

**Canadian Nuclear  
Safety Commission**

**Commission canadienne de  
sûreté nucléaire**

**Public Meeting**

**Réunion publique**

**June 27, 2002**

**Le 27 juin 2002**

Public Hearing Room  
14th floor  
280 Slater Street  
Ottawa, Ontario

Salle d'audiences publiques  
14e étage  
280, rue Slater  
Ottawa (Ontario)

**Commission Members present**

**Commissaires présents**

Ms Linda J. Keen, President  
Dr. Yves M. Giroux  
Mr. Alan R. Graham  
Ms Letha J. MacLachlan

Mme Linda J. Keen, présidente  
M. Yves M. Giroux  
M. Alan R. Graham  
Mme Letha J. MacLachlan

**Secretary:** Mr. Marc A. Leblanc

**Secrétaire:** M. Marc A. Leblanc

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Ottawa, Ontario

--- Upon resuming on Thursday, June 27, 2002  
at 3:15 p.m.

**02-M40**

**Opening Remarks**

THE CHAIRPERSON: Ladies and gentlemen, could I ask you to please take your seats.

MR. LEBLANC: Good afternoon, ladies and gentlemen. Welcome to today's meeting of the Canadian Nuclear Safety Commission.

Mon nom est Marc Leblanc. Je suis secrétaire de la Commission et j'aimerais aborder certains aspects touchant le déroulement de la réunion.

There is simultaneous interpretation to facilitate communications in both official languages. If you would, please keep the pace of speech relatively slow so that translators have a chance of keeping up and hence communicating to everyone.

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1 et 8. Les transcriptions devraient être  
2 disponibles sur le site web de la Commission dès  
3 la semaine prochaine.

4 To aid those transcripts and make  
5 them as meaningful as possible we would ask  
6 everybody to identify themselves clearly before  
7 speaking so that the transcripts are as complete  
8 and clear as possible.

9 La réunion de la Commission est  
10 enregistrée et transcrite textuellement. La  
11 transcription se fait dans l'une ou l'autre des  
12 langues officielles compte tenu de la langue  
13 utilisée par le participant à la réunion.

14 Please silence your cellphones.

15 Madame Keen, présidente et  
16 première dirigeante de la Commission, va présider  
17 la réunion d'aujourd'hui.

18 Madame Keen.

19 THE CHAIRPERSON: Good afternoon  
20 and welcome to the meeting of the Canadian Nuclear  
21 Safety Commission.

22 I would like to introduce the  
23 members of the Commission that are with us today.  
24 On my right is Ms MacLachlan; on my left are  
25 Dr. Giroux and Mr. Graham.

1                   In addition to Mr. Leblanc, the  
2                   Secretary of the Commission, Ms Irene Gendron is  
3                   with us, the Legal Counsel to the Commission.

4                   I would like to remind you that  
5                   the Commission is still on enhanced security  
6                   status, as are many of the facilities which we  
7                   regulate, and as such I will as appropriate take  
8                   measures to ensure that security matters of a  
9                   sensitive nature are not discussed in public. We  
10                  will, if necessary, move in camera at any time for  
11                  discussions on security matters.

12                  I would like to start by calling  
13                  for the adoption of the agenda as noted in  
14                  CMD Document 02-M41.B. I would like to ask the  
15                  Secretary of the Commission to read the list of  
16                  supplementary documents that have been added to  
17                  the agenda since its publication on June 12.

18                  Mr. Leblanc.

19                  M. LEBLANC: Merci.

20                  Three CMDs were added to the  
21                  agenda after publication on June 12:  
22                  CMD 02-M43.A, Significant Development Report  
23                  No. 2002-5, supplementary information filed by  
24                  CNSC staff; CMD 02-M44.A, Status Report on Power  
25                  Reactors, supplementary information filed by CNSC

1 staff; CMD 02-M49.A, Nuclear Security: Review of  
2 CNSC Order 01-1, supplementary information filed  
3 by CNSC staff.

4

5 **02-M41/02-M41.A/02-M41.B**

6 **Adoption of Agenda**

7 THE CHAIRPERSON: With the reading  
8 in of those supplementary CMD documents, may I  
9 have the agreement of the Commission Members on  
10 the adoption of the agenda?

11 For the record, there is  
12 agreement.

13

14 **02-M42**

15 **Approval of Minutes of Commission Meeting Held**

16 May 22 and 23, 2002

17 THE CHAIRPERSON: I will now call  
18 for the approval of the minutes of the Commission  
19 meeting held May 22 and 23, 2002. The minutes are  
20 outlined in document CMD 02-M42. Are there any  
21 comments, additions or deletions that the  
22 Commission Members wish to make to the draft  
23 minutes?

24 We have approval. Approved.

25

1           **02-M43/02-M43.A**

2           **Significant Development Report No. 2002-5**

3                           THE CHAIRPERSON: The next item on  
4 the agenda is the Significant Development Report  
5 No. 2002-5 as outlined in documents CMD 02-M43 and  
6 CMD 02-M43.A. I would like to call upon the  
7 Director General, Directorate of Nuclear Cycle and  
8 Facilities Regulations to begin the report.

9                           Ms Maloney.

10                          MS MALONEY: Good afternoon,  
11 Madam President. I am Cait Maloney, Director  
12 General of the Directorate of Nuclear Cycle and  
13 Facilities Regulation.

14                          We have no supplementary  
15 information to that which is before you on the  
16 McArthur River operation raise borer issue. We  
17 are available to answer questions on that.

18                          I will also note that the licensee  
19 is available and has indicated they will respond  
20 to questions as well.

21                          We had invited Saskatchewan Labour  
22 to participate in this. Unfortunately, they were  
23 not able to do so.

24                          At this time I would also ask that  
25 after we have dealt with that issue, Mr. McCabe

1 would like to update you on the forest fire  
2 situation at McArthur.

3 THE CHAIRPERSON: Perhaps I just  
4 should read into the record that the Significant  
5 Development Report, 2002-5, is titled "CAMECO  
6 Corporation: Repeated Failures of the Raise Borer  
7 Drill Strings at McArthur River Operation". That  
8 is for the record.

