Radiation Health Committee

Meeting Minutes

**Date:** 4-5 March 2020

**Time:** 9:30 am to 4:30 pm (4 March); 9:30 am to 3:00 pm (5 March)

**Location:** 38-40 Urunga Parade (Level 3), Miranda, NSW 2228

**Chair:** Dr Roslyn Drummond

**Members:** Dr Roslyn Drummond (Chair); Ms Fay Bellis (Public Representative); Mr Mark Carey (NSW); Mr Noel Cleaves (VIC); Mr Simon Critchley (QLD); Mr Bradley Feldtman (NT); Ms Penny Hill (ACT); Dr Bruce Hocking (Member); Dr Massey de los Reyes (SA); Dr Carl-Magnus Larsson (CEO of ARPANSA); Dr Stephen Newbery (TAS); Ms Hazel Upton (WA)

**Secretariat:** Dr Samir Sarkar, National Codes & Standards Section, ARPANSA

**Scribe:** -

**Apologies:** Dr Joanna Wriedt (Nuclear Safety Committee Representative)

**Invitees:** Mr Ryan Hemsley (ARPANSA) (via video for items 1.7 and 2.1)  
Mr David Wotton (TGA, for item 2.2)  
Mr Selva Kumar (ARPANSA, for item 2.4)  
Mr Glenn Riley (VIC via phone for Item 2.7)  
Dr Rick Tinker (ARPANSA, via video for items 2.11; 2.12; 3.1; 3.1.3; and 3.6)  
Dr Stephen Long (ARPANSA, via video for item 2.12)  
Dr Peter Thomas (ARPANSA, via video for items 3.1.2 and 3.4) Mr Paul Marks (ARPANSA, via video for item 3.1.2)  
Mr Cameron Lawrence (ARPANSA, via video for items 3.1.3; and 3.6)  
Dr Ken Karipidis (ARPANSA, via video for item 3.5)  
Mr Loch Castle (for item 3.9)

**Observers:** Dr Gillian Hirth (Chief Radiation Health Scientist – ARPANSA); Dr Ivan Williams (Chief Medical Radiation Scientist – ARPANSA); Mr Jim Scott (Chief Regulatory Officer – ARPANSA), Mr Ryan Hemsley (Acting Chief of Staff –ARPANSA); Ms Maryka Gaudio (Day 2 for Ms Sarah Norris, Department of Health); Mr Greg Tyczenko (SA EPA; Day 2)

1. Introduction and Standing Items
   1. Welcome by the Chair Chair

The Chair called the meeting to order. The Members were advised that Ms Sarah Norris replaced Ms Gillian Shaw of the Department of Health as an observer.

* 1. Minutes Chair

The Chair noted that the minutes from the previous meeting held on 13-14 November 2019 were confirmed out of session and had been posted on ARPANSA’s website, noting amendment to the title of Radomir Krsteski (ACT Health).

* 1. Actions and Business Arising Chair

Discussion took place on the 5G issues and on regulation of non-ionising radiation (NIR) in general. Dr Newbery referred to the Tasmanian submission to enHealth regarding cosmetic laser and IPL laser. He suggested ARPANSA to write to enHealth describing ARPANSA’s expertise in the NIR area that may facilitate interaction between enHealth, Australian Health Protection Principal Committee (AHPPC) and ARPANSA. Acknowledging the complexity of NIR regulation the Members considered the importance of having a national policy on this matter. Dr Tinker informed the Committee of the Commonwealth funding received by ARPANSA for electromagnetic energy (EME) research.

The Members agreed to request the CEO to write to enHealth to draw the attention to the complexity of regulation of NIR in Australia and the need for development of a national policy for regulation of NIR and requested that the RHC be kept informed of developments in this area.

