SUMMARY OF THE
TNI LABORATORY PROFICIENCY TESTING EXPERT COMMITTEE MEETING

MAY 10, 2013

The Committee met by teleconference on Friday, May 10, 2013, at 11:00 am EST. Chair Mitzi Miller led the meeting.

1 – Roll call

Fred Anderson, Advanced Analytical Solutions (Other)	Present
Stephen Arpie, Absolute Standards (Other)	Present
Kareen Baker, Veolia Water N. American (Other)	Present
Yumi Creason, PA DEP (AB)	Present
Rachel Ellis, NJ DEP (AB)	Absent
Scott Hoatson, Oregon DEQ (AB)	Present
Shawn Kassner, Phenova (Other)	Present
Roger Kenton, Eastman Chemical Co. (Lab)	Absent
Stacie Metzler, Hampton Roads San. Distr. (Lab)	Present
Mitzi Miller, Dade Moeller Assocs. (Chair; Other)	Present
Judy Morgan, Env. Science Corp. (Lab)	Present
Virgene Mulligan, Amrad (Lab)	Present
Joe Pardue, P2S (Other)	Present
Jim Todaro, Alpha Analytical (Lab)	Absent
Lisa Touet, MA DEP (AB)	Present
Ken Jackson, Program Administrator	Present

Associate Committee Members present: Mike Blades, ERA; Pat Brumfield; Nicole Cairns, NYSDOH; Audrey Cornell, ERA; Jeff Lowry, Phenova; Brian Stringer, ERA.

2 – Previous Minutes

Early in the call there was no quorum and consideration of the May 3, 2010 minutes was postponed.

3 – Volume 3 Comments

Discussion of the Excel file with received comments was continued from the previous calls.

Comment 27: Referring to 7.1.8 *"Add 10 % Maximum back into this statement. The maximum is more technically sound."*. Following discussion of this item on the last call, Mike Blades was invited to explain his rationale for wanting the 10% maximum added back. As an example he quoted Toxaphene in Non-Potable water, with the FoPT table giving 1 RSD = 37.2%. Verification could be off by 30-40% and still meet the criteria.

The 10% maximum limit would guard against this. An extensive discussion followed. Nicole argued that Toxaphene is just one of a few "drastic" examples, and meeting the 10% criterion does not necessarily result in a better PT. Mike countered that not one base-neutral analyte has an RSD < 15%, and 20% is quite typical. Nicole said 10% is an extreme and some analytes have lower or higher recoveries during verification. Her PT production laboratory may have to re-analyze an entire PT for just one or two analytes. Most of the PT providers on the call did not consider the 10% requirement a hardship, and it was pointed out that the subcommittee had contacted all the PT providers who had agreed on this change. However, Steve felt the requirement for the mean of the provider's verification analyses being within one-third of the laboratory acceptance limits was the real control and the 10% maximum could be optional. He reminded the committee that PT samples are not calibrants and need only be "fit for use". However, others felt there must be consistency or there may be a loss of confidence in some PT providers. Mitzi asked if it would be possible to add more flexibility without sacrificing quality, and Steve said you could forget the one third requirement and just specify a 15% maximum. Judy questioned why the 10% requirement was such a hardship on PT providers. She argued that, for a laboratory, PTs are costly and a lot rides on them.

At this point, Nicole suggested sending this issue back to the subcommittee. Shawn agreed to get the subcommittee back together. It was suggested to have a couple of laboratories and as many PT providers as possible, but not more than one member per PT provider. Judy suggested the subcommittee might consider putting in something analogous to marginal exceedances in the providers' SOPs.

Comment 29: Referring to 7.1.10 *"Add back into the standard: '7.1.10 The standard deviation of the verification analyses shall be less than one standard deviation as calculated for the participant laboratories.'"* This item was also revisited to get Mike's input. He said all PT providers meet the 1 SD requirement, so it should remain in the standard. It was agreed to also send this back to the subcommittee.

4 – Webinar proposal

Ken said Jerry Parr had asked him to consider 2-3 webinars to be presented in June/July to prepare people for the San Antonio meeting. He suggested the PT Expert Committee should provide one of the webinars (about 1 hour), being in a critical stage of standards development. There was general agreement on this and Ken said he would ask Bob Wyeth to have this discussed during the next Consensus Standards Development Executive Committee conference call.

5 – SIR 181

In this SIR it was questioned if the AB has to track to the day or just to the month. Shawn suggested copying the "comments" into the "response" and adding that this is being re-evaluated in the VDS. It was moved by Shawn and seconded by Lisa to modify this SIR as attached. All were in favor and the motion carried.

6 – Next steps

All committee participants now had copies of both ISO 17043 and Guide 34. Mitzi asked everyone to read them before the next meeting and consider whether to move to them as the standard with TNI specific requirements added.

7 – Adjournment

The meeting was adjourned at 12:30 pm EST. The next meeting was scheduled for May 24, 2013, at 11:00 am EDT.

Attachment

SIR #181

Standard	2009 TNI Standard
Volume and Module (eg. V1M2)	V1M1
Section (eg. C.4.1.7.4)	4.2.1 a)
Describe the problem:	Please clarify the use of "analysis date" in V1M1, section 4.2.1 a) for successive PT samples. The standard states that the analysis date is to be at least 5 months apart and no longer than 7 months apart. TNI defines "analysis date" as the "calendar date of analysis" in the "Terms and Definitions" section. So, if a PT sample is analyzed on March 15, 2011, is the period anytime between August 2011 and October 2011 (5 - 7 months) acceptable, or, must one use the period August 15, 2011 to October 15, 2011 for the next PT sample?
Comments	Currently these are the timeframes that laboratories and accrediting bodies must track for accreditation purposes. The feedback from both laboratories and accrediting bodies was that this was too onerous to track and the Working Draft Standard will address this.
Response	The term "analysis date" is as defined in the Terms and Definitions. The 5 to 7 month window would be as is described above; using the above example, PTs must be analyzed between August 15, 2011 to October 15, 2011 for evaluation purposes.