

INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM
QUESTIONNAIRE

Wisconsin

Reporting Period: **August, 2009 through June 30, 2014**

Note: If there has been no change in the response to a specific question since the last IMPEP questionnaire, the State or Region may copy the previous answer, if appropriate.

A. GENERAL

1. Please prepare a summary of the status of the State's or Region's actions taken in response to each of the open recommendations from previous IMPEP reviews.

a) Per letter dated 10/31/09 addressed to Tom Sieger and referencing the attached IMPEP report, Wisconsin was found to be "adequate and compatible". Per IMPEP MRB meeting on 11/21/11, Wisconsin's IMPEP will be scheduled for 2014 (5 years from the previous one in 2009).

b) Per letter dated 7/14/10 concerning the review of the final revision of DHS 157, NRC made seven comments. These comments will be addressed the next time the Rule is revised.

Note: These letters are in the NRC Reviews 157/IMPEP Notebook.

B. COMMON PERFORMANCE INDICATORS

I. Technical Staffing and Training

2. Please provide the following organization charts, including names and positions:

(a) **A chart showing positions from the Governor down to the Radiation Control Program Director;**

(b) **A chart showing positions of the radiation control program, including management; and**

(c) Equivalent charts for sealed source and device evaluation, low-level radioactive waste and uranium recovery programs, if applicable. **N/A**

¹ Estimated burden per response to comply with this voluntary collection request: 53 hours. Forward comments regarding burden estimate to the Records Management Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (3150-0183), Office of Management and Budget, Washington, DC 20503. If an information collection does not display a currently valid OMB control number, NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

2. Please provide a staffing plan, or complete a listing using the suggested format below, of the professional (technical) full-time equivalents (FTE) applied to the radioactive materials program by individual. Include the name, position, and, for Agreement States, the fraction of time spent in the following areas: administration, materials licensing & compliance, emergency response, low-level radioactive waste, uranium recovery, other. If these regulatory responsibilities are divided between offices, the table should be consolidated to include all personnel contributing to the radioactive materials program.

<u>Name</u>	<u>Position</u>	<u>Area of Effort</u>	<u>FTE%</u>
Cheryl Rogers	MPS	Supervisory	100
Dan Stefanek	NE Adv	Training	50
Megan Shoher	NE Adv	Lic. & Insp.	100
Vacant	NE Sr	Lic. & Insp.	50
Emily Eggers	NE Sr	Lic. & Insp.	100
Mark Paulson	NE Sr	Lic. & Insp.	100
Krista Kuhlman	NE Sr	Lic. & Insp.	100
Lauren Ernest	NE	Lic. & Insp.	100
Kyle Walton	NE	Lic. & Insp.	100
Andrew Turner	NE	Lic. & Insp.	100
Susan Hagstrom	OPA	Admin.	50
Priscilla Sarow	LPPA-B	Admin.	100
Vacant	NE Sr	D&D/Termination	25

3. If consultants were used to carry out the program's radioactive materials responsibilities, include their efforts. The table heading should be:

<u>Name</u>	<u>Position</u>	<u>Area of Effort</u>	<u>FTE%</u>
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4. Please provide a listing of all new professional personnel hired into your radioactive materials program since the last review, indicate the date of hire; the degree(s) they received, if applicable; additional training; and years of experience in health physics or other disciplines, as appropriate.

Kyle Walton	11/19/2012	BS: Nuclear Engineering
Andrew Turner	01/14/2013	BS: Nuclear Engineering
Lauren Ernest	01/03/2012	BS: Nuclear Medicine Technology
Shunlai Zhu	11/23/2009	MS: Civil Engineering
Emily Eggers	03/29/2010	BS: Nuclear Medicine Technology
Mark Paulson	03/29/2010	BS: Nuclear Engineering
Royston Ngwayah	09/27/2010	BS: Nuclear Engineering
Krista Kuhlman	10/12/2010	BS: Nuclear Medicine Technology

5. Please list all professional staff who have not yet met the qualification requirements for a radioactive materials license reviewer or inspector. For each, list the courses or equivalent training/experience they need and a tentative schedule for completion of these requirements.

