

VETERANS' ADVISORY BOARD ON DOSE RECONSTRUCTION

RECOMMENDATIONS

On the basis of its audits and assessments of Nuclear Test Personnel Review (NTPR) Program radiation dose assessments (RDAs) and Department of Veterans Affairs (VA) claim procedures, the Veterans' Advisory Board on Dose Reconstruction (VBDR) offered a number of recommendations at the September 2007 meeting held in Chicago, Illinois. The Board believes that these recommendations, if implemented, would improve the NTPR dose reconstruction process and the VA compensation program for atomic veterans.

For the Defense Threat Reduction Agency (DTRA):

Recommendation 1: That NTPR develop a Decision Summary Sheet (DSS) as a device for integrating its Standard Operating Procedures (SOPs) and quality documents. The DSS would be employed with radiation dose assessments, including expedited cases, and associated audits.

Recommendation 2: That NTPR discontinue the use of default upper bound factors for cases involving non-expedited radiation dose assessments and develop procedures to perform full probabilistic uncertainty analyses for these assessments. NTPR standard operating procedures should specify whether uncertainty estimates from individual sources are independent or correlated and when and how uncertainties should be propagated.

Recommendation 3: That NTPR ensure its external review entity conducts spot checks of specific calculations and computer programs (e.g., MathCAD template output).

Recommendation 4: That NTPR document its justification to expedite a case in the case file and that external Quality Assurance (QA) audits comment on appropriateness of the decision to expedite.

Recommendation 5: That NTPR expand its technical bases and criteria for expedited case processing.

Recommendation 6: That VA and DTRA formalize an advisory role for VBDR in the development of any communications efforts regarding atomic veterans. To begin that role, we recommend that a meeting be held with VBDR and appropriate representatives of outreach and public affairs from both DTRA and VA this fall. We recommend that, prior to the meeting, those representatives inventory all communications regarding atomic veterans. These include brochures, booklets, etc., outreach efforts to potential program eligibles, and other external and internal communications as each agency thinks might also benefit from risk communication input from VBDR.

For the Department of Veterans Affairs (VA):

Recommendation 1: That VA reinforce its instructions to all its VA Regional Offices (VAROs) to promptly route radiation claims to its Jackson VARO.

Recommendation 2: At previous VBDR meetings we recommended (and continue to recommend) that:

- a. For non-radiogenic cases, VA should consider developing alternatives to current methodologies including possible legislative relief and/or modification of regulation. Also, VA should clarify its handling of non-radiogenic cases; in particular, whether or under which circumstances those cases should be routed to Jackson.
- b. VA should provide the Board with a timetable and status for the development of a quality assurance plan and program (standard operating procedure) for the centralized processing of atomic veteran claims which covers claims identification through adjudication, including metrics, in the radiation exposure claims adjudication process.
- c. VA should break out the presumptive and non-presumptive radiation claims information with an indication of whether they had been granted or not. This information will be useful to DTRA and to VBDR in planning the level of detail, resources, and time needed for completing radiation dose assessments in future cases and to expedite dose reconstruction and claims processing.
- d. VA should provide VBDR with data on the time required to adjudicate claims after receiving doses and other information/data from DTRA.
- e. VA should communicate to veterans that atomic veterans are no longer held to any security/classification directives they may have received when they left the service concerning their service as atomic veterans.

Recommendation 3: That VA ensure that the Jackson VARO has adequate resources and technology to promptly expedite radiation claims and adjudications.

Recommendation 4: That VA consider distributing the Ionizing Radiation Review (IRR) Newsletter to all veterans in the Ionizing Radiation Registry.

Recommendation 5: That VA consider publishing the IRR newsletter twice a year, timed to serve as notification of the upcoming VBDR meetings and as a vehicle to describe the previous meeting.

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