MEMORANDUM OF UNDERSTANDING

BETWEEN

THE CANADIAN NUCLEAR SAFETY COMMISSION

AND

HEALTH CANADA

WHEREAS the Cabinet Directive on Streamlining Regulation requires that when managing risks on behalf of Canadians, regulatory authorities are to identify and consult with other federal departments and agencies that have a specific interest in the proposed regulations, and are to coordinate the implementation and management of regulation to minimize complexity and duplication;

AND WHEREAS the Canadian Nuclear Safety Commission (CNSC) (hereinafter, “the Commission”) regulates, pursuant to paragraph 9(a) of the Nuclear Safety and Control Act (NSCA), the production, possession and use of nuclear substances, prescribed equipment and prescribed information in order to prevent unreasonable risk to the health and safety of persons, the environment and national security, and to achieve conformity with Canada’s international obligations regarding the peaceful use of nuclear energy;

AND WHEREAS the Commission is authorized by paragraph 21(1)(a) of the NSCA to “enter into arrangements, including an arrangement to provide training, with any person, any department or agency of the Government of Canada, or of a province, any regulatory agency or department of a foreign government or any international agency”;

AND WHEREAS the December 10, 2007 Governor General in Council Directive To The Canadian Nuclear Safety Commission Regarding The Health Of Canadians states that “In regulating the production, possession and use of nuclear substances in order to prevent unreasonable risk to the health of persons, the Canadian Nuclear Safety Commission shall take into account the health of Canadians who, for medical purposes, depend on nuclear substances produced by nuclear reactors.”;

AND WHEREAS the Minister of Health has, pursuant to the Department of Health Act (DHA), the authority and duty to promote and preserve the health and well-being of the people of Canada and, specifically, to investigate and conduct research into public health, including the monitoring of diseases, and to collect, analyse, interpret, publish and distribute information relating to public health;
AND WHEREAS Health Canada (hereinafter, "the Department") regulates, pursuant to the Food and Drugs Act (FDA), the sale of drugs and medical devices, including drugs and medical devices that contain radioisotopes and accelerators that are used for medical purposes;

AND WHEREAS the Department regulates, pursuant to the Radiation Emitting Devices Act (REDA), the sale, lease and import of accelerators that do not produce nuclear energy;

AND WHEREAS the Department and the Commission recognize the importance of comprehensive and consistent regulatory oversight of radiation safety in the application of nuclear medicine for the safety of Canadians;

AND WHEREAS the Department operates the National Calibration Reference Centres (NCRC) for bioassay and in-vivo monitoring for the purposes of comparing third-party testing programs with pre-established norms of equipment performance and previously reported data;

AND WHEREAS the Department operates the Canadian Radiological Monitoring Network (CRMN) for the purposes of monitoring concentrations and distributions within the public domain of nuclear substances, including those released by or associated with facilities, equipment and activities regulated by the Commission;

AND WHEREAS the Department is responsible for the Canadian portion of the radionuclide monitoring stations under the Comprehensive Nuclear Test Ban Treaty's (CTBT) International Monitoring System;

AND WHEREAS the Department is the federal lead for the coordination of technical matters for federal nuclear emergency preparedness, including management of the Federal Nuclear Emergency Plan (FNEP);

AND WHEREAS the Commission and the Department each have responsibilities with respect to federal nuclear emergency preparedness and response, as provided for in the FNEP;

AND WHEREAS the Department has a mandate to operate the National Dose Registry (NDR) for purposes of receiving and storing information, including Personal Information regarding the exposure of nuclear energy workers (NEWs) and other workers to doses of ionizing radiation;

AND WHEREAS the Department and the Commission wish, pursuant to a memorandum of understanding (MOU), to facilitate and to set out their responsibilities concerning the handling of information, including Personal Information, relating to the
production, possession and use of nuclear substances and prescribed equipment;

AND WHEREAS the Department operates the Canadian Biodosimetry Network for the purposes of assessing over exposures to ionizing radiation;

AND WHEREAS the Commission and the Department jointly co-chair the Federal-Provincial-Territorial Radiation Protection Committee (FPTRPC), in order to advance the development and harmonization of practices and standards for radiation protection within federal, provincial and territorial jurisdictions;

AND WHEREAS the Department and the Commission are subject to the Access to Information Act, the Privacy Act and any other applicable federal legislation and policies as may apply, information exchanged between them or received by or from them in administering this MOU will be handled in accordance with the legislation as it may apply;

AND WHEREAS any protected and prescribed information, including Personal Information, shared between and received by or from the Department and the Commission in relation to the administration of this MOU is subject to the NSCA, the DHA, the FDA, and the REDA, respectively, and any regulations made thereunder;

THEREFORE, the Commission and Department hereby undertake to consult and cooperate in accordance with the following sections of this MOU in order to minimize regulatory duplication and to use government resources effectively.