9 Are there any questions from  
10 Commission Members with regard to this report?

11 Dr. Giroux?

12 MEMBER GIROUX: Yes. Do we have  
13 somebody from CAMECO here? Yes, maybe you would  
14 be the one to answer. I have just one or two  
15 technical questions to help my understanding of  
16 what happened.

17 The question is: what is the mode  
18 of separation between the head of the reamer and  
19 the rods? Is that a thread failure? Could you  
20 explain that?

21 MR. JARELL: Yes, I could. I  
22 think our current thinking is that this is a  
23 fatigue failure. It occurs at threaded joints,  
24 close to the reamer head. It is brought on we  
25 think by sort of off-centric loading on the reamer

1 head.

2 I have a number of slides here  
3 that could sort of walk you through, just to give  
4 you some sense of just what the issue here is, if  
5 you care to see those.

6 THE CHAIRPERSON: Mr. Jarrel,  
7 would you mind identifying yourself for the  
8 record, please.

9 MR. JARREL: My apologies. I am  
10 John Jarrel, Vice-President, Environmental Safety  
11 for CAMECO Corporation.

12 So with your indulgence, I could  
13 just go through a few slides here and just give  
14 you a bit of a sense on this or a little briefing,  
15 if you so desire.

16 This first slide shows basically  
17 the raised format. Let me just go back a couple  
18 here.

19 The first thing we do is we drill  
20 a pilot hole from the upper chamber down to the  
21 lower chamber. The next step of course is the  
22 actual raised boring. You may recall, you have  
23 seen this sort of pictorial I think during the  
24 relicensing about six months ago.

25 Anyway, we ream up through waste

1 rock first and then the ore. When we reach the  
2 ore then we drop the reamer head back down to the  
3 lower level.

4 The next step in this process is  
5 to put in a high strength concrete plug at the  
6 bottom and then finally to fill the void with  
7 lower strength concrete from the top.

8 This picture shows the upper  
9 level. You can see the freeze holes and in the  
10 background there you can see this actual drill.

11 Here is a close-up picture of the  
12 drill again from the top level. This next picture  
13 here, I think what is important here is to look at  
14 -- in the foreground here is the actual drill  
15 rods. These drill rods are about 11 inches in  
16 diameter. They weigh about 1,200 pounds a piece.  
17 They have a centre hole in the middle of them.

18 What we do is we attach the reamer  
19 head at the bottom using these drill rods. We  
20 just progressively add to these up to I think a  
21 maximum depth of about 120 metres. These are  
22 about five feet long each.

23 This is a picture of a reamer  
24 head. There are two types we use. There is one  
25 that is an eight foot reamer head. The other one

1 is 10 feet. This shows the 10 foot reamer. You  
2 can see the various cutter heads on the device.  
3 In the centre is the stem.

4 One of the primary failure points  
5 on this thing is on that stem right at the top of  
6 the thing, the threaded joint up there.

7 Here is another picture, just  
8 another close up of one of these reamer heads  
9 before it is put onto the drill string.

10 This picture here shows the actual  
11 process of putting the reamer head onto the drill.  
12 What we have is we put this thing in a scooptram  
13 bucket and then we are just basically torquing  
14 this on to the drill string before we start the  
15 raised boring.

16 You have probably seen this  
17 picture before when we considered relicensing last  
18 year. This is a picture of the ore collection  
19 chute and the scoop tram underneath it to collect  
20 the ore. What we do is we basically mine for  
21 upwards of typically about 30 centimetres and then  
22 stop the process when the bucket is full of ore.

23 Here is a picture again at the  
24 bottom of the thing with the scoop tram removed.  
25 You will notice there is quite a bit of styrofoam

1 up top just to provide a seal at the top of the --  
2 sort of at the raise there.

3 Of course the whole process is one  
4 of remote scoop trapping, as we have mentioned  
5 before.

6 This shows a picture of sort of  
7 the strategy of drilling. What we are currently  
8 drilling is right in this area here. This will be  
9 about row 20. You can see that the emphasis  
10 obviously is to overlap these holes to some  
11 extent. We believe that is part of the issue with  
12 the reamer head failures as well.

13 Here is a picture of a failure.  
14 What you see here is a reamer head that has  
15 fallen. You can see that some of the stem is  
16 still attached to the thing. You see that it has  
17 sat down on this ore collection chute and actually  
18 dislodged it and can crush the legs on it  
19 somewhat.

20 Here is another picture of the  
21 same one just taken from a slightly different  
22 angle just to give you sort of a sense of the  
23 issue that we have here.

24 As the significant development  
25 report indicates, there has been 18, I think there

1 is 19 now, of these incidents that have occurred.  
2 It is a fairly frequent event, and certainly this  
3 is one that is getting some priority obviously  
4 from a mine engineering perspective to try to  
5 reduce that frequency.

6 Basically, what this diagram shows  
7 is the location of the failures. It is basically  
8 at the threaded joints, as I indicated, basically  
9 right here where sort of the stem, if you will, of  
10 the raised bore attaches to the drill string.

11 There is what is called a  
12 stabilizer section, which is the first section of  
13 pipe here. This is basically a rib section. This  
14 also had quite a few failures here.

15 Over the last couple of years, we  
16 have actually had a couple where we have actually  
17 unscrewed these things. You can imagine a hundred  
18 metre of drill steel. If you torque the thing up  
19 it acts as a bit of a torsion bar and if the thing  
20 lets go it can actually unwind the threads, which  
21 has happened on a couple of occasions.

22 These things are torqued up to  
23 about 150,000 foot pounds, so this is no sort of  
24 trivial force here.

25 In any event, here is just another

1 close up of one of these raised bores. You can  
2 see there is a series of cutterheads. One of the  
3 issues when I talk about off-centric loading is  
4 the fact that if you lose some of these  
5 cutterheads obviously the thing loses balance and  
6 puts extra forces on those threaded connections,  
7 particularly the ones that are closest to the  
8 reamer head because that is the ones that see the  
9 most force.

