall, notifications to the NRC were still late in 5 of the 10 cases reviewed by a matter of days or weeks in 4 cases and not reported in 1 case. In addition, communication of incidents from the Central Office to the Regions improved, and incident investigations were typically thorough, complete and comprehensive. However, in 3 of the 10 cases reviewed, 2 involving industrial radiography source retractions and 1 involving a contaminated package, the incident investigations were insufficient in that root causes were not identified and actions taken by the licensees to prevent similar events were not documented or followed up. This recommendation remains open.

3.0 COMMON PERFORMANCE INDICATORS

Five common performance indicators are used to review NRC regional and Agreement State radioactive materials programs. These indicators are (1) Technical Staffing and Training, (2) Status of Materials Inspection Program, (3) Technical Quality of Inspections, (4) Technical Quality of Licensing Actions, and (5) Technical Quality of Incident and Allegation Activities.

3.1 Technical Staffing and Training

Issues central to the evaluation of this indicator include the Bureau’s staffing level and staff turnover, as well as the technical qualifications and training histories of the staff. To evaluate these issues, the review team examined the Bureau’s questionnaire response relative to this indicator, interviewed managers and staff, reviewed job descriptions and training records, and considered workload backlogs.
The Bureau is managed by the Bureau Director from the Central Office located in Harrisburg. The Bureau consists of four Divisions, three of which have responsibilities for radioactive materials under the Agreement: the Radiation Control Division, the Decommissioning and Surveillance Division, and the Nuclear Safety Division. Within the Radiation Control Division, the Radioactive Materials Program Chief directly supervises radioactive materials licensing activities. Inspection and compliance activities are conducted out of three Regional Offices located in Norristown, Harrisburg, and Pittsburgh. Each Regional Office has a Radiation Protection Program Manager and Supervisor who directly supervise inspection and compliance activities in the Commonwealth.

At the time of the review, there were 48 individuals with various degrees of involvement in the radioactive materials program. The Regional Offices devote approximately 19.5 full-time equivalents (FTE) to inspection, compliance and emergency response activities, including supervisory duties. The Bureau devotes approximately 5.1 FTE to radioactive materials licensing activities, including supervisory duties. The review team determined that staffing levels were adequate for the Agreement State program.

During the review period, a total of 19 individuals left the program, including 6 managers, and 12 individuals were hired, including 2 managers. At the time of the review, the Bureau had seven vacancies for technical positions, five of which were in the radioactive materials program. There were no vacancies in program management positions at the time of the review. The vacancies have not adversely impacted inspection or licensing activities. In December 2013 a Department hiring freeze was enacted. The Bureau Director anticipates that the freeze is a short-term budget measure that will be reevaluated after a merger of the human resources offices in the Department of Environmental Protection and the Department of Conservation and Natural Resources is completed in the near future.

The Bureau has a documented training plan for technical staff that is consistent with the requirements in the NRC/Organization of Agreement States Training Working Group Report and NRC’s Inspection Manual Chapter (IMC) 1246, “Formal Qualification Programs in the Nuclear Material Safety and Safeguards Program Area.” The Bureau uses on-the-job training to supplement formal classroom training. New licensing and inspection staff members are assigned increasingly complex duties as they progress through the qualification process. The review team noted that Bureau managers encourage and support training opportunities, based on program needs and funding. The Bureau has sponsored NRC training courses in the past and anticipates sponsoring additional courses in the future. The review team concluded that the Bureau’s training program is adequate to carry out its regulatory duties and noted that Pennsylvania management supports the Bureau training program.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Pennsylvania’s performance with respect to the indicator, Technical Staffing and Training, be found satisfactory.

3.2 Status of Materials Inspection Program

The review team focused on five factors while reviewing this indicator: (1) inspection frequency, (2) overdue inspections, (3) initial inspections of new licenses, (4) timely dispatch of inspection findings to licensees, and (5) performance of reciprocity inspections. The review team’s
evaluation was based on the Bureau’s questionnaire response relative to this indicator, data gathered from the Bureau’s database, examination of completed inspection casework, and interviews with management and staff.

The review team verified that Pennsylvania’s inspection frequencies for all types of radioactive material licenses are at least as frequent as similar license types listed in IMC 2800, “Materials Inspection Program.” The review team confirmed the Bureau is conducting Increased Controls inspections in conjunction with the routine health and safety inspections.

The Bureau conducted 641 Priority 1, 2, and 3 inspections during the review period, based on the inspection frequencies established in IMC 2800. Only one of these inspections was conducted overdue by more than 25 percent of the inspection frequency prescribed in IMC 2800. The review team verified there were no overdue routine Priority 1, 2, and 3 inspections at the time of the review. In addition, the Bureau performed 85 initial inspections during the review period, none of which were conducted overdue. As required by IMC 2800, initial inspections should be conducted within 12 months of license issuance. Overall, the review team calculated that the Bureau performed less than one percent of its inspections overdue during the review period.

The review team evaluated the Bureau’s timeliness in providing inspection findings to licensees. A sampling of 22 inspection reports indicated that only 1 of the inspection findings was communicated to the licensees a few days beyond the Bureau’s goal of 30 days after the inspection.