Lauren Ernest: Security-2014-15 (for NE Sr.)
Kyle Walton: Inspections & Nuclear Medicine-2014, Security-2015(for NE Sr.)
Andrew Turner: Inspections, Licensing, Nuclear Medicine &

Brachytherapy/Gamma Knife-2014-2015

6. Identify any changes to your qualification and training procedure that occurred during the review period.

RMPP 6.01 was revised to add training for Nuclear Engineer Sr. The additional courses include NRC's Root Cause, Security, and HP Technology.

The areas of qualification were revised to:

Medical: (02210)-new
Nuclear Pharmacy: (02500)
HDR/Gamma Knife: (02230/02310)
Industrial Radiography: (03310)
Medical Institution-Broad: (02110) and
Increased Controls: Inspection only-new.

7. Please identify the technical staff that left your radioactive materials program during the review period and indicate the date they left.

Chris Timmerman 6/27/14
Paul Caleb: 3/15/12
Kurt Pedersen: 8/31/12
Royston Ngwayah: 11/16/12
Shunlai Zhu: 4/11
Paul Caleb: 7/10
Diana Sulas: 6/10
Leola DeKock: 11/09

8. List any vacant positions in your radioactive materials program, the length of time each position has been vacant, and a brief summary of efforts to fill the vacancy. **New vacancy for 50% position (former employee Chris Timmerman)-last day 6/27/14**
9. For Agreement States, does your program have an oversight board or committee which provides direction to the program and is composed of licensees and/or members of the public? If so, please describe the procedures used to avoid any potential conflict of interest. **N/A**

II. Status of Materials Inspection Program

10. Please identify individual licensees or categories of licensees the State is inspecting less frequently than called for in NRC's Inspection Manual Chapter (IMC) 2800 and explain the reason for the difference. The list only needs to include the following information: license category or licensee name and license number, your inspection interval, and rationale for the difference. **N/A**
11. Please provide the number of routine inspections of Priority 1, 2, and 3 licensees, as defined in IMC 2800 and the number of initial inspections that were completed during each year of the review period.

	I	II	III	Initial
2009 (2nd 1/2)	18	1	22	3

2010	26	6	15	6
2011	19	5	29	10
2012	20	2	41	11
2013	31	16	7	4
2014 (1st 1/2)	13	3	6	3

12. Please submit a table, or a computer printout, that identifies inspections of Priority 1, 2, and 3 licensees and initial inspections that were conducted overdue.

8/09-12/10: 8 inspections were conducted overdue by NRC inspection frequencies: 4 Industrial Radiography, 3 Medicals-including 1 Broadscope that was only 1 day beyond the 90 days, and one "other" (WRT).

2011: Three initial inspections were conducted more than 1 year after the license was issued:

Wolf Paving Co. (Portable Gauge) was conducted 8 days late.

Gunderson Clinic (R & D) was conducted 11 months late-no RM

A & A Environmental (XRF) was conducted 5 months late.

2011: The table below shows 5 routine inspections that were conducted overdue:

Lic. Name	Lic. No	Priority	Last Insp	Date Due	Date Perf	Amt of Time overdue	Date Inspection Findings Issued
Team Industrial Services, Inc.*	079-2005-01	1**	7/23/09	7/1/10	8/25/11 & 11/30/11	420 days	12/21/11
Wisconsin Medical Cyclotron, LLC	079-1366-01	1**	8/20/10	8/1/11	12/9/11	130 days	12/16/11
Nuclear Medicine Center	079-1213-01	3***	7/02/08	7/1/10	6/16/11	350 days	7/08/11
Berlin Memorial Hospital	047-1036-01	3***	8/14/07	8/1/10	7/11/11	344 days	8/04/11
Alliance HealthCare Services, Inc.	133-2024-01	3***	1/15/09	1/1/11	10/19/11	291 days	11/04/11
Community Memorial Hospital-Oconto Falls	083-1068-01	3***	02/07/08	2/1/11	11/9/11	281 days	12/05/11

*Inspection due date for Team Industrial Services, Inc was incorrectly entered into RAMPROD ** Priority 1s conducted more than 3 mos. (90 days) after due date are considered overdue.

