1. **Welcome, Roll Call and Announcements**

   The meeting was called to order by the Chair at 11 am Eastern. Attendance is recorded in Attachment 1.

2. **Follow-Up on Complaint #23 and NGAB Evaluation SOP 7-100**

   The formal response to Complaint #23 was delivered to the submitter. There has been no response to Alfredo’s offer to discuss any questions about the response.

   The NGAB Evaluation SOP 7-100 was approved by Policy Committee through the use of an email vote, so that it could be submitted to the Board for endorsement prior to conference in Tulsa. At its December 9 meeting, the Board determined to allow its members time to read through the document, and will discuss it at the January 13, 2016, Board meeting.

3. **NELAP Mutual Recognition Policy 3-100**

   This policy was discussed but could not be approved at the December 4 meeting, due to lack of a quorum. At this meeting, discussion focused on whether ABs are required to grant secondary accreditation if a lab has primary accreditation from a NELAP AB, and also the suggestion to add a statement that it is desirable for ABs to work cooperatively to increase opportunities for mutual recognition, but participants determined not to return the document to the NELAP AC for reconsideration. Bob moved and JoAnn seconded that the document as presented be approved and forwarded to the Board for endorsement; approval of this motion was unanimous.

4. **Questions from PTPEC**

   Two questions were presented. The first was by email from Eric, where the chair of the PTPEC SOP Subcommittee was seeking clarification about the difference between a comment and an observation, from Policy Committee review. Short answer was, there is no difference. The second was from Ilona, about revising the PTPEC’s complaint handling process, and that was resolved by the same subcommittee as it works on addressing comments on the PTPEC’s SOPs.

5. **Internal Audits – Wrapping Up Details**

   The cleaned-up generic portions of the self-audit checklists that were reviewed at the previous meeting were deemed ready to prepare for review by the committees. Silky moved and Bob seconded that the checklists be finalized by adding particular items applicable to individual committees and then distributed for review and acceptance by the committees; approval of the motion was unanimous and Ilona will handle that process.

   Bob moved and JoAnn seconded that Policy’s checklist be approved by this committee’ approval was unanimous. After the vote on this motion, there was discussion about whether the process for self-audits and checklist reviews will be incorporated into an SOP or the QMP itself, with a consensus that the process probably should become an SOP as well as having the actual self-audit become incorporated into the committee charters.

   Policy’s expectation is that the committee self-audit checklists will be completed annually at the same time the committee charters are revised.
The focus areas for self-audits, as identified in the table provided by Jerry for insertion into the QMP, are considered appropriate by Policy Committee. These are as follows:

- Committee Operations
  - Membership (Rotation, Balance, TNI membership)
  - Operations (Voting, Minutes)
  - Charters
- Standards
  - ANSI Essential Requirements
  - Version control
  - Tracking
- Databases and Tables
  - FoPT Tables
  - LAMS
  - Analyte, Method and Technology Codes
  - SSAS database
- Document Control and Recordkeeping
  - SOPs & Policies
  - Guidance
  - Governance (Bylaws, Strategic Plan, Quality Management Plan
- Programs and Administrative Management
  - Compliance with Bylaws
  - Program Activities
  - Complaints
  - Voting procedures (Standards, Board, etc.)
- Financial*
  - Audit/Review
  - 990
  - Budget
  - Quarterly Financial statements
- Website
  - Committee Rosters
  - Consultant Listings
  - Website operation and functionality
  - Training postings
- Membership Records

Participants agreed that the risks to TNI from possible non-conformances with the QMP will be satisfactorily addressed in the selection and frequency of items for self/internal audits and the external audits, while acknowledging that this is an indirect approach, it seems satisfactory. We noted that the concept of managing risk to the organization should be included in the training materials for committee chairs.

The form and conduct of the reviews has been discussed continually, but the consensus agreement is repeated here for clarity. Self-audits will be conducted by the PA and/or the Chair, and shared with the committee. For the self-audits, corrective actions will be handled by the PA with support from the chair(s) as needed, and should be affirmed by the next higher level – one of the executive committees or perhaps the Board itself. For external audits, corrective actions will be overseen by the external auditor as part of the review process. We also noted that the to-be-constructed database for oversight of these internal and external audits needs to have an element for capturing that corrective actions are completed.

In order to finalize the QMP document itself, there are three items that have emerged from review and discussions (beginning in April 2015) of the QMP document itself:

- revise text of QMP to reflect discussions about how Internal audits shall be selected and accomplished (or affirm that current text is accurate)
- provide language for NEFAP Recognition Committee to be added to NEFAP section of Appendix 3 to QMP (an assignment to Ilona. NOTE: this comes from final bullet of QMP
review in May 15, 2015, minutes – “NEFAP, NEW BLACK BAR – add a black bar for the NEFAP Recognition Committee (Ilona to provide language for description and duties.)”

- provide NGAB write-up for the QMP appendix (per Alfredo, this may need to wait until the NGAB workgroup is dissolved.)

For the NELAP AC internal audit, either the PA or LASEC should perform that task, using the same checklist for “generic” items as well as any specific items from NELAP SOPs and policies as well as the QMP. For this aspect, at least, the NELAP AC will be treated as are all other organizational units that comprise TNI.

The status of progress towards finalizing the QMP will remain a Policy Committee agenda item until the QMP itself is approved.