10 The other sources of off-centric  
11 loading are in the process of what they call  
12 sumping in the reamer head. This is where you  
13 first start. You can imagine that if you have a  
14 hole that is on sort of a 60 per cent dip, when  
15 you first start to cut it of course you get some  
16 pretty strong, dynamic forces on this thing.

17 I think the third reason we see  
18 this sort of dynamic loading is the obvious  
19 difference in strength between the quartzite and  
20 the sort of soft concrete below the ore and the  
21 difference between sort of this mud-like ore and  
22 the concrete above. So there is a fair number of  
23 dynamic forces on this thing which all sort of  
24 focus on these threaded joints.

25 Here is a picture of some of the

1 failures. You can just sort of get a sense of  
2 this thing. What it is doing is just basically  
3 shearing this 11-inch drill's stabilizer.

4 You can see here is another one  
5 where it has actually sheared off right inside the  
6 threads.

7 Here is another one. What I would  
8 point out to you is this whole in the middle,  
9 which is instrumental here in a couple of slides.

10 Finally, here is just another one  
11 again showing just sort of the -- all of these  
12 failures seem to occur right at these threaded  
13 joints.

14 My final slide here is what we  
15 have tried to do to try to control this a little  
16 bit better in the interim is to put in what we  
17 call a reamer catcher, which is essentially a  
18 1/4-inch diameter steel rod which goes up through  
19 that centre hole and just sort of anchor bolts the  
20 thing so that if the joint fails it will actually  
21 catch this reamer so that it doesn't sort of come  
22 down all of a sudden.

23 We are one for one using this  
24 device so this is pretty formative.

25 I think the significant

1 development report indicates some of the things we  
2 have done. We have other plans. Obviously this  
3 is sort of an ongoing effort to try to reduce the  
4 frequency of these failures. We can discuss that  
5 if you would like, but I think that is just sort  
6 of a snapshot of the issue here.

7 THE CHAIRPERSON: Does that answer  
8 your questions? Good.

9 Any further questions?

10 Mr. Graham?

11 MEMBER GRAHAM: My question is:  
12 there has been no accident or no bodily harm to  
13 anybody yet, hopefully, has there?

14 MR. JARREL: No, there hasn't.  
15 There are really sort of three issues here. There  
16 is obviously the conventional safety issue of  
17 these things dropping. There is also the issue of  
18 course of rock coming down out of an open hole.

19 There is what I call sort of the  
20 conventional or chronic radiation exposure, which  
21 is the amount of time you spend in proximity to  
22 the ore.

23 Then the third issue we are trying  
24 to deal with obviously is just what I would call  
25 acute or accident-type radiation protection, which

1 is you don't want people collecting doses from  
2 radon, so that is why we have this ventilation  
3 system and so on.

4 The only accident that has  
5 occurred this year on reaming actually occurred  
6 when we were putting a backfill gantry in and a  
7 rock came down the hole, missed the backfill  
8 gantry because it was slightly out of place, and  
9 it rolled and broke someone's ankle. That was the  
10 only issue we have had but that is not related to  
11 a reamer failure.

12 THE CHAIRPERSON: Ms MacLachlan?

13 MEMBER MacLACHLAN: Thank you.

14 Do I understand that you are still  
15 carrying on with operations. You are still  
16 operating reamers, a reamer.

17 MR. JARREL: Yes, this the mining  
18 method for this what we call zone two or the main  
19 area of the ore.

20 What we are trying to do obviously  
21 is reduce the frequency of these reamer failures,  
22 but I would stress that the key point of this  
23 thing is just to keep people out of harm's way.  
24 That is why one of the great advantages obviously  
25 of remote mining is the fact that you keep people

1           30 to 50 metres away from the activity when you  
2           are actually mining.

3                           MEMBER MacLACHLAN:   How many  
4           reamers do you have on site?

5                           MR. JARREL:   We have five drills  
6           and I don't really know the total number of --  
7           there is obviously at least five reamer heads.  I  
8           think there is more because we have kind of gone  
9           through a process of obviously -- that is one of  
10          the key points is:  is one reamer better than the  
11          other?  There are sort of two main suppliers we  
12          have and we have kind of changed some of these  
13          things out.  We have some that are eight foot,  
14          some are ten foot, but I can't -- it is obviously  
15          more than five but I don't know the total number.

16                           MEMBER MacLACHLAN:  Have the  
17          reamer heads incurred any damage or is the damage  
18          all to the pipes?

19                           MR JARREL:   When they come down  
20          they seem to be missing some of the cutter heads,  
21          these tungsten-carbide bits on the thing.  We are  
22          not certain obviously whether the failures occur  
23          which sort of precipitate this off-centric  
24          loading, whether that is part of the problem, or  
25          whether they fall off on the way down.  It is

1 not clear.

2 What we obviously are doing, we  
3 hired a position called raise bore foreman just to  
4 try to start tracking this. Obviously the more we  
5 can learn about these things -- for example, we  
6 want to know when we find individual cutterheads  
7 in the grizzly we want to know about that, so we  
8 are trying to track this thing down.

9 We do find occasionally  
10 cutterheads missing as well as having to replace  
11 the stem.

12 MEMBER MacLACHLAN: I notice in  
13 CMD 02-M43.A that staff was expecting an  
14 application for a change to the licence by the end  
15 of June. This is June 27. Is an application  
16 still anticipated for the --

17 MR. JARREL: The plan was to file  
18 it this week, but a little forest fire got in our  
19 way I think so it is probably next week.

20 What we would like to try is we  
21 think we can -- what we would like to do is get  
22 rid of the ore collection chute, at least on a  
23 trial basis, and actually put the ore directly  
24 onto the floor and then pick it up on a scoop  
25 tram. The advantage of that from this perspective

1 is the fact that I think we could probably reduce  
2 the number of times we have to stop and start,  
3 which again I think adds extra force on this  
4 reamer head.

5 But the main driver for trying a  
6 test without the ore collection chute is to try to  
7 reduce the chronic radiation exposure. Part of  
8 this submission is we will make the case hopefully  
9 that we can actually reduce the chronic radiation  
10 exposure by our estimate upwards of 45 per cent if  
11 we actually got rid of the ore collection chute.

