Policy Committee
Meeting Summary

March 6, 2020

1. Roll Call:

   Patsy Root, Chair, called the meeting to order at 11:05am Eastern on March 6, 2020 by teleconference. The meeting was attended by Patsy Root, Paul Junio, Elizabeth Turner, Virginia Hunsberger, Silky Labie, Jerry Parr and Ilona Taunton (Program Administrator).

   The February 21, 2020 meeting minutes were distributed by email for review. Paul noted that there is nothing that says ex-officio members are not included, so they need to include them. Balance representation. The following language will be added to Section 3 – second paragraph: Paul commented that there was nothing in the Bylaws that excludes Ex-Officio members from being considered as they relate to balance, so it seems that they should be included in considerations of balance.

   A motion was made by Paul to approve the February 21, 2020 minutes as appended above. The motion was seconded by Elizabeth and there was no additional discussion. They were unanimously approved and will be posted on the TNI website.

2. Internal Audits

   The Committee reviewed the updates made by Ilona to the Internal Audit SOP (SOP 1-124) and made the following changes:
   - Section 7.1.3.1.1 (second sentence) - remove end of sentence and replace with: so that the relevant process can be repaired.
   - Section 7.1.3.2.2 - Remove the word "actually".
   - Ilona reviewed the new column headings for the database and noted that additional screen shots will be added to the database instructions in Appendix A as soon as William updates the database.

   A motion was made by Paul to approve the Internal Audit SOP (SOP 1-124) as sent by email on March 6, 2020 with the changes noted above and the additional screen shots showing the changes to the database. The motion was seconded by Silky and unanimously approved.

   Ilona prepared a DRAFT memo that could be sent to committee chairs and program administrators to help start the corrective action process. It can be found in Attachment A. The Committee reviewed the memo and made no changes. The memo will go out after the database update is complete.

3. SOP 1-125 – Committee Application and Membership Tracking Procedures

Ilona provided a DRAFT of a new SOP outlining Committee Application and Membership Tracking procedures. The Committee reviewed the SOP on Webex.

Section 1: Replace "Committee" with "for committee membership".

Section 2: End second sentence with "is then stored in a database".

Section 3: Add: ANSI Essential Requirements: Due process requirements for American National Standards

Section 4: No changes

Section 5:

5.1.2 – other categories can be added … then put this section into an Appendix and refer to it in the Appendix.. Add flexibility. Add: Training, PT Provider, Regulator (SSAS), Source Tester (SSAS), Regulator (SSAS), Provider (SSAS)

5.1.4 –Cross out requests any missing items. Change section to: The PA or committee chair reviews the application, may request additional information and reviews the stakeholder group for accuracy.

5.2.1 – use "enter" instead of input. The PA

5.2.2 – Emphasize activity. Work on language. Confirms active membership status.

5.2.3 – Use "options" instead of "possibilities". Use "contacts" instead of "reached out". - Applicant may be rejected if they don't have the qualifications.

5.2.3.3 - Add "in an expeditious manner" to the last sentence.

Note: Replace "column" with "field" throughout the document.

Note: Add how Affiliate members are added to the SOP. An Affiliate members cannot join a committee because their personal or organization's philosophies may be in conflict with TNI. ANSI feels strongly affiliates should be part of the process.

5.2.5 – Need to add Affiliates

5.2.6 and 5.2.7 – Add "the PA and/or TNI staff".

5.2.8.2 – Add "Where terms limits are not applicable, then "NA" is entered into this field".

5.2.9 – Add "For voting members only" to start of section. Need to make sure this is clear in the Scope too.

Note: Add something about Associate members – we don't track all the same information as we do for Voting members. Figure out where to put this.

Review of this SOP will continue during the next meeting.

4. Action Items

An Action Item Summary can be found in Attachment B.

5. New Business

None.

6. Next Meeting and Close

The next meeting will be held by teleconference on April 3, 2020 at 11:00am Eastern.

The meeting was adjourned at 12:35pm Eastern.

Attachment A

Committee Chair and Program Administrator,

The internal audits have been completed and now it is time to look at corrective actions. Your Program Administrator has access to the internal audit performed for 2019 and will export a spreadsheet of the audit and send it to you.

I have included a copy of the Corrective Action procedures from the TNI Internal Audit SOP (1-124). Please work with your Program Administrator to decide if you will use the spreadsheet to complete your responses or if you will work directly in the database.

