

**Microbiology Expert Committee (MEC)
Meeting Summary**

August 5, 2019

1. Roll Call:

Robin Cook, Chair, called the meeting to order at 9am Eastern by on August 5, 2019 in Jacksonville, FL. Attendance is recorded in Attachment A – there were 4 members present.

2. Technical Manager

Micro submitted their Technical Manager requirements to QS. QS will be discussing this in the afternoon. Some of the highlights:

- No specific degree required.
- A basic micro class is required. It is different than Chemistry because Micro thinks a little differently.

Robin reminded everyone that this wording will be in the QS module, so they may change some of the wording.

Ilona noted that in some of the other expert committees, they are adding a requirement for how many credit hours can be substituted with experiences. Robin pointed out that the requirement for the Microbiology class takes care of that for Microbiology.

A year of experience is still needed for someone with a masters or doctoral degree. They may have theoretical experience, but they need some practical experience.

The last option is petitioning each AB, but it must be pointed out that this is strictly an exception and should happen rarely.

Patsy pointed out that 1,2 and 3 is the criteria and 4,5 and 6 are alternatives/options that can be considered.

Ilona noted that another issue that has come up to QS is how many facilities a Technical Manager can be responsible for.

It was pointed out that there is now one list of requirements for the Microbiology Technical Manager. There are no longer two levels.

There are requirements in the methods for Crypto and Giardia, so it is not critical to take these into consideration.

There was discussion on how experience in other areas (e.g., milk, clinical) can be transferable.

Bullet VI can be a problem when you have an AB that is not strong in Microbiology. Jennifer Best noted that the states have the authority to make these decisions and they should be doing this. They shouldn't just have a checklist to make their decisions. Robin emphasized that this should happen rarely. This exception does not commit a state to accept the person if another state accepts someone. A state can say no.

ISO/IEC 17025:2017 sets this up as a risk question and leaves this to the lab to decide. The ABs were not comfortable with this, so TNI is trying to set-up something that is auditable ... but hopefully still gives some flexibility to the lab in the spirit of the new ISO/IEC standard. Robin does not think Section 5.2.6.2 (exceptions) in Module 2 will go away. This should be asked in the QS meeting this afternoon to confirm.

3. SIR #301

Robin asked about SIR #301. She shared the issue and the response that Micro came up. This will need to be "fixed" in the next Standard.

This came back again two weeks ago. Robin received the following note from the LASEC Program Administrator:

The LASEC SIR Subcommittee reviewed the revised response that Microbiology provided to SIR 301 and asks that you please look at it again.

Specifically, the Subcommittee's concern was that the revised response appears to contradict the initial response, and the definitions of "sample" and "plate" are still unclear. They also asked that you ensure that the response will also address the language of the 2016 Standard.

Additional comments that might help your understanding of their concern were that the term "mid-blank" in the "comments" is undefined, and they wondered how the revised response might apply to a setup using a manifold with multiple funnels. One suggestion for consideration was that Microbiology could consider preparing an Implementation Guidance document (different than the full-blown guidance that Chemistry did, much simpler) to provide "best practice" advice about implementing this piece of the standard.

The feeling is that the more recent response is correct and shouldn't change. The Committee will look at providing implementation guidance. We can't change the Standard.

Section 1.7.3.2 is what is being called into question. Jennifer Best – should be one per funnel. Doing something else is more of a risk.

There was further discussion on what the assessors think they can write a deficiency for. They agree the language is not very clear.

Robin will talk to Judy (Chair of the LASEC) and will look at preparing implementation language.

4. Module 5 Standard

Robin pulled up a copy of the 2016 Standard and gave the attendees the opportunity for to make suggestions for improvement.

- Section 1.7.3.5 d) 2) – Says specific conductance ... should probably say conductivity.
- Method blank issue discussed above.
- Incubation should be looked at during the update. Can't treat large and small incubators the same. Maybe point to if it is fully loaded. There are so many iterations you can come up with ... it would be hard to come up with the perfect definition or procedure. How long is appropriate to come to temperature? What is the temp of the containers going in? Size? Etc ...

One person is required to have a thermometer on every shelf (Arizona requirement).

Some people use min/max instead of a continuous monitoring thermometer. There is less variation with the temp if the thermometer is in water instead of the air.

Maybe it has to be in compliance with the manufacturer specs – incubator.

There were no other comments.

Robin asked the attendees if there are any implementation issues in the 2016 Standard.

- Section 1.7.3.7 b) vi) – inhibitory residue test. It only applies when you change your procedure. Change the soap? Need to do it. Change how many rinses? Need to do it.