12 Time will tell. Obviously our  
13 calculations have to be evaluated by the staff but  
14 we think that this is worth looking at from the  
15 perspective of just reducing chronic radiation  
16 exposure.

17 You may recall that during the  
18 relicensing we indicated that we wanted to focus  
19 on the radiation exposure of some of the most  
20 highly exposed workforce, that is, these raised  
21 bore operators, and this is part of that  
22 initiative.

23 MEMBER MacLACHLAN: Thank you.

24 THE CHAIRPERSON: In order to  
25 ensure the transparency of the Commission, I would

1           like CAMECO to provide, if you would agree to, a  
2           copy of the slides and we would assign these a CMD  
3           number. The suggestion is CMD 02-M43.A1 for those  
4           who may wish to access this at some point.

5                           Thank you very much.

6                           We now will move to the next --  
7           oh, yes, the forest fire report. Sorry. Thank  
8           you. The forest fire report.

9                           MR. McCABE: Thank you.

10                          Rick McCabe, Director, Uranium  
11           Mines and Lands Evaluation division. We would  
12           just like to update the Commission on the forest  
13           fire in close proximity to McArthur River.

14                          Yesterday morning we received  
15           notification that there was a fire in the area,  
16           that the mine site visibility was getting poor,  
17           the airport had been shut down and that the only  
18           means of moving out of there was via the road  
19           between McArthur River and Key Lake.

20                          We have had about two updates  
21           since that time. Yesterday morning a Saskatchewan  
22           environment and conservation officer arrived on  
23           site to take charge of directing the fire  
24           fighting. They were implementing more fire breaks  
25           in close proximity around the mine site and

1 protecting key areas.

2 They evacuated 110 employees to  
3 Key Lake, which is some 80 kilometres from  
4 McArthur to Key by road, and they kept  
5 approximately 60 people on site to do the work  
6 that was necessary to keep the plant operating and  
7 to continue with doing the fire breaks, wetting  
8 down areas and things of that nature to protect  
9 the facility.

10 3:35 P.M.

11 As of this morning and this  
12 afternoon, last night the fire slowed down in its  
13 progress. It had been progressing toward the  
14 site, but it slowed down in its progress and  
15 conditions had gotten better. I guess the wind  
16 had died down and it did not progress a lot.

17 They are setting up equipment to  
18 provide fire protection of the buildings, et  
19 cetera, if required. But as I understand just  
20 prior to this meeting, the most recent update is  
21 that the airport will be reopened and staff will  
22 be going back in there because the fire has  
23 slowed. I just wanted you to be aware of that.

24 THE CHAIRPERSON: Thank you very  
25 much.

1                   We will now move to Item No. 5,  
2                   Status Report on Power Reactors, as noted in CMD  
3                   documents 02-M44 and 02-M44.A and call upon an  
4                   oral presentation from staff. Mr. Blyth.

5

6                   **02-M44/02-M44.A**

7                   **Status Report on Power Reactors**

8                   MR. BLYTH: Thank you very much.  
9                   For the record, my name is Jim Blyth.

10                  I will briefly go over the key  
11                  points in the status report. The unit that was  
12                  shut down at Pickering to inspect the turbine  
13                  generator spindle has been returned to service.  
14                  The spindle that was removed did not show any  
15                  evidence of cracking and plans are in place to  
16                  inspect other turbine spindles and OPG has not yet  
17                  determined the root cause of the cracked blades.

18                  NB Power presented information on  
19                  their restructuring, so I do not propose to speak  
20                  to that.

21                  In the addendum, this 44.A, the  
22                  SLAR incident at Bruce B where both the pressure  
23                  tube and the calandria tube were breached during  
24                  the course of relocating garter springs in the  
25                  fuel channels, Bruce Power is now proceeding with

1       repairs. We do not have a lot of additional  
2       information on that at this time.

3                 Staff has contacted Bruce Power to  
4       solicit assurances that there were not any  
5       malfunctions with the SLAR tool that may have  
6       damaged the other fuel channel that were being put  
7       through this process during the outage. The unit  
8       will not restart until we have that assurance.

9                 There are staff from Bruce Power  
10       and OPG in the room as well, I believe, if the  
11       Commission members have any questions.

12                THE CHAIRPERSON: Thank you very  
13       much.

14                Are there any questions or  
15       comments from the Commission members with regard  
16       to the staff?

17                Thank you very much, Mr. Blyth.

18                We will now then move to the  
19       Status Report on Atomic Energy of Canada Limited:  
20       Approval to Restart Commissioning of the MAPLE 1  
21       and 2 Reactors. As noted, CMD document 02-M45.  
22       We will turn to the oral presentation by CNSC  
23       staff and Mrs. Maloney.

24

25

1           **02-M45**

2           **Status Report on Atomic Energy of Canada Limited:**  
3           **Approval to Restart Commissioning of the MAPLE 1**  
4           **and 2 Reactors**

5                               MS MALONEY: Thank you, Madam  
6           Chair.

7                               I am Cait Maloney, Director  
8           General of the Directorate of Nuclear Cycle and  
9           Facilities Regulation. With me today are Mr.  
10          Barclay Howden, Director of the Research  
11          Facilities Division and Mr. Bruce Pearson, Project  
12          Officer for the MAPLE reactors.

13                              At the December 13, 2001  
14          Commission hearing on the MAPLE reactors the  
15          Commission directed staff to provide a status  
16          report on licensing prerequisites and progress to  
17          date at each regularly scheduled Commission  
18          meeting until staff had authorized resumption of  
19          commissioning at MAPLE 1 and fuel loading at MAPLE  
20          2. The authority to make this authorization was  
21          granted to CNSC staff by the Commission at that  
22          hearing.

23                              The CMD in front of you  
24          constitutes the fourth status report. I will now  
25          turn the presentation to Mr. Pearson who will

1 provide you with an update on progress since the  
2 CMD was submitted.

