

**TNI Board of Directors Meeting Summary
September 8, 2021**

ROLL CALL

Directors	Present	Staff	Present
Jordan Adelson	X	Lynn Bradley	X
Aaren Alger	X	Carol Batterton	X
Steve Arms	X	Jerry Parr	X
Justin Brown	X	Suzanne Rachmaninoff	X
Kristin Brown	X	Ilona Taunton	X
David Caldwell	X	Janice Wlodarski	X
Stacie Crandall	X	Bob Wyeth	X
Jack Farrell	X		
Maria Friedman	X		
Myron Gunsalus	X		
Jessica Jensen			
Paul Junio	X		
Judy Morgan	X		
Patsy Root	X		
Debbie Rosano	X		
Scott Siders			
Nick Slawson			
Alfredo Sotomayor	X		
Lem Walker			
Past Chair			
Sharon Mertens	X		

AGENDA

1. Review of Consent Agenda

Approved 7/8/2021

2. Staff and Board Changes (Attachments 1 and 2)

Attachments 1 and 2 are informational only.

3. Accreditation for Covid Testing (Attachment 3)

This topic was brought up in the July Board call and after subsequent discussions in the Environmental Monitoring Coalition, Jerry submitted an abstract for an NEMC session in Bellevue and presented on this topic. Note: Nick Slawson also presented on this topic in the same session.

After discussion, the Board formed a Task Group (Alfredo, Jack, Myron, Patsy, and Sharon) to work with Jerry to explore the feasibility of such an effort and to evaluate the benefits and risk.

4. **2022 Forum on Environmental Accreditation (Attachment 4)**

Active work has begun for the Forum to be held in San Antonio from January 17-21, 2022. The TNI Advocacy Committee (who serves as the planning committee for the TNI winter meeting) supports the proposed approach for the Forum as shown in Attachment 4. Note: Because the contract was inadvertently scheduled to begin on Martin Luther King Day, everything has been shifted one day with the TNI Annual Report to begin at 1:00 pm on Tuesday.

The Advocacy Committee is seeking Board approval for the proposed approach, registration fees and health and safety protocol.

Motion to Approve Approach, Registration Fees, and Health and Safety Protocol: Approved

5. **Summary of the 2022 Summer Forum on Environmental Accreditation (Attachment 5)**

This is informational only and quite lengthy. Recordings of all meetings are available for viewing to conference attendees until October 31. For those who did not register, you can still do so at <https://nemc.us/meeting/2021/register.php>. The TNI track is \$210.

6. **Stationary Source Audit Sample (SSAS) Expert Committee Stakeholder Groups**

SOP 2-101 states:

Any Expert Committee may determine that additional or different stakeholder groups are appropriate for that Expert Committee's scope of activity. Requests for changes in the stakeholder group designations for a given Expert Committee shall be presented to the CSDEC, and under its recommendation, be presented to the TNI Board of Directors for its approval.

The SSAS Committee has two requests:

1. The stakeholder group of "Laboratory/FSMO" be separated into two discrete groups: (1) Laboratory and (2) FSMO. The reasoning behind this request is that, while the stationary source emission samplers (Samplers) who collect samples do perform field sampling and are FSMOs, their interest in the SSAS Program is different than laboratories. These Samplers are representatives of the facility being tested. Laboratories are independent of the facility and report data to the Samplers. With the two groups combined into one stakeholder group, we are unable to achieve adequate representation of the Samplers on our Committee, and therefore are unable to meet the requirements in SOP 2-10 for appropriate representation.
2. The current stakeholder group of "Accreditation Bodies" be replaced by "Regulators". The reason is that no Accreditation Bodies exist for the SSAS Program. Regulators have a similar function and should be represented on the committee.

These changes would give the SSAS Committee the following stakeholder groups: Laboratory, FSMO, Regulators, and Other.

Motion to Accept the Recommendation of the SASS Committee to Change the Stakeholder Groups:

Motion to Approve: Jack Farrell
Second: Justin Brown
Approved: Unanimous

Attachment 1

TNI Staff and Board Changes and Sustainability

Earlier this year, TNI's Executive Director was informed of 2 TNI staff retirements to occur in the near future. TNI's Executive Committee met on August 3 in Bellevue to discuss these changes to TNI staff and the Board of Directors and developed a preliminary plan. The Committee met again by teleconference on August 13 and since then finalized the proposed changes below by email.

Article VI, Section 10 outlines the responsibility of the Executive Director stating:

The Executive Director has day-to-day responsibility for TNI operations, including carrying out TNI's goals and Board policy.

The job description for the Executive Director contains this statement:

In relations with staff, the Executive Director will be responsible for staffing and staff management.

Based on several recent events, and more expected in the next 2-3 years, Jerry made a general announcement on August 4 in Bellevue that TNI expects to have openings in the next few years and a number of individuals expressed interest in supporting TNI activities in the future. Without naming everyone who came forward, we will have others willing to step forward as needed.

Two significant staff changes are coming up in the next few months and two changes to the Board have occurred and another is expected in October. Based on these changes, the Executive Director is announcing the staff changes below and requesting the Board confirm these actions.

Carol Batterton

Carol has decided to fully retire at the end of September in order to travel more and spend time with her grandchildren. Currently, Carol staffs the Advocacy Committee, and Lynn Bradley, who has been an active volunteer member of this committee has agreed to take on Carol's role effective October 1, 2021.

Suzanne Rachmaninoff

Suzanne has also given notice that she wants to leave TNI after our next winter meeting in San Antonio. Paul Junio expressed his interest in taking on Suzanne's role as both the TNI Executive Administrator (EA) and Meeting Planner and Jerry has asked Paul to take on this role effective February 1, 2022. Jerry has also asked Paul to step down from the Board on that date to avoid any potential conflict of interest. Note: This date will occur after the Board election begins in 2022, but before the election closes. Thus, this should be considered an open position for the 2022 election.

While he is still working for Northern Lake Services, it is not feasible for Paul to routinely answer the TNI telephone during the day. Jerry has thus asked Janice Wlodarski take on this role, including processing TNI membership renewals that occur by phone. Over the next five months, Jerry and Suzanne plan to flesh out several administrative SOPs and then initiate a series of teleconferences with Paul and Janice to work on a transition plan. Suzanne also indicated she could stay on part time from February to the end of May to slowly transition Paul into this new role. As well, Kay has indicated she could take on some of the meeting planning activities relating to working with the hotel. Jerry will also add Paul to the NEMC Steering Committee so he can begin transitioning into that role.

Currently, if we exclude the extraordinary effort required to put on a hybrid meeting, Suzanne averages around 100 hours a month, or a little over half time. With Kay and Janice providing assistance, and eliminating hybrid meetings, this level of effort could drop to 60-80 hours a month. The plan is to monitor Paul's activity from February through May and then consider adjustments if needed.

Board of Directors and Treasurer

As of August 13, Curtis Wood has left ERA and started his own company focused on water treatment and thus has resigned from the Board. Scott Siders plans to retire in October when his TNI membership expires. Article V, Section 7 discusses vacancies stating:

In the event of a vacancy of a Director, the Board of Directors, by a vote of the majority of the remaining Directors, may appoint a new Director to fill such vacancy until the next election cycle. To the degree possible, the Director filling the vacancy shall represent the same constituency as the Director who created the vacancy.

With these two open positions plus Paul's departure and Bob's passing, the Board will be 5 AB, 5 Lab and 7 Other in February 2022 (the other includes the 3 ex-officio). Scott's term would normally end in 2022, Paul in 2022, Curtis in 2024, and Bob in 2024. If all 4 of these positions are kept open for the 2022 election, we will end up with 6 ending in 2023, 4 in 2024, and 8 in 2025, so it may be prudent to fill two of these (Lab and Other) to expire in 2024 and hold the other two open until the 2022 election.

With Curtis leaving the Board, the position of TNI Treasurer is also open. Sharon Mertens, in her role as Chair of the Nominating Committee, asked Justin Brown if he would be willing to take on that role and Justin agreed. This move needs to be confirmed by the Board. Justin has been a member of the TNI Finance Committee for several months now. With only three members, it would be nice to add another one or two from the Board, or from individuals not on the Board that have relevant experience.

Sustainability Planning

In 2015, we created a Task Force to address sustainability. This plan included three components:

- Planning for Business Continuity
- Succession planning for the TNI Executive Director and Staff
- Succession planning for the TNI Board of Directors

This plan was updated in 2017 and has been updated again to reflect the changes above as well as to document significant improvements in business continuity. This new version is being provided to the Board for informational purposes (Attachment 2) but can be discussed if requested. TNI's Executive Committee will continue to meet to update the sustainability plan and to create feasible succession plans for the TNI Executive Director, Staff, and the Board of Directors for Board consideration at a future date.

Motion to have the current vacancies on the Board of Directors filled at the next election cycle beginning in November 2021:

Motion to Approve: Jack Farrell
Second: Patsy Root
Approved: Unanimous

Motion to Nominate Justin Brown for Treasurer of the TNI Board of Directors:

Motion to Approve: Jack Farrell
Second: Judy Morgan
Abstentions: Justin Brown
Approved: Unanimous

Attachment 2

Sustainability Plan – August 31, 2021 Update

1.0 Introduction

This is an update to a 2017 document originally created in 2015.

The three components of sustainability planning were identified as:

- Planning for Business Continuity
- Succession planning for the TNI Executive Director (ED) and Staff
- Succession planning for the TNI Board of Directors

2.0 Business Continuity

Significant progress has been made over the past five years. Almost all business records are now stored in the cloud (Dropbox) and both the ED and Executive Administrator (EA) have access to these files, including the passwords for all accounts. The only documents not stored this way are invoices and check stubs from and to staff, and these are backed up by our accountant and by electronic copies of bank statements.

A list of information to ensure business continuity is listed below.

- Financial – banks statements, audits, tax records, incorporation information, reporting information and requirements, receipts, QuickBooks
- Vendors and other suppliers, contractor information, records of who we used, when, pending and outstanding contracts, where to find status
- Staff information, payments, other records, and assignments
- Any other outstanding liabilities, accounts payable
- ANSI information
- Website and other internet service information
- Credit card payments
- Historical documents (business and technical (i.e., TNI articles of incorporation))

In addition, we have created detailed internal SOPs that describe how all of the business activities are carried out. These include:

- Emals, our on-line system for processing orders for standards, documents, webcasts, etc.
- Authorize.net, our on-line system for credit card processing
- TNI database, our database used for emails and snail mail of brochures, etc.
- LinkLok, our on-line system for managing standards and webcasts
- MachForm, our on-line system for managing committee applications, NEMC abstracts, and many other similar activities
- BBVA, our banking system
- Quicken reports: Accounts receivable and payable
- Webcast spreadsheet, used to pay royalty fees to trainers

3.0 Succession Planning for Executive Director and Staff

Some key considerations in developing the succession plan for the Executive Director and for staff that were decided in 2015 is that we do not want to run anyone off, but we need to have an idea of long-term plans as they relate to TNI. Also, we do not want to significantly change our expense structure (i.e., virtual part-time staff) unless we can increase income.

Based on an announcement made at the Environmental Measurement Symposium on August 4, it is clear we will always have individuals nearing retirement that could easily be persuaded to join the TNI virtual work force. With the sole exception of William Daystrom, any of the current staff could be replaced with eminently qualified individuals.

4.0 Succession Planning for the TNI Board

The Bylaws state:

In the event of a vacancy of a Director, the Board of Directors, by a vote of the majority of the remaining Directors, may appoint a new Director to fill such vacancy until the next election cycle. To the degree possible, the Director filling the vacancy shall represent the same constituency as the Director who created the vacancy.

The TNI Executive Committee has identified potential new members of the TNI Board and/or Finance Committee. With Curtis and Scott leaving, the current make up will be 5 AB, 7 Lab and 7 Other (the other includes the 3 ex-officio). Scott's term would normally end in 2022 and Curtis in 2024. Sharon Mertens, in her role as Chair of the Nominating Committee will be reaching out to these other individuals to see what their interest might be. Sharon welcomes any suggestions from the Board.

Attachment 3

Considerations Regarding the Establishment of Accreditation Systems for Laboratories Testing for SARS-CoV-2 in Wastewater

Jerry Parr
August 4, 2021
National Environmental Monitoring Conference

Abstract

Wastewater-based epidemiology (WBE) has become widely recognized as a useful complement to clinical testing for monitoring and informing response to the spread of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Key advantages of WBE include (1) it is a less resource-intensive way to gather information on large numbers of individuals, (2) it provides data on entire populations rather than just the subset of individuals who come in for clinical testing, and (3) it can serve as an early-warning system, given that fecal shedding of SARS-CoV-2 typically precedes symptom onset. The quantitative Polymerase Chain Reaction (PCR) assay can be used to supplement clinical testing. Accreditation has been used in a wide variety of industries to help laboratories in standardizing methodology, ensuring valid results that can be compared, and in ensuring competency amongst participating laboratories. TNI has a national laboratory accreditation program that could be adapted to accredit laboratories that test for SARS-CoV-2. While there is no specific standard for this testing, the laboratories themselves can be assessed under the TNI standard or the ISO/IEC 17025 standard. ACIL has been leading an effort to develop a checklist that could be used by laboratory assessors.