DEFINITIONS

In this MOU

“business day” means any day between 8:15 a.m. to 4:30 p.m. Eastern Standard Time from Monday through Friday, excluding statutory holidays observed by the Commission and the Department.

“designated officer of the Commission” or “designated officer” has the same meaning as found in section 2 of the NSCA.

“hazardous substances” means a substance, other than a nuclear substance, that is used or produced in the course of carrying out an activity licensed by the Commission and that may pose a risk to the environment or the health and safety of persons.
“Memorandum of Understanding” and “MOU” means this agreement, the preamble and all annexes attached to and forming part of this agreement as from time to time supplemented or amended.

“nuclear energy” and “nuclear substances” have the same meaning as found in section 2 of the NSCA.

“nuclear energy worker” Has the same meaning as found in section 2 of the NSCA.

“Personal Information” means information about an identifiable individual that is recorded in any form and that is shared between the Commission and the Department as outlined in annex 1 to this MOU and that includes, but is not limited to, the given names, surname and previous surname of individuals; a social insurance number; sex; the date, province and country of birth; the dose record for the current one-year and five-year dosimetry periods; and information concerning whether an individual is pregnant.

“prescribed” has the same meaning as found in section 2 of the NSCA.

SCOPE OF ACTIVITIES

Part A: Provision of information

The Department will:

A.1 Cooperate and exchange information with the Commission on occupational and public health matters and the health risks associated with the development, production and use of nuclear energy and nuclear substances, and radiation-emitting medical devices.

A.2 Upon request of a designated officer of the Commission (hereinafter “designated officer”), advise employers and medical practitioners about biological methods to identify persons who may have received a dose of ionizing radiation in excess of the prescribed limits.

The Commission will:

A.3 Consider the information provided by the Department pursuant to paragraphs A.1 and A.2.

A.4 Cooperate and exchange information with the Department on occupational and
public health matters and health risks associated with the development, production and use of nuclear energy and nuclear substances.

**Part B: Development or provision of standards, calibration and independent testing**

The Department will:

B.1 Be the reference calibration centre for internal dosimetry services licensed by the Commission, by providing independent tests to these dosimetry services. These tests will include all elements described in sections F.1, F.2, F.3 and F.5 of S-106, *Technical and Quality Assurance Requirements for Dosimetry Services*, revision 1, May 2006.

B.2 Make the results of the independent tests referred to in paragraph B.1 available to the Commission.

B.3 Consult with the Commission when developing and implementing quality assurance programs for services delivered by the NCRC. Make the Commission aware of any findings that reveal issues that may compromise or have compromised the quality or reliability of the services provided to the Commission by the NCRC and address these issues in an appropriate manner.

B.4 Develop Practical Reference Standards for internal dosimetry services that use bioassay and *in-vivo* monitoring to assess internal radiation doses of workers of the Commission’s licensees, by means of independent tests and intercalibrations with standards that are traceable to a recognized national standards laboratory.

B.5 Make the Practical Reference Standards referenced in paragraph B.4 available to the dosimetry services licensed by the Commission.

B.6 Develop other Practical Reference Standards deemed necessary by the Commission and the Department.

B.7 Provide independent tests for:

1) *in-vitro* urine bioassay for
   i. hydrogen-3 (tritiated water);
   ii. carbon-14;
   iii. combined hydrogen-3 and carbon-14;
   iv. natural uranium; and
   v. mixed fission and activation products.
2) *in-vivo* bioassay for
   
i. thyroid, for radioiodines;
   
ii. whole body, for mixed fission and activation products, and
   
iii. thorax, for natural uranium and for transuranics.

