From: Jeff Dovyak <personal information redacted>
Sent: January 13, 2020 2:04 PMConsultation (CNSC/CCSN)

To: Matthews, Paul (CNSC/CCSN); Samantha Eustace; Raylene McGhee; Daniel Lapkoff

**Cc:** Comments on Draft REGDOC-1.6.2

**Subject:** Draft REGDOC-1.6.2 Comments DOVYAK.pdf; ATT00001.txt; ATT00002.htm

Attachments:

High

Importance:

Dear Sir/Madame:

My comments on Draft REGDOC-1.6.2 are attached.

# Jeff Dovyak RTNM, CRPA (R)

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13 JAN 2020

Consultations
Canadian Nuclear Safety Commission
P.O. Box 1046, Station B
280 Slater Street
Ottawa, Ontario
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Via E-mail

Dear Sir/Madame:

RE: Draft REGDOC-1.6.2 Developing and Implementing Effective Radiation Protection Program for Nuclear Substances and Radiation Devices Licences

Thank you for the opportunity to comment on this draft REGDOC. This document seems to be a mix of absolute requirements vs small "g" guidance.

Element 3.6.1 Alternate RSO seems to contain at least two absolute requirements.

"For short-term absences, such as vacation, illness or injury, the alternate RSO should, at a minimum, have knowledge of the regulatory requirements of the licensed activity and all reporting requirements. The CNSC should be notified in the case of short-term absences. RSO training for alternate RSOs is recommended."

CNSC should define what a short-term absence is. For licences with Alternate RSOs already identified do CNSC Licensing Specialists really want to be notified about short-term absences like a holiday day or two or three, or a couple of weeks of vacation? Several RSOs in my organization have sufficient seniority such that they may have four to six week's annual vacation each. Perhaps in complex organizations with corporate RSOs or equivalent, tracking of short-term absences could be delegated to the corporate RSO (I already do that within my organization)?

"In the case of long-term absences, such as maternity or parental leave, temporary assignment to other duties, severe illness or injury, the alternate RSO must have the same level of knowledge about and training on the licensed activities and the regulatory requirements as the RSO. The Request to Appoint a Radiation Safety Officer or an



Alternate Radiation Safety Officer form must be completed and submitted to notify the CNSC of the replacement."

CNSC should define what a long-term absence is (I suggest at least 60-90 days). My organization has experienced an RSO being off after emergency surgery, the appropriate Licensing Specialist was notified that the RSO was off, the alternate RSO was covering, etc.

#### Element 3.1 Duties

"As best practice the applicant authority should provide the RSO with a description of the duties, as well as the number of hours the RSO should be dedicating to them."

RSO duties are generally outlined by the RSO's direct reporting person and in most cases that is probably not the Applicant Authority (AA). Some organizations have set out RSO duties in a Radiation Safety Policy (RSP) contained in the organization's Radiation Safety Manual (RSM).

#### Element 3.3 Qualifications

"The RSO is encouraged to make use of accreditation programs for RSOs which provide qualifications for the proposed use of nuclear substances and prescribed equipment."

Canadian organizations that accredit RSOs ought to be listed here or in an appendix (that includes the Canadian Radiation Protection Association (CRPA) and the Canadian Organization of Medical Physicists (COMP)).

There are a number of Canadian vendors who provide RSO training courses, those ought to be listed as well. While RSO accreditation is valuable, an appropriate RSO training course should be a minimum requirement.

# Element 3.4 Experience

"The RSO should have relevant and practical work experience in conducting the proposed licensed activities.

The CNSC expects the RSO to be familiar with the nature and characteristics of the nuclear substances and radiation devices that are to be authorized under the CNSC licence, any proposed licensed activities that will be conducted and other ancillary hazards that may impact the licensed activities."

Perhaps some times could be suggested here, for example at least one to three years.



#### Element 5.2 Assessments of the RPP

"The RPP should include means to periodically assess the performance of the program. This may be performed through self-assessments, independent assessments or management reviews. The RPP should define the type(s) of assessment(s) to perform, the frequency and the method(s) to be used. **Note:** An inspection performed by a CNSC inspector is not considered an assessment activity."