As discussed in more detail in a 2020 report, there is no doubt that accreditation to the TNI standard makes a difference in the quality of the data and in laboratory performance. Laboratories accredited to the TNI standard have documented significant improvements which include efficiency, demonstrated capability, and quicker reports. Traceability, training, quality assurance, and documentation all contribute to better decisions and confidence in the data for the accredited laboratories, data users and regulators.

Excerpts from Presentation

SHOULD LABORATORIES BE ACCREDITED FOR SARS-COV-2?

- Only 20% run negative controls
- Only 38 % run positive controls
- Only 25% evaluate calibration curves
- LOD and LOQ concepts mostly not appropriately applied
- QC Results mostly not reported

Environmental Microbiology Minimum Information Guidelines: qPCR and dPCR Quality and Reporting for Environmental Microbiology, July 21, 2021
<https://pubs.acs.org/doi/pdf/10.1021/acs.est.1c01767>

BUT COVID IS NOT AN ENVIRONMENTAL CONTAMINANT

- No, but TNI already accredits over 850 wastewater laboratories in 48 states.
- No, but the Quality Systems module provides a framework for testing environmental media for non-traditional contaminants.
- TNI Accreditation Bodies already accredit 30 laboratories for parasites and bacteria such as Cryptosporidium, Giardia, and Legionella.
- The scope of these laboratories could be easily expanded to include the quantitative Polymerase Chain Reaction (PCR) assay and SARS-CoV-2 as the analyte.

HOW MIGHT A SYSTEM BE ESTABLISHED?

- Add SARS-CoV-2 and the PCR assay to TNI's Laboratory Accreditation Management System.
 - ✓ Done
- Create a method checklist for laboratory assessors to use.
 - ✓ Almost Done; ACIL led effort
- Develop implementation guidance for Accreditation Bodies and technical training for assessors on the PCR assay.
- Explore feasibility of proficiency testing, interlaboratory comparison studies, or other comparable actions to objectively verify the competency of the laboratories.
- Publicize the benefits of this program to the CDC, State agencies, and other trade associations such as ACIL, APHL, and WEF.
- Consider modifying the Microbiology module to incorporate technical requirements for PCR.

METHOD CHECKLIST*

- WW/COVID Checklist covers several steps in the testing process
 1. Sample Checks
 2. Standard Curve (RT-PCR)
 3. Pretreatment
 4. Concentration
 5. Extraction of RNA
 6. PCR, either RT-PCR or ddPCR
 7. Results interpretation, data reporting
- Checklist includes six parameters to consider for each step in the method
 1. Quality Control Measure
 2. Description
 3. Frequency
 4. Purpose
 5. Control Limit
 6. Corrective and Preventative Actions

** Patsy Root, Collaborative Development of an Analytical Method Audit checklist, DHS/NIST Workshop: Standards to Support an Enduring Capability in Wastewater Surveillance for Public Health – June 18, 2021*

PCR TRAINING

- Basic theoretical and operating principles and associated instrumentation and software
- Critical steps and processes of the technology that must be executed to ensure quality data, including critical quality control (QC) measures and QC criteria
- Major sources of error, and how to control them
- Inappropriate procedures
- Key information required to document completely the reported results
- Essential elements for assessing data generated
- Ways to detect improper practices
- Traceability of raw data to reported results

EXPLORE CHANGING TNI MODULE 4: MICROBIOLOGY

- The module is focused on traditional technologies like enzyme/substrate methods where concepts such as calibration curves, laboratory control samples, matrix spikes, and detection limits are not applicable.
- PCR is a quantitative technique where these concepts do apply.
- Module 4 is focused on technical issues like quality and sterility of materials used, constant and consistent test conditions, and positive and negative controls.
- The method checklist developed by ACIL could be used as an interim measure while the committee addresses any needed changes.

OPTIONS FOR ACCREDITATION

17025 (2017)

- Strong QMS foundation
- Implemented by NGABs
- Best suited for non-environmental laboratories and those not already accredited under NELAP.
- Incorporates Risk-Based approach

TNI 2016 Standard

- Strong QMS foundation
- Implemented by state agencies who may not have authority to add to their FOA
- Can also be used by NGABs
- Best suited for labs already accredited by a NELAP AB

CONCLUSIONS

- Accreditation provides confidence that decisions are based on reliable, authentic data and assurance that the laboratory has been evaluated and has met accepted standards established by experts in the laboratory profession.
- Accreditation advances the field of laboratory science by promoting uniform accepted standards of practice and advocating rigorous adherence to these standards.
- The checklist developed by ACIL can be used by laboratory assessors to “promote high quality laboratory processes and procedures to assure data are fit for purpose.”
- The TNI laboratory accreditation standard is one option for laboratories to consider. Accreditation to ISO/IEC 17025 is another acceptable option.
- More work needs to be done to fully implement this initiative.

NEXT STEPS

- Seek approval from the TNI Board of Directors to pursue this initiative.
- Task TNI's Advocacy Committee to begin work on guidance documents and develop outreach materials.
- Task TNI's Training Committee to find someone to develop a course.
- Task TNI's Proficiency Testing Executive Committee to look into the feasibility of PT samples.
- Task TNI's Microbiology Committee to look at potential changes to Module 4.
- Task the NELAP AC to consider adding SARS-CoV-2 to their FOAs.
- Continue to work with other groups on this topic.

Next Steps:

Find out from the council what their level of interest is. If it's not something they can do, then we're done. If they are interested, then we can come back and start developing guidance documents, etc., that will be needed for this initiative.

Reach out to APHL and see if they will poll their members for interest? Yes.

Do a feasibility and benefits study (check with APHL regarding feasibility).

Attachment 4

2022 Forum on Environmental Accreditation

January 17-21, 2022
Hyatt Regency San Antonio

EMS 2021: Lessons Learned

- Virtual/Hybrid meetings bring in more attendees and allow organizations to register many individuals & have more participation in TNI meetings;
- Virtual meetings are not popular with exhibitors;
- Hybrid meetings are extremely difficult to manage and conduct;
- AV setup;
- Moving between presenters;
- Assigning panelists, esp. TNI Committee members;
- Hyatt was lenient this year about the room block and F&B minimum, but unlikely to be so next year.

WebEx Issues

- Training required;
- No animations or video;
- Advancing slides – Grey on Black pointer next to +/- screen size;
- Reduced screen size – 32-point font barely readable in room (OK for virtual);
- Q&A required second PC and person to manage;
- Presenters coming in as Attendees;
- 30-minute lead in prevented vendor loop;
- Substitute speakers with no training or sound check;
- Recording start/stop issues;
- Some virtual speakers are difficult to understand due to accents or low volume;
- Interaction from attendees in Week Two was lacking.

Attendee Comments

- All of the speakers should be in-person. It was pretty difficult to stay engaged when the speaker was virtual;
- For virtual presenters, it's hard to see audience' response;
- Having the recordings available for a couple of months after the conference is a huge benefit! I noticed more problems with broadcast quality for the sessions I attended in person where the speaker was remote, than I did for the sessions I attended remotely;
- The recordings of the in-person sessions hindered the functionality.

Negative Consequences of Hybrid Meetings

- Fewer in-person attendees which results in lower room block and potential penalties;
- Fewer in-person attendees which impacts the food and beverage order;
- Some individuals who indicated they planned to come canceled at the last minute and thus we ordered more food than we needed;
- Poor quality presentations for in-person attendees;
- Time wasted on bringing in presenters, starting/stopping recordings, fixing zoom in/out issues, etc.

Proposed Approach for 2022 Forum

- In-person with recordings available after;
- No virtual speakers;
- No virtual committee members;
- No virtual attendees;

- Record all sessions (not training) and post in Portal from January 24-March 30;
- No additional charge to registered attendees;
- Others may purchase recordings for full conference or one day at the same fees as in-person attendees.

The Future of the Portal

- Modify to reflect new approach;
- Allow attendees to download program and attendee lists;
- Use for Symposium evaluation;
- Allow Committee Chairs/Staff to post documents in News;
- Allow attendees to watch recordings until March 30;
- Eliminate daily access to live stream;
- Replace Virtual Exhibit Hall with rotating vendor ads.

Conference at a Glance

Time	Monday: 1/17	Tuesday: 1/18	Wednesday: 1/19	Thursday: 1/20	Friday: 1/21
8-12 AM	- Training Courses - Mission Tour (Optional)?	- TNI Committee - TNI Committee - TNI Committee	- TNI Committee - TNI Committee - Assessment Forum: Writing Findings	- TNI Committee - TNI Committee - TNI Committee	- Advocacy Committee - Other special session? - Other fun activity?
12-1	Lunch on Own	Lunch on Own	Lunch Provided	Lunch Provided	
1-5 PM	Training Courses	1:00 TNI Annual Meeting 3:00 BREAK 3:30 New Initiatives - Competency - SARS-CoV-2 - Mentor - Training - Consumables	- TNI Committee - TNI Committee - Mentor Session: Responding to Findings	- TNI Committee - TNI Committee - TNI Committee - Committee Reports 4 pm	
Evening		Reception			

Exhibit program runs from 3:00 pm Tuesday to 3:30 pm Wednesday

TNI Committee Meetings

- In-person meetings to share information and seek feedback from a narrow group.
- Special Webinars not associated with the in-person meeting to solicit feedback from a wider audience.
- We have 13 half-day times for committee meetings plus half day each for Assessment Forum and Mentor session and Advocacy on Friday.

Potential Special Sessions

- Open Forum on Knowledge, Skills and Attributes of a Subject Matter Expert
- Report from Mentors and Mentee Laboratories
- Reports from 36 non-NELAP accreditation/certification programs

COVID Contingency

- Will likely require proof of vaccination and/or negative test using Safe Expo or equivalent.
- Will follow CDC and San Antonio guidelines in effect.
- May cancel if San Antonio is at a **High** risk, defined as > 100 cases/100K and/or > 10% positivity rate.
 - San Antonio is 450/100K and 12% as of 9/6.

Room Block and Rates

Date	Day	Contracted Room Block
January 15, 2022	Saturday	20
January 16, 2022	Sunday	50
January 17, 2022	Monday	100
January 18, 2022	Tuesday	180
January 19, 2022	Wednesday	180
January 20, 2022	Thursday	150
January 21, 2022	Friday	20

Notes:

Total Room Block = 700 room nights

Attrition = 80% or 560 room nights

Room rate is \$136 per night (federal per diem)

Registration Fees

Registration Type	Attendee Rate ²	TNI Member Rate
Full Registration ¹	\$585	\$525
One Day Registration ¹	\$315	\$250
Late Fee (After January 10, 2022)	\$ 75	\$ 75

*1. Includes attendance to any session between January 18 and 21 and the ability to watch recordings of any session between January 24 and March 30, 2022 **OR** the ability to watch recordings of any session between January 24 and March 30, 2022.*

2. You may join TNI and pay the member rate.

Attachment 5
Summary of the 2021 Summer Forum on Environmental Accreditation
August 2-12, 2021

Monday, August 25, 2021

Laboratory Accreditation Body Expert Committee

1. *Discussion of Select Comments on V2M1 Draft Standard*

6.1.2.9.1 – Assessor Competency

For assessor competency, the ISO qualifications language in 17011 is largely unchanged and the committee considered two extremes for additional TNI language – no additional requirements or returning to the former highly prescriptive requirements of the 2003 NELAC Standard – before settling on a middle ground that allows for AB consideration of “commensurate experience” in lieu of a bachelor’s degree in a scientific discipline. The specific language was displayed as was the single comment, which declared that “If commensurate experience is allowed for those who would assess laboratories, then commensurate experience MUST be allowed for those who are running those laboratories”, such as Technical Managers and QA Managers.

Jerry Parr and Aaren Alger of the Competency Task Force explained that the Task Force tabled its work on defining necessary competencies and knowledge, skills, and abilities (KSAs) for assessors until the LAB committee resolves its language about assessor competencies and training and is currently working on similar effort for Technical Manager competencies and KSAs that includes provision for “commensurate experience” in lieu of some or all education requirements. Another commenter noted that while assessors and Technical Managers have many parallels, assessors are more comparable to Quality Managers.

Participants briefly discussed whether to discuss and vote on whether the comment is persuasive or non-persuasive, but decided instead to receive feedback from participants and hold the committee discussion at a later time, perhaps after all other comments are addressed. This would allow time for the Competency Task Force’s recommendation about Technical Manager to be further refined.

6.1.2.9.2 – Assessor Training

Carl reviewed the assessor training requirements currently in the Draft Standard V2M1 and then the comments received. Committee discussion reflected that commenters may have been addressing concepts that the language of the standard do not actually require, and that the intent of the language was that assessors be trained in “how to assess” the different technical disciplines, not how to perform the work itself.

One participant noted that the specific title on an assessor’s training certificate could easily become a “sticking point” for an AB evaluator in the future. Another noted that the training courses referred to in the Draft Standard do not currently exist, but another noted that the course outlines are complete (by the Competency Task Force) and the courses could easily be prepared and ready by time the revised V2M1 is implemented, but that an AB could design its own training courses, there is no requirement for a sole source provider.