B.8 Develop other independent tests as deemed necessary by the Commission and the Department.

B.9 For regulatory assurance purposes, the reference calibration facilities will:

1) participate in related independent intercomparisons and intercalibrations as they become available, and make the results of such exercises available to the Commission; and

2) continue to maintain ISO 9001 certification.

The Commission will:

B.10 Require that the independent tests provided by the Department pursuant to paragraph B.7 be used for the independent testing of internal dosimetry services licensed by the Commission.

**Part C: National Dose Registry**

The Department will:

C.1 Operate the National Dose Registry (NDR) to receive, record, store and make available to the Commission, for regulatory purposes, data concerning the exposure to ionizing radiation and to radon progeny received by workers at facilities or during activities licensed by the Commission.

C.2 Assist in reviewing and provide input to epidemiological studies assessing the relationship between ionizing radiation and health effects.

C.3 Continue to develop and maintain a quality management system for the NDR. Make the Commission aware of any quality assurance/control issues that may compromise or have compromised the integrity of data received by the NDR and measures it has, or will take, to address the issues.

C.4 Provide Commission staff access to information contained in the NDR, in accordance with terms and conditions found in annex 1 to this MOU.

C.5 Inform the Commission of any problems associated with the data submitted in the
prescribed format to the NDR, when the Department reviews the quality of data submitted by the Commission’s licensees.

The Commission will:

C.6 Abide by the terms and conditions regarding access to the information contained in the NDR, as provided for in annex 1 to this MOU.

C.7 Solicit the NDR’s input on issues related to submission of data to the NDR, including ways to improve or resolve issues of missing or late submissions, when the Commission is reviewing the compliance of licensees with the regulatory requirements of the Commission.

C.8 Assist in reducing the effort of the Department in addressing the work demands upon the NDR caused by Commission licensees. These include, but are not necessarily limited to, reduction of excessive rejections of dosimetry records by Commission licensed dosimetry services and dose record verifications by licensees.

C.9 Take the necessary actions to ensure that licensees submit information in the format and form specified by the NDR.

The Commission and the Department acknowledge that:

C.10 The NDR-CNSC Liaison Committee, comprised of staff from the Commission and the Department, is the primary forum for consultation, discussion and possible solutions of problems or issues related to the submission of data by Commission licensees to the NDR, as well as issues related to the operation of the NDR that are of mutual interest to the Commission and the Department:

1) Liaison Committee members will consult with their respective line management on ways to resolve chronic issues.

2) In the event that no solution for a chronic issue is found at the Liaison Committee member level, the Liaison Committee will request a meeting with senior representatives from the Commission and the Department to resolve the issue.

Part D: Cooperation regarding investigations, tests and studies

Canadian Radiological Monitoring Network

The Department will:
D.1 Immediately share with the Commission any information from the CRMN and the CTBT International Monitoring System that suggests an early indication of a radioactive release beyond licensed limits, from a nuclear facility in Canada or as a result of nuclear emergencies outside of Canada, and share any related information on a timely basis.

D.2 When planning changes to the programs associated with the CRMN, consult with the Commission with respect to those changes that deal with the monitoring of levels of radioactivity near nuclear facilities regulated by the Commission.

The Commission will:

D.3 Immediately share with the Department any information that suggests an early indication of a radioactive release from a nuclear facility, including releases from facilities outside of Canada, or of any equipment or activities regulated by the Commission that the Commission or the Department determines to have caused, or to be cause for, public concern, and share any related reports on a timely basis.

D.4 Immediately share any information from the Commission’s Independent Environmental Monitoring Program (IEMP) that suggests an early indication of a radioactive release beyond licensed limits from a nuclear facility in Canada, and consult the Department concerning any changes to the Commission’s IEMP that may be of interest to or may impact the Department.

The Commission and the Department will:

D.5 Cooperate, where possible, in coordinating and sharing the public information from the Department’s CRMN and the Commission’s IEMP; for example, by providing links to each other’s data sets in appropriate locations on their respective websites.

**In-vitro assays and in-vivo monitoring**

The Department will:

D.6 Conduct, when requested by the Commission and deemed appropriate by the Department, in-vitro assays of biological samples and in-vivo measurements to assess radiation doses.

