

**Summary of the NELAP Accreditation Council Meeting
January 24, 2018 10:30 am Mountain Time
Forum on Laboratory Accreditation, Albuquerque, NM**

1. Introductions

The NELAP Accreditation Council (AC) met at 10:30 am on Wednesday, January 24, 2018, at the Forum on Laboratory Accreditation in Albuquerque, NM. Those present are listed in Attachment 1.

2. Update on Evaluations

Aaren provided an update on the current round of evaluations, explaining this peer review function and how it serves NELAP. For the current 2017-2019 cycle, eleven renewal letters have been sent, with three submissions pending, and Oklahoma has submitted its long-awaited application to become a NELAP Accreditation Body. Two evaluations have been completed, with one renewal approved and the other awaiting a vote by the NELAP AC. OK had its site visit the week prior to conference, and David indicated that it went very well, offering his thanks to Steve Arms (the Lead Evaluator) and state AB representative Victoria Pretti.

3. Policy Development

The draft policy for method selection, intended to standardize the process of choosing methods to be assessed during lab assessments, continues to make slow progress. Aaren noted that it may be necessary to separate drinking water methods from other methods in order to make progress with this policy.

A policy for decoupling the evaluation procedure from the issuance of certificates of recognition was developed by LASEC, for the AC's consideration. Draft is ready for AC review. During the previous (2014-2016) evaluation cycle, all but two ABs needed temporary extensions, and the same is happening with the current cycle, so the proposal is a three year evaluation cycle with annual renewal of the AB certificates of recognition. Decision of when and how to implement is open, at present.

4. MUR Implementation

Aaren asked that each state provide its status and plans for implementing the latest Method Update Rule from EPA. The responses are tabulated below.

State	Status	Likely Implementation Date
FL	Rulemaking will be required to implement MUR. Program office attempting "fast-track" regulation. Labs wishing accreditation for new methods will need to apply for scope expansion and pay fee; new methods will then be accredited. If additional analytes are sought, the normal accreditation process (with on-site) applies. PTs for new methods will be required	Possibly as early as March 2018
IL	Implementation will be slow, but AB is encouraging use of	No mandatory

	new MDL procedure	date set
KS	Encouraging and providing training for new MDL procedure. AB will accredit new methods on request. Program office is not pushing implementation	No mandatory date set
LA DEQ	In summary, LDEQ has instructed the laboratories to implement the rule by the time of the next re-assessment or by September 28, 2018, whichever comes first. LDEQ will continue to accept data based upon the previous rule until August 28, 2019	September 28, 2018, or at the next re-assessment
LA DOH	Implementing new MDL as of February 2018; no new drinking water methods published	February 1, 2018
MN	Will require new MDL procedure by calendar 2019. New methods are required by renewal date (October 2018), pending availability of IT support	October 2018 for methods; January 2019 for MDL procedure
NH	Will add new methods at any time. Plans outreach to lab community and to set an eventual deadline for new MDL procedure to be required, possibly with next MDL determination. Needs to talk with EPA regional office before proceeding further	No mandatory date set
NJ	Required new MDL as of September 27, 2017. Will require new methods as of July 1 renewals.	July 1, 2018, for all primary and secondary accredited labs
NY	New methods and MDL procedure will go into effect April 1, 2018, with issuance of new certificates	April 1, 2018, for all primary and secondary accredited labs
OK (pending applicant)	Need to implement through rulemaking, estimate 20 months' time. Will provide MDL training with implementation	Anticipate September 2019
OR	Requested decision from program about when to notify labs to begin using new methods	After October 2018
PA	State program is in no rush to implement, so MUR methods will not be required. New MDL procedure will be required at next lab assessment. AB will honor lab's transition to new methods when lab chooses to implement them	No mandatory date set for methods
TX	Program office has not responded to request for guidance. AB not accrediting new methods now, but will do so about six months after program response arrives. Encouraging use of new MDL procedure.	Awaits guidance from program office
UT	Will honor lab's decision to implement new methods, but not required now. Labs will need to implement new MRL procedure at next assessment	No mandatory date set for methods
VA	VA DEQ will need to update regulations. AB will allow labs to implement earlier, if they choose	Mandatory date will be set after DEQ's rulemaking

5. Request from PTPEC

The PT Program Executive Committee (PTPEC) is undertaking an effort to have the analyte names in Field of Proficiency Testing tables (FoPT) match the names in the LAMS database. The AC has deferred to the “experts” to decide which nomenclature to use, but requested that CAS numbers be provided whenever possible.