***Priority 3s conducted more than 9 mos. (270 days) after due date are considered overdue.

2012: One initial inspection was conducted more than 1 year after the license was issued:

United Engineering Consultants, Inc. (Portable Gauge) was conducted 1092 days after issuing license. The licensee never received a portable gauge therefore the license was terminated on 4/13/2012.

The table below shows 2 routine inspections that were conducted overdue:

Lic. Name	Lic. No	Priority	Last Insp	Date Due	Date Perf	Amt of Time overdue ♦	Date Inspection Findings Issued
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Medi-Physics Inc.	079-1168-01	1 %	10/14/11	10/1/12	1/8/13	99 days (HDR)	1/24/13
Waukesha Memorial Hospital	079-1285-01	1 ^	10/7/10	10/1/11	1/19/11	110 days (HDR)	2/7/12
St. Vincent Hospital	009-1303-01	1 \$	9/10/10	9/1/11	2/23/12	175 days (HDR)	3/14/12
RAM Services Incorporated	071-1234-01	2 *	5/10/10	5/1/12	11/13/12	196 days	12/4/12
Wheaton Franciscan Healthcare – St. Francis, Inc.	079-1285-01	3 **	11/11/08	11/1/11	10/2/12	336 days	10/29/12

- ◆ HDRs are required to be inspected on an annual basis for the Department compared to the 2 year requirement by the NRC.
- % Inspection due date for Medi-Physics Inc. was incorrectly entered into RAMPROD due a reactive inspection was performed on 3/27/12.
- ^ Inspection performed at Waukesha Memorial Hospital was performed overdue due to waiting for an HDR procedure to be observed.
- \$ The routine inspection date was incorrectly entered into RAMPROD database due to 2 reactive inspections were performed on 2/3/11 & 6/14/11 that resulted in Medical Events.
- * Priority 2s conducted more than 6 mos. (180 days) after the due date are considered overdue.
- ** Priority 3s conducted more than 9 mos. (270 days) after due date are considered overdue.

2013: Table: no inspection conducted overdue by “amount of time from previous inspection”

Lic. Name	Lic. No	Priority	Last Insp Date	Date Due	Date Perf	Amt of Time overdue ◆	Date Inspection Findings Issued
Novelos Therapeutics, Inc.*	025-1065-02	I	3/14/12	3/1/13	6/14/13	105 days (actually 90 days)	6/18/13
Aspirus-Wausau**	073-1342-01	III, then I	9/9/11	4/1/13	7/11/13	101 days	7/24/13
Twin Ports Testing, Inc.***	031-1317-02	I	11/26/12	5/1/13	9/11/13	133 days	10/03/13

- * Licensee only receives RM once a week.
- ** Re-assigned Priority I code, was a Priority III (added an HDR-inspection is due 3/14)
- *** Inspection frequency was reduced for field to 5/13, field actually conducted 9/11/13 (< 1 year)

2014: One inspection, NDT Specialists-Priority I, conducted overdue by 6 days. RML No. 079-1199-01

At a minimum, the list should include the following information for each inspection that was conducted overdue during the review period:

- (1) Licensee Name
- (2) License Number
- (3) Priority (IMC 2800)
- (4) Last inspection date or license issuance date, if initial inspection
- (5) Date Due
- (6) Date Performed
- (7) Amount of Time Overdue

(8) Date inspection findings issued

13. Please submit a table or computer printout that identifies any Priority 1, 2, and 3 licensees and initial inspections that are currently overdue, per IMC 2800. At a minimum, the list should include the same information for each overdue inspection provided for Question 12 plus your action plan for completing the inspection. Also include your plan for completing the overdue inspections.

2014: Table: no routine inspection conducted overdue by “amount of time from previous inspection”. One initial inspection (XRF) will slightly exceed one year.

