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Destruction and Inadequate Retrieval of INL Documents Worse than Previously Reported

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The Centers for Disease Control's National Center for Environmental Health (NCEH) conducted a dose reconstruction health study at the Idaho National Engineering and Environmental Laboratory (INEEL) now called INL. ¹ During the study process in 1994, NCEH researchers identified over 15,000 documents or boxes of documents that may be relevant to the health study. ² The Department of Energy (DOE), through a formal memorandum of understanding, agreed to place the information under a destruction moratorium until after NCEH had completed its health study. While reviewing CDC Master Data Base, it's apparent given the destruction dates stated, this "Moratorium" was not honored.

The Environmental Defense Institute filed in 1991 a Freedom of Information Act (FOIA) request ³ on behalf of the INEL Research Bureau (IRB), ⁴ for copies of worker non-personal identification data analysis files located ⁵ at the U. S. Department of Energy's (DOE) Idaho National Engineering Laboratory (INEL) formerly known as the National Reactor Test Station (NRTS). This FOIA was denied and EDI appealed the ruling only to be denied again later in 1991. ⁶

In the fall of 1998, NCEH requested physical retrieval of 4,948 boxes of previously identified documents from DOE's INL archives. DOE contractor Lockheed Martin (at the time) responded to the NCEH's request by stating that 602 boxes had been destroyed and an additional 72 boxes were missing from the archive due to being "permanently recalled by the custodian", which is an obtuse way of saying the originator of the box of documents ordered the box sent back to them without leaving any copies or record of its current location. This potentially represents

^{1.} In this report INEEL is used because that was what the current INL site was called at the time. The original name of the site was the National Reactor Testing Station (NTRS) that was more appropriate due to the > 52 reactors built and tested at the site (highest concentration in the world).

^{2.} See CDC; "Destroyed Boxes" that lists in 29 pages 1,176 individual box (P1MC_NUM) (TOMC_NUM) numbers of INL documents destroyed prior to CDC INL Dose Reconstruction Study. A box could potentially contain 5,000 pages/box. This data is available from EDI upon request.

^{3.} IRB FOIA request 2/3/1991 to Carl Robertson, Information Access Officer Freedom of Information Act Office U.S. Department of Energy Idaho Operations Office.

⁴ INEL Research Bureau (IRB) was a coalition of Idaho organizations that worked on INL health and safety issues.

⁵ The location of the requested data may be in part at INEL's Idaho Falls Operations Office, contractor document repositories, NRF's Pittsburgh Office, ANL's Chicago Office, and Seattle, WA.

⁶ Appealed to Director Office of Hearings and Appeals U.S. Department of Energy, Washington, D.C., April 10, 1991.

over 3 million pages of information that NCEH researchers did not have available to determine how much radiation workers were exposed to and how much was released from INL over its then >67 year operating history.

John Till, Radiological Assessments Corp. (RAC) (NCEH Phase-II research contractor) believes; "the issue of records being destroyed before we have had an opportunity to verify the contents is very disconcerting. This should not have happened, and shows that whatever system was supposed to be in place to prevent it, did not work."

The INL/Lockheed Martin December 1998 report, titled "Corrective Action Plan" acknowledges the destruction of 602 boxes of documents that were identified by NCEH as pertinent (Pert 1, 2, 3, 9). ⁷ The reports notes: "359 boxes were destroyed as a normal course of business because they were not included in the list of frozen records schedules or had been lifted from the freeze by (unnamed) the DOE Historian. 44 boxes were destroyed because they were incorrectly scheduled as >non-records. And 199 boxes were destroyed because they were incorrectly scheduled in the past, reviewed and rescheduled using schedules that were not identified as frozen." ⁸

The fact that the DOE "historian" was allowed to unilaterally override the NCEH freeze moratorium could be considered as obstruction of justice if it was in the context of judicial proceedings.