6. Letter of Appreciation from OK

Chris Armstrong, the manager overseeing Oklahoma’s Accreditation Body program and David Caldwell’s supervisor, was unable to attend this conference, but he sent a very nice letter of appreciation to be read at the AC meeting. In this letter, he thanked the Council for its anticipated recognition of OK DEQ as a NELAP AB, noting Judy Duncan’s service to the OK program and her determination to seek recognition, David’s effort and accomplishment in preparing and submitting OK’s AB application and also April Franklin, the QA Officer, especially noting April’s outstanding ability to draft procedures.

Participants responded with applause as Aaren read this letter, and Aaren quipped that all AB supervisors were welcome to provide similar letters for their program managers.

7. Adoption and Implementation of the 2016 TNI Environmental Lab Sector Standard

Now that the NELAP AC has accepted each of the individual revised modules of the 2016 standard, LASEC is reviewing the full volumes for consistency issues and another look at implementability. The individual reviewers have not discussed their reviews yet, but barring some difficulty, that process should be completed within a couple of LASEC meetings, and then a recommendation will arrive for AC consideration.

The actual adoption cannot occur until the requested guidance documents are reviewed and found acceptable, as well as the standard itself. Review of the guidance documents is expected to follow review of the standard, in both timing and process.

With those caveats, Aaren explained that the implementation date was set for two years after the adoption date, for the 2009 standard, with a rolling implementation based on what each AB is able to accomplish. Aaren indicated that an earlier implementation date may be set, perhaps one year, but this is yet to be decided upon. Some can adopt immediately if their rules reference the current NELAP standard, while others require rulemaking. Once again, all NELAP ABs will recognize the lab accreditations granted by other NELAP ABs, regardless of which standard that AB is using.

Individual ABs provided the following information about their process and anticipated implementation date in this rolling implementation process. States adopting by reference will allow labs time to implement the new standard.

State	Process for Implementing the Standard	Likely Actual Implementation Date
FL	Requires rulemaking. A rule is underway specifying adoption by reference but that regulation must have a Notice of Proposed Rule Amendment published in February 2018 or else will need to re-start at the beginning	Uncertain
IL	Must do formal rulemaking, probably more than two years	More than two years after

		rulemaking begins
KS	Rulemaking needed, but regulation is drafted already. Hope to change the regulation to adoption by reference, but may be unable to do so.	Nine to eighteen months after adoption
LA DEQ	Based upon the current language in the Louisiana Administrative Code, LDEQ will implement the revised standard as soon as the NELAP AC votes to adopt it. The implementation process includes updating the program's quality system documents, which should take no more than four weeks.	One month after implementation date
LA DOH	Must do formal rulemaking, indefinite time needed	Indefinite
MN	Adopts by reference	Implementation date as adopted
NH	Needs formal rulemaking. Uncertain when approval to develop new rule can be obtained	Uncertain
NJ	Adopts by reference but will need six to twelve months to implement required changes internally	Twelve months after adoption date
NY	Adopts by reference, but internal documents and certification manual need to be updated. Will implement the standard with the next renewal date once those tasks are completed	April 2019
OK (new applicant)	Must do formal rulemaking, at least two years needed	Two years after rulemaking begins
OR	Needs formal rulemaking, but expect that to proceed quickly as it is non-controversial. Also needs time to update internal documents and processes	Less than two years after adoption
PA	Adopts by reference, just needs time to prepare the necessary "tools" to implement (checklists, etc.)	Shortly after formal implementation date
TX	Will adopt by reference on the implementation date	Implementation date
UT	Must do formal rulemaking	6-12 months after implementation date
VA	Will begin formal rulemaking once adoption is accomplished, and then will need time to adapt internal systems and documentation. Previous rulemaking took several years	Uncertain

Several additional comments were made concerning the standards revision, adoption and implementation process.

The Consensus Standards Development Program noted that almost all of the expert committees need additional AB stakeholder category members and asked that ABs please consider increasing their participation in these committees that actually conduct the revision of standards.