The Bureau’s reciprocity inspection goals are equivalent to the requirements in IMC 1220, “Processing of NRC Form 241 and Inspection of Agreement State Licensees Operating under 10 CFR150.20,” which is 20 percent of candidate licensees. During the review period, the Bureau granted 85 reciprocity permits and exceeded the NRC’s criteria of inspecting 20 percent of candidate licensees operating under reciprocity in each of the four years covered by the review period.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Pennsylvania’s performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

3.3 Technical Quality of Inspections

The review team evaluated the inspection reports, enforcement documentation, inspection field notes, and conducted interviews, as needed, for 22 radioactive materials inspections conducted during the review period. The casework reviewed included inspections conducted by 27 current and former Bureau inspectors from three Regional Offices and the Decommissioning and Surveillance Division, and covered a wide variety of inspection types involving initial, routine, reciprocity and special inspections. The casework included inspection of various types of programs, including medical broad scope, medical institutions-therapy including gamma stereotactic radiosurgery, high dose rate remote afterloader, unsealed radiiodine therapy, permanent and temporary implant brachytherapy, medical-diagnostic, portable gauges, industrial radiography, nuclear pharmacy, well logging, decommissioning activities, research and development, service providers and Increased Security Controls for Large Quantities of
Radioactive Materials (Increased Controls). Appendix C lists the inspection casework files reviewed, as well as the results of the inspector accompaniments. Inspections are performed by the three Regional Offices, Southeast (Norristown), South Central (Harrisburg) and Southwest (Pittsburgh). Inspection files are maintained in the Regional Offices, with copies sent to the Central Office. Inspection results are transmitted to licensees via inspection letters generated by the Regional Offices. Decommissioning inspection activities are performed by the Decommissioning and Surveillance Division in Central Office.

Based on the evaluation of casework, the review team noted that inspections covered all aspects of the licensee’s radiation safety programs. The review team found that inspection reports were thorough, complete, consistent, and of high quality, with sufficient documentation to ensure that a licensee’s performance with respect to health and safety was acceptable. The documentation routinely noted observations by the inspector either by direct observations of licensed activities or by demonstrations requested of the licensee by the inspector. The documentation supported violations, recommendations made to licensees, unresolved safety issues, the effectiveness of corrective actions taken to resolve previous violations and discussions held with licensees during exit interviews.

The inspection procedures utilized by the Bureau are consistent with the inspection guidance outlined in IMC 2800. An inspection report is completed by the inspector(s) which is then reviewed and signed by the Section Chief at the Regional Office. The Bureau has a policy to accompany all staff performing radioactive materials inspections on an annual basis. Supervisory accompaniments were conducted annually for all inspectors by the Section Chiefs at each Regional Office.

The review team determined that the inspection findings were appropriate and prompt regulatory actions were taken, as necessary. Inspection findings were clearly stated and documented in the reports and sent to the licensees with the appropriate letter detailing the results of the inspection. The Regional Office issues to the licensee either a letter indicating a clear inspection or a Notice of Violation (NOV), in letter format, which details the results of the inspection. Notice of Violation letters are reviewed by the Compliance Specialist in the Regional Office before issuance. When the Regional Office issues an NOV, the licensee is required to provide a written corrective action plan, based on the violations cited, within 20 days.

The review team noted that the Bureau maintains an adequate supply of appropriately calibrated survey instruments to support the inspection program, as well as to respond to radioactive materials incidents and emergency conditions. The Bureau’s instruments are sent to an authorized entity for calibration. The Department has a well-equipped radiochemistry laboratory to support the Agreement program. The Bureau also contracted with Oak Ridge Institute for Science and Education for technical assistance with complex decommissioning sites.

The review team accompanied seven of the Bureau’s inspectors in September and October 2013. The inspectors conducted inspections at medical facilities, industrial radiographers, a HDR facility and decommissioning activities. The accompaniments are identified in Appendix C. During the accompaniments, the inspectors demonstrated performance-based inspection techniques and knowledge of the regulations. The inspectors were trained, well-prepared for their inspections, and thorough in their audits of the licensees’ radiation safety programs. The
inspectors conducted interviews with appropriate personnel, observed licensed operations, conducted confirmatory measurements and utilized good health physics practices. The review team determined that the inspections were adequate to assess radiological health, safety and security at the licensed facilities.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Pennsylvania’s performance with respect to the indicator, Technical Quality of Inspections, be found satisfactory.

3.4 Technical Quality of Licensing Actions

The review team examined completed casework and interviewed license reviewers for 29 licensing actions covering 25 specific licensees. Licensing actions were reviewed for completeness, consistency, proper radioisotopes and quantities, qualifications of authorized users, adequacy of facilities and equipment, adherence to good health physics practices, financial assurance, security requirements, operating and emergency procedures, appropriateness of license conditions, and overall technical quality. The casework was also reviewed for timeliness, use of appropriate deficiency and transmittal letters, reference to appropriate regulations, supporting documentation, consideration of enforcement history, pre-licensing visits, peer and supervisory review, and proper signatures.

