TNI PT Program Executive Committee
Meeting Summary

November 19, 2020

1. Roll call, approval of minutes and overview:

   Chair, Shawn Kassner, called the TNI PT Program Executive Committee (PTPEC) meeting to order at 1pm Eastern on September 17, 2020 by teleconference. Attendance is recorded in Attachment A – there were 6 members present. Associate Members: Sennett Kim, Tim Miller, Mike Blades, Patrick Selig, Nicole Cairns (until 2pm EST), and Amy DeMarco, Rami Naddy (until 2pm EST), and Jennifer Best (came in at 1:15pm EST).

   The Committee did not meet in October 2020.

   Shawn asked for confirmation that everyone received the agenda and meeting information.

   A motion was made by Carl to accept the September 17, 2020 minutes with an editorial change of "residulal" to "residue" in the Section 4 heading and a spelling correction in Section 5 for fluoride. The motion was seconded by Andy and there was no further discussion. The motion was unanimously approved.

   There were no changes made to the agenda.

2. WETT Expert Committee Input Request

   Shawn pulled up the summary document provided in Attachment D. It includes the WET Expert Committee's suggested changes and Shawn's thoughts.

   Andy asked if the Expert Committee considered standardizing reference toxicants. That would standardize performance of the method across laboratories when running PTs. This would also give better limits. There are currently reference toxicants listed on the current table.

   Rami Naddy's recommendation is to standardarize the reference toxicants. Rami suggested that each year the providers get together and use the same toxicant. One year they might use ammonia. The fish may use zinc. This would have to be a directive from the PTPEC?

   Andy noted that switching toxicants will widen the limits. Should the same toxicant be used at different concentrations?

Shawn noted that there is nothing in Volume 3 that would allow for this. This would need to be amended into Volume 3. Nicole reminded everyone that the FoPT table supercedes the Standard, but this will not work with this issue. It would require a Standard rewrite.

Could the FoPT be reduced to only one toxicant? Andy agreed with this because it would address his concerns above. You can actually start setting good limits.

Shawn commented that it would be a big step to move from three toxicants to one. Rami reminded the group they are trying to reduce variability.

Nicole Cairns asked if 1-3 at the top of Attachment D are lab requirements? Would labs look at FoPT tables for requirements? Are these instructions? Rami commented that most labs wouldn't look a the FoPT tables.

Rami commented that he would stay away from referring to the permit, because permits use lots of variations. PTs need to be run similarly between labs.

Nicole thinks this information belongs in Volume 1.

There will be a joint virtual meeting during the Winter Conference. He suggested looking at Attachment D and stating where the items belong.

Rami asked if putting it in the Volume will get it in the PT Provider instructions. Shawn noted that there is no current mechanism to tell PT Providers what to put in their instructions.

Andy noted that it takes a long time to update a Standard, so maybe it should be put in the FoPT table. He was reminded that most labs don't look at the FoPT table.

Rami noted that WET would be happy to send the PT Providers some recommended instructions to include in their instructions to the labs.

Carl commented that Volume 3 says the PT Providers have to make up the PTs according to the FoPT table and they have to score the PTs according to what is in the FoPT table. He thinks the footnotes need to be changed on the FoPT tables so that there isn't any scoring criteria for hypothesis testing. It is exclusively there for the point estimate testing. The PT Providers should be making instructions accordingly and appropriately. He hoped his thoughts made sense.

Rami tried to work with EPA on this issue. There was a misunderstanding because WET just wanted it dropped to one end point for PTs only.

Bring PT Expert, PTPEC and WET together to finalize a plan. Some items belong in Volume 1 and others belong in WET's module of the Standard. This will be further discussed during the virtual conference.

3. Analyte Request Application (ARA) for PCB Aroclor Identification

Shawn sent Michelle and Rachel the new footnote the PTPEC suggested, but they didn't like it. They want to see instead: A not-acceptable evaluation of any one or more Aroclor identifications constitute a failure to demonstrate profiency for all accreditaed Aroclors reported.

Shawn encouraged people to accept this wording.

A motion was made by Fred to include the language above on the NPW and SCM FoPT tables. The motion was seconded by Jennifer Duhon and unanimously approved after no further discussion.