6. **Next Meeting**  
Policy Committee will meet again on January 15, 2016, at 11 am Eastern. Documents and teleconference information and an agenda will be circulated in advance of the meeting. Action Items are included in Attachment B and Attachment C includes a listing of reminders.
### Attachment A

<table>
<thead>
<tr>
<th>Name/Affiliation</th>
<th>Representing</th>
<th>Present</th>
</tr>
</thead>
</table>
| Alfredo Sotomayor, Chair  
Milwaukee Metropolitan Sewer District  
Milwaukee, WI  
asotomayor@mmsd.com | TNI Board | Yes |
| JoAnn Boyd  
Southwest Research Institute, San Antonio, TX  
jboyd@swri.org | Lab and FSMO | Yes |
| Lynn Boysen  
MN ELAP  
Lynn.Boysen@state.mn.us | NELAP AC | No |
| Silky Labie, Vice Chair  
Env. Lab. Consulting & Technology, LLC  
Tallahassee, FL  
elcatllc@centurylink.net | At Large | Yes |
| Calista Daigle  
Dade Moeller, Inc.  
calista.daigle@moellerinc.com | NEFAP Executive Committee | Yes |
| Mei Beth Shepherd  
Shepherd Technical Services  
mbshep@sheptechserv.com | At Large | Yes |
| Eric Smith  
ALS  
eric.smith@alsglobal.com | PTP Executive Committee | Yes |
| Bob Wyeth  
Retired  
rfwyeth@yahoo.com | CSD Executive Committee | Yes |
| Jerry Parr (ex-officio)  
Executive Director, TNI  
Jerry.Parr@nelac-institute.org | | No |
| Lynn Bradley, Program Administrator  
The NELAC Institute (Staunton, VA)  
lynn.bradley@nelac-institute.org | | Yes |
| Ilona Taunton, Program Administrator  
liona.taunton@nelac-institute.org | Will continue to participate until QMP review is completed, at Chair’s invitation | Yes |
## Attachment B

### Action Items – TNI Policy Committee

<table>
<thead>
<tr>
<th>Action Item</th>
<th>Who</th>
<th>Expected Completion</th>
<th>Comments/ Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>82</td>
<td>Ilona</td>
<td>By final approval of QMP</td>
<td></td>
</tr>
<tr>
<td>85</td>
<td>Alfredo, Jerry, Bob, Lynn, TBD</td>
<td>– began 7/10/15</td>
<td>Review progress @ 6 month intervals</td>
</tr>
<tr>
<td>86</td>
<td>Alfredo</td>
<td>By time Internal Audit development is complete</td>
<td></td>
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<tr>
<td>88</td>
<td>Ilona w/ subcommittee as needed</td>
<td>For 11/6/15 Policy Cmte meeting</td>
<td>Final revisions to be completed for 12/18/15 meeting</td>
</tr>
<tr>
<td>Item</td>
<td>Meeting Reference</td>
<td>Comments</td>
<td></td>
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<td></td>
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<tr>
<td>1. Look into need to include something about review schedule in all SOPs.</td>
<td>3/20/12</td>
<td></td>
<td></td>
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<tr>
<td>2. Include mention of abstentions in SOP 1-102 revision (or elsewhere,) to ensure that intentional choice of appropriate wording is made in committee decision making choices</td>
<td>10/5/12</td>
<td></td>
<td></td>
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<tr>
<td>3. In SOP 1-101, &quot;Committee Operations,&quot; or else SOP 1-102, &quot;Decision Making...,&quot; some mention of &quot;default&quot; decision making rules would be beneficial, since most committees do not have documentation of their decision processes.</td>
<td>10/22/12</td>
<td>SOP 1-102 discusses various options and situations where one might work better than others, but SOP 1-101 refers to 1-102 as if it sets a default.</td>
<td></td>
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<tr>
<td>6. New Committee Charter format should include listing for Executive Director as ex officio member for all committees (per Bylaws.)</td>
<td>9/20/13</td>
<td>Charter format to be upgraded to address committee annual budgets later this year</td>
<td></td>
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<tr>
<td>7. Next revision of Pol 1-122 include addition of a sentence addressing the possibility of additional stakeholder categories.</td>
<td>2/21/14</td>
<td>Committees may add an additional stakeholder category with approval of TNI Board</td>
<td></td>
</tr>
<tr>
<td>8. When the CSD PEC charter is next updated, it should clarify which committees have added stakeholder categories and note that Board approval is required and was obtained for including those additional representatives in the committee(s.)</td>
<td>2/21/14</td>
<td></td>
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<tr>
<td>9. Revise SOP 1-100 (SOP on SOPs) to address use of bullets and alternative numbering systems</td>
<td>9/5/14</td>
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<tr>
<td>10. Revise Guidance SOP 1-105 to note that a new approval request is required for updates to existing guidance products</td>
<td>10/3/14</td>
<td></td>
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</tr>
<tr>
<td>11. Create SOP for document review of Policy committee documents (which will automatically require Board review)</td>
<td>10/17/14</td>
<td>Grew out of streamlining the approval process for SOPs and Policies</td>
<td></td>
</tr>
<tr>
<td>12. Revise how TNI refers to its own training courses, prepared and presented to train individuals for the accreditation and peer review (evaluation) processes. Typically, these are courses required in order to perform a specific function, yet are not referred to as a credential, per se, but are designed and presented under contract to TNI and thus implicitly endorsed by</td>
<td>1/23/15</td>
<td>From discussion about language used in SOP 5-101 (TNI-recognized training) versus usage elsewhere as just “TNI training” (e.g., NELAP Evaluation SOP 3-102)</td>
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<td></td>
<td>Changes to Appendix 3 of the QMP should be reflected on the web pages of the various committees as well as in their charters</td>
<td>5/15/15</td>
<td>Random thought by PA</td>
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<tr>
<td>14</td>
<td>Add concept of managing risk to TNI into the committee chair training materials</td>
<td>12/18/15</td>
<td>Came out of internal audit discussions</td>
</tr>
</tbody>
</table>