The licensing casework was selected to provide a representative sample of licensing actions completed during the review period. Licensing actions selected for evaluation included 1 new license, 6 renewals, 18 amendments, and 4 license terminations. Casework reviewed included a cross-section of license types, including: industrial radiography, broad scope - medical and academic, nuclear medicine - diagnostic and therapeutic, research and development, portable gauge, nuclear pharmacy, and decommissioning. Reviewed casework included work from each license reviewer and licensing supervisor. A listing of the licensing casework reviewed can be found in Appendix D.

The review team found that the licensing actions were thorough, complete, consistent, and of high quality with health, safety, security issues and Increased Controls properly addressed. License tie-down conditions were stated clearly, supported by information contained in the file and enforceable. The review team found that actions terminating licenses were well documented, particularly for decommissioning casework which included appropriate material survey records, and contained documentation of proper disposal or transfer of radioactive material, as required. Incoming licensing actions are entered into the licensing tracking system, then assigned and controlled by the Licensing Supervisor. There were three fully qualified license reviewers including the supervisor, and one newly hired individual working towards full qualification.

The Commonwealth has adopted NRC licensing guidance and practices. License reviewers use the NRC’s licensing guidance provided in the NUREG-1556 series. Licenses are created from previous actions of identical type, tracked using a local database, and closely managed by the Licensing Supervisor. A tracking form was used for each step in the licensing process to document each reviewer’s action. Once completed, all licensing actions are peer reviewed by another qualified license reviewer. The Licensing Supervisor provides final quality assurance review and signs all licenses. Licenses are issued for a 10 year period under timely renewal
regulations. Decommissioning licensees requiring financial assurance by Commonwealth of Pennsylvania regulations had adequate funding plans and remained in compliance with financial assurance requirements throughout the period. Financial assurance instruments were properly reissued after being transferred from the NRC, and were appropriately protected from loss or theft.

The review team assessed implementation of the pre-licensing guidance. Implementation was noted for the essential elements of the NRC's pre-licensing guidance issued on September 22, 2008, and transmitted to the Agreement States via Office of Federal and State Materials and Environmental Management Programs (FSME) Letter RCPD-08-020, “Requesting Implementation of the Checklist to Provide a Basis for Confidence That Radioactive Material Will Be Used as Specified on a License and the Checklist for Risk-significant Radioactive Material.” A basic pre-licensing checklist was incorporated into the licensing process. Eligible pre-licensing visits were assigned by the Central Office to local Regional Offices, and completed as required to ensure that the applicant will use the requested material as intended.

The review team verified that legally binding license conditions met the criteria for implementing the Increased Controls Orders, Fingerprinting Orders, and National Source Tracking System requirements, and were used appropriately. The review team evaluated the program’s methodology for identifying licenses that required implementation of the Orders and found the review process to be appropriate. All license files including those containing Increased Control and Fingerprinting conditions were located in a designated, well controlled area. These licenses and corresponding cover letters were marked as containing sensitive information as required with one exception. An incoming amendment application from a research facility that requested materials quantities of concern was submitted without proper markings. Discussion with the Licensing Supervisor indicated he would follow up with the licensee to ensure documents were properly marked. For other applicable correspondence, the review team verified that the program was identifying and marking sensitive security-related information appropriately in accordance with established policy.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Pennsylvania’s performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

3.5 Technical Quality of Incident and Allegation Activities

In evaluating the effectiveness of the Bureau’s actions in responding to incidents and allegations, the review team examined the Bureau’s response to the questionnaire relative to this indicator, evaluated selected incidents reported for Pennsylvania in the Nuclear Material Events Database (NMED) against those contained in the Bureau’s files, and evaluated the casework for 10 of 91 reported radioactive materials incidents. A listing of the casework examined, with case-specific comments, can be found in Appendix E. The review team also evaluated the Bureau’s response to nine allegations involving radioactive materials. The NRC did not refer any allegations to the State during the review period.

As a result of the review of the Pennsylvania Agreement State Program that was conducted during the period of November 16 - 20, 2009 (previous IMPEP), the review team recommended that the Commonwealth strengthen its incident response program to ensure that incidents are
appropriately investigated and are promptly reported to NRC, as appropriate. The Commonwealth implemented actions to improve its incident response program such that incidents are appropriately investigated and are promptly reported to NRC, as appropriate. For example, a Central Office Health Physicist was assigned to track incident response, including input of information into NMED and notification of events to the NRC. In addition, the Commonwealth developed and implemented a database that is used to record and monitor incidents. The database is shared between the Central and Regional offices, and it includes pertinent information about the events. Applicable staff received training on the events database in early 2010, which included required reporting of incidents to the NRC, timeliness of reporting, and entering information into NMED to close events.