The Commission will:

D.7 Reimburse the Department for costs associated with in-vitro assays of biological samples and in-vivo measurements to assess radiation doses when requested by
the Commission and deemed appropriate by the Department in accordance with Part L.

Other studies and investigations

The Department will:

D.8 Advise the Commission before undertaking or commissioning studies or assessments of the health risks associated with facilities, equipment or activities regulated by the Commission, or studies and assessment of issues or events related to the regulatory responsibilities of the Commission.

The Commission will:

D.9 Advise the Department before undertaking or commissioning non-routine studies or assessments of the impacts on public health and safety of facilities, equipment or activities regulated by the Commission.

The Commission and the Department will:

D.10 Cooperate and exchange information as early as possible concerning studies or assessments dealing with the health effects of nuclear substances and nuclear energy and risk assessments associated with the development, production and use of nuclear energy and nuclear substances.

D.11 Undertake periodic and regular exchanges of information on radiation protection and related issues of mutual interest to the Commission and the Department.

D.12 Provide the other with an opportunity to review and/or comment, before public release, on any study that either the Commission or the Department produces that is likely to have an impact on or be of direct interest to the other.

Part E: Notification of findings

The Department will:

E.1 Inform the Commission of the result of any review or investigation by the Department that indicates that any medical devices that are prescribed equipment under the NSCA, FDA or regulations thereunder are or may be unsafe.

E.2 Cooperate with the Commission in investigations initiated by the Commission that may arise concerning the radiological safety of medical devices that are prescribed equipment under the NSCA, FDA or regulations thereunder.
E.3 Share with the Commission any observations with respect to the handling, processing and storage of nuclear substances at radiopharmaceutical manufacturing facilities that the Department might observe during the course of the Department's inspections of such facilities, where the Department believes that such handling, processing or storage may place the public or workers at risk.

The Commission will:

E.4 Cooperate with the Department in any investigations initiated by the Department that may arise concerning the radiological safety of medical devices that are prescribed equipment under the NSCA, FDA or regulations thereunder.

E.5 Share with the Department any observations with respect to the manufacture or handling of radiopharmaceuticals that the Commission might observe during the course of the Commission's inspections of regulated activities at radiopharmaceutical manufacturing facilities, where the Commission believes that such manufacture may place the persons receiving the radiopharmaceutical for research, diagnosis or treatment or the public or workers at risk.

E.6 Advise the Department, through the Director General of the Biologics and Genetic Therapies Directorate, of any regulatory decision that could result in a significant impact on the production of medical isotopes for the Canadian health care system.

**Part F: Cooperation on Environmental Assessments**

The Department will:

F.1 Provide specialist or expert information or knowledge in respect to a federal environmental assessment for which the Commission is the responsible authority, as per the Department's obligation as a federal authority pursuant to section 20 of the *Canadian Environmental Assessment Act, 2012*.

**Part G: Radiological and Nuclear Emergencies and Incidents**

G.1 The Commission and the Department will cooperate and exchange information on matters of mutual interest related to nuclear emergency preparedness and response, in accordance with the Federal Nuclear Emergency Plan (FNEP), its provincial annexes and its supporting documents.

G.2 The Commission and the Department will fulfill the emergency response roles and responsibilities as outlined in annex 2.
G.3 The Department will be responsible for the role of National Competent Authority (Abroad) for the International Atomic Energy Agency (IAEA) with respect to emergency preparedness and response matters.

G.4 The Commission and the Department will each be designated as a National Competent Authority (Domestic) to the IAEA with respect to emergency preparedness and response matters.

G.5 The Commission and the Department will cooperate on the development and delivery of relevant training related to nuclear emergency preparedness and response.

G.6 The Commission and the Department will cooperate and exchange, in a timely manner, information on radiological or nuclear incidents that do not trigger the FNEP, but that are of mutual interest and of interest to Canadians.

G.7 The Commission and the Department will pro-actively consult on the strategy for, coordinate the development of, and share for comment any After Action Reports generated following a major exercise, or response to a radiological or nuclear emergency event or incident with offsite consequences occurring in Canada or abroad.

The Commission and the Department acknowledge that:

G.8 The Health Canada-CNSC Emergency Preparedness and Response Liaison Committee, comprised of directors from the Commission and the Department, is the primary forum for consultation, discussion and possible solutions of problems or issues related to nuclear emergency preparedness and response:

1) Liaison Committee members will consult with their respective line management on ways to resolve chronic issues.