Lic. Name	Lic. No	Priority	Last Insp Date	Date Due	Plan for completion
Waukesha Memorial Hospital*	133-1339-01	I	03/27/13	03/01/13	HDR inspection-Wi inspects annually
University of WI-Madison**	025-1323-01	II	Initial	06/01/13	Received RM on 6/8/14 (View Ray medical unit)
Aurora Health Metro***	079-1028-01	II	Initial-new technology	12/01/13	No use (new tech)yet-conduct after 6/24/14
Lead Safe Services****	139-1154--01	V	2/26/08	2/01/13	Will terminate, XRF disposed of
CR-Social Development Commission*****	079-2045-01	V	Initial	6/21/14	Scheduled for 7/8/14

14. Please provide the number of reciprocity licensees that were candidates for inspection per year as described in IMC 1220 and indicate the number of reciprocity inspections of candidate licensees that were completed each year during the review period.

Calendar Year 2014 1 st 1/2		Candidates for Inspection	Inspections Performed
I	40%	5	2
IA	75%	4	3
II	66%	3	2
III	0%	1	0
V	8.0%	12	1
Calendar Year 2013		Candidates for Inspection	Inspections Performed
I	66%	6	4
IA	100%	5	5
II	0%	3	0
III	0%	1	0
V	9%	22	2

Calendar Year 2012	Candidates for Inspection	Inspections Performed

I	25%	8	2
IA	100%	3	3
II	60%	5	3
III	0%	1	0
V	5.8%	17	1
Calendar Year 2011		Candidates for Inspection	Inspections Performed
I	50%	6	3
IA	100%	4	4
II	75%	4	3
III	0%	1	0
V	0%	20	0
Calendar Year 2010		Candidates for Inspection	Inspections Performed
I	40%	5	2
IA	100%	4	4
II	0%	4	0
III	0%	2	0
V	0%	23	0
Calendar Year 2009		Candidates for Inspection	Inspections Performed
I	20%	5	1
IA	100%	5	5
II	50%	4	2
III	0%	1	0
V	0%	14	0

III. Technical Quality of Inspections

15. What, if any, changes were made to your written inspection procedures during the reporting period? **Radioactive Materials Program Procedures (RMPPs) 3.03 and 3.05 were updated in 2014. New procedure 3.06 was developed in 2014 to address NSTS and Increased Controls inspections.**
16. Prepare a table showing the number and types of supervisory accompaniments made during the review period. Include:

<u>Inspector</u>	<u>Supervisor</u>	<u>License Category</u>	<u>Date</u>
Leola DeKock	Cheryl Rogers	Industrial Radiography	09/09/09
Kurt Pedersen	Cheryl Rogers	HDR	09/15/09
Megan Shober	Cheryl Rogers	Medical	09/16/09
Paul Caleb	Cheryl Rogers	Nuclear Pharmacy	10/15/09
Kurt Pedersen	Cheryl Rogers	Medical Broadscope	10/27/09
Shunlai Zhu	Cheryl Rogers	Research & Development	05/19/10
Chris Timmerman	Cheryl Rogers	Medical Broadscope	06/29/10
Emily Eggers	Cheryl Rogers	Research & Development	07/13/10
Chris Timmerman	Cheryl Rogers	HDR	07/14/10