When notified of an incident or an allegation, the appropriate Regional manager and staff discuss the initial response and the need for an onsite investigation, based on the safety significance of the incident. If the incident meets the reportability thresholds, as established in FSME Procedure SA-300 “Reporting Material Events,” the Bureau notifies the NRC Headquarters Operations Center and enters the information into NMED, in a prompt manner. During the previous IMPEP, the review team noted that Bureau managers thought entering an incident into NMED fulfilled the reporting requirement to the NRC Headquarters Operations Center. Of the incidents evaluated during the previous IMPEP, all were properly entered into NMED, but 7 of the 16 incidents had not been reported to the NRC within the required time frame, mostly because of the aforementioned misconception.

During this IMPEP review, the review team noted that for the 10 incidents reviewed, pertinent information was entered into NMED, but in 5 of the 10 cases, the incident had not been reported to the NRC Headquarters Operations Center within the required time frame. Four of the incidents were reported late to the Headquarters Operations Center by a matter of days or weeks, while one was not reported at all. Subsequent to the onsite review, the Bureau conducted a retrospective review of the Commonwealth’s 91 reported radioactive materials incidents and identified one additional incident that was not reported timely.

The previous IMPEP review team determined that the Bureau’s responses to incidents were thorough, complete, and comprehensive in all but two instances. Those two incidents involved industrial radiography source retraction problems that were reported by licensees to the Central Office. The Central Office entered the information for both incidents into NMED, but did not send the information to the appropriate Regional Offices. Absent knowledge of the incidents, the Regional Offices could not perform the appropriate incident investigations.

During this IMPEP review, the incidents selected for review included medical events, lost or stolen radioactive material, a contamination event, transportation events, an overexposure, and equipment failures. The Bureau took action to ensure that the appropriate Regional Offices were made aware of the incidents. The review team determined that the Bureau’s responses to incidents were thorough, complete, and comprehensive in 7 of the 10 incidents reviewed. In those seven cases, the Bureau dispatched inspectors to the site when the possibility of an immediate threat to public health and safety existed. The review team noted that the Bureau identified the causes of the incidents, reviewed corrective actions and the preventive measures to avoid similar events. Also, at the conclusion of investigations, inspectors generated narrative reports that thoroughly documented the investigations.
For 3 cases reviewed, the Bureau’s response was not comprehensive or sufficient to determine root causes, contributing factors and/or preventive measures to avoid similar events. Two of the three incidents involved industrial radiography source retraction problems, while the other incident involved a contaminated package during transport. While the decision to conduct an onsite investigation is at the discretion of the Bureau and based on the significance of the event, the review team noted that the Bureau did not conduct onsite incident investigations for the two events involving industrial radiography source retraction problems because (1) for one of the two events, the Bureau had conducted a routine inspection of the licensee five days before the event and the licensee provided a detailed report of the event; and (2) for the other event, the source was secured, and the associated radiography equipment was repaired and placed back into service. The Bureau did not conduct an onsite incident investigation for the event involving the contaminated package because the shipper verified that there was no contamination at its facilities. Although the Bureau reviewed and documented each of these three incidents, it did not fully investigate in order to identify the event root cause, event contributing factors, or preventive measures to avoid a similar event. For two of the events, the Bureau conducted inspections some months afterward; however, those inspections did not include followup of the reported events.

Based on the potential issues involved with insufficient followup of the two industrial radiography source retraction events reviewed, the review team reviewed casework for five additional radiography events reported to NRC during the review period which involved source retraction issues. Based on the information provided in NMED, the review team determined that the Bureau conducted appropriate followup to these five events, including determination of root causes and preventive measures to avoid similar events. The IMPEP team determined that the Bureau followed its incident response procedures, and Bureau actions were appropriate, well-coordinated, and timely in most instances.

While timeliness of reporting incidents has improved overall, notifications to NRC were still late during the review period. In addition, communication of incidents from the Central Office to the Regions improved, and incident investigations were typically thorough, complete and comprehensive, but the exceptions noted above. Due to these issues, the review team determined that continued focus is needed on the Commonwealth’s incident response program and the recommendation from the previous IMPEP should remain open. Therefore, the review team recommended, and the MRB agreed, that the Commonwealth continue to strengthen its incident response program to ensure that incidents are appropriately investigated and are promptly reported to NRC, as appropriate.

In evaluating the effectiveness of the Bureau’s response to allegations, the review team evaluated the casework for nine allegations. The review team concluded that the Bureau consistently took prompt and appropriate action in response to concerns raised. The review team noted that the Bureau thoroughly documented the investigations and retained all necessary documentation to appropriately close the allegations. The Bureau notified the allegers of the conclusion of the investigations. The review team determined that the Bureau adequately protected the identity of allegers.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Pennsylvania’s performance with respect to the indicator, Technical Quality of Incident and Allegation Activities, be found satisfactory.
4.0 NON-COMMON PERFORMANCE INDICATORS

Four non-common performance indicators are used to review Agreement State programs: (1) Compatibility Requirements, (2) Sealed Source and Device Evaluation Program, (3) Low-Level Radioactive Waste Disposal Program, and (4) Uranium Recovery Program. NRC's Agreement with Pennsylvania does not relinquish regulatory authority for a sealed source and device evaluation, low-level radioactive waste disposal or uranium recovery program; therefore, only the first non-common performance indicator for Compatibility Requirements applied to this review.