Committee member discussion suggested that the language better explain that assessor staff shall be trained on how to assess the various module requirements and that the “TNI” adjective for training courses be removed. Language generally agreed upon by committee members present as well as the several commenters who were present would be as follows:

- a) Assessment training for V1M1 and V1M2
- b) Assessment training for technical modules 3-7 (and any subsequent modules developed)

At this point, Jerry Parr noted that a Basic Assessor course is scheduled at the end of August, and still has room for eight additional attendees. He also discussed the concept of digital badges being issues to future trainees, as

is under consideration by the Credentialing Subcommittee (a joint workgroup of the Competency Task Force and the Training Committee). It's important to note that merely passing a test does not ensure competency, although it is an easy way to demonstrate for personnel records that "competency" should have been attained.

One participant pointed out that passing a test does not ensure capability, nor does failing a test mean incompetence – the criteria need to be broad enough to capture everyone who CAN do the job of an assessor and eliminate those who cannot. Another noted that third party assessors face different requirements from each state and asked for some version of mutual recognition of assessor qualifications among the NELAP ABs. The end result must be that each AB is responsible for the competency of its assessors, regardless of hiring qualifications or mandatory training.

2. *Presentation of Status of Changes to Volume 1, Module 1*

Summary

- General requirements for the Accreditation Body in Module 1 and specific laboratory on-site assessment requirements in Module 3 combined into one module.
- The recently revised international standard for accreditation bodies in ISO/IEC 17011:2017(E) incorporated.
- Additional TNI normative language specific for environmental testing laboratory accreditation bodies retained or revised for improvements, and then moved into the appropriate sections of the Standard.
- Some requirements now deemed redundant, obsolete, or no longer needed proposed for elimination.

Timeline

- ✓ Presentation of Draft Standard *TNI ELS V2M1 "General Requirements for Accreditation Bodies Accrediting Environmental Laboratories"* – December 2020
- ✓ Received Comments on Draft Standard – March 2021
 - Discuss and rule on comments – underway now
 - Persuasive or Non-persuasive, Editorial
 - If controversies identified – publish updated version of Draft Standard and receive/review comments again
 - Committee vote for Final Standard – 2022?
 - Adoption by relevant TNI Programs

Major Issues in Draft Standard

- Assessor competency requirements
- Laboratory Assessment Report contents
- Confidential and Publicly Available Information requirements

Assessor Competency Requirements

- LAB considered both extremes
 - No requirements – let the AB decide
 - Former prescriptive requirements from 2003-version NELAC Standards, Chapter 3 with its Appendices

The Compromise Draft Standard

- Clause 6.1.2.9.1 Education and Experience Requirements
An assessor shall hold at least a bachelor's degree in a scientific discipline or have commensurate experience acquired by having performed verified assessments of environmental CABs (see 6.1.3.2.1).
- An accreditation body that chooses to evaluate an assessor's educational qualifications using the "commensurate experience" allowance shall have documented procedures for evaluating what constitutes commensurate experience. These procedures must define how this practice is applied within the organization and document the decision-making process used to approve the assessor.

Assessor Competency Requirements – Basic Qualifications

- Assessor Education and Experience
- Bachelor's Degree in a scientific discipline
- Alternatively, "commensurate" experience
- AB decides if commensurate experience is allowed
- AB defines & documents what "commensurate" means
- AB defines how this practice is applied & documents its decision process for approving the assessor

Summary of Comments on Assessor Competency Requirements

- Is totally unequitable and non-uniform when compared to the insistence among ABs that laboratory Technical Managers be required to have bachelor's degrees as well as specified credits in various disciplines. If commensurate experience is allowed for those who would assess laboratories, then commensurate experience MUST be allowed for those who are running those laboratories. There cannot be this unequitable ability to rely on commensurate experience on the one hand, but not on the other.

Assessor Competency Requirements – Training: The Proposed Compromise Draft Standard

- Clause 6.1.2.9.2 Training Requirements for New Assessors
An assessor shall complete and pass assessor training courses that include obtaining a passing score on the written examination at the conclusion of the course. These training courses shall include, but not be limited to:
 - a) TNI proficiency testing and quality management systems assessment training (specifically, TNI ELS Volume 1, Modules 1 and 2);
 - b) TNI technical module assessment training (e.g., Modules 3 through 7); and
 - c) Technical discipline assessment training as required by the Accreditation Body for the accreditation scheme(s) supported.

Assessor Competency Requirements – Assessor Training

- New ABs seeking NELAP or TNI Recognition
 - Assessors trained per the Standard, complete by time AB gets "Recognized" & assessors begin laboratory assessments
- Existing NELAP & TNI Recognized ABs that hire new assessors
 - New assessors trained per 6.1.2.9.2, complete by the time the new assessor performs unsupervised assessments

- Existing NELAP & TNI Recognized ABs with previously trained and competent assessors
 - Train assessors in any & all revisions to TNI Volume 1 during mandatory refresher training
- All assessors must be trained in the NELAP accreditation scheme, no legacy employee training accepted
- Initial Training Requirements – passing score on written examinations required,
 - TNI proficiency testing and quality management systems assessment training (specifically, TNI ELS Volume 1, Modules 1 and 2)
 - TNI technical module assessment training (e.g., TNI ELS Volume 1, individual Modules 3 through 7)
 - Technical discipline assessment training as required by the Accreditation Body for the accreditation scheme(s) supported could include the EPA Safe Drinking Water Act Certification Officers training courses in Microbiology, Inorganic Chemistry, and Organic Chemistry or technical assessment training courses approved and offered by TNI – the AB will decide the scope & content of technical discipline assessment training required.

Summary of Comments on Assessor Training

- The list includes training courses that may not yet exist, and thus cannot be required. If the intent is to require certain courses, then the list must be specific (i.e., course name and/or number). If the intent is to provide examples, then the above wording must be changed. Finally, terms such as "TNI technical module assessment training" are undefined.
- AB considers “basic assessor training” to be necessary but does not believe each assessor needs to pass a written exam on each module. AB does not agree the draft language will increase consistency. We believe the draft language will require NELAP accreditation bodies to develop their own training materials, in part because the current training catalog available to assessors through TNI or other groups is limited. AB strongly recommends dropping the requirement for TNI training on specific modules and adopting language that is more general to give the accreditation body options. We also recommend removing the requirement for passing a written exam for technical discipline assessment training.
- Language in this section should be reverted to the language currently in V2M3 4.2.4.
- The NOTE from 2009 TNI V2M3 4.2.4 stating “Technical disciplines applicable to the environmental sector include microbiology, toxicity testing, inorganic non-metals, metals, organics, asbestos, radiochemistry, and field activities” was indicated under 6.1.2.9.3 as being removed language. This NOTE provided helpful clarity to ABs regarding how the requirement for “technical discipline” training would be evaluated and should remain in the Standard under 6.1.2.9.2 to help preserve consistency of interpretations of this requirement in the future.
- The addition of a description of what an AB needs to do if “commensurate experience...” option is used is an improvement over the current standard which does not require this record of justification. Please leave that phrasing in, should this section be otherwise edited / reverted to the previous language.
- Any change in qualifications for a position already held needs to include language which exempts those already deemed qualified for the position prior to the implementation of the new requirement. (The added training or newly available training should be recommended but not required for these staff members.)

Clause 6.1.2.9.3 On-going Training Requirements for Current Assessors

An assessor shall complete on-going refresher training that includes any revisions to the TNI ELS Volume 1 Standard, plus any additional refresher training as required by the Accreditation Body.

NOTE: The Accreditation Body may require a written examination with a passing score as evidence for the ongoing (refresher) training of its assessors.

On-going Training -- written examinations optional

- On-going refresher training that includes any revisions to the TNI ELS Volume 1 Standard

- Any additional refresher training as required by the Accreditation Body

Summary of Comments, Ongoing Training

- The note may be misleading and subject for interpretation as requiring the assessor to participate in a written examination with a passing score. Suggestion to notes: “NOTE: The Accreditation Body may introduce a written examination with a passing score as evidence for the ongoing (refresher) training of its assessors.”

Assessment Report Contents (7.6.6)

- (b)(2) The assessment report shall contain the following minimum contents:
- Assessment Date(s)
 - Laboratory Name and Physical Address
 - Laboratory ID Number (as assigned by the Accreditation Body)
 - Scope of Accreditation Matrices that were assessed
 - Test Methods that were assessed, including preparation methods when separate or different from the analytical method
 - Key Laboratory Personnel (e.g., technical manager, QA officer, etc.)
 - Laboratory personnel interviewed at the time of the assessment
 - For each nonconformity reported, the specific Standard citation, regulatory requirement, or test method section where the observed laboratory activity is not in conformance
- (b)(3) If the report is not issued by the accreditation body itself, the accreditation body shall develop and implement procedures to outsource the issuance of assessment reports to conformity assessment bodies, as described in clause 6.4.
- (d) If additional nonconformities are identified after the assessment is concluded, these nonconformities shall be communicated to the laboratory in writing.

Summary of Comments on Report Contents

- AB is concerned the list of contents for assessment reports is too prescriptive. AB recommends striking the following elements from 7.6.6.b.2:
 - Physical Address;
 - Scope of Accreditation Matrices that were assessed;
 - Test Methods that were assessed, including preparation methods when separate or different from the analytical method;
 - Key Laboratory Personnel; and
 - Laboratory personnel interviewed at the time of the assessment.
- What is the perceived benefit of including this information in the report? Accreditation bodies maintain this information in other ways, so there is no improvement in record keeping or traceability. AB believes this will make reports longer without adding any value and increases the risk of transcription errors in accreditation records. Without the above elements, the report will still be traceable to the laboratory and indicate the degree of compliance or non-compliance to the Standard, which is the sole purpose of the assessment report.

Issuing Assessment Reports

- 7.6.7.1 The accreditation body shall develop procedures for the review and approval of assessment reports.
- If the accreditation body finds that any portion of the report issued to the conformity assessment body requires amendment, the accreditation body shall issue an amended report to the conformity assessment

body and explain why an amended report is being issued. Issuing an amended report does not reset the timeline for a conformity assessment body to provide a plan of corrective action, as required in clause 7.6.8.1, for the portions of the report that are not amended.

- Who issues on-site assessment reports to laboratories?
 - AB responsible for the report contents in all cases
 - AB documents procedures for review & approval of reports
 - Nonconformities identified after the assessment is formally concluded (possibly after accreditation decision was made)
 - In each case, laboratory is notified in writing
- Amended reports
 - Explanation provided on why amended report is issued and/or additional nonconformities are cited that require laboratory corrective action
 - Timelines adjusted if appropriate

Summary of Comments on Issuing Reports

- Why are we allowing anybody but the accreditation body to release a final report?
- Why is the language in 7.6.7.2, where the report has to be released by the accreditation body, being removed? This also seems to go against 7.6.6 b)1.
- The final report should not be being released to the CAB before being reviewed by the AB. A final report should not be issued to a CAB by a third party or contract assessor for an AB.

Summary of Comments on Confidential and Publicly Available Information

- In general, public information laws make much of Section 8.1.1 moot for governmental accreditation bodies. AB strongly recommends keeping the note under Section 8.1.1.
- AB is concerned about the requirement to make publicly available, without request, information on suspensions and withdrawals of accreditation, including dates and scopes. AB has been led to believe that “without request” generally means we must post this information on our website. If we had to post the notices on the website, this would be a significant amount of work to track. AB proposes allowing accreditation bodies to use the Laboratory Accreditation Management System (LAMS) to make this information available. Currently, LAMS shows the suspended analytes and shows which laboratories are currently accredited. AB strongly proposes adding a note about LAMS under Section 8.2.2. Proposed Revision: *“NOTE 2: Accreditation bodies may use the Laboratory Accreditation Management System (LAMS) to make this information publicly available.”*

Chemistry Expert Committee

Committee Chair: Michelle Wade, A2LA Workplace Training

Non-Valid SIR

- Michelle presented Non-Valid SIR 405 (regarding analyst training, i.e., the process and the trainer) which was determined to be not valid as this subject matter is not an element of M4 but rather other TNI Modules.
- The second non-valid SIR was 409 (i.e., method specified requirements) was not valid as the TNI Standard does not address method specific requirements as compliance with said requirements must be assured.

Valid SIR

- The first SIR discussed was SIR 391 to which the committee has made numerous responses to the LASEC. The issue is the requirements for determination of Relative Error for pH, conductivity, fluoride, ammonia, and other tests performed using ion specific electrodes (ISE). The CEC's responses were ultimately approved by the LASEC/AC but additional questions were asked of the CEC which have also been appropriately addressed. Fundamentally, the questions are "how to" or "must it be done". The answer is the Standard is not a "how to" document nor was it designed to be. Basically, determination of error is a requirement, and it must be done. The CEC will address this issue during review and potential modifications to M4. CEC's SIR subcommittee will draft a formal response to the LASEC's questions for full committee approval and submittal to the LASEC. Paul Junio volunteered to prepare the first draft of said response.
- SIR 410 regards calibration requirements for Ion Specific Electrodes methods. SIR 390 to which the LASEC has not yet responded to the CEC is similar. The committee agreed to table a CEC response to SIR 410 awaiting LASEC comments on SIR 390. Michelle will advise Lynn on behalf of the LASEC that the CEC response has been tabled and a formal response will be forth coming.

Notice of Intent (NOI)

Bob presented the draft notice of intent to establish or modify a standard. It was pointed out that the form presented was inconsistent with the form presented in SOP-100, Rev. 3.4. Bob agreed to resubmit the NOI to the committee for consideration in September. Noted editorial changes and content (language) in the body of the NOI will also be addressed. Once the committee approves the NOI, approval of the CSDEC will be sought and notifications as required by the SOP 2-100 will be made. The revised NOI, addressing these concerns is presented below.