3 MR. PEARSON: Thank you.

4 Madam Chair and members of the  
5 Commission, for the record, my name is Bruce  
6 Pearson, Project Officer for the MAPLE reactors.  
7 CMD 02-M45 is the fourth report to the Commission  
8 on the status of the prerequisites identified  
9 during the December 2001 hearing. I do not intend  
10 to address any of the issues reported in the CMD.  
11 However, I would like to report that all issues  
12 are progressing as planned, with only minor delays  
13 being experienced in a few areas. We consider a  
14 minor delay to be two weeks or less.

15 Since the last status report, AECL  
16 has made satisfactory progress in meeting the  
17 prerequisites established for restart of the MAPLE  
18 1 reactor and for loading fuel into the MAPLE 2.  
19 CNSC staff will provide a further update on  
20 progress at the September 2002 Commission meeting.

21 That concludes my presentation.

22 Thank you.

23 THE CHAIRPERSON: I would just  
24 like to ask Mr. Labrie from AECL if he could  
25 approach the microphone. I just wanted to ask if

1 he has had an opportunity to review this report  
2 and if he has any comments on it?

3 MR. LABRIE: I have reviewed the  
4 CMD and it is true that there has been some  
5 slippage, both in the review of our submissions  
6 and ourselves in completing some of the work  
7 related to meeting the prerequisites.

8 THE CHAIRPERSON: Are there any  
9 questions from Commission members with regard to  
10 this status report?

11 Dr. Giroux.

12 MEMBER GIROUX: Just one question  
13 to staff, in your report under 2.3 you are  
14 discussing control absorber rods and you are  
15 discussing problems with stepper motor and saying  
16 that this will not affect the safety and  
17 reliability, but will affect the operational  
18 reliability. Does that mean that the rods will  
19 continue falling down and with other problems and  
20 the stepper motor is to raise the rods after they  
21 have gone down? Am I interpreting this correctly?  
22 If not, please correct.

23 MR. PEARSON: For the record, my  
24 name is Bruce Pearson, Project Officer for the  
25 MAPLE reactors.

1                   Yes, the stepper motors -- the  
2 control absorber rods have two functions; one is  
3 part of the reactor regulating system and the  
4 other is part of safety system two.

5                   The stepper motors are used in the  
6 reactor regulating system function to raise and  
7 lower the rods, but the safety system action is  
8 independent of the stepper motors. The control  
9 absorber rods fall into the core under gravity on  
10 the release of the magnetic clutch.

11                  So the problem with the stepper  
12 motors is tied to more operational considerations  
13 than safety.

14                  MEMBER GIROUX: And these are  
15 problems that you expect to be solved at some time  
16 during commissioning?

17                  MR. PEARSON: Yes.

18                  THE CHAIRPERSON: Other questions?

19                  Then we will move to Item 5.3,  
20 Status Report on Atomic Energy of Canada Limited:  
21 Approval to Commence Active Commissioning of the  
22 New Processing Facility, 02-M46. Again I will  
23 turn to the oral presentation by CNSC staff and  
24 Mrs. Maloney.

25

1           **02-M46**

2           **Status Report on Atomic Energy of Canada Limited:**  
3           **Approval to Commence Active Commissioning of the**  
4           **New Processing Facility**

5                               MS MALONEY: Thank you, Madam  
6           Chair.

7                               I am Cait Maloney, Director  
8           General of the Directorate of Nuclear Cycle and  
9           Facilities Regulation. With me today are Mr.  
10          Barclay Howden, Director of the Research  
11          Facilities Division and Mr. Stephen Cook, Project  
12          Officer for the New Processing Facility.

13                              At the December 13, 2001  
14          Commission hearing on new processing facility the  
15          Commission directed staff to provide a status  
16          report on licensing prerequisites and progress to  
17          date of each regularly scheduled Commission  
18          meeting until CNSC staff had authorized  
19          commencement of active commissioning of the new  
20          processing facility. The authority to make this  
21          authorization was granted to CNSC staff by the  
22          Commission at that hearing.

23                              The CMD before you constitutes the  
24          fourth status report and I will now turn the  
25          presentation over to Mr. Cook who will provide you

1 with an update on progress since the CMD was  
2 prepared.

3 MR. COOK: Madam Chair, members of  
4 the Commission, my name is Steve Cook. I am  
5 Project Officer for the New Processing Facility.  
6 The following is an update of the status of  
7 prerequisites since CMD 02-M46 was filed.

8 On June 14, 2002, AECL submitted  
9 the Phase A Commissioning Completion Assurance of  
10 NPF.

11 CNSC staff have initiated their  
12 review and scheduled completion for June 28, 2002.

13 All other issues are progressing  
14 as planned with only minor delays being  
15 experienced in a few areas. We consider a minor  
16 delay to be two weeks or less.

17 Since the last status report, AECL  
18 has continued to make satisfactory progress  
19 towards completion of the prerequisites to  
20 commence active commissioning of the New  
21 Processing Facility.

22 CNSC staff will provide an update  
23 on progress on the remaining items at the  
24 September 2002 Commission meeting. Thank you.

25 THE CHAIRPERSON: Thank you.

1                   The same question to Mr. Labrie  
2                   with regards to AECL's knowledge of this report  
3                   and do you have any comments?

4                   MR. LABRIE: I have reviewed the  
5                   report and it is true that there has been some  
6                   slippage in some of the reviews. AECL has  
7                   requested from the CNSC staff the authorization to  
8                   start the active commissioning in the new  
9                   processing facility because we believe that we had  
10                  completed several of -- well, the prerequisites.

11                  THE CHAIRPERSON: Comments, Ms  
12                  Maloney, on that?

13                  MS MALONEY: Staff is reviewing  
14                  the requests that we have just received from AECL  
15                  and we will update you at the next meeting.

16                  THE CHAIRPERSON: Thank you very  
17                  much to all of you.

18                  We will now move to the  
19                  Information Reports portion of the meeting. We  
20                  will turn to Item 6.1 which is the Cancer and  
21                  General Mortality in Port Hope Study, 1956 to 1997  
22                  as contained in CMD document 02-M47. I will turn  
23                  it over to Mr. Blyth and his staff.