4.1 Compatibility Requirements

4.1.1 Legislation

Pennsylvania became an Agreement State on March 31, 2008. Legislative authority to create a radiation control program and enter into an Agreement with NRC is granted in the Pennsylvania Statutes, Radiation Protection Act (Act 1984-147), as amended. The Bureau is designated the Commonwealth’s radiation control program and implements the Agreement State program. There have been no changes since the effective date of the Agreement. Pennsylvania regulations are not subject to sunset laws.

4.1.2 Program Elements Required for Compatibility

The Commonwealth’s regulations for control of radiation are located in the Pennsylvania Code, Title 25, Article V, Chapters 214-240, and apply to all ionizing radiation, whether emitted from radioactive materials or produced by machines. Pennsylvania requires a license for the use, manufacture, production, transport, transfer, receipt, acquisition, possession, ownership and disposal of radiation sources. Pennsylvania also requires the registration of radiation-producing machines and radiation-producing machine service providers.

The review team evaluated the Bureau’s response to the questionnaire, reviewed the status of regulations required to be adopted the Commonwealth under the Commission’s adequacy and compatibility policy, and verified the adoption of regulations with data obtained from the State Regulation Status Sheet that FSME maintains. Current NRC policy requires that Agreement States adopt certain equivalent regulations or legally binding requirements no later than three years after the effective date of NRC’s regulations. The Commonwealth adopts NRC regulations by reference and uses Orders or legally binding requirements such as license conditions as appropriate. Pennsylvania regulations “point” to the NRC regulations so that if the NRC develops a new regulation section, such as the requirements for physical protection of byproduct materials in 10 CFR Part 37, Pennsylvania must create a new section in its regulations which points to the NRC part. The Program is currently working on creating this new pointer to Part 37 as part of a larger amendment package and expects to meet the due date of March 19, 2016, for Agreement State adoption. The Pennsylvania regulatory process typically takes approximately two years to complete, which includes two rounds of review and public comment.
Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Pennsylvania’s performance with respect to the indicator, Compatibility Requirements, be found satisfactory.

5.0 SUMMARY

As noted in Sections 3.0 and 4.0 above, Pennsylvania’s performance was found satisfactory for all six performance indicators reviewed. The review team did not make any new recommendations, but determined that the recommendation from the 2009 IMPEP review should be kept open.

Accordingly, the review team recommended, and the MRB agreed, that the Pennsylvania Agreement State Program be found adequate to protect public health and safety and compatible with the NRC’s program. Based on the results of the current IMPEP review, the review team recommended, and the MRB agreed, that the next full IMPEP review take place in approximately five years and periodic meeting in one year.

Below is the review team’s recommendation, as mentioned in the report, for evaluation and implementation by the Commonwealth:

RECOMMENDATION

1. The review team recommends that the Commonwealth strengthen its incident response program to ensure that incidents are appropriately investigated and are promptly reported to NRC, as appropriate. (Section 3.5; kept open from 2009 IMPEP review)
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# APPENDIX A

## IMPEP REVIEW TEAM MEMBERS

<table>
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| Bryan Parker, Region III    | Team Leader  
|                             | Status of Materials Inspection Program                     |
| Donna Janda, Region I       | Technical Staffing and Training  
|                             | Compatibility Requirements  
|                             | Inspector Accompaniments                                   |
| Craig Gordon, Region I       | Technical Quality of Licensing Actions  
|                             | Inspector Accompaniments                                   |
| Robert Gattone, Region III  | Technical Quality of Incident and Allegation Activities    |
| David Turberville, State of Alabama | Technical Quality of Inspections                       |
The Governor's Cabinet oversees the directors of various state agencies. These directors, appointed by the Governor and confirmed by the Senate, each Secretary is responsible for the oversight of their agency. An equally important responsibility of all Cabinet members is advising the Governor on subjects related to their respective agencies.

**GOVERNOR'S CABINET OFFICIALS**

The Governor's Cabinet includes the director of various state agencies. These directors, appointed by the Governor and confirmed by the Senate, each Secretary is responsible for the oversight of their agency. An equally important responsibility of all Cabinet members is advising the Governor on subjects related to their respective agencies.

- Jim Cawley, Lieutenant Governor
- C. Alan Walker, Secretary of Community and Economic Development
- Brian Duke, Secretary of Aging
- James D. Schultz, General Counsel
- Michael F. Cowdine, Insurance Commissioner
- John Wetzel, Secretary of Corrections
- Barry J. Schoch, P.E., Secretary of Transportation
- Carol Aichele, Secretary of the Commonwealth
- Sheri Phillips, Secretary of General Services
- Ellen Feretti, Acting Secretary of Conservation and Natural Resources (SCNR)
- Glenn Cannon, Pennsylvania Emergency Management Agency Director
- Michael Wolf, Secretary of Health
- Glenn Meck, Secretary of Education
- Charles Zogby, Secretary of the Budget
- E. Christopher Abruzzo, Acting Secretary of Environmental Protection
- Frank Noonan, State Police Commissioner
- Michael A. Sprow, Inspector General
- Beverly Macketh, Secretary of Public Welfare
- Julia K. Heathway, Secretary of Labor & Industry
- George Greig, Secretary of Agriculture
- Daniel P. Reeser, Secretary of Revenue
- Major General Wesley Craig, Adjutant General of Military & Veterans Affairs
- Kelly Powell Logan, Secretary of Administration
- Carolyn C. Dumas, Acting Secretary of Education
- Gary Tennis, Secretary of Drug and Alcohol Programs
# Radiation Protection Program