Module 4 (EL V1M4) Review

Discussion as to potential modifications of M4 during this meeting began with the following sections:

Terms and conditions - some changes may be required to be consistent with other modules and/or standards and the Glossary being developed by the CSDEC.

Method selection - likely to be removed and covered in method verification and validation (which will be a new section in the module). Selectivity may also be developed as an element of a Guidance Document. A comment was made that the QS committee is revising M2 and speaks to these issues to ensure compliance with the 2017 version of ISO 17025 and that coordination with that committee would be advisable.

Validation - committee feels an extensive rewrite of this section is required and that the concept of verification needs to be included, possibly as a separate section.

Limits of detection and quantification - will be developed as separate stand-alone section of the module after extensive rewriting. Will ensure consistency with EPA requirements.

Evaluation of precision and bias - some discussion has been had relative to "grandfathering" which will likely remain in the module. Section to be clarified for useability. Examples to be removed as not an appropriate element of a standard but may be included in a guidance document.

Technical requirements: Calibration - A suggestion was presented that the phrase "associated with" (both here and throughout the module) should be changed/reworded. In this section the suggested language was "acceptable calibration established prior to sample analysis". Traceable may also be a term to consider in modifying this language.

Another issue was raised as to what is "sufficient". Section 1.71.1b) needs to be clarified.

The word "applicable" is also potentially problematic. The issue of reconstruction of calibrations (i.e., documentation) may be more appropriate in a different section.

It was noted that QS committee is also addressing record keeping and documentation as per ISO 17025 and this topic may be more an element of M2 than M4.

Section 1.7.1.1 e. v.b) redundant with 1.7.1.1.e) ii.

Section 1.7.1.1c) also requires review to account for different analysis (e.g., Toxaphene, PCBs). Section 1.7.1.1.d) redundant with M2.

Section 1.7.1.1.e) i ...except as noted in 1.7.1.1.e) ii. Potentially remove the last sentence from ii. Be mindful of terms utilized throughout this entire section.

Section 1.7.1.1 e) v.3.... why 24 hours; too arbitrary. Next workday? Next analytical event? Is reprocessing required? Need to clarify standards language.

Section 1.7.1.1 f) – needs to be rewritten and consider inorganic analyses.

NOTE: comment that entire section on calibration was too “organic-centric”

Section 1.7.1.1. h) – why is a linear dynamic range required if never reporting above the highest standard?

Section 1.7.1.1.k) – needs to be reworked in its entirety. During review, refer EPA new “re-back” standard...revised 500 and 600 series. Will also address ISE issues.

Section 1.7.1.1.L) – “specify” or “allow”; “procedure” versus “method” ...clarify; consider placing in different location within the standard.

Section 1.7.1.1. m) – impact of new PCB congener method? Congener method should specify requirements and may not impact on approach as written for Aroclors.

Section 1.7.1.1. n) – what is a second source? Lot or manufacturer?

Tuesday, August 3

TNI Mentor Session – Laboratory Quality: Are You in Jeopardy?

Dorothy Love, Eurofins Environment Testing America

This session is a combination of an interactive Jeopardy-style game and presentations.

- Quality Responsibilities - Dorothy Love, Eurofins Environment Testing America
- MDLs/Control Limits - Michelle Wade, A2LA WorkPlace Training
- Corrective Actions - Silky Labie, ELCAT
- Quality Training Tips - Jeanette Hernandez, San Antonio River Authority
- Report Formats - Key Requirements - Aaren Alger, Alger Consulting & Training

Due to an unforeseen technical glitch, interspersing the talks with Jeopardy game sessions was not feasible so the game was played first with the talks following in the latter parts of the session. Dorothy indicated that about one hundred people participated virtually throughout the day (but may not have been present for the entire time), and 50-70 people were present in the room for the morning session, while afternoon attendance was somewhat lower.

NOTE: From discussion at the August 12 Advocacy Committee meeting, the Jeopardy game PowerPoint is available at <https://slidelizard.com/blog/jeopardy-powerpoint-template>. Many thanks to Louise for first sharing this with Dorothy, as it was a roaring success!

Wednesday, August 4

Update on TNI Activities

Session Moderator: Alfredo Sotomayor, Milwaukee Metropolitan Sewerage District

This session featured six presentations:

- Reinventing the Technical Manager Position - Aaren Alger, Alger Consulting and Training
- Applying Management System Concepts to Environmental Activities - Marlene Moore, Advanced Systems, Inc.
- Benefits of Accreditation for Field Sampling and Measurement Organizations - Justin Brown, Environmental Monitoring and Technology
- TNI's Training Efforts - Calista Daigle, Pace Analytical Services
- State of National Accreditation - Jerry Parr, The NELAC Institute
- TNI's Mentor Initiative - Susie Arredondo, San Elijo Joint Powers Authority

Aaren noted that another of the TNI sessions (Wednesday afternoon) raised the issue of recording both of these trainings and adding them to the webcasts available through TNI's Educational Delivery System. Ilona was present, monitoring the WebEx system, and noted that Jerry favors this action and was able to contact the webmaster right then and learned that he has the winter (virtual) conference's recordings of both sessions archived. There was a brief discussion and consensus that a disclaimer be added to state that the material in the recordings does not supersede the language of the Standard itself. Lynn offered to follow up with the Training Committee, but during the Advocacy Committee meeting on Thursday morning, in discussions about planning the San Antonio conference in January 2020, TNI leadership decided that the currently available recordings will be made available as training and that future Mentor Sessions and Assessment Forums (presumably in-person meetings) will be recorded on-site and made available as well, for a nominal cost.

Thursday, August 5

Assessment Forum: Unmasking the 2016 TNI Standard

Session Moderator: Judy Morgan, Pace Analytical Services

TNI's Assessment Forum was structured to provide an opportunity for laboratories and laboratory assessors to share information on how to improve the laboratory assessment process. The 2021 Forum focused on findings from laboratory assessors on new language in the 2016 Standard and included the following presentations:

- % RSE and RE – What is it and how do I use it? – Aaren Alger, Alger Consulting & Training
 - Focused on clarifying the details around the new concept %RE and %RSE, as described in 2016 TNI V1M4: Section 1.7.1.1.k which caused some significant misunderstanding and confusion during implementation.
- Calibration – Creation, Verification, Large Analyte Lists and Dropping Points – Jeanne Mensingh, Labtopia, Inc.
 - An in-depth look at proper calibration, verification, and a detailed look at handling complex analyte lists relative to dropping points.
- Method blank and DL (MDL) – Mitzi Miller, Miller Quality Consulting
 - The 2016 Standard added a requirement to assess blanks as part of the process and this topic gives an in-depth assessor's look at the relationship between method blanks and detection limit.
- LOD/LOQ – Valerie Slaven, PDC Laboratories, Inc
 - Unraveling the details around spike concentration, frequency, data points, and handling failures
- Traceability – Where Does it End? – Shawn Kassner, Pace Analytical Services, LLC Corporate
 - A comprehensive view of Section 4.13 of the 2016 Standard will be given with a focus on SIRs received since the release of the Standard.

Attendees were well engaged, especially in the second half of the forum, where actual deficiencies from assessments were discussed. The questions were very detailed and noted that the deficiencies used for the discussion were "real" even though many were poorly written, which probably indicates a need for further training of assessors.

Monday, August 9

Quality Systems Expert Committee

Committee Chair: Debbie Bond, Alabama Power

3. *ISO/IEC 17025:2005* verse *17025:2017* Language

Debbie shared the crosswalk the Committee is using to track changes that need to be made to the Standard.

2005: Section 4.1.5.d – Debbie noted that the Committee still needs to look at whether policies and procedures are needed to avoid involvement in activities that would diminish confidence in its competence, impartiality, judgment, or operational integrity. Marlene commented that the 2017 version requires the lab to have an analysis of the risk to its impartiality. It is ok to have a policy and procedure, but this is not required since it is more important for the lab to have done a risk analysis and determined how the risk is eliminated or minimized.

Debbie noted that the Committee is leaning towards keeping the Quality Manual requirements.

Comment: 2017 seems to be codifying the Quality Policy Statement. Including a Quality Policy Statement may be redundant in the QM.

Kathi emphasized that 2017 does not require a specific Quality Policy Statement. Jerry Parr commented that the Quality Statement is generally boiler plate language. Is this even auditable?

Nick noted that the 2017 does require that the lab have a policy, but it is not the same as the Quality Policy Statement from before. It is simplified. He pointed to Section 8.2.1 of the 2017 Standard. 8.2.2. also has a required policy.

Marlene noted that the lab has to have something that states their policy and objectives. It doesn't mean a manual specifically is needed. Could be on the lab website. She is OK with dropping the Quality Manual, but all the requirements in Section 8.2 still need to be followed.

2005: Section 4.3: Document Control

The concept of a "master list" is not in the 2017 language. Debbie noted the Committee thinks it should be kept because there needs to be a way to identify current documents.

Jerry commented that the document control procedure will be used to identify... You don't have to have a list... just need a way to control all the documents. Others agreed. Make sure there is a process, don't define.

2005: Section 4.3.2.3: 2017 document removed the requirement. 2017 moves more towards electronic documents. Marlene reminded everyone that there are labs that are not doing electronic.

2005: Section 4.3.3.3: Drop hand changes because whether by hand or electronic... it needs to be identified.

Could clarify that amendments must be approved prior to use. Maybe there could be a procedure to know when an amendment requires an approval.

2005: Section 4.3.3.4: Paul commented that it would be difficult to do this without a procedure. Section 8.3.2 looks good to Jerry and Paul. Marlene noted in 2017, a documented procedure is not required, but a process would be needed.

Nicole noted that the section before does talk about management system documentation. Points back to 8.2.1 and 8.2.2. – lab has to have policy and objectives. She thinks the requirements are still there, but they are not spelled out the same way in 2005.

2005: Section 4.4: Review of Requests, Tenders and Contracts

Nick asked to see note in 4.4.2. He noted there is a note in 2017 - 7.1.1.- Note 2. Will look to see if this note is more appropriate.

Sections 4.5, 4.6, 4.7, 4.8 - Overall. Looks good.

The Standard Update Workgroup is at Section 4.9, so Debbie stopped review at this point.

4. Summary of Changes to DRAFT Standard

Section 5.8.7.1: Addition requires that a lab have a procedure instead of just implementing verification of preservation. Change term "documenting" to "recording".

Section 5.10.11.c: Jessica commented that if you claim accreditation across the board, you need to clearly identify what you are accredited for in your reports.

Nicole thinks that if we need a note about the statements on the website ... maybe this belongs somewhere else in the Standard.

The reports are important, and it should be clear what the accreditation status is for each reported result.

Jerry pointed to a statement on the TNI website: <https://www.nelac-institute.org/news.php?id=4254>:

NELAP and California Proposition 65

TNI's National Environmental Laboratory Accreditation Program (NELAP) was established to accredit environmental laboratories that test environmental media (e.g., air, soil, water) for environmental contaminants using test methods published by the United States Environmental Protection Agency and other groups such as ASTM International and Standard Methods. Section 25900 of California's "Proposition 65" regulation contains a clause that among other entities, mentions laboratories accredited under NELAP. NELAP-accredited laboratories are not accredited to use test methods approved by the Consumer Products Safety Commission. The test methods these laboratories do use are specific to environmental analysis and are not appropriate for consumer products. TNI cautions all NELAP-accredited laboratories to not imply their NELAP accreditation has any basis for testing consumer products. TNI recommends those seeking to have consumer products tested use an accredited lab from the Consumer Products Safety Commission.

Some ABs are requiring showing accreditation status to the analyte results level on the report. A listing of what a lab is or is not accredited for is not being considered acceptable.

Section 7.11.2: Debbie added to Section 7.11.2 – Commercial off the shelf software used without any configuration or modification may be used without further validation by the laboratory. This would be added as a requirement instead of Note 2. Instead, the group preferred that this additional text be deleted and that a note about Note 2 being a requirement be used instead.

Section 8.3.1: Section deals with "authorized editions". Labs have to have copies of the Standard.

Section 4.13.3: Look at DOD language.

Marlene asked if this section includes manual integration. Need to specify that electronic before and after records need to be maintained.

Section 7.5.2 is clear about this. It does not state that you need to note a reason for the change. A note may be needed? Or it would be easier to spell it out?

Possible DRAFT language: This system shall impact the quality and historical reconstruction of the resulting data, such as laboratory facilities, equipment, analytical methods, and related laboratory activities, such as sample receipt, sample preparation, or data verification, and inter-laboratory transfers of samples and/or extracts.

Or make it a Note? Paul commented that traceability is critical. TNI does have a definition for traceability that Paul read to the group. It was commented that notes are an excellent way to ensure consistency between labs and assessors. I think we should use notes more for these types of things.

Comments:

- I see this section as a 'gotcha' item for assessors. Please consider what is actually necessary to ensure quality, rather than something that 'is just a good idea' or something an assessor is going to pull things out of the air.
- Quality and traceability of data
- Or impact data quality

Section 4.4.1.c: Need a definition for customer. Entity requesting data? A person or organization that purchases services from a laboratory?