At a December meeting in Salt Lake City of the INL Health Effects Subcommittee that advises NCEH on its INL Dose Reconstruction Study, NCEH only reported that 62 boxes of pertinent documents were destroyed and failed to quantify the number of boxes that had been recalled by their originators. ⁹

John Till notes that: "we [RAC] have re-categorized a number of boxes from what they were categorized to be by [former contractor Sanford Cohen and Associates] SC&A. Therefore, I think it is important that no further boxes be destroyed until we have had a chance to verify their contents, even the category 9 boxes. I think it is critical that the Committee take stock in what has happened and weigh in to recommend some rules that should be followed. It should be recognized that document destruction may be necessary to continue, but not until everyone is absolutely certain what is being destroyed."

John Till continues: "...if any boxes of records are to be reviewed during the cleanup process, they must not be destroyed until after they have been looked at. Further, it must be made clear that pert 9 documents from the SC&A review should not be construed as of no value until we have a chance to verify this." ¹⁰

The issue of the 72 boxes permanently recalled is also crucial...and not fully disclosed by NCEH in Salt Lake. DOE's statement that: "There may still be available to some extent through the recall requestor or returned under another box" is equally bogus. First there is no record of who the recaller [sic] was or even that the box was recalled at all...it just is no longer in the archive. If it is returned in another box with another number it will go unnoticed unless NCEH/RAC does a

⁷ The term "Pert" is a NCEH data base designation of the relative "pertinence" of a document to the Dose Reconstruction Health Study.

^{8.} Denson, W.J., President and CEO, Lockheed Martin Idaho Technologies Co., letter to John Wilcynski, Manager U.S. Department of Energy Idaho Operations Office, Concern with Destroying Epidemiological records, December 4, 1998, cover letter for ACorrective Action Plan for the Continued Protection of Epidemiological Records at the Idaho National Engineering and Environmental Laboratory, December 8, 1998.

⁹ See CDC Dbase Book 17 produced by RAC Task Order (TO) MS Excel spread sheet that lists 5,585 boxes/reports pertinence and status, location, and if destroyed.

¹⁰ John Till email January 31, 1999 to Chuck Broscious

new search.

INL does outline some "corrective actions" to enforce the moratorium on document destruction; however it is like closing the door after the thieves have looted the store. Also there is no assurance on DOE or NCEH's part to clamp down on other archives were INL related documents are housed (i.e., Federal Records Centers in Atlanta, Los Vegas, Chicago, Germantown, Seattle, and Hanford).

John Till stated that: "The Seattle records center is a special situation which is becoming more problematic. There are quite a few Pert 9 boxes there, and I do not want them destroyed either until we decide how to verify the contents of some or all of the boxes, depending on the strategy we take during the review. Hopefully we will have some information on alternatives that can be used at the next meeting. Things have gotten a bit frustrating over there."

A legitimate question to ask is: when did NCEH learn about the document destruction problem and what-if anything is being done about it? NCEH's Phase-I research contractor Sanford Cohen and Associates (SC&A) quarterly reports (October-December 1993) and (January-March 1994) acknowledge that document destruction is a significant problem area. ¹¹ SC&A's draft final Phase-I report quantifies the document destruction at 65,000 boxes. Years later NCEH is still sitting on their hands and not particularly concerned over the issue. ¹²

The National Institute for Occupational Safety and Health (NIOSH) is conducting a completely separate health study of the INL workforce. Document destruction is a major problem with this study as well. In a September 1993 protocol report, NIOSH states: "While stored files are no longer being destroyed under the DOE-ordered moratorium in March 1990, prior to its implementation approximately 11,000 boxes of INL records had been destroyed. Many of these boxes contained information germane to INL's operations during its earlier years, and the only way to compensate for their loss is by obtaining oral histories for each INL facility from its long-term employees." ¹³ By sheer volume alone, the worker health study has a major document destruction problem along with the National Center for Environmental Health's dose reconstruction study.

Additionally, the CDC contractor's initial DOE document archive review at the various locations appears to be fundamentally compromised by determining documents with apparent legitimate relevance to be "Not Useful to a Dose Reconstruction." See examples listed below. In Section 4.3 NIOSH ER POSITION # 3 it states:

"The radiological monitoring program at the Burial Ground included the presence of a health physicist, safe work permits for all waste disposals, personnel surveys upon completion of work, air monitoring, and decontamination of vehicles at CPP if they were found to be contaminated.... This defense-in-depth approach was adequate to ensure that unmonitored intakes of plutonium did not occur." [NIOSH 2017, page 236] 14

^{11.} Britz, Wayne, Project Manager, Sanford Cohen and Associates letter to Leeann Denham, Project Officer, Centers for Disease Control and Prevention, Subject Quarterly Report, October-December 1993, page 10; Quarterly Report, January- March 1994, Contract No 200-92-0538, page 7.