## Director's Office

**David J. Allard, CHF, Director**

### Central Office

**Harrisburg, PA**

**Telephone:** 717-787-2480

---

## Radon

**Telephone:** 717-783-3594

**R. Lewis**

Program Manager

<table>
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<tr>
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## Radiation Control

**Telephone:** 717-787-3720

**J. Meline**

Program Manager

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## Decommissioning & Environmental Surveillance

**Telephone:** 717-787-2480

**R. Mauer, PE**

Program Manager

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## Nuclear Safety

**Telephone:** 717-787-2163

**R. Jarrett**

Program Manager

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<td>B. Feller, PE, NS9</td>
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<td>M. Murphy, NS5</td>
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<td>L. Ryan, NS5</td>
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<td>L. Winker, NS3</td>
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## Regional Offices

### Southeast Regional Office

**Norristown, PA**

**Telephone:** 484-250-5950

**T. Deshner**

Program Manager

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<th>EP Compliance Specialist</th>
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<td>R. Croll</td>
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### Southwest Regional Office

**Pittsburgh, PA**

**Telephone:** 412-442-4000

**D. Shearer**

Program Manager

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<td>J. Hrubik</td>
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## Updated September 2013

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### Administrative and Clerical Support

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### Director's Office and IT Support
APPENDIX C

INSPECTION CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS.

File No.: 1
Licensee: Wilkes-Barre General Hospital
Inspection Type: Routine, Unannounced with IC
Inspection Date: 8/24/11
License No.: PA-011A
Priority: 2
Inspectors: BR, TD, MH

File No.: 2
Licensee: Temple University
Inspection Type: Routine, Unannounced with IC
Inspection Dates: 6/4-7, 12/12
License No.: PA-0134
Priority: 2
Inspectors: JK, FC, EC

File No.: 3
Licensee: Westmoreland Hospital
Inspection Type: Routine, Unannounced
Inspection Date: 7/17/13
License No.: PA-0084
Priority: 3
Inspectors: CR, DM

File No.: 4
Licensee: Columbia Inspection Services, Inc.
Inspection Type: Routine, Announced
Inspection Date: 8/21/12
License No.: PA-0792
Priority: 5
Inspectors: FP, GH

File No.: 5
Licensee: Valley Inspection Service
Inspection Type: Routine, Announced with IC
Inspection Date: 11/10/11
License No.: PA-1186
Priority: 1
Inspector: RC

File No.: 6
Licensee: Certified Testing Laboratories, Inc.
Inspection Type: Routine, Announced
Inspection Date: 12/10/12
License No.: PA-0430
Priority: 1
Inspectors: FD, FP

File No.: 7
Licensee: Universal Well Services
Inspection Type: Initial, Unannounced
Inspection Date: 8/21&23/12
License No.: PA-1446
Priority: 5
Inspectors: CR, CS

File No.: 8
Licensee: Triad Isotopes
Inspection Type: Routine, Unannounced
Inspectors: CR
Inspection Date: 10/12-13/11
License No.: PA-0479
Priority: 2
File No.: 9  
Licensee: York Hospital  
Inspection Type: Routine, Unannounced  
Inspection Date: 1/25-26/12  
License No.: PA-0010  
Priority: 2  
Inspectors: FP, FD, MF

File No.: 10  
Licensee: Penn State Hershey Medical Center  
Inspection Type: Routine, Unannounced  
Inspection Date: 1/19-20/11  
License No.: PA-0127  
Priority: 2  
Inspectors: GD, FD

File No.: 11  
Licensee: Good Samaritan Health System  
Inspection Type: Routine, Unannounced  
Inspection Date: 3/24/10  
License No.: PA-0222  
Priority: 3  
Inspector: JD

File No.: 12  
Licensee: Halliburton Energy Services  
Inspection Type: Routine, Unannounced  
Inspection Date: 1/09/13  
License No.: PA-1389  
Priority: 3  
Inspectors: CS, CR

File No.: 13  
Licensee: Professional Service Industries  
Inspection Type: Routine, Unannounced with IC  
Inspection Date: 12/20/12  
License No.: PA-0281  
Priority: 1  
Inspectors: DS, DM

File No.: 14  
Licensee: Forbes Hospital  
Inspection Type: Routine, Unannounced  
Inspection Date: 06/12/13  
License No.: PA-0350  
Priority: 3  
Inspectors: DW, DM, BB