**Action 1**: **Request** t**he CEO of ARPANSA to write to enHealth to draw their attention to the complexity of regulation of NIR in Australia and the need for development of a national policy for regulation of NIR, and also request that they keep RHC informed of the developments in this area.**

* 1. Correspondence Chair

The Members noted and discussed the following correspondence:

1. Letter (3 February 2020) from the Chair to Dr Carmelo Bonanno, President, Australian Dental Association regarding the proposal to develop DRL for the use of Cone Beam Computed Tomography in Dental Radiography;
2. Letter (18 November 2019) from Ms Angela Foulds to the Health Minister (CWTH) requesting to be appointed as a member of the Radiation Health Committee;
3. Letter (9 December) from Mr Nathan Wahl, ARPANSA to Ms Angela Foulds advising there are currently no vacancies on the RHC.
4. Email (30 December2019) from Mr Martin Ralph to the RHC Public Representative for the RHC options paper ‘national approach to the regulation of radiation safety and security’ to be released, and the follow-up communication from Dr Drummond to Mr Cleaves and Mr Kumar on the matter.

It was agreed to release the paper referred to under point 4 above with a cover letter from the Chair to Mr Martin.

**Action 2:** **The Chair to release the RHC Options paper ‘‘National approach to the regulation of radiation safety and security- Options paper’ to Mr Martin Ralph.**

*After-note*: The RHC paper with a cover letter from the RHC Chair was sent to Mr Martin Ralph on 7 April 2020.

* 1. Public Interest Issues Ms Bellis

Nil

* 1. Conflict of Interest Declarations All Members

Nil

* 1. International Liaison Mr Wahl

Mr Wahl provided an update on Australia’s participation in international activities including both past and upcoming meetings and events. The Members noted theupdate.

1. National Uniformity
   1. IRRS Action Plan and outcomes of enHealth workshop Mr Hemsley

Mr Hemsley presented the outcomes of the Radiation Health Expert Reference Panel (RHERP) (an advisory body of enHealth) meetings held in November 2019 and February 2020. He also provided an update on the Integrated Regulatory Review Service (IRRS) Action Plan.

Mr Hemsley advised that ARPANSA drafted a template for a national action plan and a reporting matrix to track progress against the findings affecting all jurisdictions. The Panel reviewed the action plan, and discussed each recommendation and suggestion in detail. The Panel noted that many of the findings related to current work undertaken by the RHC, and had been captured in the NDRP2 and other national uniformity projects. Some recommendations would be grouped together if they have similar themes or can be addressed by a single project. The Panel agreed on the structure and most of the content of a draft national strategy for radiation protection, which was Suggestion 1 of the IRRS (develop a national strategy for radiation protection). Panel members discussed the draft strategy and provided suggested amendments. The strategy will be re-circulated for Panel input. The national strategy and NDRP2 will contribute to the implementation of other recommendations and suggestions.

The panel considered that the RRN constitutes a very useful forum for regulatory discussions, akin to a ‘Community of Practice’. Since the group may, at a later stage, include also industry and other stakeholders (e.g. professional bodies), the RRN has now taken the name ‘Radiation Protection Network’ (RPN) to accommodate for a potential expansion of participating bodies. The RPN provides an informal information sharing mechanism and platform to discuss regulatory issues. This relates to the IRRS Suggestion 2 (sharing international information), but can be expanded to include all facets of regulatory information sharing.

The Members noted the update on IRRS Action Plan and the outcomes of enHealth workshop.

* 1. TGA presentation Mr Wotton

Mr David Wotton of Medical Devices and Product Quality Division, Therapeutic Goods Administration (TGA), presented TGA’s approach to regulation of medical device software. This includes software and mobile 'apps' that meet the definition of a medical device. He described the regulatory requirements for medical devices, quality management system for medical devices, software development and quality management, and inspection and compliance activities undertaken by TGA. The Members considered that continued engagement with TGA would be beneficial. The RHC thanked Mr Wotton for his comprehensive presentation.

**Action 3: RHC continue to engage with the TGA on matters of mutual interest.**

* 1. Medical Radiations Australia Dr Newbery

This item is covered under Item 2.6 below.