Comment: Remember, the contract review should include any regulatory requirements for the data. Thus, the end user/regulator's needs/requirements should already have been determined as part of the needs of the customer.

Debbie confirmed that most are OK with having Quality Manual but get rid of Quality Policy Statement.

NELAP Accreditation Council Meeting

1. *Updates from NELAP ABs*

The primary agenda item was an opportunity for each of the NELAP AB representatives present to update participants about three items – current operational status from pandemic disruptions, current implementation status of the 2016 TNI EL Standard (See Consent Agenda), and expected implementation plans for the 2021 Method Update Rule (MUR). State responses to these items are displayed in the tables below.

Table 1. Current Operational Status of NELAP ABs Following Pandemic Disruptions

State	Status
FL	Has returned to normal, in-office operations with most on-site assessments, but if Program Manager approves, more data review is being conducted off-site prior to the actual site visit.
IL	Returned to normal in-office April 1, 2021. Had on-site assessments in June and July. Looking at Covid-19 metrics for our assessment this month.
KS	Currently performing all assessments in person, but have started evaluating the current situation in KS to determine if remote or partially remote assessments are needed. We have sent data and recommendations onto our Department of Environment within KDHE and are awaiting their guidance on next steps.
LA	Returned to normal operations on May 10, 2021, but have now scaled back assessments to do the maximum possible off-site reviews. Remote assessments not allowed. If lab reports COVID-19 cases, assessors do not go on-site unless precautions are in place or quarantine period is over.
MN	Mostly back to normal as of July 31. Remote assessments are no longer allowed but staff are permitted to work remotely. Staff are not travelling (MN uses third-party assessors exclusively).
NH	Fully operational, but now performing a remote conference with labs on the day prior to the site visit.
NJ	Phased return to full in-office operations, current return date is planned to be September 7, but that will depend on state caseloads with delta variant surge. Has mostly returned to in-person site visits for assessments.
NY	Staff in Albany are in office 2 days/week, assessors based elsewhere normally work from home. In-state assessments are being performed on-site; out-of-state assessments are remote. As of September 7, will initiate pilot project having 50% of assessments remote.
OK	Working in office full time, and performing on-sites, but as “blended” assessments with much of the data review accomplished off-site/remotely.
OR	Most assessments now are on-site, although Oregon’s declaration of emergency has been extended until December 2021. Some “hybrid” assessments being done, and assessors are working hard to eliminate their backlog of assessments.
PA	Staff still working fully remote and doing only remote assessments, but program is fully operational and all lab assessments are current. No travel being approved except for emergencies. Anticipate permanent telework for staff, with perhaps two days/week in office and social distancing implemented.
TX	Now requires documents to be submitted up front for remote review, and conducts virtual opening and closing meetings with shorter on-site times. May need additional adaptations due to delta variant. Jody Koehler hired as new program manager and transition from Steve Gibson to her is underway but Steve will remain the primary contact until further notice.
UT	Fully operational. Performing on-site assessments, although running behind on scheduling.
VA	Performing only remote assessments.

Table 2. Implementation Plans for 2021 Method Update Rule

State	Status
FL	AB awaits direction from the program office, FL DEP.
IL	2021 MUR, PFAS methods and 23 rd Edition of SM are all in our legislature awaiting approval, hopefully by October 2021.
KS	Has reached out to the Bureau of Water (enforcement arm within KDHE) to collaborate with them on a go live date. No date has been set yet, but we are expecting that January of 2022.
LA	Labs must comply with MUR by July 2022 or the next assessment, whichever comes first.
MN	Working with MN Pollution Control Agency to determine implementation and will notify labs of decision when renewal materials are sent in September 2021.
NH	Implementation will be based on lab requests for accreditation of updated methods. Has no directive from program office.
NJ	No firm plans yet, but under consideration.
NY	MUR and drinking water regulations will be implemented at the end of the year for an April 1, 2022, effective date.
OK	Discussions with OK DEQ program staff are in process.
OR	Per OR DEQ, the MUR methods will be phased in as routine assessments occur.
PA	Implementation is under discussion.
TX	Implementation decision is made by Water Quality Division, not yet available. Prior 2016 MUR was only partial implementation
UT	No firm plans yet, but under consideration.
VA	VA DEQ (program office) will determine when MUR is implemented.

After all of the AB representatives who were present provided their updates, Kristin noted that the evaluation process for AB recognition renewals is progressing and that the remote site visits are working out well. She also noted that the Virtual NELAP Basic Assessor Course will be presented later in August and that there is still room for additional participants in this course session.

2. Open Forum

One participant noted that the MUR implementation is state-specific and asked several AB representatives explained their different procedures. Accreditations for updated methods can be accomplished prior to mandatory implementation dates in some states, according to lab needs, but most states do not have implementation dates established.

Another participant asked if information was available for the three states not present – IL, KS, and NY. Lynn offered from memory that NY and IL have essentially implemented the 2016 Standard, but that Kansas still must complete its rulemaking.

Laboratory Accreditation System Executive Committee

Recent LASEC Activities

- Mentor Session and Assessment Forum
- Forum on Environmental Accreditation, January 2021
- Environmental Measurement Symposium, August 2021
- Many improvements to SIR management processes
- New Implementation Guidance SOP

Mentor Session and Assessment Forum

- Encourage networking and collaboration
- Provide for knowledge sharing (guidance)

- Reduce barriers to:
 - getting accredited
 - maintaining accreditation

SIR and SIR Management Update

- New submittals receive an acceptance decision within 5 days
- SIR History

<u>Total/Valid</u>	<u>Year</u>
44	2008
54	2009
49	2010
44	2011
31	2012
21	2013
36	2014
13	2015
8/4	2016
8/2	2017
19/14	2018
30/6	2019
26/10	2020
8/12	January-June 2021

SIR Process -- SOP 3-105 – Standards Interpretation Request

- Criteria for a valid SIR
 - Must contain only one question
 - Must apply directly and clearly to cited section of Standard
 - Question is understood without supposition
 - Question is compelling -- the language used in the Standard(s) section cited is not clear or where it might have more than one interpretation
 - Cannot be used to settle a dispute between a laboratory and an AB
 - Is not a “how to” question or a method interpretation question
 - Where possible, the question should be framed in a manner that solicits a “Yes” or “No” answer
- LASEC is responsible for verifying that all SIRs relevant to the module have been reviewed for incorporation when each module of the TNI Environmental Laboratory Sector Standard undergoes revision

LASEC SIR Process Changes

- Enhanced SIR Tracking Spreadsheet Now Monitors Timeframes
- SIR Management SOP 3-105
- LASEC receives periodic reports on adherence to timeframes
- More formal procedures for SIR Subcommittee including a required 2/3 majority vote for all SIR activities
- Implementation Guidance SOP 3-114
- IG development requires advance approval of LASEC SIR Subcommittee
- Reviewed by Policy Committee and improvements returned for approval

Implementation Guidance – Available Only to TNI Members

- <https://www.nelac-institute.org/content/NELAP/interpret.php>

TNI Standards Guidance

Disclaimer: This material represents the opinion of its authors. It is intended solely as guidance and does not include any mandatory requirements except where such requirements are referenced. This guidance does not establish expectations of being implemented universally, exclusively, in whole, or in part.

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Module: Chemistry

Subject: New Calibration Curve Overwritten with Old

Question 1

The weekend staff recalibrated an instrument on Saturday, and ran samples following the calibration curve. Week day staff came in on Monday, and loaded the prior calibration to process Friday's samples. They failed to reload the Saturday calibration curve back to the instrument, and all subsequent data for the next month was processed and reported with the old calibration curve. How could this have been discovered? What course should the investigation take? What should be done to correct the situation?

All samples affected by the mistaken curve should be investigated. Involve weekend staff and weekday staff and supervisor in the root cause investigation and resolution process.

The 2016 TNI standard requires that the laboratory uses the most recent initial calibration generated for a given analysis. In the event that a previous calibration is accidentally used, it may still be possible to use the data. Review and compare both calibration curves. If the responses are essentially the same and all QC is still passing, make a note on the data to ensure traceability and defensibility. If there is a significant

Tuesday, August 10

Microbiology Expert Committee

Committee Chair: Cody Danielson, Oklahoma DEQ

Discussion of Proposed Changes to Microbiology V1M5

Cody shared the changes to the 2016 Standard in a PPT presentation (Attachment B). These are all the non-editorial changes.

Question: Why not indicate accredited and not just certified?

V1M5 1.7.3.1. The Committee did not make this change. It is legacy language. May take a look at it and see if a change is warranted. Ilona reminded people that if this is important to the commenter, be sure to comment on the Voting Draft Standard that is now up on the TNI website.

The link to Implementation Guidance Documents was shared:

<https://nelac-institute.org/content/NELAP/interpret.php>

The DRAFT Standard has been posted on the TNI website for comment over the next 90 days.

Upcoming Projects: Implementation Guidance for Equilibrium Testing V1M5: 1.7.3.7.b.v.a

Cody pulled up a copy of the new DRAFT Standard and read the language – Section 1.7.3.6.b.v.a:

The laboratory shall establish the uniformity of temperature distribution and equilibrium conditions in incubators and water baths prior to first use after installation or service. The equilibrium check shall include time required after test sample addition to re-establish equilibrium conditions under full capacity load appropriate for the intended use.

The Committee had a lot of questions about this in the 2016 Standard and are planning to prepare Implementation Guidance. They have not gotten started on this but would like to hear any comments.

Paul noted there is a lot that goes into this, but it comes down to their being a volume of water at a specific temperature and it is going to take a certain amount of time to get to the correct incubation period. He is concerned there is going to be a lot of “tail chasing” in trying to address this.

Cody noted that some labs do it only at installation and service, but others do it annually to see how well their incubators are doing (not a requirement). Needs to be full capacity load because that is the worst-case scenario. Not planning to be overly prescriptive.

Committee members have offered examples of what they do in hopes that this will help write this implementation guidance.

A comment was provided that they think this equilibration requirement should be removed from the next Standard. Others on the call agreed. Too many variables and more stringent than the DW Manual. Cody noted that the requirements in the 2016 Standard are more specific than the 2009 Standard. Elisa noted this came up in an audit and the assessor had trouble with this language.

A comment was made to verify what is in the DW Manual. Paul reviewed what is in the DW Manual – page v-17, Section 5.3.1.5. There is a discussion about bringing samples to room temperature and full loads. The TNI Standard has a lot more detail.

Cody suggested that people comment on this part of the Standard.

A comment was made that this was going to be deleted in a previous Standard update, but it was put back in because they were told it is a DW requirement. It was suggested that the Committee talk to Jennifer Best to confirm the requirement.

Paul compared this discussion to temperature loggers in coolers. Do you really want all that data?

There is a lot of confusion about whether samples should be brought to room temperature. Cody noted that some PT providers have this in their instructions, and another does not. Her lab tries to be consistent with all samples. This helps with incubators coming up to temperature too.

SIR 414 Regarding DOCs and Variability/Reproducibility Testing

Describe the problem:

For ongoing DOC e.g., for HPC SimPlate, the lab performs a blind PT sample or a Quality Control sample with results meeting the manufacturer's acceptance criteria. However, we would like to be able to use Section 1.6.3.2.e) "A documented process of reviewing QC samples performed by an analyst, or groups of analysts, relative to the QC requirements of the method, laboratory SOP, client specifications, and/or this Standard. This review can be used to identify patterns for individuals or groups of analysts and determine if corrective action or retraining is necessary."

SM/TNI requires repeat counts performed monthly with criteria of 5% RPD for a single analyst or 10% for more than one analyst counting. Can this process be applicable or acceptable to meet Section 1.6.3.2.e and be applied for continuing DOC for other analysts who did not actually perform the PT or QCS? If not, please expand on exactly what this Section means with a clear example.

From Lynn Bradley - To the Micro Committee:

Before determining this was a valid SIR, the Chairs asked the submitter “When you refer to an “analyst who did not actually perform the PT or QCS”, are you referring to a group member who did not contribute results to the group for the analysis in question, or did you have something else in mind?” and received the following response:

Yes, I am specifically referring to the correct interpretation of 1.6.3.2.e) "A documented process of reviewing QC samples performed by an analyst, or groups of analysts, relative to the QC

requirements of the method, laboratory SOP, client specifications, and/or this Standard. This review can be used to identify patterns for individuals or groups of analysts and determine if corrective action or retraining is necessary."

Let us assume there are at least 2 analysts but only one performed the QC this year. Both had done the initial DOC and had been performing the particular analysis throughout the year. Repeat counting is required to be done at least once a month with a given acceptance criteria. If the repeat count is done by the second analyst for this QC, can this be considered a continuing DOC for the second analyst who did not analyze the QC?

Cody commented that she and Robin took a brief look at this. Regarding the other analysts that did not perform the PT itself, if the analyst runs the method in full, it could not be applicable. If you only read results, it might be applicable. She asked for additional thought. Paul agreed.

Elisa needed more clarification on what type of sample they were analyzing. Not clear if it is a PT sample or some other blind sample.

It was commented that the IDOC/DOC applies to the analyst. There was agreement.

Paul noted again that the Draft Standard has been posted on the TNI website. It is open for 90 days for comment. There is also a copy of the Summary of Changes document.