2) In the event that no solution for a chronic issue is found at the Liaison Committee member level, the Liaison Committee will request a meeting with directors general from the Commission and the Department to resolve the issue.

G.9 The Department will serve as Canada’s primary representative on the IAEA’s Emergency Preparedness and Response Standards Committee, and the Commission will serve as the alternate.
Part H: Federal-Provincial-Territorial Radiation Protection Committee

H.1 The Commission and the Department will cooperate to advance the development and harmonization of practices and standards for radiation protection within Canada, in accordance with the Terms of Reference of the Federal-Provincial-Territorial Radiation Protection Committee (FPTRPC).

H.2 The roles and responsibilities of the FPTRPC, as an intergovernmental Committee established to support Federal, Provincial and Territorial radiation protection agencies in their respective mandates, are to:

1) provide a national focus for government radiation protection agencies;

2) promote the harmonization of radiation health and safety programs for the public, workers and patients;

3) identify emerging issues in radiation protection and recommending actions to the appropriate jurisdictions;

4) develop and harmonize radiation protection standards, guidelines and input for legislation;

5) provide a forum for representatives of the provinces and territories, the Commission, the Department, the Department of National Defence, and other federal departments/agencies; and

6) consider requests from other governmental committees and agencies concerned with health, safety and environmental issues and liaising regularly with such committees and agencies.

Part I: International Committees

I.1 The Commission and the Department will coordinate their activities and share information about invitations to, training by, or meetings of various international committees such as the World Health Organization (WHO), the United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR), IAEA, the International Commission on Radiological Protection (ICRP) and the Nuclear Energy Agency (NEA).

I.2 The Commission and the Department will consult one another before making commitments to international committees when those commitments may implicate or be of interest to the other.
I.3 The official Canadian representative to UNSCEAR will be nominated upon alternating terms by the Commission and the Department. Terms will last for a maximum of 5 years or until the incumbent steps down unless otherwise determined by the Commission and the Department.

I.4 Nominations of Canadian advisors to UNSCEAR meetings may be vetted by either the Commission or the Department.

**Part J: Licensing and Certification of Medical Devices**

The Commission will:

J.1 Verify that any medical devices that are new prescribed equipment under the NSCA or regulations thereunder have a valid Health Canada Medical Device Licence issued under the FDA.

The Commission and the Department will:

J.2 Share licence or certificate assessment information for medical devices that are new prescribed equipment under the NSCA or regulations thereunder when requested as part of normal business.

**ADMINISTRATION OF THE MOU**

**Part K: Contacts**

K.1 The Commission and the Department will identify the persons to be contacted in matters related to the general administration of this MOU and the activities described herein, as provided in annex 3 and amended when necessary.

**Part L: Cost Sharing**

L.1 Where possible, the Commission and the Department will provide or honour the services and the commitments made in this MOU without charge to one another.

L.2 Notwithstanding paragraph L.1 above, the Commission and the Department recognize that the delivery of certain services listed herein or the honouring of certain commitments made in this MOU may be subject to cost recovery regulations or may require, on a case-by-case basis, financial arrangements between the Commission and the Department to offset, in whole or in part, the
associated costs.

L.3 With respect to financial arrangements referred to in paragraph L.2, the Commission and the Department will develop cost recovery arrangements that are satisfactory to both the Commission and the Department. Any reimbursements will be via the Interdepartmental Settlement process and will be outlined in separate administrative agreements.

Part M: Resolution of Conflicts

M.1 The Commission and the Department will make every reasonable effort to resolve at the working level any conflicts that arise from this MOU.

M.2 Failing resolution, conflicts may be referred for resolution to the persons or offices named pursuant to paragraph K.1 above or other senior managers in the Department and the Commission, or ultimately to the signatories of this MOU.

Part N: Revisions to the MOU

N.1 The Commission and the Department will give one another notice of any change in legislation, regulations or policy relating to respective programs that is likely to affect this MOU.

N.2 The Commission and the Department will consult in advance concerning any significant changes in the level or nature of service that the Commission or the Department, as the case may be, intends to request pursuant to this MOU.