* 1. RRN activity updated Dr Newbery/Mr Kumar

Dr Newbery provided an update on RRN activities including the projects undertaken by RRN. He informed that the RHERP considered RRN as Radiation Regulators Community of Practice, but considering the role of the group Radiation Protection Network (RPN) would be a more suitable name for the purpose of this group. He also informed that work on creating an architecture for RPN had commenced. It was noted that the role and the scope of the activities of RPN were yet to be determined. The Members considered the involvement of various stakeholders such as industry and professional bodies could add value to the RPN. Dr Larsson suggested to keep the scope of the work of RPN proportionate to the needs. In support of Dr Larsson’s suggestion, Mr Cleaves stated that limiting the scope of activities of the RPN to specific areas, for example ‘inspection’, could be beneficial. Mr Cleaves supported the involvement of key industries to fully address all relevant issues.

Dr Larsson suggested to adopt an integrated approach by mapping out the roles and relationships between various groups to obtain a clear picture of the interface between various groups. Appropriate mapping of the roles and relationships between various bodies may result in suggestions for amendments to the ARPANS Act, when the Act is up for its next review. He requested the Members to share their thoughts on this matter. The Members considered that a discussion paper on the responsibilities of the RHC, RPN and RHERP, and describing how they can work together in the future to avoid duplication of effort would be useful and requested Dr Larsson to prepare this discussion paper.

Further details of RRN activities are covered under items 2.5 -2.9 below.

**Action 4**: **Dr Larsson to prepare a discussion paper on the responsibilities of the RHC, Radiation Protection Network (RPN) and the enHealth Radiation Health Expert Reference Panel (RHERP) and describing how they can work together in the future to avoid duplication of effort.**

* 1. Competency requirements – non-medical Dr Newbery

Dr Newbery provided an update on the progress on competency requirements for users in non-medical radiation practices. He informed the Committee that the document on competency requirements is nearly complete. It was noted that the competency aspect will be covered in NDRP2. The Members suggested that it would be useful to have a process of incorporating these competencies into regulations, and Dr Newbery undertook to prepare a paper with recommendations on the matter. The Chair suggested to circulate the competency requirements document out of session.

**Action 5: Dr Newbery to circulate the document on Competency requirements – non-medical out of session to members to provide feedback by 15 May 2020.**

**Action 6:** **Dr Newbery to prepare a paper on recommendations of how to incorporate these competencies into regulations and report on the progress at the next RHC meeting.**

* 1. Competency requirements - medical Mr Cleaves/Dr Newbery

Dr Newbery provided an update on the competency requirements for users of medical radiation. He referred to a meeting with Prof Davidson of Medical Radiation Practice Board Australia (MRPBA) where variation in licensing requirements and competency requirements from jurisdiction to jurisdiction were discussed.

Mr Cleaves added that mapping exercise of various modalities would be useful to identify the competency requirements. The Members agreed that a mapping exercise on all jurisdictional requirements was needed, and to form a working group led by Mr Cleaves to undertake the mapping exercise on competency requirements for medical practitioners using ionising radiation.

Action 7 Mr Cleaves to report on the mapping exercise on medical competency requirements of all jurisdictions at the next RHC meeting.

* 1. Cone Beam CT Issues Dr Newbery

Dr Newbery provided an update on the outcomes of discussion with the Australian Dental Association through a teleconference on 17 February 2020. The teleconference was attended by Dr Newbery, Mr Cleaves and Dr Thomas, and the CEO (Mr Damian Mitcsh) and Deputy CEO (Ms Eithne Irving) of the ADA. The discussion was based on the RHC paper presented at the November 2019 meeting, which was revised following that meeting. Issues related to CBCT usage, DRL and non-uniformity in licensing of CBCT were discussed. Regarding DRL work, Dr Thomas indicated that due to competing priorities, DRL work was not planned at this point in time, but indicated that this could be further discussed with ADA.

It was noted that the revision of RPS 10 was progressing satisfactorily as a RHC project and should be continued with priority. Dr Newbery informed that ADA recognised the value of engagement with such activities to improve safety in dental practices. It was agreed to continue engagement with the ADA and explore the cost recovery for DRL work.