File No.: 15  
Licensee: H & H X-Ray Services  
Inspection Type: Routine, Unannounced with IC  
Inspection Date: 4/4/11  
License No.: PA-1124  
Priority: 1  
Inspector: CR

File No.: 16  
Licensee: Duraloy Technologies  
Inspection Type: Routine, Unannounced with IC  
Inspection Date: 9/12/13  
License No.: PA-1281  
Priority: 1  
Inspector: JH

File No.: 17  
Licensee: Avid Radiopharmaceuticals, Inc.  
Inspection Type: Special  
Inspection Date: 7/19/13  
License No.: PA-0988  
Priority: 5  
Inspectors: EC, MH
### File No.: 18
- **Licensee:** Best Theratronics, LTD
- **License No.:** PA-R0063
- **Inspection Type:** Routine, Unannounced (Reciprocity)
- **Priority:** 2
- **Inspection Date:** 4/13/13
- **Inspectors:** SB, MH, NN

### File No.: 19
- **Licensee:** Baker Hughes Oilfield Operations, Inc.
- **License No.:** PA-R0098
- **Inspection Type:** Routine, Unannounced (Reciprocity)
- **Priority:** 3
- **Inspection Date:** 4/21/10
- **Inspectors:** RC, BR

### File No.: 20
- **Licensee:** Chase Environmental Group, Inc.
- **License No.:** PA-R0187
- **Inspection Type:** Routine, Unannounced
- **Priority:** 3
- **Inspection Date:** 10/28/13
- **Inspector:** CR

### File No.: 21
- **Licensee:** Lionville Laboratory
- **License No.:** PA-1046
- **Inspection Type:** Special
- **Priority:** D
- **Inspection Date:** 7/31/13
- **Inspectors:** CO, LF, BW

### File No.: 22
- **Licensee:** Dickenson College
- **License No.:** PA-0381
- **Inspection Type:** Special
- **Priority:** 5
- **Inspection Date:** 12/04/12
- **Inspector:** CO

#### INSPECTOR ACCOMPANIMENTS

The following inspector accompaniments were performed prior to the on-site IMPEP review:

- **Accompaniment No.: 1**
  - **Licensee:** UPMC Altoona
  - **License No.:** PA-0016
  - **Inspection Type:** Routine, Unannounced
  - **Priority:** 2
  - **Inspection Date:** 9/4/13
  - **Inspector:** FD

- **Accompaniment No.: 2**
  - **Licensee:** Pinnacle Health Hospitals
  - **License No.:** PA-0037
  - **Inspection Type:** Routine, Unannounced
  - **Priority:** 3
  - **Inspection Date:** 9/6/13
  - **Inspector:** MF

- **Accompaniment No.: 3**
  - **Licensee:** Vantage Exton Radiation Oncology, LLC
  - **License No.:** PA-1058
  - **Inspection Type:** Routine, Unannounced
  - **Priority:** 2
  - **Inspection Date:** 9/11/13
  - **Inspector:** EC
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# APPENDIX D

## LICENSE CASEWORK REVIEWS

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File No.: 27
Licensee: Cardiovascular Disease Specialists  License No.: PA-1478
Type of Action: New  Amendment No.: New
Date Issued: 9/30/13  License Reviewers: RW/JC

File No.: 28
Licensee: Abington Memorial Hospital  License No.: PA-0055
Type of Action: Renewal  Amendment No.: 27
Date Issued: 6/7/11  License Reviewers: DK/JC

File No.: 29
Licensee: Lockheed Martin  License No: PA-1099
Type of Action: Amendment  Amendment No.: 3
Date Issued: 3/7/12  License Reviewers: RK/JC
APPENDIX E

INCIDENT CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1
Licensee: Jeff Zell Consulting
Date of Incident: 9/8/09
Investigation Date: 1/15/10
License No.: PA-37-28531-01
NMED Log No.: 100029
Type of Incident: Lost Material
Type of Investigation: Site

File No.: 2
Licensee: University of Pennsylvania
Date of Incident: 1/21/10
Investigation Dates: 3/4, 4/26-27, and 11/08/10
License No.: PA-0131
NMED Log No.: 100085
Type of Incident: Medical Event
Type of Investigation: Site

File No.: 3
Licensee: Hillis-Carnes Engineering Associates
Date of Incident: 5/24/10
Investigation Date: 5/25/10
License No.: PA-1366
NMED Log No.: 100273
Type of Incident: Lost Material
Type of Investigation: Site

Comment: The Bureau did not report this incident to the NRC Headquarters Operations Center timely (approximately one day late); however, the Pennsylvania State Police reported the incident to the NRC Headquarters Operations Center on the date of the incident.

