proc-- you know, this activity that we're underway now that we'd follow the same process. And if it gets beyond that, then I think it almost behooves us that it has to go to the full Board, under the current circumstances. And I mean it's a very awkward situation because we're reviewing NIOSH, NIOSH doesn't want to be in the process of making decisions about this review, and we've also got the FACA and procurement thing to balance out. And I think we just -- you know, err on the side of being careful, but again, I think -- you know, this -- most -- clarification, if it takes place, should take place tomorrow when we talk to the contractor. And if not, if it's something significant, it's going to have to wait till the next meeting and hopefully that won't take place.

MR. ELLIOTT: The distinction I'd like to make here, though, is that what we were doing as I just described it was under the closed session type of process. Okay? It wasn't going to be done in the public venue anyway. What we're talking about now, though, where you're dealing with a specific task and points of clarification, questions about how to proceed from your contractor, I don't want to be in that situation

where I'm crafting a response and getting somebody's reaction to it. I think that response needs to be crafted by somebody this Board designates.

DR. MELIUS: And when that comes up, I think -- and if we have to formalize this, we should -- is that we'd say you go -- you go to the Chair. For this particular activity, you'd go to the Chair. But I think in terms of the public transparency of that process, that we would then expect Paul to report back at the conference call, look, during this process the -- you know, I was, you know, asked these questions. This is what I told them. And then the Board knows, the public knows and -- and I think, you know, we're within, you know, the spirit and -- and probably the actual, you know, regulations regarding the -- this process.

DR. ZIEMER: It may be, for example, that there are very simple clarifications needed that have nothing to do with policy or actually how things are going to proceed, but something needs clarification -- something as simple as do I provide this in Word or WordPerfect? That doesn't -- very simple. So there's a sense in which

either the Chair or the NIOSH staff person, if it's Jim or Larry, has to make a judgment as to the significance of what's being asked and whether or not the answer can be given without Board input. And as you say, hopefully we'll make whatever clarifications are needed at the session tomorrow afternoon when the folks are here with us.

Okay. Other comments before we move on? Tony, yeah.

DR. ANDRADE: I think it'd be very helpful to have, as Jim suggested, a list of those activities -- general activities, items -- administrative type actions that we should be able to delegate to other offices within NIOSH without any further Board action -- for example, the approval of invoices -- and/or such that we can begin discussion on when the Board should be looking at -- and I'm not sure if these timetables exist; I've forgotten, as well -- as to when products are due. And based on those products, whether or not the Board should approve the work. But not until we have that list in front of us can we start to intelligently make decisions about those sorts of things. Now I'm sure there are simple things that

we can take care of by tomorrow if NIOSH staff would be willing to put that list together.

DR. ZIEMER: Thank you. Other comments?

(No responses)

Now the other item I was suggesting we proceed with is the issue of selection of sites for the initial group of reviews. Now there are a number of large sites, and if you looked at the -- our suggestion of -- or our -- our statement of work was that we would do ten or 12 DOE sites and several -- I think it was up to four of the AWEs. The ten to 12 DOE sites -- I think intuitively most of us said well, that's the ten big sites or something like that, but it may not be all of the sites on the list. I forget how many were on that list that we had -- 15? So there needs to be some kind of reason for not doing some of these, at least during the first year. We may eventually do more later, but I think it would be useful if we could identify some objective criteria on which to make the decision so that we're not doing it just based on our warm fuzzy feeling about some particular sites. And I wonder if any of you have suggested criteria that might be used for that purpose. I will suggest some if no one else does,

but -- open the floor for that. I had already suggested one that might be a possibility and that was the number of cases -- DR cases generated by a site. Jim, Wanda? Wanda's first.

MS. MUNN: I was very interested in seeing the figures that Jim gave to us earlier today with respect to the percentage of claims received as opposed to worker population. It seems to me that those figures may be one of the criteria that we may want to consider when we're thinking about which sites we want to look at and which ones we do not. It appears that it might be wise for us to look at a couple of the sites with the larger percentage of claims to worker personnel, and that we would similarly want to look at a couple of the very lowest and fill in in between. Those -- those percentages probably tell a story of their own, and whether the site profiles are a key part of that story I don't think we can tell unless we decide that we want to look at both ends of that spectrum.

MR. ELLIOTT: Wanda, I think the percentages you're referring to were in Pete Turcic's presentation, and those are not -- not clearly related to the number of cases we have in dose

reconstruction, but I have a report here that, if you want to know how many cases we have and how many we've completed for a given site, I can share that with you upon your request.