**Action 8: Dr Newbery to continue the interaction with ADA on matters related to development of DRLs for CBCT, and on revision of RPS 10.**

**Action 9: ARPANSA assist the ADA to review the information on dental radiography that the ADA provide to their members**

**Action 10: Progress work on revision of RPS 10.**

* 1. Exemption of cabinet X-ray apparatus Mr Riley

Mr Riley advised that a significant amount of work had been done on this matter, and the information were being formulated in the form of a national agreement for exemption. After discussion, the Members agreed to include the exemption of cabinet X-ray apparatus in the NDRP. The Members considered that the scientific analysis for the basis of exemption would be important, and Mr Cleaves undertook to provide a report on the scientific analysis and recommendations on the exemption of X-ray apparatus at the next RHC meeting.

**Action 11: Mr Cleaves to report on the scientific analysis and recommendations on the exemption of X-ray equipment at the RHC meeting**

* 1. Compliance standard – non-medical Dr Newbery

Dr Newbery provided an update on this item referring to the agreed approach to development of common compliance Standards for non-medical radiation apparatus and sealed source devices and sealed sources. He referred to the set of compliance standards adopted by Qld and Tasmania, which were based on RPS 5 (Code of Practice Portable Density/Moisture Gauges Containing Radioactive Sources) and RPS 13 (Code of Practice and Safety Guide for Safe Use of Fixed Radiation Gauges (2007)). Dr Newbery advised that the ‘workbook’ would capture the standards of compliance testing and exemption, and relevant IAEA documents would also be used for this purpose. Considering that compliance standard form part of the review of the Code for non-medical radiation apparatus and sealed sources, the Members agreed that no separate agenda item was needed for non-medical compliance standard. Further details are described under item 3.1.4.

**Decision 1: No separate agenda item is needed for” compliance standard-non-medical” as it forms part of the review of the relevant Code related to non-medical radiation apparatus and sources**

* 1. Validation of Type B(U) and Type C overseas package design – Transport Code Mr Cleaves

Referring to section 3 of the Transport Code (RPS C-2, Rev. 1), Mr Cleaves drew the attention of the Members to the implications of the validation of Type B(U) and Type C overseas package design. Dr Sarkar informed the Committee that the overseas competent authorities use their own regulatory process for certification of a package design and such certification refers to a specific version of the IAEA Transport Regulations. The inconsistencies in application of requirements of the IAEA Regulations may result in lack of internal harmonisation and denial of shipment as well. In addition, the rigour of assessment may vary from country to country. Considering that such packages may contain significant amount of radioactive material, they should be validated by Australian competent authorities, and ARPANSA could provide assistance in this regard. This is consistent with international best practice. The Members considered a further clarification on this requirement in the form of an ‘advisory note’ would be useful.

**Action 12: ARPANSA to prepare an advisory note to clarify the process for validation of a package design as stated in paragraph 808A of the Transport Code.**

* 1. NHMRC review of the Australian Drinking Water Gruidelines Dr Tinker

Dr Tinker provided an overview of the National Health and Medical Research Council (NHMRC) review process for the radiation protection chapters of the Australian Drinking Water Guidelines (ADWG). He highlighted the major changes to the radiation protection chapters in the ADWG including lowering screening level from 0.5 mSv/year to 0.3 mSv/year. Dr Tinker informed that NHMRC was currently seeking feedback on the updated radiation protection chapters from the enHealth Water Quality Expert Reference Panel (WQERP). Members of the WQERP also submitted the update to the Radiation Health Expert Reference Panel (RHERP) for feedback. Over 100 comments have been received from enHealth. NHMRC has requested ARPANSA to review the comments. The Members noted the status of the NHMRC review of the ADWG.

* 1. National Radon Action Plan Dr Tinker/Dr Long

Dr Tinker and Dr Long presented the Australian Radon Action Plan 2020 -24 outlining the overarching vision and direction for radon protection in Australia. The plan provides a long-term strategy to optimise protection of people from exposure to radon and radon progeny in homes and workplaces taking into account national and international obligations. Detailed information on the Radon Action Plan including the risk posed by radon, recommended reference levels for households and workplaces, actions and outcomes are presented in the agenda paper. The Members discussed the plan and found it informative. Regarding implementation on the Action Plan Dr Tinker stated that no action had yet been taken regarding governance arrangements. The Plan will be placed on ARPANSA’s website and there will be regular updates on progress meeting the expectations of the Plan. The Members noted the Australian Radon Action Plan.