Kurt Pedersen	Cheryl Rogers	Gamma Knife	07/22/10
Emily Eggers	Cheryl Rogers	Medical	08/17/10
Mark Paulson	Cheryl Rogers	Research & Development	09/01/10
Kurt Pedersen	Cheryl Rogers	Medical Broadscope	09/29/10
Megan Shober	Cheryl Rogers	Medical	10/07/10
Shunlai Zhu	Cheryl Rogers	Medical	10/20/10
Shunlai Zhu	Cheryl Rogers	Industrial Radiography	11/18/10
Mark Paulson	Cheryl Rogers	Medical	1/06/11
Emily Eggers	Cheryl Rogers	Nuclear Pharmacy	3/03/11
Mark Paulson	Cheryl Rogers	Medical Broad-Reactive	4/07/11
Royston Ngwayah	Cheryl Rogers	R & D	4/21/11
Krista Kuhlman	Cheryl Rogers	Medical	4/27/11
Royston Ngwayah	Cheryl Rogers	Portable Gauge	4/28/11
Megan Shober	Cheryl Rogers	Medical	5/04/11
Paul Caleb	Cheryl Rogers	Medical	6/14/11
Kurt Pedersen	Paul Caleb	Educational-Type B	7/20/11
Royston Ngwayah	Paul Schmidt	Portable Gauge	8/02/11
Emily Eggers	Cheryl Rogers	Ind. Rad.-Field (recip)	11/08/11
Mark Paulson	Cheryl Rogers	Ind. Rad-Office & Field	11/09/11
Chris Timmerman	Cheryl Rogers	Ind. Rad-Office & IC	11/30/11
Krista Kuhlman	Cheryl Rogers	Nuc. Pharm/M & D	12/01/11
Mark Paulson	Megan Shober	Medical	1/18/12
Royston Ngwayah	Cheryl Rogers	Medical	2/07/12
Mark Paulson	Cheryl Rogers	Nuclear Pharmacy	2/15/12
Emily Eggers	Cheryl Rogers	Medical	2/23/12
Krista Kuhlman	Cheryl Rogers	Nuclear Pharmacy	3/28/12
Royston Ngwayah	Cheryl Rogers	Ind. Radiography (Office)	4/10/12
Kurt Pedersen	Megan Shober	Medical	5/10/12
Lauren Ernest	Cheryl Rogers	XRF	5/15/12
Emily Eggers	Chris Timmerman	Broad Scope	6/05/12
Kurt Pedersen	Cheryl Rogers	R&D	6/28/12
Chris Timmerman	Cheryl Rogers	Portable Gauge	7/02/12
Megan Shober	Cheryl Rogers	Broad Scope	11/9/12
Krista Kuhlman	Cheryl Rogers	HDR	1/23/13
Lauren James	Cheryl Rogers	Nuclear Pharmacy	2/14/13
Chris Timmerman	Cheryl Rogers	Medical Broad	3/01/13
Krista Kuhlman	Cheryl Rogers	Industrial Radiography	3/14/13
Emily Eggers	Cheryl Rogers	HDR/Medical	3/27/13
Mark Paulson	Cheryl Rogers	HDR/Medical	4/04/13
Megan Shober	Cheryl Rogers	Medical Broad	8/15/13
Kyle Walton	Cheryl Rogers	Portable Gauge	7/24/13
Andrew Turner	Cheryl Rogers	Medical-Diagnostic	10/24/13
Lauren James	Cheryl Rogers	Ind. Rad-office/fixed	11/12/13
Emily Eggers	Cheryl Rogers	Increased Controls	11/12/13
Kyle Walton	Cheryl Rogers	Medical	2/26/14
Krista Kuhlman	Cheryl Rogers	HDR/Medical Broad	4/30/14
Mark Paulson	Chris Timmerman	HDR	4/30/14
Lauren James	Emily Eggers	Medical-New Tech	5/7/14
Andrew Turner	Cheryl Rogers	Portable Gauge-Reactive	5/28/14

17. Describe or provide an update on your instrumentation, methods of calibration, and laboratory capabilities. Are all instruments properly calibrated at the present time? Were there sufficient calibrated instruments available throughout the review period? **Yes**

Calibration: Instruments are calibrated annually by the manufacturer (Thermo-Electron or Ludlum). Sufficient calibrated instruments were available throughout the review period. A list of available instruments will be in the notebook available to the IMPEP Team during the on-site visit.

Wipes: The state Hygiene Lab has developed procedures to count wipes for H-3 and C-14 contamination for the radioactive materials program. A purchase order has been created to pay for the analysis.

Routine Use: The inspectors routinely use a Thermo Electron FH-40 GL (internal gas filled proportional detector). The meter is convenient to use because it can be used for a wide range of radiation measurements (1 uR/hr - 10 R/hr) or with the addition of a pancake GM detector (smart probe), it can be used for contamination surveys.

A Thermo Electron RO-20 Ion Chamber is available for use.

Several Ludlum Model 12s with pancake detector are available. These are used by emergency response field teams and for contamination surveys.

Five Ludlum 2401 EC are available and used for radiation measurements. These are useful for the industrial applications such as fixed gauges where access may be challenging. In addition these instruments are useful during portable gauge inspection since the instrument is similar or the same instrument being used by the licensee.