7.0 Corrective Action

7.1 Each committee must address the nonconformities ("No" responses) found in its internal audit by preparing a corrective action response/plan.

7.1.1 The corrective action process is coordinated by the Program Administrator and committee Chair.

7.1.2 The Internal Audit Database includes three columns that track responses to each nonconformity that include root cause evaluation, proof of correction or a plan for correction with a due date and a verification that the corrective action has been implemented. Corrective action responses are due by May 31st each year.

7.1.3 The Internal Audit Database corrective action columns include:

7.1.3.1 "What factors contributed to "No" response?"

7.1.3.1.1 This question leads to a root cause analysis. It is important to evaluate what lead to the nonconformity so that it can be repaired at the root instead of only applying a bandaid. The committee should consider all factors that may have contributed to the issue.

7.1.3.2 "What will or has been done to correct issue – Corrective Action (CA)?"

7.1.3.2.1 Provide a summary of what was done or what the committee plans to do to correct the issue. The completion date or the expected completion date must be included in the response.

7.1.3.2.2 In some cases, a committee may find that the checklist item is out of the committee's control and another committee is actually responsible for correcting the issue. In these cases the committee must state in this column that the correction has been transferred to a named committee and include the date the other committee was notified.

7.1.3.2.3 The need to update written procedures should be taken into consideration when preparing corrective action plans.

7.1.3.2.4 Corrective action plans are tracked by each committee using its procedure for tracking action items.

7.1.3.2.5 The committee must notify the next level of organizational management within TNI when the corrective action responses are complete.

7.1.3.3 "CA Verified (Name/Date)"

      7.1.3.3.1   Verification takes place approximately 60 days after completion of the corrective action task and is performed by the Program Administrator or committee Chair. If the corrective action is not found to be implemented, the committee places the task into its action item listing and the task is looked at again for verification approximately 60 days after the task is completed

7.1.4 The corrective action response is reviewed by the next level of organizational management within TNI (*i.e.*, an Executive Committee or TNI Board of Directors).

7.1.4.1 The review by the next level of organizational management shall be documented by stating "Approved" or "Not Approved" in the same corrective action response box. Responses that are not approved will be reconsidered by the committee and a new response will be written for approval.

7.1.4.2 The committee that wrote the response must be notified once the corrective action responses have been reviewed.

7.2 Corrective action documentation will be maintained by the Program Administrator following SOP 1-104 (Control of TNI Documents).

7.2.1 The corrective action responses/plans are considered Class III documents.

The target to complete corrective actions is May 31st. Please contact Ilona Taunton if you have any questions or need any assistance.

Attachment B: Policy Committee Action Item Summary

Task Description	Document Number	TNI Contact	Committee Contact	Start Date	Complete Date	Communication	Notes
Email policy/SOP	POL 1-121 or SOP 1-114	Jerry/William	Jerry	4/5/19			Jerry to draft document
update SOPs 1-100 and 1-116		Jerry/lynn		10/4/19			revise file naming requirements to accommodate PowerDMS
Review PTPEC Complaint SOP	SOP 4-102	Eric		12/6/19	12/6/19	awaits final PTPEC review	approved contingent on PTPEC agreement with minor edits
Review NEFAP COI	SOP 5-107			12/6/19	12/6/19	pending presentation to Board, likely in March	NEFAP EC agrees with minor edits 1/3/20
Review NEFAP Nominating SOP	SOP 5-103	Ilona		12/6/19	1/3/20		comments returned to NEFAP EC 1/12/20
Discuss CA process for Internal Audits		Ilona		1/17/20	1/17/20	Ilona to request database modifications	agreed upon revisions will be added to SOP 1-124
Review IT SOP 1-109 revisions		MeiBeth/Jerry					
Review Revised IA SOP	SOP 1-124	Ilona		2/21/20	3/6/20		Updated SOP approved. Waiting for database to be updated before Appendix A can be finalized with new screen shots. Once complete - send to BoD.

Task Description	Document Number	TNI Contact	Committee Contact	Start Date	Complete Date	Communication	Notes
Review Application and Membership SOP.	SOP 1-125	Ilona		3/6/20		SOP needs to be modified and reviewed again.	
Review IA memo.		Ilona		3/6/20	3/6/20		No changes requested. Needs to be sent as soon as database updates are complete.