1. RHC Work Program
   1. RHC projects update Dr Sarkar/Dr Tinker

Dr Sarkar presented an update on progress of the current RHC projects, discussed under relevant agenda items. The Members noted the status of the projects.

* + 1. RHC Statement on exemption of cabinet X-ray apparatus that is  
       for inclusion in the NDRP2 Dr Newbery/Mr Cleaves

At the November 2019 meeting it suggested to prepare a RHC Statement on exemption of cabinet X-ray apparatus using the GSR Part 3 risk assessment methodology that could eventually be captured into NDRP 2. Since exemption of X-ray apparatus is considered under Agenda Item 2.8 above, it was agreed that a RHC Statement on this matter was not needed.

**Decision 2:** **No RHC Statement on exemption of X-ray apparatus is needed.**

* + 1. Review and revision of the RHC statement on safe handling   
       of deceased persons recently treated with radioactive material Dr Thomas/Mr Marks

Dr Thomas and Mr Marks presented the updated RHC Statement on Safe Handling of Deceased Persons Recently Treated with Radioactive Material. The content of the Statement essentially remains unchanged. References have been updated and a clarification has been made with regard to death of a patient within the medical radiation facility. The Members approved the updated RHC Statement subject to presenting the information in an appropriate publication format.

**Action 13: ARPANSA to publish the updated RHC Statement subject to appropriate publication formatting.**

* + 1. Update on revision of Code of Practice and Safety Guide for  
       Radiation Protection and Radioactive Waste Management in  
       Mining and Mineral Processing, RPS9. Dr Tinker/Dr Lawrence

Dr Lawrence provided an update on the progress of the work on revision of RPS 9. He presented the draft ‘workbook’ which was prepared taking into account the requirements of the Planned Exposure Code (RPS C-1) and the IAEA draft Specific Safety Guide DS459 (in publication). A working group representatives from SA, VIC and QLD was formed. Mr Feldtman indicated that he would explore the possibilities of NT’s participation in the working group.

**Decision 3: Endorsed creating a working group to progress review of RPS 9**

**Action 14: Dr Lawrence to provide a progress report on RPS 9 at the meeting in November 2020**

* + 1. Priority list for revision of RPS and RHS documents Dr Newbery/Dr Sarkar

Dr Newbery provided an update on developing common compliance standards applying the ‘workbook’ methodology. He informed that a virtual workshop was held in February 2020 to:

* measure the progress on content development for RPS 5, RPS 9, RPS 10, RPS 13, RHS 9, RHS 21, RHS 22, RHS 24 and RHS 28
* peer review of the content
* explore uniformity issues related to implementation and compliance expectations

Further details on progress of projects and examples of some uniformity issues and regulatory expectations are presented in the agenda paper. The Members discussed the possible steps for achieving the end product and benchmarking the ‘workbook’ against the IAEA Standards and the criteria for finalising the end product. They requested Dr Newbery to continue the work on the interim document based on the work book , progressing the review of RHS 9, RHS 21 and RHS 22 and the decision making tool for the end product.

**Action 15: Members agreed, in principle, that after completion of the workbook an interim document for digesting the information from the ‘workbook’ is required to enable the form of the final regulatory document to be decided. Dr Newbery to lead work.**

**Action 16: Dr Newbery to lead the review of RHS 9, RHS 21 and RHS 22 using the workbook methodology and develop a decision making tool, to determine whether the final regulatory document would be a Code or Guide, so that this tool be generally applicable to review of other RPS documents**

* 1. Development of procedures for managing the review of RPS and  
     RHS documents and for prioritisation of revision of such documents Dr Sarkar

Dr Sarkar presented a draft procedure for management of the review of RPS and RHS documents, and for prioritisation of such documents taking into account the RPS document production process, and requested the Members to provide feedback on this draft procedure.