24

25

1           **02-M47**

2           **Cancer and General Mortality in Port Hope,**  
3           **1956-1997**

4                           MR. BLYTH:    Good afternoon.  
5           Again, for the record, my name is Jim Blyth.  I am  
6           the Director General of Power Reactor Regulation,  
7           but I also have the privilege of working with the  
8           CNSC's experts on radiation protection.  We are  
9           here today to present for your information a study  
10          sponsored by the CNSC staff and carried out by  
11          Health Canada on our behalf, concerning general  
12          mortality and cancer mortality in the Town of Port  
13          Hope for the period from 1956 to 1997.

14                           With me today is Mr. Rod Utting,  
15          the Director of Radiation Protection and  
16          Environmental Compliance Division; and Ms Rachel  
17          Lane who is the CNSC epidemiologist and a member  
18          of Mr. Utting's division; also Mr. Robert Semenciw  
19          of Health Canada who I believe was the principal  
20          author of this report.

21                           With that I would now like to ask  
22          Ms Lane to present the report.  Thank you very  
23          much.

24

25

1           **Oral Presentation by CNSC staff**

2                               MS LANE: Good afternoon, Madam  
3           President and Commission members. I am Rachel  
4           Lane, CNSC's epidemiologist. I am the project  
5           manager for the project, Cancer and General  
6           Mortality in Port Hope, 1956 to 1997.

7                               As an overview of today's  
8           presentation I will be discussing the following  
9           for your information: as a general background  
10          some residents of Port Hope have expressed concern  
11          about possible adverse health effects in Port Hope  
12          as a result of radium and uranium processing  
13          industries in the town since the 1930s and the  
14          local disposal of radioactive and heavy metal  
15          wastes in the town.

16                              Numerous studies have taken place  
17          in Port Hope to study both the levels of  
18          contamination in the town and the health status of  
19          the community. Recently, the CNSC released a  
20          cancer incidence study on Port Hope in August  
21          2000. Overall the cancer incidence in Port Hope  
22          was no different from the rest of Ontario,  
23          although some increases and decreases occurred  
24          when examined by cancer type, time period and sex.

25                              The objectives of the current

1 study are to, number one, extend the cancer  
2 mortality analysis to an earlier time period, from  
3 1956 to 1997, which is 42 years of mortality.

4 Second, to examine results of  
5 cancer and all other major causes of death.

6 Third, to compare the cancer  
7 mortality results with the previous cancer  
8 incident study.

9 This and the cancer incident  
10 report descriptive studies, this type of study  
11 studies the amount and distribution of disease  
12 within a population by person, place and time.  
13 Thus the current studies are designed to answer  
14 the question are there more or less cancers in  
15 Port Hope than what one would expect based on the  
16 age and sex of the people who live there.

17 The materials and methods are  
18 standard and directly related to the main  
19 objective which is to compare the mortality in  
20 Port Hope with that of the entire Province of  
21 Ontario. These are not analytic studies.  
22 Analytic studies study the determinates of disease  
23 or reasons for relatively high or low frequency of  
24 disease in specific groups. These type of studies  
25 would attempt to answer the question what factors

1 are linked or associated with the risk of a  
2 disease.

3 The study was conducted by Health  
4 Canada scientists as part of a mandate for  
5 national disease surveillance. The researchers  
6 who conducted the study are internationally  
7 recognized for their leadership in cancer  
8 surveillance. The study was peer reviewed for  
9 scientific merit by three internationally  
10 respected independent university based  
11 epidemiologists. They all deemed the study to be  
12 scientifically sound.

13 The main results of the study are,  
14 number one, there was no overall evidence of  
15 increased cancer mortality in Port Hope from 1956  
16 to 1997. There were 836 cancer deaths observed in  
17 Port Hope compared to 845 expected based on  
18 Ontario rates.

19 Number two, there was no evidence  
20 of excess mortality for cancers known to be  
21 associated with radiation exposure. There is no  
22 increased mortality from leukaemia, breast cancer  
23 or lung cancer or childhood leukaemia in  
24 particular. These findings on the whole are  
25 consistent with the cancer incidence report.

1                   However, there was a consistently  
2                   increased mortality from circulatory diseases.  
3                   From 1956 to 1997 there were 2,301 circulatory  
4                   disease deaths observed in Port Hope, which was an  
5                   increase of 15 per cent from the 2,000 deaths  
6                   expected based on Ontario rates.

7                   Elevated mortality included  
8                   coronary heart disease, stroke and diseases of the  
9                   arteries. Elevated circulatory disease mortality  
10                  was also noted in the larger Northumberland  
11                  County, so it was not unique to Port Hope.

12                  Number five, there were some  
13                  increases and decreases in mortality when data  
14                  were divided into finding units by time period and  
15                  sex. There were significantly higher mortality  
16                  for pneumonia, cirrhosis of the liver and of brain  
17                  cancer.

18                  For pneumonia, both men and women  
19                  had significantly higher mortality for the whole  
20                  time period. Men had significantly higher  
21                  mortality from cirrhosis in one time period and  
22                  women had higher mortality for brain cancer for  
23                  one time period.

24                  There are also a few diseases that  
25                  had significantly lower mortality than what would

1           be expected. Diabetes and Alzheimer's disease for  
2           both men and women for the whole time period had  
3           lower mortality than what would be expected.

4                           In conclusion, there was no  
5           overall evidence of increased mortality in Port  
6           Hope. The overall pattern of cancer incidence and  
7           mortality in Port Hope was comparable to that of  
8           the rest of Ontario. These findings are  
9           consistent with existing knowledge of those  
10          response relationships of radiation risk.

11                          Finally, there were significantly  
12          increased circulatory disease mortality in Port  
13          Hope throughout the 42-year period studied.  
14          Cigarette smoking, high blood pressure, high fat  
15          diet and lack of exercise are the main risk  
16          factors for circulatory disease. It is unlikely  
17          the increased rates are a result of the town's  
18          industrial activities, especially since results  
19          were not specific to Port Hope.