VA once again expressed its plea to have a quality systems checklist where each item is a standalone, rather than a phrase or partial sentence or a group of related item. If this is not provided by the expert committees, then the AB is unable to use the provided checklist until it is modified appropriately, and doing this in-house is burdensome. UT, OK, LDEQ, KS and possibly FL would also be able to use such a checklist better than the one provided now. PA

asked for a checklist that is composed of statements and not questions, and also needs each item to be a standalone. Ilona agreed to work with VA and others to modify the checklists that have been prepared by expert committees already.

The Chair of Microbiology stated that she was aware of this preference and that the microbiology checklist should already address this stated need. She noted that full context is available in the Small Lab Handbook as well as the standard itself.

The Chair of the Radiochemistry Expert Committee expressed serious frustration at this request, expressing his concern that parsing the standard into phrases removes needed context for the assessor, leaving just individual bullets with lesser effect. He noted that the radiochemistry checklist will be posted separately (and in Word) from the full checklist. Several ABs stated that the standalone phrasing requested is for a database to be used in writing the assessment report, rather than being used for the assessment itself.

8. Technical Training for Assessors

Mei Beth Shepherd asked what AC members do to meet the requirements for training in specific technical areas for laboratory assessors. She acknowledged that the EPA Certification Officer training is required for assessment of drinking water methods (microbiology, organic and inorganic chemistry, and most recently protozoa) and that she is aware of the series of planned five seminar series to be offered by Marlene Moore, but wondered how training is done by the individual ABs.

The basic response is that each AB defines its training and the testing required by the NELAP standard. Some ABs share training efforts and materials, and discuss how to train assessors, but essentially, assessor training is not standardized across NELAP ABs. The following table provides responses from each AB, addressing how they qualify assessors.

State	How assessors are qualified and training requirements
FL	Scopes of accreditation are at the technology level. Technologies for assessors are identified by (contract) assessor on the AB's website. Technologies that are not part of the EPA Cert. Officer course revert to training criteria from the 2003 NELAC standard or the (former) On-Site Assessment Committee guidance. For evaluating contract assessor training qualifications, FL relies on the syllabus of training courses and test results
IL	New assessors must have a degree in biology or chemistry plus TNI and drinking water assessor training, and they practice audits in the lab also. IL also tracks methods that are assessed to build some knowledge of methods/technologies. Assessors are supplemented by lab personnel as technical experts so that individual technologies can be assessed
KS	Relies on EPA drinking water training and in-house training
LA DEQ	LDEQ assessor qualification is initially determined during the hiring process or contract award. Assessors are required to comply with requirements described in 2009 TNI V2M1 6.0 and V2M3 4.2. LDEQ provides annual assessor refresher and technical training for the disciplines identified in the note in 2009 TNI V2M3 4.2.4 either internally or externally (such as by contract). LDEQ contract assessors are required to obtain their own technical training and supply documentation that it is complete. LDEQ also provides shadow assessment opportunities to both in-house and contract assessors as needed.

LA DOH	Accredits only drinking water and must rely on EPA-provided training
MN	Uses categories identified in V2M1 for contract assessor qualifications
NH	?
NJ	Has detailed qualifications for hiring of assessors plus in-house training
NY	Has detailed qualifications for hiring of assessors, with a training checklist that addresses every category of testing (micro, chem [organic, inorganic, wet chem] asbestos, rad chem.) Assessor training requires 12-15 months after hiring
OK	Is developing teams for additional assessors (from lab staff and new hires.) AB's QAO will develop videos with accompanying tests, training to specific technologies
OR	Relies on EPA Cert. Officer training if assessor is not from within the lab. For lab personnel, accepts analytical responsibilities as training. Specialty items receive off-site training (the DEQ lab is next door to the AB location, so assessors can observe lab personnel)
PA	Assessors are trained according to the categories identified in the NELAP standard, V2M1
TX	Assessors are qualified to the V2 high level categories plus drinking water (which serves also as organic/inorganic chem training.) Some training provided in-house
UT	Assessors are qualified to the technology level (per LAMS technologies)
VA	Assessors are qualified by V2 disciplines, and the fee categories match this. Uses TNI guidance for assessor training. Fully supports TNI providing training materials to ABs. Uses example methods by technology, assessors can observe in the VA lab (co-located) which serves as internal audit for the lab, also. Requires that assessors work through a checklist before signing off on training

One AC member noted that there is a chronic lack of resources for assessor training, and that training for new assessors within a reasonable timeframe is needed. Other ABs noted the requirement to observe other assessors and then to be observed initially and periodically over time. Yet another AB remarked that the different training processes and procedures arose from desperation, and that a one-time cost training (not per pupil) is highly desirable. The training must be pre-approved by the NELAP ABs in order to be acceptable per the standard. Several large ABs noted that training and experience requirements to be hired into their programs are already high, and then they train on specific assessor techniques.