**Action 17: Members to provide feedback on the procedures for ‘Managing the Review of RPS and RHS documents’ to the Secretariat by 15 May 2020**

* 1. Guidance for implementation of the Medical Exposure Code (MEC) Dr Newbery/Mr Cleaves

Dr Newbery provided an update on the development of a safety guide/regulatory expectations for implementation of the MEC. He presented the results of the mapping of GSR Part3/MEC against SSG 46 and other relevant information that would provide an opportunity for discussion amongst regulators related to uniform or consistent compliance/regulatory expectations. Dr Newbery referred to the Victorian Practice Guidance document ‘Justification and Approval of Medical Radiation Procedures’ as useful for the purpose of developing a safety guide/regulatory expectations. He pointed out that some requirements in the MEC are not self-explanatory and therefore, a safety guide or a document on regulatory expectations would facilitate compliance by the stakeholders. Details of mapping and the Victorian Guidance document are presented in the agenda paper. Dr Newbery suggested that a detailed analysis of the ‘workbook’ should be undertaken prior to develop a combined safety guide and compliance/regulatory expectations document. The Members discussed the content of the paper and agreed to use the ‘workbook’ approach for the development of a safety guide and compliance /regulatory expectations, and requested Mr Cleaves, Dr Newbery and Dr Thomas to prepare an interim document of compliance expectations for implementation of MEC.

**Action 18: Mr Cleaves, Dr Newbery and Dr Thomas to prepare an interim document of compliance expectations for implementation of MEC and report at the next meeting in July 2020.**

* 1. Implementation of Code of Practice for the Exposure of Humans  
     to Ionizing Radiation for Research Pruposes (RPS 8) – RHC   
     Statement on Implementation of RPS 8 Mr Cleaves/Dr Thomas

Mr Cleaves presented the Radiation Health Committee Statement on the ethical review of multi-centre trials. He suggested the Committee adopt and publish the Statement to enable the distribution of the Statement to human research stakeholders. Following the publication of the Statement, a small working group of human research stakeholders will commence work on the review of the ‘Code of Practice for the Exposure of Humans to Ionising radiation for Research Purposes (RPS 8). The Members agreed that, using this Statement as an interim Statement prior to full review of RPS 8 would be useful.

**Action 19: ARPANSA to publish the approved RHC Statement as an interim Statement.**

* 1. Revised RPS3 – consultation material and a communication  
     strategy for members of the public Mr Hocking/Dr Karipidis

Dr Karipidis provided the status of the consultation material and a communication strategy for RPS 3. Consultation material describing what the revised RPS 3 will mean to the public is under preparation. A draft communication plan has been prepared. Dr Hocking suggested to strengthen the link with the Australian Communications and Media Authority (ACMA) in relation to rooftop workers. Dr Karipidis stated that ACMA would be consulted noting that ACMA regulates only public exposure not occupational exposure. Regarding occupational exposure related to communication and non-communication sectors (e.g. welding), Dr Karipidis informed that ARPANSA would continue its effort to engage with industry.

**Action 20: The revised draft RPS 3 to be circulated out of session to the RHC members once the ICNIRP Guidelines are published**

* 1. Australian National Radiation Dose Register – Advisory Board  
     to develop a work plan for developing a guidance for regulators Dr Lawrence

Dr Lawrence presented progress with regard to the Australian National Radiation Dose Register (ANRDR) Advisory Board and the work plan. He advised that nominations for the Advisory Board were sought from all jurisdictions in January 2020, and the Advisory Board appointed. The advisory Board will be requested to develop guidance for regulators to assist with the nationally uniform implementation of the ANRDR.

* 1. RPS 20 update Dr Sarkar

Dr Sarkar provided an update on the amendment of RPS 20. He informed that the OBPR advised that no decision RIS was required. The document was placed on ARPANSA’s website for stakeholders’ comment and the period of receiving comment ended on 14 February 2020. Stakeholders’ comments have been incorporated in the revised guide. The Members suggested to further clarify the scope of the document regarding waste from mining and processing of minerals. The Members noted that the revised Guide will be published as RPS G-4, and endorsed the revised Guide for publication subject to revising the scope and foreword of the document.