Carl commented that the Chemistry Expert Committee is working on IDOC/DOC for the laboratory and segregating those requirements for each analyst. The Microbiology expert committee needs to do this too. Paul doesn't agree with this. The Standard talks about an analyst documentation of capability. Not a laboratory documentation of capability. Paul will share his comment with the Chemistry Expert Committee. Cody made a note and will check on it.

Whole Effluent Toxicity Testing Expert Committee

Committee Chair: Rami Naddy, TRE Environmental Strategies

Wednesday, August 11

Proficiency Testing Program Executive Committee

Committee Chair: Shawn Kassner, Pace Analytical Services

Radiochemical PT Limits

Shawn shared a PPT regarding the development of the limits (Attachment D).

He would now like to send it to the NELAP AC for comment and for the entire committee to review it for additional discussion during the September meeting.

PTPA Reports

A2LA

- 12 analytes have failure rates larger than 10% and this accounts for less than 1% of the data.
- In conclusion - No big changes between 2020 and 2021. No analytes with average failure rates over 20%.
- The 4 analytes to look at are Aroclor 1221, Benzo(a)anthracene, Dinoseb and Mercury.

ANAB

- There was one complaint received – a mislabeled PT test item.

- Residual Free Chlorine - 5 of 12 studies less than 90% pass rate. They are looking into this further. One provider.
- Failure rates consistent.

Someone asked about preparation methods on FoPT tables. Shawn noted that it is on the Committee's list of things to look at. Getting data from the labs could be difficult. Not all PT Providers are requesting it.

Carl noted another issue is different technologies for the same analytes. ICP vs ICP MS. Shawn commented that these types of issues are brought to the committee by PT Providers.

PT Program Metrics and Charter

What is the purpose of the PT Programs?

- To provide PTs for labs to demonstrate they can analyze them to a known value.
- Equivalency between labs.
- Demonstrating competency.
- Method evaluation
- Method validation
- Some labs use PTs for Demonstration of Capability for personnel.
- Uncertainty
- Method equivalency
- Independent spot check - does not need to include every analyte
- Comment: They do not accurately assess lab performance in regard to reporting. Reporting PTs is very different than reporting regular samples.
- PTs can be used as part of Corrective Action
- Comment: Successful results are not as important as failures.

How many labs are using PTs as part of their regular operations? Is this something for the advocacy committee to look at? Need a simple poll. Pull from LAMS database. Jerry will bring this up with Advocacy. Shawn will try to attend on Thursday.

How do we measure that we are being successful in meeting the goals?

- Need to talk to PTPA's about what data is available and what is confidential.
- Work with Advocacy.
- Become more involved in evaluation teams.
- Review material from Jerry and how we can use this to involving non-TNI ABs.

New FoPTs

- CA Microplastics session Tuesday - Listen to Christine Sotelo's presentation. She is interested in possibly developing PTs and limits. Asking how to do this and wants TNI's help.
- Jerry commented: Also, SARS-CoV-2 in WW and PFAS.
- Shawn reminded people that we will be looking at Air too.
- Microcystins - PT in DW- CA has new FOAs, pseudomonas in PT in DW. Jennifer noted these are being discussed with the next updates to the drinking water regulations. Shawn will ask Christine about this.

Subcommittee Updates

Chemistry FoPT

PFAS - reviewed the data, but there was not as much data as preferred. The Committee is working on a survey to get information from the labs to help with PFAS discussion.

Looking at dissolved solids too.

Microbiology FoPT

Jennifer Best. The Committee has not been meeting because there is nothing on their plate. The Drinking water MUR is on their radar.

Shawn and Jennifer talked about Legionella and adding that to the FoPT table.

Field Activities Committee

Committee Chair: Scott Haas, Environmental Testing, Inc.

The Committee worked on the FSMO Standard update today. Scott provided some history to share how the committee got to this stage. The Committee started with ISO/IEC 17025:2017 and then inserted TNI language and missing ISO/IEC 17025:2005 language. The Committee is now going back through this document to decide what to keep from the 2014 Standard, ISO/IEC 2005 language and make additions to improve the Standard.

Marlene is also working on Volume 2 – the AB portion of the Field Standards. She sent a DRAFT update around to the ABs and committee members. She has some comments from ANAB and PJLA. She is hoping to incorporate these and send out to everyone for comment in 30 days. She used the Draft NELAP version of this Standard to help with this update. She hopes to have a DRAFT Standard for the Committee to vote in by the end of the year.

Scott brought up a copy of the document (Standard Update) to work on. The black italic language is ISO/IEC 17025:2017 language (none of this language can be deleted), the blue italic language is from ISO/IEC 17025:2005 (language that didn't make it into the 2017 version) and the regular blue text is from the TNI 2014 FSMO Standard.

Section 5.6: Do we need a quality manual? See Section 8.2. Marlene does not think we need a Quality Manual. Ilona noted that Quality Systems is working on this too and we should keep track of what they decide to do. Add note to introduction about following more stringent requirements imposed by states, regulations, or clients. See 6.2.2 note. Doesn't need to be added to introduction.

Section 5.6 d: Remove requirement for Quality Manager in favor of defining specific responsibilities required by the Standard. Doesn't necessarily need to be done by one person with the Quality Manager title.

Marlene noted that we need to make sure the responsibilities are clear and who is responsible and has the authority.

Note in 6.2.2 should be a requirement. It should not be a note. It should also apply to the entire standard and not just 6.2.2.

The Committee decided to eliminate all the blue language in Section 5.6. It is all covered within the new ISO/IEC language.

Section 5.7: Delete blue language.

Section 6.2.2: Note in 6.2.2 should be a requirement. It should not be a note. It should also apply to the entire standard and not just 6.2.2.

The Public Webinar had a comment to develop language to require a demonstration of capability for field personnel. Marlene noted that would have to be broken down. Scott pointed to Section 6.2.3.

Add a note to 6.2.3 stating that a demonstration of capability may be used to demonstrate competence for field test. An observation/witness of technique by a trainer may be more appropriate for sample collection activities. These may be incorporated into internal audit activities. There was another comment that PT studies might also be used where applicable.

Section 6.2.3: Remove blue language. Add: This shall also include any certifications or licenses required.

Section 6.2.4: Remove blue language.

Section 6.2.5: The Committee read Sections 8.2.2 and 8.2.3. The following comment was added to this section:

Consider adding something along these lines. See previous discussion at 6.2.

The laboratory shall provide evidence that top management has communicated the importance of meeting customer, statutory, and regulatory requirements.

Laboratory policies shall include the importance of meeting customer, statutory, and regulatory requirements.

There was agreement to remove blue language in c) and d). No need to add the need to evaluate effectiveness. It is covered by monitoring competence.

Should safety language be added? Change last bullet from "should" to "appropriate". The first two bullets are suggestions and could just be notes. Bullet 2 changed to "should" instead of "shall".

It was commented that Safety doesn't belong in the Standard. Marlene noted this is only saying it should be considered in planning, not how to do it. There was general agreement to leave these in with the changes above.

There was a comment to add something about vehicle safety too.

Scott recommended adding an annual data integrity training requirement to item c including the level of detail we deem appropriate from old section 4.2.8 of the 2014 Standard.

There was discussion to keep this language but make it consistent with 2016 TNI lab standard. Should not require a specific procedure.

From 2016 Lab Standard

4.2.8.1 The laboratory shall establish and maintain a documented data integrity system. There are four (4) required elements within a data integrity system. These are

- 1) data integrity training,
- 2) signed data integrity documentation for all laboratory employees,
- 3) periodic in-depth data monitoring, and
- 4) data integrity procedure documentation.

The data integrity procedures shall be signed and dated by top management. The requirements for data integrity investigation are listed in Section 4.16. The requirements for data integrity training and documentation are listed in Section 5.2.7.

Management shall annually review data integrity procedures and update as needed.

a) Laboratory management shall provide a procedure for confidential reporting of data integrity issues in their laboratory. A primary element of the procedure is to assure confidentiality and a receptive environment in which all employees may privately discuss ethical issues or report items of ethical concern.

Adopt the language from NELAP instead of the 2014 FSMO language. There was agreement.

Scott thought the 2014 language in Section 5.2.2.2 would make a good note to go along with item f being kept above rather than making it an absolute requirement. Adding it as a note allows room for creativity on the part of the FSMO while also giving an auditor grounds for at least making an observation if the FSMO plan is subpar.

Section 6.3.1: Delete blue language (covered in new Section 6.3.1) except make 2014 language in Section 5.3.1 a note:

NOTE: Field personnel should document sampling and measurement conditions that may affect the quality of results including, but not limited to, air temperature, ambient conditions, weather conditions, tides, stream stage, etc. Descriptions of sample conditions (e.g., turbidity, odor, less than optimal sample quantity, etc.) should also be noted.

Section 6.3.6: Delete language noted from Summary of Changes document to make an addition. It was decided this information is actually addressed in new Sections 7.3 and 7.4.1.

There was discussion on whether to use “must” or “shall”. Other committees are moving over to use of “must”. We can state they are equivalent or start using “must”.

Section 6.4: Delete blue language.

Section 6.4.2: Retain blue language from 2014 Standard, but make Section 5.5.2.1 a note.

Section 6.4.3: Move blue language from 2014 Standard Section 5.6.2.1.3 into this section. Delete all other blue language.

Section 6.4.5: Change second sentence originally from the 2014 Standard Section 5.5.6.1 to “Processes” instead of “The FSMO shall establish and maintain procedures”.

Section 6.4.6: Delete blue language. See new Section 7.6.

Section 6.4.7: Language originally from the 2014 Standard Section 5.6.2.1.4 is more along the lines of testing, not sampling. This needs to be rewritten to help assessors understand when it applies / possibly taken out / revised as a note / notes.

Remove blue language dealing with calibrations programmes.

Section 6.4.1.2: Delete blue language.

Section 6.4.1.3: Scott had suggested adding language suggested by the Summary of Changes document as a new subsection under Section 6.4 of the Draft Standard. The discussion today pointed out that these items are technically covered in other elements of Section 6. Perhaps these specifics would be better as notes distributed where applicable.

The Committee finished up the review of Sections 5 and most of Section 6. Review ended at Section 6.5 (Metrological traceability).

Thursday, August 12

Advocacy Committee

Committee Chair: Steve Arms, Florida DOH (Retired)

Under accomplishments, Steve noted:

- Jerry's presentation on the State of National Accreditation was well received.
- Susie Arredondo's presentation on the Mentoring Initiative was well done and is available for viewing. She reported that 9 labs had applied to be mentored, but only 5 mentors are available. Jerry will put this on the TNI Board agenda.

Under goals, Steve noted:

- We have not yet taken any action on updating the "Introduction to TNI" presentation and converting it to a webinar.
- Jerry is working with ACIL and APHL to make a list of state contacts for sharing the State of National Accreditation report.
- We have one potential addition to the TNI Ambassadors, Mike Delaney. He would be the Ambassador to Region 1.

Overview of significant issues at summer conference

- The EPA update session was very good. Jerry offered to write a summary for the newsletter.
- The Tuesday keynote on effective communication was very motivational. We could ask for permission to post this presentation on our website. We should also consider following up with a newsletter article on the link between effective communication and quality management systems.
- The Assessment Forum and Mentor Sessions were very good. We should consider converting these into training videos. William already has a number of these recorded. The Jeopardy game was especially effective.
- The SARS-Covid sessions were good. Jerry will propose some action items to the Board in September which will include a proposal that Advocacy develop a position paper supporting accreditation of labs analyzing COVID wastewater samples by the PCR technique. He will also propose that the Training Committee find a trainer to offer a course on PCR technology.
- There were 75 virtual attendees for the Update on TNI Activities session. Potential follow up could be a newsletter article on the technical manager position, an article on training and an article on FSMO's based on Justin's PowerPoint. We can also post Justin's presentation on the website. Christine Sotelo's talk on "Labs as Essential Services" was also well done. We should also consider posting the TNI Updates session under "Training" on the TNI website for viewing at no charge. There may be other presentations as well that could be posted under Training and offered for free.
- The Quality Systems Committee presented a comparison of ISO 2017 compared to the TNI Standard 2016.
- The presentation on California's efforts to regulate microplastics may be reason for TNI to think about a process for accrediting emerging contaminants. This could be an Advocacy effort.
- There was an interesting presentation in Citizen Science regarding citizen monitoring of microplastics on the Texas Gulf Coast. We may want to consider a special session at the San Antonio meeting and invite Diane Wilson, "Keeper of San Antonio Bay".
- The Microbiology Committee talked about revisions to V1M5. We should have a newsletter article. (We also need to work on distribution of internal notifications about draft standards.)
- The PT Executive Committee (PTEC) had a discussion about the value of PT. We may need to provide some education to regulators in this area. It could be a joint project between the PTEC and Advocacy. Our previous white paper could be useful in this effort.

Newsletter: After discussion of the highlights of the conference, members agreed on the following articles for the next newsletter.