Robin reviewed how the test is done. You can change your soap or change your procedure. Need to make sure your procedure is not inhibiting growth.

- Lab noted that the Committee did try to remove some of the passive language in the 2016 Standard. There are now sections where it clearly states that: the lab shall ...
- Need to do the media check at the location where the media is being used. A parent lab can't do the check and then send it to a satellite location without the satellite location doing the check too.

Robin opened the floor for general discussion.

- At the last audit someone with no micro experience audited them. If Colilert is filled all the way to the top ... what do you do? You have to shake it up and put it in a graduated cylinder and then pour back. The lab shakes it, but that wasn't good enough. The issue is that you can't adequately shake it with no headspace. It was suggested that you reject the container if it is over filled. Jessica Jensen's lab asks that the sampler fill between two lines in their container. Paul Junio noted that if you are going to transfer ...put it in a bigger container (150 ml) so it can be mixed properly. The homogenation is important!
- ISO 1135 and ISO 17025 – Patsy is going to advocate for that if lab and manufacturer are both accredited ... don't need to check anything but sterility.

5. Action Items

See Attachments B and C for updates to action items.

6. New Business

None.

7. Next Meeting and Close

The next meeting will be held by teleconference on September 10, 2019 at 1:30pm Eastern.

A summary of action items and backburner/reminder items can be found in Attachment B and C.

Robin adjourned the meeting at 11:53am Eastern.

Attachment A

**Participants
Microbiology Expert Committee (MEC)**

Members	Affiliation	Balance	Contact Information
Robin Cook (Chair) (2019) Present	City of Daytona Beach EML	Lab	cookr@codb.us
Michael Carpinona (2022*) Absent	NJ DEP	AB	Michael.Carpinona@dep.nj.gov
Ron Coss (2022*) Absent	Orange County Sanitation District	Lab	RCoss@OCSD.COM
Cody Danielson (2022*) Absent	Oklahoma	AB	Cody.Danielson@deq.ok.gov
Lew Denny (2021*) Absent	Flowers Chemical Laboratories – North	Lab	lewdenny@comcast.net
Jessica Hoch (2019*) Absent	TCEQ	Other	Jessica.Hoch@Tceq.Texas.Gov
Lily Giles (2022*) Absent	Louisiana	AB	Lily.Giles@LA.GOV
Mary Robinson (2022*) Absent	Indiana	AB	mrobinson@isdh.IN.gov
Michael Blades (2021*) Absent	ERA	Other	mblades@eraqc.com
Jody Frymire (2022*) Present	IDEXX	Other	Jody-Frymire@idexx.com
Kasey Raley (Vice-chair) (2020*) Present	Eurofins Eaton Analytical, Inc.	Lab	KaseyRaley@eurofinsUS.com
Vanessa Soto Contreras (2020*) Present	Florida DOH	AB	Vanessa.SotoContreras@flhealth.gov
Gary Yakub (2020) Absent	Environmental Standards, Inc.	Other	gyakub@envstd.com
Enoma Omoregie (2021*) Absent	NYCDEP	Other	eomoregie@health.nyc.gov
Christabel Monteiro (2021*) Absent	ESC	Lab	cmonteiro@esclabsciences.com
Ilona Taunton (Program Administrator) Present	The NELAC Institute	n/a	Ilona.taunton@nelac-institute.org

Attachment B

Action Items – MEC

	Action Item	Who	Expected Completion	Actual Completion
1	Review Method codes and send comments to Robin for Dan Hickman.	Deb	TBD	
19	Provide EPA interpretation on temperature readings to Ilona. She will have it posted on the website.	Robin	1/31/14	
74	Send questions for ABs regarding method codes to Robin.	ALL	3/15/18	
76	Provide an update on what has been done with the databases after Jennifer's review and internal EPA meetings.	Jennifer	4/10/18	
78	Forward link to PDFs on DW website with rule, method and analyte information.	Jennifer	3/31/18	
81	<i>Addition: Forward response to SIR 331 to Lynn Bradley.</i>	<i>Robin</i>	<i>11/13/18</i>	
83	Send out resumes for all applicants to the committee.	Robin	12/10/18	Send before 1/8/19.
84	Send out copy of Charter.	Robin/Ilona	12/10/18	
87	Contact Pennsylvania, New York and New Jersey about Technical Manager requirements.	Robin	5/14/19	
88	Send SIR 301 response to Lynn Bradley.	Robin	5/14/19	Complete
89	Robin will update the Technical Manager language and send it to the Committee for comment by email. She would like something to present to QS by their 6/10/19 meeting.	Robin All	6/10/19	Still in progress.
90	Prepare Jacksonville Agenda.	Kasey Robin	6/23/19	Complete