**Action 21: Secretariat to revise the foreword and scope of the revised RPS 20 prior to publication as RPS G-4.**

* 1. Accreditation of Personal Dosimetry Service Providers – Guidelines  
     for Dosimetry Provider Accreditation System Mr Cleaves

Mr Cleaves presented the proposed national agreement on accreditation of personal radiation dosimetry service providers, which was based on targeted consultation and the outcomes of the ANRDR workshop in Adelaide in November 2019. The proposed agreement comprises three elements – a national agreement, the national accreditation panel and accreditation standards. The scope of the proposed framework is limited to external dosimetry for beta, photon and neutron radiation. Discussion took place on current practices, the regulatory framework for the dosimetry service providers and the transmission of dose records to the ANRDR.

Regarding accreditation of the dosimetry services including NATA accreditation it was noted that the service provider and the device would be accredited by a national body. Mr Kumar suggested considering competition neutrality assessment, and sending the preliminary assessment to the OBPR prior to public consultation. The Members suggested to summarise the discussion points and prepare a preliminary assessment on the Regulatory Guidance for implementation of the ANRDR.

**Action 22: Mr Cleaves to summarise the discussion points and prepare a preliminary assessment on the Regulatory Guidance for implementation of the accreditation of personal dosimetry service providers and circulate to the Members out of session.**

* 1. Sealed Source Register Mr Carey/Mr Castle

Mr Carey and Mr Castle presented the stakeholder analysis to identify and assess key stakeholder expectations for the national sealed source register. Dr Hirth stated that it was a component of national hazard assessment

In order to progress the work it was considered that a gap analysis between various systems should be performed, and the short-term and long-term outcomes for the national sealed source register should be identified.

**Action 23: Mr Carey to lead a gap analysis between various systems, and identify short-term and long-term outcomes for National Sealed Source Register, and report at the next RHC meeting.**

1. General Information Items
   1. Nuclear Safety Committee (NSC) Update Dr Larsson

No NSC meeting was held since the RHC meeting on 13-14 November 2019.

1. Closing
   1. Any other business Chair
      1. Sharing information on events with safety implications Dr Larsson/Dr Williams

A number of incidents and the regulatory responses to such incidents were discussed. Dr Larsson stated that currently there is no established system for immediate sharing of such information between jurisdictions. Referring to the NDRP 2, the Chair stated that the provisions of notifying the regulatory authority of the incidents and national reporting framework (inclusion in ARIR) exist. Dr Larsson emphasised the importance of sharing information on events with safety implications on a regular basis. Considering the importance of this area it was agreed to include this item on the agenda as a standing item.

**Action 24: The RHC to add a standing item to the Agenda: ‘Jurisdictional reports on any outstanding radiological safety events since the last meeting’. Members to share report on selected events regularly.**

* + 1. IAEA draft documents Dr Sarkar

Dr Sarkar provided an update on the status of the IAEA documents. He advised that a number of documents were awaiting publication and/or in the process of approval for publication, and these documents would be useful for the review and development of RPS documents. The Members noted the status of the IAEA documents.

* + 1. Other matters Members

A letter from the Chair, ACDS Oversight Committee to all State /Territories and enHealth Chair was discussed. The letter raised concerns that ACDS auditing may not be mandatory in all jurisdictions. Discussion at RHC found all State/Territory except NSW have made ACDS type auditing mandatory. The Jurisdictions do not name the ACDS as a sole provider, but have means of ensuring commercial neutrality is maintained while requiring this type of audit.

Dr Newbery referred to the National Surface Transport Security strategy and policy related information, which jurisdictions may find useful and stated that he would share this information with the Members. The information was subsequently forwarded to the Members for information.

* 1. Next Meeting –22-23 July 2020 Chair

The next RHC meeting will be held in Sydney on 22-23 July 2020.

*After-note*: The planned meeting on 22-23 July has been cancelled due to COVID-19 pandemic. Details of the meeting on 18-19 November will be circulated in due course.