MS. MUNN: (Off microphone) (Inaudible)

DR. ZIEMER: Okay, thank you. Jim and then Michael.

DR. MELIUS: It might be helpful if we had that information, Larry and -- I mean not right now or tomorrow morning or whenever we want to talk about this. Also, with some input from Jim Neton as to how complete these site profiles are. I haven't gone through what's on -- comprehensively what's on the web site, but there are reserved sections and so forth that -- that we may want to think about in terms of scheduling issues that -- that they're partially done now but you know that within three months or whatever that -- that major sections will be completed and may be more appropriate at that point in time. And I think if we also had that list arrayed we could also think about the diversity of processes at those sites that we -- and just as you know, for example, do we need to do both Portsmouth and Paducah or -- or, you know, uranium -- uranium

enrichment -- how alike are some of these sites and -- and so forth in terms of some of the issues that might be encountered there on a site profile. So I think if we arrayed that -- again, it's going to come down to -- I don't think we can have completely objective criteria, but I think if we had that type of information arrayed in front of us, then we could make a selection. And we may tier it. You know, these are the first three or five or whatever and then, you know, defer choosing some others or delay -- delay some at some point in time. But I think if we had that it would be a pretty straightforward process. And I think we could probably do the same with the AWE sites or AEC sites, also.

MR. GIBSON: I pretty much agree with Jim's comments. I just wanted to add that I think it would be important to look at some of the sites that had a very diverse operation and had a very diverse amount of isotopes on site to determine the adequacy of the site profile.

MR. OWENS: I think it's important, particularly in regard to the SEC sites, that we consider those sites that are not SEC status currently and the number of workers who have

worked at those particular sites versus the number of claims that have been filed at those sites. I think that if we review the procedures based on that, that might aid the credibility of the program overall from the standpoint of the under-represented numbers of workers who have filed in those areas.

DR. ANDRADE: Actually I had two suggestions. This morning, after one of the presentations, I was sort of surprised at the number of claims denied from SEC sites, and some explanations were given. Nevertheless, I think that it would be interesting to look at one or more of those sites, especially with the high turn-down rate.

And my other idea, which purely addresses my health physics curiosity, would be to look at a site which we're looking at heavy external dose, and also another site with a fairly healthy amount of work in which one could potentially have received or there are records to show that there were -- that there were significant intakes. I think -- those would be my suggestions.

DR. DEHART: I don't know all the sites specifically, but I'm sure there are some sites that have rather unique energy levels or sources

that's not common among the other sites and I would like to add that to the list so we'd be sure to pick up the unusual.

DR. ZIEMER: Sites with unusual nuclides or sources of radiation?

DR. DEHART: Sources of radiation. Specific different kinds of isotopes that are unique to a facility, for example.

MS. MUNN: I was writing down what other people were saying and thinking about how I might go about that myself, and I wound up with five different bullets which I thought perhaps we might be able to put into a matrix of some sort to get a good cross-section. Those five bullets I had were number of claims or workers; the type of activity, which would include internal or external dose and different types of sources; years of operation; geographic distribution; and SEC sites. If we were to place those specific -- consider those as being basic items that we wanted to assure were included, then we could make some decisions about how many might fit one or more of those categories.

DR. ZIEMER: Jim?

DR. MELIUS: I would modify that slightly and

say I think we should look at both the number of workers potentially there -- I think is what Leon was getting at a little bit -- as well as the number of claims that have come in so far, 'cause that would sort of give us a sense of both what NIOSH's immediate priorities are, which are going to -- you know, what's covering the most cases with the site profiles, as well as down the road.

MS. MUNN: (Off microphone) (Inaudible)

DR. MELIUS: I thought you said (Off microphone) (Inaudible).

MS. MUNN: (Off microphone) (Inaudible)

DR. MELIUS: I wanted both.

DR. ZIEMER: Tony, you have another comment? Actually there have been -- about a dozen different criteria have been suggested here, and there are sites that -- any given site probably meets a number of those criteria. We would need to -- we would -- we would need to determine which of these criteria are the important ones. You could probably make a case for most any site, based on one or more of these criteria. But the whole point is I think that when we're ready to select sites -- and I'm going to suggest that we might want to wait till tomorrow to actually do

that 'cause you need to think about this -- but one would then couch the selection in terms of some of these criteria. I'm not sure that it's worth trying to say one of these criteria is any more important than the other. They're probably all important in their own way. But at the point at which we're ready to make that selection, it seems to me that with the selection we have a rationale that couches or expresses why that site was selected, perhaps in terms of one or more of these, as opposed to simply saying I like that site better or I used to work there or whatever it might be.