9. Potential Interim Oversight of NELAP ABs between Evaluations

One commenter noted that, while the evaluation process is rigorous, it might be desirable to add some interim oversight (more often than three years.) Aaren noted that this was discussed but not addressed when the NELAP Evaluation SOP 3-102 was revised. The Council will revisit this issue, as it may be appropriate to include in either the decoupling policy (see above) or the evaluation SOP, going forward.

10. Next Meeting

The next meeting of the Council will be Monday, February 5, 2018. An agenda and any documents will be sent in advance.

Attachment 1

STATE	REPRESENTATIVE	PRESENT
FL	Carl Kircher E: carl.kircher@flhealth.gov	Yes
	Alternate: Vanessa Soto E: Vanessa.sotocontreras@flhealth.gov	NO
IL	Celeste Crowley T: 217-557-0274 F: 217-524-6169 E: celeste.crowley@illinois.gov	Yes
	Alternate: Becky Hambelton Rebecca.Hambelton@Illinois.gov	No
	For information purposes: Kathy Marshall Kathy.Marshall@Illinois.gov	
	For information purposes: John South John.South@illinois.gov	
KS	Sara Hoffman sara.hoffman@ks.gov	No
	Alternate: N. Myron Gunsalus 785-291-3162 E: ngunsalus@ks.gov	Yes
	For Information Only: Paul Harrison	Yes
LA DEQ	Paul Bergeron T: 225-219-3247 E: Paul.Bergeron@la.gov	No
	Altérnate: Elizabeth West elizabeth.west@la.gov	Yes (Phone)
LA DOH	Grant Aucoin Grant.aucoin@la.gov	Yes
	Alternate: Scott Miles Scott.Miles@la.gov	
MN	Lynn Boysen E: lynn.boysen@state.mn.us	Yes (phone)

	Alternate: Stephanie Drier 651-201-5326 E: stephanie.drier@state.mn.us	No
NH	Bill Hall T: (603) 271-2998 F: (603) 271-5171 E: george.hall@des.nh.gov	No
NJ	Michele Potter T: (609) 984-3870 F: (609) 777-1774 E: michele.potter@dep.nj.gov	Yes
	Alternate : Rachel Ellis E: rachel.ellis@dep.nj.gov	No
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	Alternate: Lynn McNaughton lynn.mcnaughton@health.ny.gov	No
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	Lizbeth Garcia Lizbeth.garcia@dhsosha.state.or.us	No
	Included for information purposes: Stephanie Ringsage, Manager, Laboratory Compliance Section 503-693-4126 stephanie.b.ringsage@state.or.us	No
	Included for information purposes: Scott Hoatson Agency Quality Assurance Officer Oregon Department of Environmental Quality 503-693-5786 E: hoatson.scott@deq.state.or.us	Yes
PA	Aaren Alger T: (717) 346-8212 F: (717) 346-8590 E: aaalger@pa.gov	Yes
	Alternate: Yumi Creason E: ycreason@pa.gov	No
TX	Ken Lancaster T: (512) 239-1990 E: Ken.Lancaster@tceq.texas.gov	Yes
	Alternate: Kristy Deaver T: (512) 239-6816 Kristy.deaver@tceq.texas.gov	Yes

UT	Kristin Brown T: (801) 965-2540 F: (801) 965-2544 E: kristinbrown@utah.gov	Yes
	Alternate: Alia Rauf T: 801-965-2511 E: arauf@utah.gov	No
VA	Cathy Westerman T: 804-648-4480 ext.391 E: cathy.westerman@dgs.virginia.gov	Yes
	Alternate: Ed Shaw T: 804-648-4480 ext.152 E: ed.shaw@dgs.virginia.gov	No
NELAP AC PA and EC	Lynn Bradley T: 540-885-5736 E: lynn.bradley@nelac-institute.org	Yes
EPA Liaison	Donna Ringel T: 732-321-4383 E: Ringel.Donna@epa.gov	Yes (phone)
California	Christine Sotelo Christine.Sotelo@waterboards.ca.gov	No
Oklahoma	David Caldwell E: David.Caldwell@deq.ok.gov	Yes
Guests:		