File No.: 4
Licensee: Lancaster General Hospital
Date of Incident: 6/3/10
Investigation Date: 6/21/10
License No.: PA-0233
NMED Log No.: 100314
Type of Incident: Medical Event
Type of Investigation: Site

File No.: 5
Licensee: University of Pennsylvania
Date of Incident: 7/7/10
Investigation Date: 8/4/10
License No.: PA-0131
NMED Log No.: 100371
Type of Incident: Medical Event
Type of Investigation: Site
Incident Casework Reviews

File No.: 6
Licensee: Geisinger Health System  
License No.: PA-0006
Date of Incident: 3/1/11  
NMED Log No.: 110135
Investigation Date: 3/2/11  
Type of Incident: Contaminated
Pkg.  
Type of Investigation: Phone

Comments:

(1) The Bureau did not report this incident to the NRC Headquarters Operations Center; however, it emailed information about the event to NMED on the day it was notified of the event.

(2) The Bureau did not adequately review the cause of the incident.

File No.: 7
Licensee: Non-Destructive and Visual Inspection  
License No.: PA-1413
Date of Incident: 10/28/11  
NMED Log No.: 110569
Investigation Date: 11/03/11  
Type of Incident: Overexposure
Type of Investigation: Site

File No.: 8
Licensee: E & I Hawaii  
License No.: PA-1080
Date of Incident: 9/19/12  
NMED Log No.: 120636
Investigation Date: 9/19/12  
Type of Incident: Equipment Failure
Type of Investigation: Phone

Comments:

(1) The Bureau did not report this incident to the NRC Headquarters Operations Center timely (approximately one month late).

(2) The Bureau did not adequately review the cause of the incident.

File No.: 9
Licensee: Earth Engineering, Inc.  
License No.: PA-1040
Date of Incident: 10/26/12  
NMED Log No.: 120676
Investigation Date: 11/01/12  
Type of Incident: Theft of Material
Type of Investigation: Site

Comment: The Bureau did not report this incident to the NRC Headquarters Operations Center timely (approximately one week late).
Comments:

(1) The Bureau did not report this incident to the NRC Headquarters Operations Center timely (approximately three months late).

(2) The Bureau did not adequately review the cause of the incident.
ATTACHMENT

March 19, 2014 letter from David J. Allard
Pennsylvania’s Response to the Draft Report
ADAMS Accession No.: ML14080A226
March 19, 2014

Mr. Bryan Parker
U.S. Nuclear Regulatory Commission
4613 Quail Point Drive
Flowery Branch, GA 30542

Dear Mr. Parker:

We appreciate the opportunity to have had you and your NRC Integrated Materials Performance Evaluation Program (IMPEP) team review the Commonwealth of Pennsylvania’s Agreement State (AS) Program over the past several months, and you forwarding on the draft summary report for comment.

We concur the report is factually accurate; and most importantly, that our AS Program is as best as the NRC can rate, i.e., “Satisfactory and Compatible.” However, we would like to address some of the results from the report.

First and foremost, as we discussed during the onsite portion of the review, the Bureau of Radiation Protection (BRP) is concerned with a potential vulnerability with our AS Program staffing. As noted in the report, during the review period our staff levels during the review period were “satisfactory.” What isn’t captured in the report are the current difficulties and restrictions in hiring new staff in order to keep up with simple attrition. This is worrisome to my managers and myself. We would again note the many open AS positions flagged during the formal IMPEP review, as well as the two highlighted retirements expected later in 2014.

Related to staffing, the draft report states on page 3, second full paragraph “a total of 19 individuals left the program, including 6 managers, and 12 individuals were hired, including 2 managers…” This statement may be true but it is general and we would like to discuss the specifics during the Management Review Board (MRB) meeting.

In response to the Technical Quality of Incident and Allegation Activities indicator, the BRP wishes to formally note the complete turnaround in our performance regarding this indicator compared to our first IMPEP in 2009. At that time, we lacked the training necessary to fully implement the duties and understand the importance of the notification process. We believe the program staff continues to grow in knowledge and understanding of the full impact of this indicator, and have vastly improved since 2009. It should also be noted that of the 10 examples reviewed during this IMPEP, five were from the 2010 time period. This was shortly after our first IMPEP and the time period when we instituted new responsibilities and actions in order to respond to the incident / allegation “recommendation” made in 2009. It was also the year we received formal NMED training from the Idaho National Laboratory NMED group.
We do agree with the current “reporting and follow-up recommendation” and fully understand this will be an important ongoing goal to correct moving ahead. Regarding the HOO report identified during the IMPEP briefing, BRP did forward the report on February 25, 2014. In addition, after our IMPEP review was completed, the staff took the initiative to reevaluate all NMED reports submitted during the review period. One additional event was discovered that required a HOO notification and consequently was submitted. We have amended our incident / event tracking system, and missed HOO reports should not happen in the future.

As always it was a pleasure working with an NRC IMPEP Team. We always take advantage of these reviews as an opportunity to gain experience from other NRC and AS staff. Clearly this IMPEP will help Pennsylvania maintain its “Satisfactory and Compatible” rating as an Agreement State in years to come, and close the ongoing “reporting and follow-up recommendation.”

We look forward to seeing you and other members of the IMPEP team at the MRB meeting in Rockville, MD on April 3, 2014.

Sincerely,

[Signature]

David J. Allard, CHP
Director,
Bureau of Radiation Protection

cc: Donna Janda, NRC R1
    PA RP Program Managers