A Ludlum 2401-P is available for contamination detection. This instrument is small and portable.

Non-Routine Use: A Ludlum Model 12 with a beta-gamma "sandwich" detector (Model 44-21) is used for I-125 (low energy gamma) contamination surveys. A Ludlum Model 12 with a 100 cm² dual phosphor alpha/beta scintillator that is used for simultaneously counting alpha and beta contamination is available for use. A Thermo Electron E-600 with an external Pancake Probe (contamination) and Beta/Gamma 'Hotdog' probe (exposure) is available for use. A Ludlum Model 78 12 ft. Stretch scope for use with spent reactor or other high activity shipments.

Several Bicron microrem meters (solid scintillator) are available and used for radiation measurements. They have been replaced by Victoreen 451B (Ion chamber with a beta slide). We plan to keep all meters in calibration to accommodate the field teams.

Alarming Ratemeters: Nine different electronic dosimeters are available for use (4 SAIC PD-10i, 2 Thermo Electron Mod. 6100; 1 Canberra Mini-Radiac; and 2 NDS Products RA-500. (The RA-500s made by NDS Products are the same model used by industrial radiographers.)

Incident Response (including scrapyards): We have two identiFINDER NGs for field identification of radioactive materials. This is typically used for found radioactive materials at scrapyards.

IV. Technical Quality of Licensing Actions

18. How many specific radioactive material licenses does your program regulate at this time?
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19. Please identify any major, unusual, or complex licenses which were issued, received a major amendment, were terminated, decommissioned, submitted a bankruptcy notification or renewed in this period.
- **Unusual licensing actions:**
 - 2014: Medical College of WI (Broad-scope) Special license condition (time limited) for finding a new Radiation Safety Officer**
 - 2012: Northstar (R&D/Distribution), RAM Services (storing ORSP sources in transit for disposal), Materion (disposing of radioactive waste water) and UW-Madison (DOT exemption for contamination control)**
 - **Complex licensing actions:**
 - **2014: None to date**
 - **2013: UW Madison (View Ray) license amended for Co-60 possession and Increased Control License Condition added.**
 - **2012: UW-Madison (View-Ray)**
 - **2009-10: Celectar-authorized as a Nuclear Pharmacy for up to 30 Curies of I-131, CERAC-air monitoring evaluation and UW-Madison-exemption from public dose limits**
 - **Bankruptcies:**
 - **2014: None**
 - **2013: New Page**
 - **2012: Neenah Foundry Co. and J.T. Roofing Inc.**
 - **2011: New Page (undergoing re-organization), H. H. Holmes, Comprehensive Genetic Services, and J. T. Roofing.**
 - **Terminations:**
 - **2014: Albany International Corporation, Froedtert and the Medical College of WI, Lakeshore Lead Consulting, LLC, Institute for Environmental Assessment, Milwaukee Cardiovascular Center, S. C.**
 - **2013: Green Bay Packaging Inc., Thermo Fischer Scientific-Milwaukee LLC, Sanchez Painting Contractors, Terracon Consultants, Inc., City of Fond du Lac, Layne Christensen Company, Clark County Government, Curwood Inc., Milwaukee City, Mithridion, Inc., RIAD Restoration Services, Inc. (Administrative Action), Froedtert Physician Partners, Inc., Epicentre Technologies, and Cardinal Environmental**
 - **2012: Froedtert Physician Partners Inc.; Epicentre Technologies, Inc.; Cardinal Environmental; Ruekert & Mielke Inc.; Vierbicher Associates, Inc.; Eau Claire Heart Institute; RMT, Inc.; United Engineering Consultants; ECS Illinois, LLC.; H. H. Holmes Testing Laboratories; Allen-Bradley Company; and Wisconsin Heart S.C.**