Article	Author
Recap of the summer conference	Jerry Parr
Summary of the EPA updates session	Jerry Parr
2022 Forum in San Antonio	Jerry Parr
Article about San Antonio – what to do, where to eat, overview of the history	Patty Carvajal
2022 TNI Board nominations	Sharon Mertens
Call for abstracts NEMC	Jerry Parr
Expert committee openings	Paul Junio
Effective communications and the link to QMS	Trinity O'Neal
Sidebar with link to Jeopardy game	Dorothy Love
Updates on technical manager position	Aaren Alger
Labs provide essential services in times of crisis	Christine Sotelo
Chemistry standard- same concepts in a different way	Paul Junio
Updates on micro standard	Cody Danielson
Updates on FSMO standard	Scott Haas with help from Marlene Moore
Member spotlight <ul style="list-style-type: none"> • Scott Siders • Carol Batterton 	Zonetta English
San Antonio recipe -Rosario's salsa	Sharon Mertens
Charlie Carter Award	Jerry Parr
Musings from the Chair	Alfredo Sotomayor

For the fall edition:

- Martina McGarvey will be the editor.
- Target publication date is October 2021 (may have to move to November).
- Articles will be due September 30, 2021.

For the spring/summer edition, members agreed on the following:

- Editor will be Steve Arms.
- Target publication date is June 2022.
- Articles will be due May 1, 2022.

CONSENT AGENDA Approved 9/8/2021

1. Approval of July Minutes

2. Update on the TNI Standard

- In the July call, the Board discussed revising the letter that goes to laboratories that purchase the standard. The revised text is shown in red below.

From: no-reply@nelac-institute.org
Sent: Tuesday, August 31, 2021 11:44 AM
To: somebody@somewhere.com

Thank you for your order. For reference your order number is 6110915. **Please retain this email as proof you have acquired a licensed copy of the Standard.**

Please use the link(s) below to download your purchase.

Notice: By clicking the download link(s) below, you agree to the [License Agreement](#) for use of the TNI copyright protected standards.

To download "2016 TNI Standard - Lab Vol 1 - Single Use" click the link below:

[STD-ELV1-2016-Rev2.1_LabReqs.pdf](#) (1.23 MB) ~ Download link will expire in 180 days

If you have any questions regarding this order, please contact us.

The NELAC Institute
<http://www.nelac-institute.org>
shop@nelac-institute.org

- The Board also wanted to know how many laboratories that are not accredited have purchased the 2016 standard. The table below summarizes the over 500 purchases.

Group	Number
DOD Facilities (e.g., US Army Garrison Japan)	10
EPA	3
Other Federal (e.g., NASA, DOE)	14
Accreditation Bodies	14
Other State Agencies	13
Consultants/Individuals	60
Universities	18
Vendors (LIMS, PT)	11
Engineering Firms	12
Other (Health Care, Attorneys, Food Extracts, Skin Care)	13
California Laboratories	313
Other Municipal/Utility Labs	43
Other mainly commercial/industrial Labs	97
International (Italy)	1

3. California Update

- As mentioned in an email that went to the Board on August 22, in a court hearing on August 20, the judge in a case brought by the Coalition of Accredited Laboratories denied their petition to strike down the California laboratory accreditation regulations in a 33-page Writ and in oral arguments held that day. There were 20 written arguments and one offered orally that the judge denied flat out. A summary of the lawsuit against ELAP was posted on their website. This new page includes the link to the read-only unlicensed version of the TNI standard.
https://www.waterboards.ca.gov/drinking_water/certlic/labs/elap_regulations.html

4. December 2016 US House Hearing on Data Integrity and Ethics at USGS

- Christine Sotelo discovered this 1 hour and 15-minute C-Span hearing.
<https://www.c-span.org/video/?419628-1/william-werkheiser-testifies-falsified-geological-data>
- U.S. Geological Survey (USGS) Deputy Director William Werkheiser testified at a hearing on cases of data manipulation at his agency between and 1996 and 2014. An internal investigation of a Lakewood, Colorado, USGS laboratory confirmed the misconduct and also identified personnel and management problems. Mr. Werkheiser stated that scientific integrity is essential to his agency and outlined steps to enhance data quality assurance to prevent future misconduct.
- It not only shows the scrutiny one can get from a data integrity issue but also shows why management is responsible for the competency of analysts. Jerry transcribed the testimony and provided it as a separate document.

5. CONSENSUS STANDARDS DEVELOPMENT REPORT

5.1.1 CSDP Executive Committee

- Standard/Module review continues for virtually all elements of the TNI Standard. An NOI for Chemistry is anticipated shortly. Potential developments on EL-V3 and EL-V4 are also under consideration. An ANSI BSR-8 for EL-V1M3 (asbestos) has been submitted and no comments were received (comment period closed) and a BSR-8 was submitted for EL-V2-M1 (General Requirements for Accrediting Bodies). PINS announcements to ANSI will follow approval of the CEC NOI by the CSDEC.
- The TNI Glossary work group continues to prepare a comparison document of all definitions presented in TNI documents and the current glossary as completed last year. Relevant ISO standards definitions are also being included as appropriate. A Glossary Annex which contains all the TNI definitions contained in documents which are not included in the Standards has been prepared. This ever nears completion and should be finalized during the September meeting. A request of the authors of the documents in question to modify their language to utilize the harmonized definition will then be made focusing on those modules currently under review/proposed modification. As virtually all of the anticipated changes are editorial in nature this process should be relatively straight forward. The resolution of different definitions within the Standards will utilize the same approach; the plan is to determine the most appropriate definition and then to work with the appropriate expert committees to include these harmonized definitions within the next revision of their Standard/Module.
- Revised training materials for Expert Committee members and Chairs has been completed. Availability for Chairs and committee members is in the final stages of development and training will be available soon. Attendance by all Committee members is mandatory and will be recorded by the Committee Chairs. While not required, Committee associates are also being encouraged to participate in the training.

- The CSDEC Charter was approved by the executive committee and submitted to the Policy Committee. The Policy Committee however has returned the Charter to the CSDEC with questions and suggested changes. The CSDEC Charter changes will be addressed during the committee's September 9, 2021 meeting.

5.2 Asbestos Committee

- The Asbestos Expert committee has completed development and approval of their Draft Standard (EL V1M3), and all required accompanying documentation. An ANSI BSR-8 was filed on behalf of the ATEC. The comment period for ANSI has closed with no public comments received. The completed Response to Comments (R2C) form is scheduled for approval during the September meeting. This document will then be posted on the website with all required notifications completed. The required corrections for persuasive response (primarily clarification issues) will then proceed.
- Ryan Larum of the NJDEP applied for a position on the ATEC to replace Michael Carpinona previously with the NJDEP but who has left the environmental industry. The committee approved Mr. Larum appointment during the August meeting.

5.3 Chemistry Committee

- The Chemistry Committee continues to seek resolution of SIRs from the LASEC. The committee also continues discussion of potential issues regarding modifications to Module 4. While the entire module will be examined as per SOP 2-100, at this point in time, the primary issues facing the committee relate to reconsideration of the language and/or clarification of the requirements for Initial and Continuing Demonstration of Capabilities for the laboratory and individual analysts, and detection limit and calibration language clarifications. Numerous other issues of a lesser nature are also being discovered as the committee rolls through the current module.
- A Notice of Intent (NOI) for modifications to V1M4 has been approved by the committee and forwarded to the CSDEC. Upon their approval website posting and notifications as required by SOP 2-100, Rev. 3.4 will be completed as will submission of a PINS to ANSI.
- The CEC received an application from Scott Kisner of A2LA for membership. Scott was accepted as an Associate member. Following the August meeting two other requests were made for Associate membership based on their TNI membership. They will be accepted as Associate members pending verification of TNI membership.

5.4 Laboratory Accreditation Body Committee

- LAB members continue reviewing the comments submitted on the V2M1 Draft Standard. The most controversial of these, about assessor qualifications and assessor training requirements, were discussed at the conference session, and consideration of those comments and others continues in the committee teleconferences. Commenters on those two areas specifically are invited to the September 21 LAB meeting.

5.5 Microbiology Committee

- The Committee posted the DRAFT Standard on the TNI website for comment on August 9, 2021 and comments are due in 90 days.
- Cody Danielson was voted in as the new Microbiology Expert Committee Chair. The new Vice-Chair is Robin Cook.
- The Committee is starting work on new implementation guidance for Equilibrium Testing (V1M5: 1.7.3.7.b.v.a).

- The Committee is starting work on SIR 414 regarding DOCs and Variability/Reproducibility Testing

5.6 Proficiency Testing Committee

- The PTEC committee continues to develop work plans focusing on needed changes to Module 1 including review of ISO 17011, 17025, 17034 and 17043 for consistency with the TNI standard. The committee is also beginning to look at EL V2M2, EL V3 and EL V4 for any needed updates or modifications to these standards. These latter standards will have to initiate the revision process or be reaffirmed through the ANSI process by 11/29/2021. The committee also communicated with the CEC relative to their review of the PTEC spreadsheet regarding potential issues in modifying the module (Comments-Review of PT Standards 06.04.21). The PTEC intends to work through these issues during the September/October meetings. The committee is also addressing SIR 413 concerning Secondary Accreditation and it's required in the principal PT modules (both V1M1, V2M2).

5.7 Quality Systems Committee

- The workgroup formed to start working on specific sections of the new Standard while the Committee continues to tackle the controversial topics, is continuing to meet and is making progress. Two additional workgroups have also started on Definitions and Language Updates.
- SIR 412 (dealing with solvent analysis and unique IDs) was completed and sent back to LASEC.
- The Committee continued its discussion about Internal Audits. The following language is being discussed:
 - The interval for each audit shall be determined by the lab and shall not exceed:
 - a. 24 months methods/technologies on the scope of accreditation
 - b. 12 months for the elements in Module 2 of this standard
- The Committee continued work on defining the term Annual. The Committee will be seeking feedback on options.
- Paul Junio brought up an issue where some people are reviewing Committee minutes and implementing Committee SIR responses instead of waiting until the SIR is posted on the TNI website. Paul reminded everyone that an SIR is not final until it is posted on the TNI website.

5.8 Radiochemistry Committee

- The Committee worked on a response to a question Kirstin Daigle (Chair, PT Expert Committee) sent. It was a question regarding the reporting of uncertainty with all Radiochemistry PT results.

5.9 Stationary Source Audit Sample Committee

- EPA has not yet responded to TNI's request that they reconsider their requirement for two providers.
- The Committee is working on the update to its three Standard modules.
- The Committee voted in a new member (James Haynes) but will wait to add him to the Committee until approval of the new stakeholder designations are complete so the Committee can stay in balance.

5.10 Whole Effluent Toxicity Committee

- Development of a Data Interpretation Training and review of draft revisions to various sections of the V1M7 module of the TNI Standard continue, with good progress. The conference session for WET

discussed the proposed changes to the WET module V1M7. There was no WET teleconference in August.

6. NEFAP

6.1 NEFAP Executive Committee

- Justin is still working on the metrics and marketing report and should have it to me on Monday to include.
- The Committee updated its Charter and submitted it to the Policy Committee.
- EPA has provided a new person to nominate for Committee membership since Norman had to resign due to a job change. This completes the list of candidates for membership and the Nominating Committee is completing their nomination and preparing biographies for posting for vote on the TNI website.
- Oklahoma requested a copy of the NEFAP Standards: David was asked by the state environmental lab where he works to see if he could obtain a copy of the current NEFAP standard. They might be exploring the possibility of being a part of NEFAP.
- The Voting SOP update has been approved. Justin is adding the additional vote tally to the July minutes. This SOP will be forwarded to the Policy Committee once the votes are confirmed. The Committee does want to keep the option of an alternate vote and veto voting.
- The Training Subcommittee is working on developing an Internal Audits course. Paul Bergeron is coordinating this effort.

6.2 Field Activities Expert Committee (FAC)

- The Committee met during the virtual conference and made great progress updating their Standards.

7. NELAP

7.1 Accreditation Council

- Two AB renewals have been approved and a third was presented to the Council on September 7. A fourth remote site visit is scheduled for later this week. At present, one application review is well underway and another is beginning. Sadly, EPA Region 2 advises that its new evaluator will not be able to complete the evaluator training in time to participate in New Jersey's review but does plan to observe the remote site visit. Otherwise, there are three submitted applications awaiting review and two applications yet to be submitted.
- The Policy Committee's requested revisions to the NELAP Evaluation SOP 3-102 were offered to the Council in June, but members wanted more time to review the extensive edits needed to accommodate language from the Non-governmental AB Evaluation SOP 7-100. This document was presented to the Council for approval at its September 7 meeting.
- The updated implementation status of the 2016 Standard is shown below, based on information presented at conference. Participants also discussed the operational status of all NELAP ABs and their plans for implementing the 2021 Method Update Rule.