N.3 The MOU may be revised by the Commission’s and the Department’s mutual written consent through an exchange of letters.

Part O: Requirement for regular review

O.1 This MOU will be reviewed every five (5) years after coming into force, or, in the case of a revision pursuant to paragraph N.2, every five (5) years after the date of revision.
Part P: Termination

P.1 Either the Commission or the Department may withdraw from this MOU by providing at least six (6) months' notice in writing to the other, specifying the intention to withdraw and the effective date of withdrawal.

Part Q: Coming into force

Q.1 This MOU becomes effective on the date of the last signature, and will remain in effect until revised pursuant to paragraph N.2 or terminated pursuant to paragraph P.1.

Signed in duplicate in the English and French languages.

Michael Binder
President
Canadian Nuclear Safety Commission
Signed on: OCT 10 2017

Simon Kennedy
Deputy Minister
Health Canada
Signed on: OCT 17 2017
Annex 1

Canadian Nuclear Safety Commission Access to the
National Dose Registry for Regulatory Purposes

General Principles

1. Any collection, use or disclosure of Personal Information pursuant to this MOU is to be carried out with the highest degree of anonymity that is possible and limited to whenever necessary in the circumstances. Personal Information exchanged under this MOU will be retained and disposed of by the collecting party according to applicable legislation, including the Library and Archives of Canada Act.

2. In the event of accidental or unauthorized access, disclosure, use, modification and/or deletion of Personal Information, the Commission and the Department will endeavour to implement all applicable policies and guidelines; promptly take all reasonable steps to contain, mitigate and prevent the recurrence of the event; promptly notify one another of any actual or potential loss, unauthorized disclosure, access or use of the Personal Information, or any other breach or potential breach of any terms set out in this MOU. Further, the Commission and the Department will endeavour to take all reasonable and necessary steps to regain possession of the Personal Information and to prevent further unauthorized disclosure, access or use, and to notify one another promptly of the same.

3. The Commission and the Department are responsible for the actions of their respective employees, agents and contractors with respect to the collection, use, disclosure, retention and/or disposal of Personal Information.

4. Any restriction on the collection, use, disclosure, retention or disposal of Personal Information will comply with the Access to Information Act, the Privacy Act, the Library and Archives of Canada Act and any other applicable legislation and policies.

5. The Commission and the Department will use reasonable efforts to ensure that the collection, use and disclosure of Personal Information are solely for Regulatory Purposes.

6. The Commission and the Department will refer any access to information requests pursuant to the Access to Information Act and the Privacy Act concerning Personal Information disclosed under this MOU, to their respective Access to Information and Privacy advisors or coordinators.
Authorities respecting the Disclosure and Collection of Personal Information

1. The Department confirms that it is authorized to disclose to the Commission Personal Information for Regulatory Purposes pursuant to paragraphs 4(2)(a.1) and (d) of the federal Department of Health Act, and under paragraphs 8(2)(a), and (f) of the Privacy Act.

2. The Commission confirms that it is authorized to collect Personal Information from the Department for Regulatory Purposes pursuant to subsections 9(a) and 21(1)(b) of the NSCA.

Identification of Personal Information

1. Personal Information disclosed by the Department to the Commission includes personal information of workers exposed to nuclear energy set out under section 19 of the Radiation Protection Regulations (RPR) under the NSCA as follows:
   a. given names, surname and any previous surname;
   b. social insurance number;
   c. sex;
   d. date, province and country of birth;
   e. dose records; and
   f. whether the worker is pregnant.

Responsibilities of the Commission

The Commission will:

1. Provide to the NDR the names of those members of the Commission’s staff who are authorized to request NDR data, and will provide the NDR forthwith of any changes to these authorizations;

2. Ensure that any member of its staff that it authorizes to request NDR data from the Department possesses an appropriate level of security clearance in accordance with applicable legislation, policies and Department and Commission requirements;

3. Inform and train the members of staff that are referred to above of their obligations with respect to the terms of this MOU and Annex, and any applicable legislation and policies concerning the use of Personal Information collected for purposes of the RPR under the NSCA and obtained from the NDR;
4. Ensure that those persons authorized by the Commission to request NDR data from the Department will only do so via the submission of the appropriate form to the Department, in conformity with any applicable Treasury Board security and information and technology policies and guidelines;

5. Ensure that all information received from the NDR is handled, processed, and stored securely; and

6. Accept the decision of the Department denying any member of the Commission’s staff who breaches the security measures described in this Annex further access to NDR data.

