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COMPLIANCE
Regulatory Affairs
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UNRESTRICTED

2014 May 20

Mr. Brian Torrie
Director General, Regulatory Policy Directorate
Canadian Nuclear Safety Commission
280 Slater Street
P.O. Box 1046, Station B
OTTAWA, Ontario K1P 5S9

Dear Mr. Torrie:

Comments on Regulatory Document REGDOC-2.10.1
Nuclear Emergency Preparedness and Response

AECL personnel have reviewed the additional proposed changes to REGDOC-2.10.1, *Nuclear Emergency Preparedness and Response*, and have met with industry partners, Ontario Power Generation, Bruce Power, and New Brunswick Power to discuss issues, challenges, and impact of the proposed changes.

The combined comments on REGDOC-2.10.1 are contained in Attachment A.

AECL has major concerns with these new requirements and requests a joint Industry/CNSC workshop to provide clarification and ensure that the proposed changes are practical.

If you require further information or have any questions regarding this submission, please contact me as below.

Yours sincerely,

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TA/mj
Attachment

c C. Carrier (CNSC)

Consultations (CNSC)

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Attachment A

Industry Comments on REGDOC-2.10.1, Nuclear Emergency Preparedness and Response

New Requirement	Industry Issue	Suggested Change (if applicable)	Major Comment/ *request for clarification*	Impact on Industry
1	1. There are several questions that should be answered before we can provide meaningful comment. Canada has made great progress in the Fukushima response because we studied each issue carefully and then moved quickly to deal with any concerns. It appears that we have skipped the study phase here and are in danger of making an uninformed decision. We suggest that the CNSC needs to better understand the impacts of what is being proposed and recommend an open workshop be held with all interested stakeholders to discuss this and provide a fair opportunity for input. 2. Agree, pre-distribution is the "right thing to do". The issue is "how" to get KI to 'everyone', respect community personal boundaries, minimize safety risk in the process, and measure success. General Issues: • The community is not in the jurisdiction of industry. Health Canada has the jurisdiction to determine, but has not yet done so, whether a mass distribution of KI pills would be a contravention of s. 14(1) of the *Food and Drugs Act*. • The KI working group (federal, provincial and industry) looked at pre-distribution and raised various concerns - examples of concerns are: a. Mailing: KI unsolicited brings risk to children who might open the package. b. Mailing: will result in waste when a portion gets disposed as junk mail. c. Door to Door Delivery: a stranger coming to the door to inform and distribute KI can stress the homeowner or latch key children. d. Door to Door Delivery: many people are not home or won't answer the door to a stranger so when is there "enough" distribution. e. Door to Door Delivery: there is a risk to the delivery person going to a stranger's home. f. Centralized Pick-Ups: Are already available in OPG areas via "call us" or area pharmacies. Almost no utilization by the public. • KI has a specific purpose and there is no established planning basis that supports the need for pre-distribution beyond 10km. Other ingestion control measures are already available for outer areas.	***1. Convene information gathering workshop*** ***2.ADD words -*** "the **opportunity** for pre-distribution of iodine thyroid blocking agents **will be made** to all residences, businesses and institutions within the plume exposure planning zone (sometimes named the primary zone or the urgent protective action zone, typically sized at approximately 10 km), ***DELETE words -*** "and selective pre-distribution in the ingestion planning zone (sometimes named secondary zone or extended planning distance, typically sized	**Major and Clarification**	The local community and the province have **authority** over the public domain. Industry has an obligation to support the community, with community and provincial agreement, but industry has no legal jurisdiction. Industry **cannot "force" the public to accept KI tablets** into their businesses and homes **so how can pre-distribution compliance be measured**? Clarification: 1. What is level of industry authority (jurisdiction) in the community? Where is this confirmed? 2. What is the basis for expanding distribution outside the UPA/primary zone? 3. What/who is part of "selective pre-distribution"? 4. What are the expectations for "recall" of KI? 5. What is the measure of compliance? 6. Who ensures that industry will not be held liable from issues arising from distribution Why wording change: This allows more options and makes compliance feasible. Example: the community/industry could follow the Quebec example and send out coupons for people to "pick up their KI". We could add a telephone number if the homeowner wanted/or needed personal home delivery. This enables everyone with the *opportunity* to get KI ahead of time, we

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	• There is no clarity on what/who is part of "selective pre-distribution"? • Industry does not have medical experts to manage the process or questions. • There needs to be a capability to "recall" KI once it has been distributed in case of problems… what are the rules for when KI is past the shelf life? • Cost with unconfirmed benefit, particularly if extending past 10km e.g., OPG would need to supply to 4.5 million people within York and Peel regions.	at approximately 50 to 80 km)".		make it easy but we don't force the issue. Win-win for everyone and compliance can be demonstrated when notice/coupon was sent and opportunity was published periodically in the local paper. Compliance in terms of frequency of opportunity needs clarification (once/year).
2	The PNERP provides the foundation for the Licensee's nuclear emergency plan's offsite response, and site specific design basis accidents are fully detailed in each Licensee's Licensing Basis. The industry requires clarification on additional provisions beyond those presently provided.	***Convene information gathering workshop in order to clarify the information required***	**Major**	Dependent upon the level of detail for the technical planning basis will grade whether this is a major issue. It would be highly security sensitive to provide "all information" that makes up the technical planning basis for all things including design basis accidents, the basis for Emergency Response Organization minimum complements.
3	Because there is no clear description of "what" emergency plan information includes, what is compliance? The general emergency plan information is already available through the Ontario provincial plans and the community plans which are available through the Licensee central web-sites. Physical "distribution" is always a concern. People move so what does "success/compliance" look like.	***Rewrite*** "ensure provincial and municipal **nuclear** emergency plans **and public support information materials** are available online."	**Clarification**	The jurisdiction for providing materials to the public is already in the domain of the community and province. If "distribution" of information is required, there needs to be clarification around frequency and expected level of content. The public already has access to the community and provincial plans that clearly outline what they need to know. **Site specific information, not related to the community, can be security sensitive**. The industry site response plans are pre-reviewed (review and comment) and shared with the community, provincial and federal staff who support response. Additional distribution should be on a "need to know" basis.