^{12.} Draft Identification, Retrieval and Evaluation of Documents and Data Pertinent to a Historical Dose Reconstruction at The Idaho National Engineering Laboratory, Revision 1, Prepared by S. Cohen and Associates, Inc. for Centers for Disease Control and Prevention, September 2, 1994, page 3-13.

¹³ Preliminary Protocol for an Epidemiologic Study of Workers at the Idaho National Engineering Laboratory, Health and Energy Related Research Branch Division of Surveillance, Hazards Evaluation, and Field Studies, National Institute for Occupational Safety and Health, September 23, 1993.

¹⁴ DRAFT REVIEW OF NIOSH'S EVALUATION REPORT FOR PETITION SEC-00219, IDAHO NATIONAL LABORATORY: BURIAL GROUND, 1952–1970, 2017.

Apparently, NIOSH has no basis for this based on the documents that they failed to keep from being destroyed and/or that they simply found "not to be useful for dose reconstruction." As the old saying goes "don't look for something you don't want to find."

This is not just another academic exercise. This is not equivalent to determining whether or not to put a new interchange on interstate 15. It is about determining why southeastern Idahoans had the lowest cancer rate in the nation during the first half of the century, and now in the second half of the century after INL's start up, the southeastern Idaho ranks up there with the polluted big cities. This is about the health and safety of hundreds of thousands of INL workers and Idahoans who live in the shadow of that nuclear reservation. Idaho Division of Health studies and ID Cancer Registry reports around INL indicate increased rates of radiogenic diseases.

Even the Tennessean newspaper conducted surveys of INL downwinders and generated a list of forty individuals with health problems that they believed were related to INL emissions.

Who controls the information needed to answer these basic accountability questions? Who is responsible for destroying the documentation needed to determine why Idahoans suddenly have such a high cancer rate? None other than the Department of Energy! DOE was doing the same at the Hanford Environmental Dose Reconstruction study. ¹⁵

Who is paying National Institute for Occupational Safety (NIOSH) and Health National Institute for Occupational Safety and Health (NCEH) Radiation Studies Branch to conduct this INL Dose Reconstruction and Worker Studies? Who is paying the NCEH to study the health of the INL workforce? Who has the greatest liability exposure if a cause and effect is established? None other than the Department of Energy. Whoever controls the purse strings controls the outcome. EDI together with many other NGO's who cover the DOE Complex Sites and who advocated for these dose reconstruction studies in the hope that an independent agency like CDC would finally tell the truth about what DOE subjected the public to, also expressed our collective outrage over DOE manipulating the funding come from them rather than directly from U.S. Department of Health and Welfare.

This system of health study funding has corrupted the credibility of the public health agencies. The U.S. Health and Human Services Advisory Committee on Energy Related Epidemiological Research (ACERER) was a national body that monitors the public health agency studies at DOE sites. ACERER recommended transferring the funding from DOE over to Department of Health and Human Services. ACERER's recommendation states:

Battelle's information resources task leader."

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¹⁵ Karen Dorn Steele, "Radiation study set up as defense, records show It was supposed to be neutral probe into Hanford's effects on public, "Spokesman Review, February 13, 2005. "After the [CDC HEDAR] study was finished, plaintiffs' lawyers encountered resistance to their renewed records requests. The Energy Department claimed "privilege" over 16 of the documents requested, but eventually released 14 of them. The lawyers also learned they'd been denied 18 boxes of other HEDR project records that Battelle had designated as "non-records." Many of the "non-records" were from the files of project manager Dilbert "Dil" Shipler and Shirley Gydesen,

"This arrangement is a vestige of a bygone era in U.S. history in which the research emphasis on all aspects of nuclear energy development - including the health consequences of radiation exposures - was primarily oriented toward national defense. The need for a robust health research program into the effects of ionizing radiation on nuclear workers and exposed communities continues. However, the arrangement for funding this research has proven to be inadequate and has outlived its usefulness.