Responsibilities of the Department

The Department will:

1. Inform and train the Departmental staff members of their obligations with respect to the terms of this MOU and Annex, and any applicable legislation and policies concerning the use of Personal Information collected for the purposes of the RPR under the NSCA and obtained from the NDR;

2. Use reasonable efforts to ensure the completeness, accuracy and timeliness of the Personal Information covered under this MOU. Although it is understood and agreed that the Department cannot guarantee accuracy, and will therefore not be held responsible for any damages resulting from the disclosure or transfer of any Personal Information that is inaccurate, incomplete or out of date, the Department will endeavour to correct any information that is known to be inaccurate;

3. Respond to Commission requests for NDR information, outlining the projected timeframe for providing the Commission with the requested information;

4. Deny access to NDR information to those members of the Commission’s staff, identified in paragraph 1 of the Responsibilities of the Commission in this Annex, who have breached the security measures described in this Annex;

5. Provide training to key Commission staff on how to request NDR information, when such training is requested in writing by the Commission; and

6. Manage its security systems and procedures for the NDR according to departmental standards, in order to maintain security over Personal Information in relation to this MOU.
Annex 2

Roles and Responsibilities for Nuclear Emergency Response

General Principles

1. Senior management within the Commission and the Department will be responsible for providing briefings to committees according to their organizations' respective onsite/offsite responsibilities.

2. The Chief Public Health Officer of the Public Health Agency of Canada will be responsible for federal communications about offsite public health consequences.

3. The Commission and the Department will collaborate in developing their respective communications products.

4. The Commission and the Department will coordinate when providing information to the IAEA, and in particular when such information will result in an IAEA press release that requires input from both National Competent Authorities.

Responsibilities of the Department

The Department will:

1. Notify in a timely manner the Commission's duty officer in the event of an actual or potential emergency situation within the scope of the FNEP, or of incidents of potential interest to the Commission of which it has been made aware.

2. Be the lead along with the FNEP Technical Assessment Group (TAG) for offsite assessment and prognosis.

3. Communicate with stakeholders regarding offsite assessment and prognosis.

4. In the event of a nuclear emergency within or outside Canada, make available to the Commission in a timely manner data collected through the CRMN National Network and the Canadian portion of the CTBT’s International Monitoring System.

Responsibilities of the Commission

The Commission will:

1. Notify in a timely manner the Department's Duty Officer for the FNEP in the
event of an actual or potential emergency situation within the scope of the FNEP, or of incidents of potential interest to the Department, of which it has been made aware.

2. In the event of a nuclear emergency within or outside Canada, make available to the Department, in a timely manner, information concerning the source term or estimated source term of an actual or potential release or a variety of release scenarios. For events at a Canadian licensed facility, the Commission will share, in a timely manner, any information relative to the conditions of a licensee that may result in offsite releases above approved licensed levels.

3. Be the lead for onsite assessment and prognosis.

4. Communicate with stakeholders regarding onsite assessment and prognosis, as well as issues regarding onsite emergency workers, etc.

5. Provide detailed onsite assessments to other regulatory bodies such as the United States Nuclear Regulatory Commission and the IAEA. The Commission will provide qualitative onsite status information, including estimated time of forecast release, to the Government Operations Centre and provincial stakeholders.

6. Provide the Department and the FNEP TAG with relevant information about the forecast release characteristics, to support the FNEP TAG offsite assessment.

7. Use any other release characteristics – for example, a credible worst-case release – for internal analysis only. Information of relevance to the offsite assessment will also be shared with the FNEP TAG for consideration.
Annex 3

Contacts

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<tr>
<th>Canadian Nuclear Safety Commission</th>
<th>Health Canada</th>
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<tbody>
<tr>
<td>Director General, Directorate of Environmental and Radiation Protection and Assessment</td>
<td>Director General, Environmental and Radiation Health Sciences Directorate</td>
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<td>or</td>
<td>Director, Radiation Protection Bureau</td>
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<td>Director General, Directorate of Nuclear Substance Regulation</td>
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