- **2011: Comprehensive Genetic Services; discussed terminating the license with H. H. Holmes and J. T. Roofing moved and left no forwarding address**
20. Discuss any variances in licensing policies and procedures or exemptions from the regulations granted during the review period.
2011: Brachytherapy licensees with prostate programs were required to select medical event criteria. If the criteria was < 80% or > 130% it was accepted. The 130% was approved by Policy. A few licensees wanted more leeway and have a license condition that lets them go up to 150%.
- 2012: Medical licenses in the state have been allowed by license condition to use electronic signatures for procedures requiring a written directive.
 UW – Madison allowed for caregivers for adolescent patients to receive up to 2 Rem per license condition.**
21. What, if any, changes were made in your written licensing procedures (new procedures, updates, policy memoranda, etc.) during the reporting period?
RMPPs 2.02, 2.03 and 2.05 were updated in 2014
22. Identify by licensee name and license number any renewal applications that have been pending for one year or more. Please indicate why these reviews have been delayed and describe your action plan to reduce the backlog. **N/A**

V. Technical Quality of Incident and Allegation Activities

23. For Agreement States, please provide a list of any reportable incidents not previously submitted to NRC (See Procedure SA-300, *Reporting Material Events*, for additional guidance, OMB clearance number 3150-0178). The list should be in the following format:
Licensee Name License # Date of Incident/Report Type of Incident
N/A
24. Identify any changes to your procedures for responding to incidents and allegations that occurred during the period of this review. **Revised the following:**
RMPP 4.01 Management of Allegations (2/01/11)
RMPP 4.02 Radiological Incident Response (2/01/11)
RMPP 4.03 Scrap Yard Response (2/01/11)

C. **NON-COMMON PERFORMANCE INDICATORS**

I. Compatibility Requirements

25. Please list all currently effective legislation that affects the radiation control program. Denote any legislation that was enacted or amended during the review period.
Wisconsin Statutes
Chapter 254—Environmental Health
Subchapter III—Radiation Protection
Sections—254.31 through 254.45
26. Are your regulations subject to a "Sunset" or equivalent law? If so, explain and include the next expiration date for your regulations. **N/A**

27. Please review and verify that the information in the enclosed State Regulation Status (SRS) sheet is correct. For those regulations that have not been adopted by the State, explain why they were not adopted, and discuss actions being taken to adopt them. If legally binding requirements were used in lieu of regulations and they have not been reviewed by NRC for compatibility, please describe their use.

RATs ID sheet is up-to date.

28. If you have not adopted all amendments within three years from the date of NRC rule promulgation, briefly describe your State's procedures for amending regulations in order to maintain compatibility with the NRC, showing the normal length of time anticipated to complete each step.

WI Rule, DHS 157, was last updated in 2010. The Radiation Protection Section received permission to proceed with rule development this year and expect to be done within the next few years. The timing is uncertain as we are under new state requirements. WI submitted and received approval for a License Condition addressing the Part 37 requirements which can be implemented in March 2016 if the Rule is not final by that time.

II. Sealed Source and Device (SS&D) Evaluation Program **N/A**

29. Prepare a table listing new and amended (including transfers to inactive status) SS&D registrations of sources and devices issued during the review period. The table heading should be:

<u>SS&D Registry Number</u>	<u>Manufacturer, Distributor or Custom User</u>	<u>Product Type or Use</u>	<u>Date Issued</u>	<u>Type of Action</u>
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30. Please include information on the following questions in Section A, as they apply to the SS&D Program:

Technical Staffing and Training - Questions 2-9
Technical Quality of Licensing Actions - Questions 18-22
Technical Quality of Incident and Allegation Activities - Questions 23-24

III. Low-level Radioactive Waste Disposal Program **N/A**

31. Please include information on the following questions in Section A, as they apply to the Low-Level Radioactive Waste Disposal Program:

Technical Staffing and Training - Questions 2-9
Status of Materials Inspection Program - Questions 10-14
Technical Quality of Inspections - Questions 15-17
Technical Quality of Licensing Actions - Questions 18-22
Technical Quality of Incident and Allegation Activities - Questions 23-24

IV. Uranium Recovery Program **N/A**

32. Please include information on the following questions in Section A, as they apply to the

Uranium Recovery Program:

Technical Staffing and Training - Questions 2-9

Status of Materials Inspection Program - Questions 10-14

Technical Quality of Inspections - Questions 15-17

Technical Quality of Licensing Actions - Questions 18-22

Technical Quality of Incident and Allegation Activities - Questions 23-24