DR. ROESSLER: This might be a dangerous suggestion, but another approach would be, since we have -- since we could include most of the sites that are on the list, maybe we should look at it from the point of view of eliminating a site because it overlaps with another site or because -- for some reason. Would it be easier to approach it that way?

DR. ZIEMER: I don't know.

DR. MELIUS: I think we might need a little bit of both and, you know, not to avoid some of the overlap but -- do that. Can we delegate --

and since Larry has the numbers, Larry have one of his staff people do -- give us a listing that we can -- both as a handout and as a power point tomorrow that would list the sites with some of these numbers involved and maybe some of these other characteristics, but more importantly just the numbers so that we have an array --

DR. ZIEMER: Or at least the ones that they have readily available -- numbers of case --

DR. MELIUS: Right.

DR. ZIEMER: -- numbers of workers at the site --

DR. MELIUS: Right.

DR. ZIEMER: -- percentages of cases submitted. They'd certainly know which have mainly external/internal --

DR. MELIUS: Yeah, I think we --

DR. ZIEMER: -- which are the broad sites as far as diversity of operation.

DR. MELIUS: Yeah, and long -- and then maybe status of the site profile. If we don't have a site profile, it's hard to review it, so -- that -- and if we could have that for -- for tomorrow morning for discussion, I think we can then talk -- go through some of these other criteria and make

an initial selection and --

DR. ZIEMER: Is it feasible to at least get that for the 15 sites on the chart -- or the two groups of... I think much of that you already have.

MR. ELLIOTT: It's very feasible. I could just read it to you right now and you could write it down. The feasibility comes into play as to what we have scheduled for this evening and rest time for staff to get through the night, I guess. But we certainly have, in Jim Neton's presentation, this one slide that shows you the top 15. I can present to you the number of claims that we have in our hands for those 15 and how many we have worked through.

DR. MELIUS: Well, whatever is feasible to do, if you could get that organized, either into a quick briefing and we'll write it down tomorrow morning, or into an overhead and handout, that's -- that's fine, also. But I think just so we're all working from the same numbers and the same list of sites, then I think we can go from there and -- I'm not trying to keep you up too late.

DR. ZIEMER: We can do that in our work session tomorrow and just all do it at the same

time. That's good.

Rich, you have another comment?

MR. ESPINOSA: Yeah, I do. Along with the percentage on -- on all these sites, I'd also like to see it done by district, you know, the Denver -- one out of each one, not maybe three out of the same district, like Jacksonville.

DR. ZIEMER: Get some national spread on these is what you're saying.

MR. GRIFFON: Geographic, yeah.

MR. PRESLEY: Geographic spread.

DR. ZIEMER: Good point, yeah.

MR. PRESLEY: Paul, something else you might want to ask to be put in there is whether a national lab, production area or a gaseous diffusion plant.

DR. ZIEMER: Thank you. National lab, a production facility or a gaseous diffusion.

MR. PRESLEY: Gaseous diffusion.

DR. ZIEMER: Okay, very good. We still have a little time. Maybe if we have the data, we should go ahead and do some jotting-down now. Do we have it or not?

DR. MELIUS: Can I make one more -- I hope it's a practical suggestion -- possible. But

there's the one -- that one power point slide in Jim Neton's that listed all the sites for the site profiles and the documents and the stars and so forth. If you could blow that up, you know, into a -- so it's printed out in a single page, that would be a pretty good list to work off of and then we can write in the numbers tomorrow.

DR. ZIEMER: Is that do-able, Jim, or...

DR. MELIUS: And that also has some idea of what the status is of the -- that presents the status of the site profiles.

DR. NETON: (Off microphone) (Inaudible)

DR. ZIEMER: We have a little tiny thing we can barely read. Yeah, that -- that's -- Jim, is slide five of your presentation I think is the one you're referring to. Right?

MR. GRIFFON: Can you -- can you read down the number of claims now, by site, or is that -- why don't -- let's just do it now and get the numbers down.

DR. ZIEMER: What is it you're going to read?

MR. ELLIOTT: I'm going to read for Fernald and for all subsequent sites on the slide that Jim had of site profiles for the top 15 DOEs -- sites, the number of claims that we have current --