

**Summary of the Laboratory Accreditation Body Expert Committee Meeting
Tuesday, June 16, 2015**

1. Welcome and Roll Call

Carl opened the meeting and the roll was called. Those present are noted in Appendix A. Minutes from May 19, 2015, were approved.

2. Update on Revising the Standard V2M1/V1M3

At the May meeting, LAB approved the text for a published notice that LAB Expert Committee would undertake to revise and consolidate the two modules of the standard. Lynn offered the Consensus Standards Development Program Administrator an opportunity to review the notice, since this would be the first such notice to be published since the Standards Development SOP 2-100 was revised.

The response was that, while the language of the notice is in good shape, the CSD program already has an active standards revision activity filed with ANSI, so that another could not be undertaken until after the end of calendar 2015. LAB will need to wait before publicly announcing its effort and will also be unable to discuss the potential revision of the standard at its meeting at conference.

3. Policy for the NELAP AC

Carl noted that the only revision received was to add a reference to §6.13.2 of the standard, and asked that the draft previously circulated be approved with that change, for forwarding to LASEC.

There was considerable discussion, focusing on whether to minimize the policy's interpretation of the standard as well as the relationship of this policy to SIR #254, previously referred to LAB and the expectation of the EPA Drinking Water program that all EPA-approved drinking water methods be assessed at every site visit. Lynn noted that the AC has deferred its action on SIR#254 until such time as a policy about selecting methods (or all methods) for assessment is approved, so that there is no relationship between this policy and any existing Standards Interpretation Request.

Nilda moved and Virginia seconded that the policy be approved as presented (including the reference to §6.13.2). There were three "yes" votes and one "no" with the majority of those present approving the document.

Carl requested that Lynn format the document into the template used by TNI for policies, and forward it to LASEC. NOTE: the language as approved is attached to these minutes (see Appendix B.) The formatted policy as transmitted to LASEC accompanies these minutes in the email transmitting them. For full disclosure purposes, the full text as approved by LAB is appended to the draft that was transmitted, since much of the language in the policy statement approved does not fit within the template.

4. Agenda for LAB Session at Conference

Carl outlined his anticipated agenda for the Monday morning committee meeting at conference in Chicago on July 13, as follows:

Approval of Minutes from June 16 (assuming a quorum is present)
Summary of Committee Activities since Crystal City
Request for Applicants for Committee Membership, particularly in the "other" stakeholder category
Presentation of the Newly Developed Generic Application (at least a beta-version)

It is unclear whether Carl will be able to travel, since Florida has not yet approved its budget for fiscal 2016 (beginning July 1.) It is thus possible that no meeting will occur, since the Vice Chair does not plan to be in Chicago and only one other member "might" be attending.

Carl thanked everyone for their time and the meeting adjourned at 12:02 pm Eastern.

5. **Next Meeting**

The next meeting of the LAB Expert Committee is scheduled for **Tuesday, August 18, 2015, at 11:00 am Eastern.** A reminder notice will be sent the week before.

The LAB Expert Committee meeting at conference in Chicago will be on Monday morning, July 13. No teleconference line will be available.

Our membership is down to six. Requests for member applications in the TNI newsletter, at conference and to NELAP evaluators have brought no response. Current members are asked to please use their personal connections to recruit additional members to help with the increased workload due to review and revision of the standard as well as the policy and upcoming generic application issues. Lynn noted that we must have an additional member from the "other" stakeholder category before we can add anyone from either the "lab" or "AB" category.