Implementation Plans for 2016 TNI ELS Standard – 8/9/2021

State	Process for Implementing the New Standard	Anticipated Implementation Date
FL	FL adopted the TNI 2016 Standards by regulation on September 26, 2018. Laboratories were granted a grace period until April 1, 2019, to implement the new standards.	Fully implemented on April 1, 2019
IL	Full implementation on January 31, 2020.	January 31, 2020
KS	Rulemaking underway, but slowly. Is allowing labs to upgrade now and is assessing to 2016 Standard even though 2003 NELAC standard is still the official version.	Expected to implement August 1, 2022
LA	Regulation updates delayed by pandemic, tropical storms, and hurricanes.	Unknown
MN	Implementation by statute was accomplished early this year. Program office is updating files and documents now.	January 30, 2021
NH	Rulemaking is needed. Public meeting scheduled for mid-August, and implementation may occur in winter 2021.	Possibly winter 2021-22
NJ	Incorporated into regulation by reference.	January 30, 2020
NY	Labs are required to meet the 2016 Standard requirements, and the NY certification manual is updated, but the assessment checklist update is not yet complete.	2016 Standard is in place
OK	Hopes to begin rulemaking in fall 2021, is allowing labs to upgrade now.	Unknown
OR	Implemented 2016 Standard effective January 1, 2021. Plans rulemaking for fee increase effective March 2022 and is hiring assessors for three areas – environment, cannabis, and psilocybin.	January 1, 2021
PA	Incorporated into regulation by reference, all labs are required to have the 2016 standard implemented by July 2020.	January 30, 2020
TX	Incorporated into regulation by reference. Implementation has gone well.	January 30, 2020
UT	Rulemaking complete, 2016 standard implemented.	June 11, 2021
VA	Is in latter stages of rulemaking but AB has no control over timing of next steps.	Unknown

7.2 Laboratory Accreditation Systems Executive Committee

- At its July meeting, LASEC and CSDEC were scheduled to discuss the desirability of avoiding public discussion of and release of preliminary but expert-committee-approved SIR responses. The availability of committee-approved decisions is creating confusion in laboratories about whether they are expected to adopt these preliminary interpretations prior to their formal and final approval and posting to the TNI website. The committee also approved some additional language clarifying that SIRs originating from assessment findings “may” be rejected, but that such rejection will not be automatic. An AB is not expected to proceed any differently than normal, even if it is aware that an SIR was submitted about an assessment finding. As the SIR Management SOP 3-105 with multiple changes is currently undergoing Policy Committee review, this tweak to the language will be added once the feedback from Policy is received on the existing revision.
- Both the Mentor Session and the Assessment Forum at conference were highly successful. Many thanks to Dorothy Love and Judy Morgan for spearheading these training events. After some discussion in the Advocacy Committee, recordings from these sessions for the past two conferences will become available as webcast training courses offered through TNI’s Educational Delivery System.

Quarterly SIR Report

Total Number: 414

Closed Out: 398

SIRS not resolved

SIR #	Date	Subject	Status	Comment
254	3/13/14	Do ABs have to assess all methods during a reassessment	LASEC	LASEC looking at developing a policy. Probably not an SIR.
362	9/10/19	What if 30 th day falls on a weekend or holiday	NELAP AC	Posted on voting site 12/23/20. Discussion requested.
378	3/2/20	Calibration frequency for reference thermometers	Quality Systems	Sent back to Committee on 4/21/21.
389	9/28/20	Do the surrogates and/or internal standards also need to be verified by a second source?	NELAP AC	
390	10/7/20	Ion-selective electrode (ISE) and minimum number of calibration standards	Chemistry	Sent back to Committee on 5/9/21.
391	10/7/20	ISE and measure of relative error in the calibration	Chemistry	Sent back to Committee on 5/9/21.
392	10/14/20	What equipment must be identified	Quality Systems	Sent back to Committee on 5/9/21.
393	10/20/20	Calibration frequency for secondary set of weights.	LASEC	QS sent back to LASEC on 1/11/21 because they don't believe it is an SIR.
398	1/27/21	Number of calibration points required	NELAP AC	NELAP AC vote will close on 9/20/21.
402	2/4/21	Failures of the ongoing verification of the DL and LOQ.	Chemistry	
403	2/8/21	Requirements on counting samples within a Radiation Measurement Batch (RMB) on the same detector.	NELAP AC	Sent back to Radiochemistry 5/9/21 and they sent back to NELAP AC 5/26/21.
410	4/27/21	Are calibrations for the use of Ion Selective Electrodes (ISE) required to adhere to the rules specified in 1.7.1.1. (f) which apply to regression or average response/calibration factor calibrations?	Chemistry	
412	5/18/21	Unique container IDs	Quality Systems	
413	6/17/21	Responsibility of the secondary accreditation body to use or not to use LAMS to provide information about the laboratories granted secondary accreditation.	LAB PT Expert	
414	6/21/21	PT use for DOCs	Microbiology	
416	8/9/21	Documenting traceability of reference materials, standards, and reagent preparation.	Quality Systems	

8. PROFICIENCY TESTING PROGRAM

- The Committee is looking at the Radiochemistry Limits that were developed but put on hold until SOP 4-101 (Recommendation, Evaluation, and Calculation of Acceptance Criteria and Applicable Concentration Ranges for Proficiency Tests) is completed. Shawn decided that the procedure used to update these limits has been well documented and he'd like to move them forward. He will send them

to the NELAP AC for comment and asked that all Committee members review them too for discussion in September.

- PTPA's ANAB and A2LA provided reports during the virtual conference. There were no big changes between 2020 and 2021. There were a few analytes with >10% failure rates and the Committee will look at these to determine if limits need to be reviewed by one of the FoPT Subcommittees.
- SOP 4-107 (FoPT Table Management) is still in progress and will be sent to the Policy Committee soon for review.
- The Committee started work on developing their metrics in combination with updating their Charter. The Committee worked on updating their success measures (which were mainly tasks) during conference.
- The Committee still needs to complete their review of the voting SOP to finalize their preliminary decision to make it obsolete and start using the new TNI Voting SOP instead.
- PFAS ARA: The Chemistry FoPT Subcommittee is still working on contacting laboratories through PT Providers to get information about their MDLs, RLs, calibration curves, etc. The contact is being done by the PT providers so the labs can remain anonymous. The thought is that this information may help them set appropriate limits.
- A WET FoPT Subcommittee is still being formed.

9 ADMINISTRATION

9.1 Advocacy Committee

- The next newsletter will be published in late October 2021. Martina McGarvey is the editor. Articles are due by September 30.
- The mentoring initiative needs additional volunteer mentors. The Advocacy Committee recommended that an email soliciting mentors be sent out to the TNI general membership.
- The Advocacy Committee reviewed Jerry's proposal for the San Antonio meeting. The committee agrees with the recommendation for an in-person meeting with recordings that can be viewed later. Advocacy also provided input for possible special sessions in San Antonio.
- The committee plans to develop a strategy for disseminating the "State of National Accreditation" report to state and federal stakeholders.
- Lynn Bradley is taking over as Program Administrator for the Advocacy Committee.
- With Lynn Bradley's move to Program Administrator for Advocacy, the committee voted to add William Lipps as full member of the committee.

9.2 Policy Committee

- Review of SOP 3-105 (Standard Interpretation SOP) has been completed and Patsy is drafting an email to return this SOP for further updating.
- The review of SOP 6-101 (SSAS Table Management) has been completed and SSAS has been requested to provide an update to the Policy Committee.

- The Committee is continuing to review updated Charters. Many Charters are being returned to the groups to ensure they are specifying Success Measures and not tasks/action items.
- The Committee discussed whether the procedure for how Program Chairs are selected should be consistent between all TNI Programs. For example, the CSDEC Chair is supposed to be appointed by the TNI Board. The NEFAP EC and PTPEC chairs are selected by the Committee members. The Committee is leaning towards making this consistent.
- The Committee has started reviewing a revision to SOP 1-110 (Educational Delivery System).

9.3 Training Committee

- The Training Materials Review workgroup is continuing to review current TNI courses.
- The Training Opportunities Workgroup is continuing to look at longer term efforts needed to continue to develop courses for future RFPs.
- The Credentialing Workgroup is making great progress. They are looking at important concepts regarding credentialing:
 - Training courses will be available and not required. They can take a test.
 - For someone to be “Credentialed” it would be a combo of passing a test and years of experience. Maybe some education too.
 - To remain credentialed - need to accumulate Professional Development Hours. There are differences between CEUs and PDH.
They are continuing work on digital badges leading to credentials/certification. Some examples provided include:
 - Environmental Laboratory Professional – Quality Management System
 - Quality Systems Specialist
 - Proficiency Testing (PT) Specialist
 - Data Integrity Specialist
 - Document Control Specialist
 - Measurement Traceability Specialist
 - Each of these has recommended KSAs and classes that could be taken.
- The Committee has decided to send out a training flyer each month the Tuesday after the TNI Board meeting. It will update people on available trainings.
- Current Classes being worked on:
 - Tony Francis completed the Electronic Records Management class on July 16th (46 students).
 - Jack Farrell completed the Technical Writing for Environmental Laboratory Method SOPs on July 20 and 27th (40 students).
 - The Basic Statistics for Environmental Laboratories course has started – September 3, 10 and 17th. (34 students).
 - How to Properly and Scientifically Calibrate an Analytical System – September 16th and 23rd
 - Introduction to Proper and Scientific Integration Techniques for Chromatographic Systems – December 7 and 9th.
 - Good Laboratory Practice – Internal Audits – Part II (ANAB) –They will be making the requested updates to this class and then it will be available as a self-paced course. No additional update.

- ANAB's new course: Risk Based Thinking in the Environmental Laboratory. This will be a 10-hour class. TNI will essentially be marketing the class on the website, but ANAB will be handling all the registration.
- Marlene and Ilona are still discussing evaluator training for the NEFAP/PTP Evaluations. It looks like this training will need to be completed during the summer.
- A training was submitted by the WET Expert Committee: Whole Effluent Toxicity (WET) Testing – Data Interpretation Training. They are now picking a date in October for this training.
- The NEFAP Training Subcommittee is developing an Internal Audit course for late Fall or early Winter.
- New recorded training classes from the summer conference are being added to available TNI training. We are calling this type of training "Conference Learnings". The three being posted are:
 - Leading Through Effective Communication (Rick Parmely)
 - TNI Mentor Session Summer 2021 – Laboratory Quality: Are You in Jeopardy?
 - TNI Assessment Forum Summer 2021- Unmasking the 2016 TNI Standard

9.4 2022 Forum on Environmental Accreditation

- See Agenda item 3.

9.5 2021 Environmental Measurement Symposium

- We ended up with 223 in-person attendees and 367 that attended virtually.
- The 37th meeting of NEMC had 182 technical presentations over 8 days.
 - Twenty-eight technical breakout sessions with 141 oral and 28 poster presentations,
 - Two keynote presentations,
 - One general session with 4 presentations,
 - One EPA session with 3 presentations, and
 - 4 vendor lunch presentations.
- The TNI portion of the symposium consisted of
 - Thirteen TNI Committee meetings
 - An Assessment Forum
 - A Mentor Session
 - An Update on TNI Activities session with 6 presentations.
- Recordings of the presentations and TNI committee meetings will remain on the NEMC website until October 31, 2021.
- Proposals were received from 12 locations for the 2022 Symposium. That was narrowed down to 4 (Baltimore, Cincinnati, Crystal City, and New Orleans). On September 3, after reviewing the proposals, the Steering Committee selected Crystal City.

9.6 NGAB

No activity.

9.7 Information Technology

William has launched a new on-line system for managing committee membership and applications. Jerry and the Program Administrators are updating all committee rosters and adding in all associate members. This system should be implemented later in September. It will also be used to manage the TNI Internal Audit process.

10. TASK FORCES AND OTHER EFFORTS

10.1 Competency Task Force

- The Task Force representatives met with the NELAP Accreditation Council at its rescheduled July 6 meeting and received feedback that was only partially supportive of the proposal for updating the Technical Manager requirements. A revised version of the proposal with an option that was intended to address the Council's concerns was presented at conference, and further revisions are ongoing.

10.2 Consumables Task Force

- The Task Force has not met since June 8, 2021 due to scheduling conflicts but is scheduled to convene again on August 14, 2021. The Task Force is continuing in the process of listing and classifying critical products, supplies and services. Meetings have resulted in further defining elements of the first area of concern, general products and supplies required for all laboratories. The Task Force nears completion on the topic of "General Laboratory Supplies and Services" and is developing the means by which laboratories can effectively utilize this data.
- The recent work of the Task Force has focused on how laboratories can ensure compliance with the TNI requirements and appropriate ISO/IEC requirements. The Task Force in response to this question, has and continues to investigate ISO Guide 31 and the necessary informational requirements of product "certificates".
- The Task Force will require an extended effort prior to the production of any "product" whether in the form of Guidance and/or a recommendation for a standing Expert Committee. The sheer volume of items to be properly classified and for which purchasing guidelines need to be developed is extensive.

10.3 Environmental Monitoring Coalition

- The letter from EMC to EPA has been finalized and should be sent within the next week.
- A data collection effort to evaluate holding times for acrolein and acrylonitrile has been completed. David Friedman presented on this topic at NEMC in August. The data support a pH 2 preservation with a holding time of 14 days.
- The EMC has received feedback from the drinking water program on Initial Demonstration of Capability. EMC shared this information with every state accreditation/certification program manager on August 18.
- A subcommittee is actively working on language for Method 200.8 to allow the use of collision cell technology.
- EMC is also working on a letter to EPA regarding the use of correlation coefficient in instrument calibration. When finalized, the letter will recommend the approach in the Chemistry Module of the 2016 TNI Standard.

11. MEMBERSHIP

11.1 Committee Applications

Robert Royce, New Jersey DEP, Microbiology
Ryan Larum, New Jersey DEP, Asbestos

11.2 New and Renewed Members:

- Of the 27 expired memberships in June, 7 renewed after contact, 15 did not respond, and 5 were no longer at the company and/or the email did not exist. No membership outreach to expired members was conducted for July due to the EMS; emails went out to members with July and August expiration dates on September 1.
- 94 New and Renewed memberships in July
- 62 New and renewed memberships in August

11.3 Expired Memberships

- 20 Memberships expired in July
- 16 Memberships expired in August