20                           Thank you.

21                          MR. BLYTH: Thank you very much,  
22          Ms Lane.

23                          CNSC staff and our colleagues from  
24          Health Canada are available to answer any  
25          questions that the Commission Members might have.

1 THE CHAIRPERSON: Thank you very  
2 much. We will open the floor for questions.

3 Mr. Graham?

4 MEMBER GRAHAM: Just a further  
5 explanation for a layperson who needs some  
6 clarification. In your very last slide, are you  
7 saying that in the significant increase in  
8 circulatory disease and mortality in Port Hope you  
9 could not tie a correlation to the industrial  
10 activities in that town to that? That would be  
11 more to the three risk factors that you indicate.  
12 Is that what you are saying?

13 MR. BLYTH: I will ask Ms Lane to  
14 respond.

15 MS LANE: The study was a  
16 descriptive study so it only described the disease  
17 rates in Port Hope. It was not an analytic study  
18 so it did not look to see what were the causes of  
19 high or low rates of disease within the  
20 population, but those are the main risk factors  
21 for circulatory disease in Canada.

22 MR. BLYTH: I think it is also  
23 important to note that that was -- that situation  
24 existed beyond the confines of Port Hope but was  
25 high in the Northumberland County as a whole. The

1 population of Port Hope is in the order of 15,000,  
2 16,000 people I believe while as the wider county  
3 is between 75,000 and 80,000 depending on which  
4 Web site you go to to find the population.

5 MEMBER GRAHAM: The significant  
6 increase you say is -- that same trend was for the  
7 whole county, not just for Port Hope. Where it  
8 says disease/mortality in Port Hope, it really  
9 could be for the whole county. Is that what you  
10 are saying?

11 MR. BLYTH: That is exactly my  
12 point, that circulatory disease is higher than you  
13 would expect based on the province of Ontario  
14 averages for the whole county and not just the  
15 municipality.

16 THE CHAIRPERSON: Dr. Giroux.

17 MEMBER GIROUX: Yes. Following up  
18 on that one, that then is the basis for your  
19 statement that it is unlikely to be related to the  
20 pollution in the city because it is also present  
21 in Northumberland and because it says "mainly in  
22 Canada is one of the main causes of mortality?"

23 MR. BLYTH: That is correct. It  
24 is my understanding also that circulatory disease  
25 is not traditionally associated with radiation

1 doses at the levels that we are talking about. It  
2 is my understanding that at higher levels that one  
3 might receive in the course of medical treatment  
4 or something for a cancer that is the case.

5 But to the best of our knowledge  
6 at this time that correlation does not exist. We  
7 are aware that there are studies going on but  
8 there is no consensus on those studies with  
9 respect to linkages between lower doses and  
10 circulatory problems.

11 MEMBER GIROUX: Thank you.

12 I have a question for staff or for  
13 Health Canada, I am not sure, about the confidence  
14 interval and the level of the 95 per cent that you  
15 are using. In previous meetings and hearings of  
16 the Commission, we had people from Port Hope and  
17 some criticized the use of 95 per cent and said  
18 you might instead use 90 per cent and then the  
19 results might be different.

20 Could you justify the use of  
21 95 per cent as a level and indicate if the results  
22 might be different if you used another one?

23 MS LANE: Ninety-five per cent  
24 confidence intervals are the standard confidence  
25 limits that epidemiologists would use in this type

1 of study. If you were to look at the literature,  
2 the majority of literature published would be a 95  
3 per cent confidence interval.

4 By going to a 90 per cent  
5 confidence interval you are narrowing the range so  
6 more things are likely to be statistically  
7 significant. By keeping it at 95, that is the  
8 recognized standard that epidemiologists use under  
9 this situation.

10 MEMBER GIROUX: Thank you.

11 The question for staff now. This  
12 is an important study of course for the people in  
13 Port Hope and intervenors that we have had before.  
14 What are your plans for publication and  
15 dissemination and maybe discussion? Will people  
16 have a chance to react? They will be informed, I  
17 am assuming, but please explain.

18 MR. BLYTH: There has already been  
19 a fairly wide dissemination of the information.  
20 It was disseminated to municipal officials,  
21 medical health officers and individuals like that.

22 Also, we have had requests from  
23 interested citizens and groups in Port Hope, at  
24 least one, and they have been forwarded and  
25 supplied with the report already. I believe there

1           have been comments in the newspaper to that regard  
2           already in the media.

3                           Do you want to add anything to  
4           that, Rachel?

5                           MS LANE: I think that pretty much  
6           sums it up. The document is available to the  
7           people of Port Hope as well as other people of  
8           Canada. Selected, elected and appointed officials  
9           received the report in advance of the release. I  
10          have made initial contact with the medical officer  
11          of health in Port Hope as well as the chief  
12          medical officer of health in Ontario offering to  
13          discuss the study with them.

14                          They have not been back in touch  
15          with me at this time.

16                          MEMBER GIROUX: Are you planning  
17          any public presentation in Port Hope? Are you  
18          thinking of creating a forum for discussion of the  
19          report?

20                          MR. BLYTH: We have not planned  
21          any such event. Upon request we would obviously  
22          do it, but in this situation we are not going to  
23          proactively offer workshops, townhall meetings or  
24          presentations.

25                          THE CHAIRPERSON: My question is

1 with regard to I guess what would be a logical  
2 next step. Perhaps this is a naive question but  
3 since the province is responsible for health care,  
4 would the province be the group that would  
5 undertake -- for example, if people were worried  
6 about the circulatory disease question, would it  
7 be the province who would logically follow up?  
8 Would it be the medical officer or would it be a  
9 broader Ontario ministry of health officials?  
10 What would be the logical place for the people of  
11 Port Hope to turn to? To whom would that be  
12 logical?