"Under the current system, the agency (DOE) that inherited the weapons production and nuclear energy promotion responsibilities from the old Atomic Energy Commission is the recipient of virtually all of the federal funds spent on health research related to radiation exposures caused by past and present DOE activities. As such, the agency continues to exercise discretionary control over whether and how much funding passes through for this research. DOE's continued control over this research creates real or perceived conflicts of interest. In practice, funding transfers have neither been timely not complete; in such cases funding that should have been provided hasn't been.

"The [ACERER] Committee believes that national security no longer requires that the nation fund health research into radiation-effects through such a system. Moreover, we believe that public expectations for a health research program that is removed from even the appearance of institutional bias are legitimate and reasonable. We also believe that reorganization can be accomplished without weakening DOE's occupational protection and training programs. Likewise we believe this can be accomplished while maintaining under DOE's purview the environmental monitoring programs necessary for it to provide its own internal assurance that it is fulfilling its legal and managerial responsibilities to protect workers, the public and the environment. Therefore, the ACERER committee recommends that Congress, with deliberate speed, frame a new mandate for research on the health effects of ionizing radiation, and that this mandate charge Health and Human Services with the primary responsibility for administering such research."

There are no guarantees that funding transfers will accomplish the desired unbiased commitment to good science in radiation health studies. However, it is a first step in a long journey that must be taken; otherwise there will be no journey toward the land of accountability. Recent biased radiation health studies by the National Cancer Institute are reminders that eternal public vigilance is a fundamental requirement of a participatory democracy. The only alternatives are large well financed class action litigation that can afford independent research to establish cause and effect between radioactive releases and health outcomes.

Tami Thatcher's reports on NIOSH's INL health studies are helpful in understanding worker exposure issues. 16 17 18 19

¹⁶ Radiological and Chemical Exposures at the Idaho National Laboratory that Workers May Not Have Known bout — How health is harmed by uranium, plutonium and other radiological and chemical exposures and possible nutritional support strategies, Environmental Defense Institute Special Report By Tami Thatcher April 2017. http://environmental-defense-institute.org/publications/Radchemreport.pdf

¹⁷ A Brief History of Radiation Exposures to Idaho National Laboratory Workers By Tami Thatcher January 5, 2016 Update, http://environmental-defense-institute.org/publications/TopTenINLR2.pdf

¹⁸ The Hidden Truth About INL Drinking Water A Long Legacy of Aquifer Contamination at INL, By Tami Thatcher. http://environmental-defense-institute.org/publications/INLdrinkwaterR1.pdf

¹⁹ The "Forever" Contamination Sites at the Idaho National Laboratory, by Tami Thatcher. http://environmental-defense-institute.org/publications/EarthDayINLreport.pdf

Examples of Reports Deemed "Not Useful for Dose Reconstruction"