I'm confused and wonder how many others are wondering if this section is mixing self-inspection with RPP reviews.

"Although the RPP should be assessed at least every five years, the frequency of the assessments will depend on the complexity of the RPP and the risk associated with the licensed activity. The frequency and the chosen method(s) should be defined and documented in the RPP. The basis of the assessments may need to be expanded to account for different use types, associated hazards and mitigating controls."

RPP assessment should involve the AA and Radiation Safety Committee (RSC) where one exists. It should not be up to the RSO to set out the RPP assessment.

#### Element 5.4 Documentation

"The radiation safety manual should be signed and dated by the RSO and applicant authority to confirm that the published version of the manual was reviewed and approved." [4<sup>th</sup> sentence 1<sup>st</sup> para]

The recommendation that the Radiation Safety Manual (RSM) be signed and dated by the AA & RSO is totally impractical. In my organization our RSM comprises forty-eight (48) RSPs. Each RSP is signed by the corporate President & CEO and they are all dated. As the corporate RSO I send out new and revised RSPs to our stakeholders along with an updated Table of Contents for the RSM. One of my duties to maintain a record of revision of the RSM. I urge that maintaining a record of revision of the RSM be added after the above sentence or replace the above sentence.

### Appendix A: Duties of the RSO

## "Management system

This SCA covers the framework that establishes the processes and programs required to ensure an organization achieves its safety objectives, continuously monitors its performance against these objectives, and fosters a healthy safety culture.



□ conduct assessments of the RPP" [4<sup>th</sup> bullet]

Assessing the RPP is not likely an appropriate RSO duty.

# "Radiation protection

This SCA covers the implementation of a radiation protection program in accordance with the *Radiation Protection Regulations*. The program must ensure that contamination levels and radiation doses received by individuals are monitored, controlled and maintained ALARA.

□ establish internal administrative and action levels" [7<sup>th</sup> bullet]

RSOs and Licensees should not be lead to believe that the establishment of administrative and action levels is a requirement. Licensees might choose to go with regulatory requirements alone.

Appendix B: Radiation Safety Committee

## B.2 Membership

"The RSC should comprise members from multiple disciplines. An RSC should include at least corporate and site RSOs, an authorized user from each type of licensed activity, a representative of the auxiliary personnel (e.g., clerical, janitorial, security), a representative of the nursing service where applicable (therapeutic nuclear medicine licence) and a representative of management. The RSC may also include physicians, physicists and representatives of corporate interest groups, such as managers (senior staff members), workers or specific user units. It should also include a representative of the health and safety committee. Every department that receives occupational dose or has an impact on radiation exposure or safety should also be represented."

Existing complex RPPs for long-established organizations may well have evolved historically in a variety of ways and may well not include representation from ancillary services such as housekeeping, maintenance and security. If the concern is to ensure that workers in those areas receive the appropriate training this section isn't the place to cover that in an indirect way.

"The chairperson should work closely with the applicant authority to ensure effective decisions are made and carried out."

That is very vague and should be expanded.

B.3 Terms of Reference



"The RSC's terms of reference depend on individual circumstances, such as management decisions, corporate procedures, available resources, licence requirements and the magnitude, diversity or complexity of the licensed activities. The terms of reference should contain the following:

6. required meeting agenda items"

A concern with including required meeting agenda items in a Terms of Reference (ToR) document is that if an item is not included during a RSC meeting (for a good reason) CNSC may well come back during a Type I Inspection or audit and take the RSC to task for not following its ToR.

## **B.4 Meetings**

"The circumstances that can trigger a non-routine meeting should also be described in the terms of reference." [2<sup>nd</sup> sentence, 3<sup>rd</sup> para]

Again a potential concern is that if a non-routine RSC meeting is called for a reason other than what is defined in the ToR the CNSC may take the RSC to task during a Type I Inspection or audit. Some RSCs and licensees might be more comfortable just by stating in the RSC ToR that non-routine meetings can be called by the RSC Chair.

Thank you again for the opportunity to comment on draft REGDOC-1.6.2.

Sincerely,

9. Dovyak

Jeff Dovyak RTNM, CRPA (R) Radiation Safety Coordinator