13 MR. BLYTH: I am going to give a  
14 high level response and then I will pass it to my  
15 more learned colleague.

16 This is the reason behind our  
17 initiative to try to make contact with the medical  
18 health officers to discuss logical next steps and  
19 who might take those steps, if any. It is not  
20 clear -- it may well be clear that with respect to  
21 circulatory disease that maybe somebody should be  
22 doing something in Port Hope. If you had limited  
23 funds to spend, presumably that would be the place  
24 you would start based on this kind of information  
25 if your interest is public health.

1                   We don't feel that falls within  
2                   our mandate but we certainly want to talk to the  
3                   provincial authorities. We believe that they are  
4                   responsible to inquire about logical next steps.

5                   We at this time are not planning  
6                   steps beyond that. My reason for saying that is  
7                   we don't have a clear policy position with respect  
8                   to the kind of research we should or shouldn't be  
9                   doing as a regulatory agency and, more precisely,  
10                  where we fit in the health studies field vis-à-vis  
11                  Health Canada and the provinces and things  
12                  like that.

13                  We need to get our policy with  
14                  respect to research and health studies more  
15                  clearly defined and generally accepted before we  
16                  are likely -- it would be appropriate for the CNSC  
17                  to take next steps, I would say, apart from  
18                  discussions with provincial agencies and municipal  
19                  authorities who have an interest in this if they  
20                  are so inclined to have those discussions.

21                  Rachel, do you want to add  
22                  anything?

23                  MS LANE: I think I should just be  
24                  short and sweet.

25                  A study was conducted in 1998, the

1 Great Lakes study. In that study elevated rates  
2 of cardiovascular disease were noted in Port Hope,  
3 so our study wasn't providing really any new  
4 information to the community.

5 My understanding of public health  
6 is that the local health unit has to provide a  
7 health assessment, regular health assessments, of  
8 the community, so they are already aware of  
9 cardiovascular disease in their community, I would  
10 not presume but I would assume that they are  
11 aware. I haven't had the opportunity to discuss  
12 with them what they have already implemented  
13 within their community.

14 THE CHAIRPERSON: I just would  
15 like to clarify, Mr. Blyth. I guess my question  
16 was that the studies are done usually for a  
17 reason. There could be I guess scientific  
18 curiosity, but they are done for a reason which  
19 would require some implementation per se which is  
20 I gather from you not our job, which I know is not  
21 our job.

22 Your comment about policy would to  
23 me then relate to other studies that would be done  
24 rather than implementation. Am I correct in  
25 that triangle?

1                   MR. BLYTH: That is absolutely  
2 correct. We won't be taking next steps in terms  
3 of additional studies, more in-depth  
4 investigations of this or earlier reports until we  
5 have sorted out our policy. We will be talking to  
6 the medical health officers and responsible people  
7 in the province of Ontario.

8                   I think as part of our due  
9 diligence to make sure that they are aware of our  
10 report and to discuss, again at least at an  
11 intellectual level, what they might do as a  
12 result, but the ball in my mind moves clearly in  
13 their court at this time.

14

15                   **02-M48**

16                   **The Canadian Nuclear Safety Commission's**  
17                   **Regulatory Transition Plan**

18                   THE CHAIRPERSON: Thank you.

19                   I would like to move to item 6.2,  
20 which is the CNSC regulatory transition plan as  
21 noted in CMD Document 02-M48. I would call upon  
22 Mr. Mike Taylor, please.

23

24                   **Oral Presentation by CNSC Staff**

25                   MR. TAYLOR: Thank you,

1 Madam Chair, Members of the Commission.

2 My name is Mike Taylor. I am the  
3 Executive Director of the Office of Regulatory  
4 Affairs.

5 With me is Mr. Jongile Majola from  
6 my office who led the team that put together the  
7 report before you.

8 We do not have a presentation for  
9 you. Hopefully, the report is explanatory enough.  
10 We are available to respond to your questions.

11 THE CHAIRPERSON: Questions from  
12 the Commission Members with regard to the  
13 transition plan?

14 I guess I have a philosophical  
15 question. The transition plan was a document that  
16 came out of the changeover to the new legislation  
17 two years ago. When does the transition plan stop  
18 and the just general ongoing exemptions continue?  
19 Is it a matter of nomenclature or is there a  
20 definite changeover time?

21 MR. TAYLOR: From my point of  
22 view, the transition plan stops when the last item  
23 on the current transition plan is complete. At  
24 the moment, as we have stated in the report, we do  
25 not believe that we need to ask for any further

1 amendment to the transition plan.

2 Should any item that is currently  
3 on that plan turn out to require extension, then I  
4 believe we would come back and seek the  
5 Commission's approval to change that particular  
6 item, but at the moment we believe that there  
7 should be no further requirement to change and  
8 therefore once the items on this plan are all  
9 complete I would say that the transition period  
10 is over.

11 THE CHAIRPERSON: For example, the  
12 date that I see that is furthest out is  
13 December 2006. Is that when the transition plan  
14 would expire?

15 MR. TAYLOR: In my view, yes. But  
16 I think once we have completed the other items on  
17 the transition plan, I would not envisage us  
18 introducing extra items onto the transition plan.  
19 I would say that any new item is simply part of  
20 the ongoing process of regulatory change.

21 THE CHAIRPERSON: When would we  
22 see another update of the transition plan to the  
23 Commission?

24 MR. TAYLOR: If I may consult with  
25 my colleague.

1 --- Pause

2 MR. TAYLOR: We suggest that there  
3 is a report to be submitted in June of next year  
4 on the transportation situation and if the  
5 Commission agrees we would update this program at  
6 that time.

7 THE CHAIRPERSON: So yearly in  
8 fact --

9 MR. TAYLOR: Yes.

10 THE CHAIRPERSON: -- may be  
11 appropriate, including the transportation report.  
12 Any other questions from the  
13 Commission?

14 Thank you very much, Mr. Taylor.

15

16 **Closing of Meeting**

17 THE CHAIRPERSON: We will now move  
18 to in camera. The next item, CMD 02-M49 relates  
19 to security matters and will not be discussed in  
20 public. This brings to the end the public part of  
21 this meeting and we will move to closed session.

22 Thanks to all of you for attending  
23 today.

24 --- Whereupon the meeting concluded at 4:14 p.m.