Appendix A

LAB Expert Committee Roster

Name/Email	Term ends	Affiliation	Present?
Joseph Aiello joseph.aiello@dep.state.nj.us	12/31/2016	AB – NJ State Department of Environmental Protection	No
Nilda Cox, Vice Chair nildacox@eurofinsus.com	12/31/2017	Lab – Eurofins Eaton Analytical Inc.	Yes
Virginia Hunsberger vhunsberge@pa.gov	12/31/2017	AB – PA Department of Environmental Protection	Yes
Lucrina Jones Jones.Lucrina@epa.gov	12/31/2016	Other – EPA Region 9 Laboratory	No
Carl Kircher, Chair carl_kircher@flhealth.gov	12/31/2015	AB – Florida Department of Health	Yes
Aurora Shields ashields@lawrenceks.org	12/31/2015	Lab – City of Lawrence, KS	Yes
Program Administrator: Lynn Bradley Lynn.Bradley@nelac-institute.org	N/A		Yes
Associate Members:			
Jeff Flowers, Chair jeff@flowerslabs.com		Lab – Flowers Chemical Laboratories, Inc.	No
Chris Gunning cgunning@A2LA.org		AB – A2LA	No
Doug Leonard dleonard@L-A-B.com		AB – Laboratory Accreditation Bureau	No
Jeff Lowry JeffL@phenova.com		Other -- Phenova (PTP)	No
June Main jmain@dep.nyc.gov		Lab – NYC DEP	Yes
Rebecca Pierrot		LAB -- Eurofins	No
Nishant Bhatambrekar Nishant1.Bhatambrekar@ge.com		LAB -- GE- Power & Water Engineering	No
Guests: none			

Appendix B

NELAP Policy on Laboratory On-Site Assessments (Re-assessments)

The NELAP Accreditation Council (AC) highly recommends that all the accredited laboratory Fields of Accreditation be covered and addressed during the regular on-site assessments that are conducted at the accredited Conformity Assessment Body (CAB, environmental testing laboratory) every two years, plus-or-minus six months (as re-assessments).

The applicable Standard in ISO/IEC 17011 Clause 7.5.6 (and TNI V2M3, 6.3.5) says that the assessment team needs to "witness a representative number of examples." The reader should not automatically or necessarily equate "examples" with accredited test methods, to imply that not all test methods need to be covered during on-site assessments. Analytes might also be considered as "examples." Further examples that could be witnessed on a representative basis would be laboratory analysts, test reports, data packages, continuing demonstrations of capability, limits of detection and verifications, and test method standard operating procedures. Taken together, it could be that not all accredited methods will be covered during a CAB's reassessment. However, 100% of the laboratory Quality System must be addressed during the re-assessments of each accredited CAB.

This Standard also specifies "sampling (if applicable)," and there may be instances where sampling only a representative number of methods and analytes during a reassessment is not applicable. An example of this circumstance would be US EPA's expectations for a State Accreditation Body (AB) to maintain Primacy for the Safe Drinking Water Act. Laboratory client expectations, project requirements, and other factors should be taken into account.

With the Standard as currently worded, while all methods of all technologies, test methods, and analytes do not necessarily have to be assessed during the reassessment, the AB is obligated to assure the performance of the laboratory. While the Standard is not prescriptive about how that must be accomplished, the Standards are clear about what the end result must be.

V2M1, 3.7 NOTE: Assessing the competence of a CAB involves assessing the competence of the entire operations of the CAB, including the competence of its personnel, the validity of the conformity assessment methodology, and the validity of the conformity assessment results.

V2M1, 4.2.1: The ... operation of an accreditation body shall be such as to give confidence in its accreditations.

V2M1, 4.2.2: The accreditation body ... shall be responsible for its decisions relating to accreditation, including the granting, maintaining, extending, reducing, suspending, and withdrawing of accreditation.

V2M1, 7.7.2: The accreditation body shall establish procedures and plans for carrying out ... reassessments at sufficiently close intervals to monitor the continued fulfillment by the accredited CAB of the requirements for accreditation.

If the Accreditation Body considers that reassessments should be identical with initial assessments (rather than "similar"), then the following Standard is also applicable:

V2M3, 6.9.1: The assessment team shall conduct the assessment of the conformity assessment services of the CAB at the premises of the CAB ... to gather objective evidence that the applicable scope the CAB is competent and conforms to the relevant standard(s) and other requirements for accreditation.

V2M3, 6.13.2: The accreditation body shall establish procedures and plans for carrying out periodic surveillance on-site assessments, other surveillance activities and reassessments at sufficiently close intervals to monitor the continued fulfillment by the accredited CAB of the requirements for accreditation.

If not all methods and analytes are covered during the routine reassessment, the laboratory may need reassessments at intervals more frequently than every two years plus or minus six months.

Each recognized Accreditation Body on the NELAP Accreditation Council (AC) should consider that confidence in its laboratory accreditation decisions needs to be instilled in many affected parties, inclusive of laboratory clients, officials making environmental protection and public health decisions, users of laboratory test results, the laboratory community seeking competent subcontractors, NELAP AC members granting secondary accreditations, and (last but not least) The NELAC Institute.