91064 JWA2000062760 URINALYSIS Box 31 dose reconstruction, useful for worker studies 06/27/20003:28:02 PM	259 9 Jill	Not useful for							
91055 JWA2000062751 URINALYSIS SHEETS Box 31 dose reconstruction, useful for worker studies	259 9	Not useful for							
DOSIMETER LOG SHEETS, HP REQUESTS FOR SPECIAL DOSIMETRY PROCESSINGS Box 12/30/1987 12/29/1992 31	259 9	Not useful for							
dose reconstruction, useful for worker studies									
JWA2000062875 HEALTH PHYSICS SURVEY REPORTS									
JWA2000051069 AREA RADIATION ACTIVITY STRIP CHARTS Box 3/18/1978 4/13/1978 31 259	9	Not useful for							
dose reconstruction 05/10/2000 4:00:21 PM Jill		Not useful for							
JWA2000051070 AREA RADIATION ACTIVITY STRIP									
CHARTS Box 11/21/1978 12/3/1978 31 259 dose reconstruction 05/10/2000 4:00:29 PM Jill	9	Not useful for							
JWA2000051071 AREA RADIATION ACTIVITY STRIP									
CHARTS Box 8/26/1978 9/12/1978 31 259	9	Not useful for							
dose reconstruction 05/10/2000 4:02:21 PM Jill									
JWA2000051072 AREA RADIATION ACTIVITY STRIP CHARTS Box 4/24/1978 5/11/1978 31 259	9	Not useful for							
dose reconstruction 05/10/2000 4:02:41 PM Jill									
JWA2000051073 AREA RADIATION ACTIVITY STRIP	0	NI C 1 C							
CHARTS Box 9/5/1977 9/17/1977 31 259 dose reconstruction 05/10/20004:04:03 PM Jill	9	Not useful for							
JWA2000051074 AREA RADIATION ACTIVITY STRIP									
CHARTS Box 6/15/1977 7/6/1977 31 259 dose reconstruction 05/10/20004:04:10 PM Jill	9	Not useful for							
JWA2000051075 AREA RADIATION ACTIVITY STRIP									
CHARTS Box 2/7/1978 3/1/1978 31 259	9	Not useful for							
dose reconstruction 05/10/20004:04:32 PM Jill									
JWA2000051076 AREA RADIATION ACTIVITY STRIP CHARTS Box 10/30/1977 11/16/1977 31 259	9	Not useful for							
dose reconstruction 05/10/2000 4:04:55 PM Jill									
JWA2000051077 AREA RADIATION ACTIVITY STRIP									
CHARTS Box 11/23/1977 12/16/1977 31 259 reconstruction 05/10/2000 4:05:15 PM Jill	9	Not useful for dose							
JWA2000051078 AREA RADIATION ACTIVITY STRIP									
CHARTS Box 12/27/1977 12/27/1977 31 259 reconstruction 05/10/2000 4:05:34 PM Jill	9	Not useful for dose							
100011301 0001 10/2000 7.03.37 1 W JIII									

JWA2000051079	AREA RADIATION ACTIVITY STRIP									
CHARTS	Box	12/27/1977	2/7/1978	31	259	9	Not useful for dose			
reconstruction	05/10/2000 4	:05:52 PM	Jill							
JWA2000051080	WA2000051080 AREA RADIATION ACTIVITY STRIP									
CHARTS	Box	9/13/1977	10/2/1977	31	259	9	Not useful for dose			
reconstruction	05/10/2000 4	:06:13 PM	Jill							
JWA2000051081	31 AREA RADIATION ACTIVITY STRIP									
CHARTS	Box	2/13/1977	3/15/1977	31	259	9	Not useful for dose			
reconstruction	05/10/2000 4	:06:46 PM	Jill							
JWA2000051082 AREA RADIATION ACTIVITY STRIP										
CHARTS	Box	4/20/1977	4/30/1977	31	259	9	Not useful for dose			
reconstruction	05/10/2000 4	:07:10 PM	Jill							
JWA2000051083	AREA RA	ADIATION A	CTIVITY STR	IP.						
CHARTS	Box	12/9/1976	1/1/1977	31	259	9	Not useful for dose			
reconstruction	05/10/20004:	10:56 PM	Jill							
NOT USEFUL FOR DOSE RECONSTRUCTION !!!!!!!										
THESE ARE ACTUAL REAL TIME RADIATION PRINTOUTS										

Destroyed Box P1786 is an exemplar of critical problem of fundamental DOE intervention in controlling what data CDC was allowed to include in its Dose Reconstruction Health study.

"Originally box P 1786 contained non-record copies of 1957 dosimeter ring exposures, badge reports, and film badge reports. (Records copies were the responsibility of the Phillips Health and Safety Division.) Also, time sheets, warehouse transfer receipts, miscellaneous forms and letters, and safe work permits were included. Notes entered onto the records storage indicate that the safe work permits were removed from box 1786 and placed into box P 699, 67 968, 96720 & 96721 before box 1786 was destroyed on 6/26/58. (Box number P699 contain film badge reports, ring exposures, and other dosimeter records.) 9/11/00 information: Box P1786 was destroyed 6/26/58. Ring exposures are addressed in box P1798 located on FRC shelf 141896 accession 70."

Box P1786 was destroyed