Shawn thought the effective date could remain the same for these tables. The effective date is in October and it is now November. This will be further discussed at the December meeting. He will check in with the PT Providers and NELAP AC regarding effective dates.

Shawn is still planning to do the survey to reach out to other states beyond just the NELAP states.

4. PFAS ARA

This ARA was submitted by New Hampshire. They provided a list of analytes to add to the FoPT table. The analytes listed in the Excel Spreadsheet were from Methods EPA 533 and EPA 537.1.

Carl asked what they are proposing for acceptance limits? The Subcommittee would need to decide. Michella noted they do a limited number of those analytes for UCMR and EPA uses +/- 40%. They thought that worked well. They chose it because there were spike limits of 30% and 50% in the method, so they went with 40%. Fortified blank would be difficult at the low levels.

Shawn pulled up Section 9.3.1 of SOP 4-107 and reviewed the "checklist" of items to decide whether to accept an ARA.

- AB sponsorship – OK
- Availability of historical data – OK
- Feasability of producing a PT – OK
- Cost impact – We don't have details, but generally these PTs do warrant being used.

The Chemistry FoPT Subcommittee will review the historical data and EPA's +/- 40% criteria to set limits.

A motion was made by Michella to move this ARA request to the Chemistry FoPT Subcommittee. The motion was seconded by Fred and was unanimously approved after no further discussion.

Shawn will send a formal request to the FoPT Subcommittee.

Carl asked if Andy has a contact in DoD regarding their PT data. Michella has a limited set of the analytes and it is a different method. She will send information to Carl after she gets an OK. She will need to do some clean-up of the data and will forward it to Carl if it is OK to pass on.

The FoPT Subcommittee will send a data request to Shawn. They will want as much data as possible.

5. Review Membership

   Membership will be discussed at a special meeting after the Thanksgiving holiday.

6. SOP News

   Ilona noted that TNI is working on an NGAB SOP that will decouple the certificates from the evaluations. More information will be available at the December meeting.

7. Subcommittee Reports

   Chem FoPT – Nothing new to report. Current.

   PT SOP: The Subcommittee will be meeting tomorrow. Still working on SOP 4-101 – Limits.

   Micro: Nothing new. Shawn asked if Legionella shoud be talked about. Should this be added to the table. It is not monitored. No regulatory need.

8. New Business.

   None

9. Action Items

The action items can be found in Attachment B.

10. Next Meeting

The next meeting will be by teleconference on December 17, 2020 at 1pm EDT.

Action Items are included in Attachment B and Attachment C includes a listing of reminders.

Adjourned at 2:42pm Eastern. (Motion: Fred. Seconded: Michella – Unanimous).

Attachment A
Participants
TNI
Proficiency Testing Program Executive Committee

Members	Rep	Affiliation	Contact Information
Shawn Kassner (2023*) (Chair) **Present**	Lab	Pace	shawn.kassner@pacelabs.com
Dixie Marlin (2021) (Vice-Chair) **Absent**	Other	Marlin Quality Management, LLC	marlinquality@gmail.com
Ilona Taunton, Program Administrator **Present**		TNI	tauntoni@msn.com
Carl Kircher (2021*) **Present – on phone**	AB	Florida Department of Health	Carl.Kircher@flhealth.gov
Andy Valkenburg (2021*) **Present**	Other	QASE Inc.	cvalkenbur@aol.com
Jennifer Duhon (2022) **Present**	Other	Millipore Sigma	jennifer.duhon@sial.com
Patrick Garrity (2022) **Present**	AB	Kentucky DEP	patrick.garrity@ky.gov
Michella Karapondo (2022) **Present**	Other	USEPA	karapondo.michella@epa.gov
Fred Anderson (2020*) **Present**	Other	Advanced Analytical Solutions, LLC	Fred@advancedqc.com
Jennifer Bordwell (2020*) **Absent**	Lab	Upper Occoquan Service Authority	jennifer.bordwell@uosa.org
Scott Haas (2020*) **Present**	FSMO	Environmental Testing, Inc.	shaas@etilab.com
Rachel Ellis (2022*) **Absent**	AB	New Jersey DEP	rachel.ellis@dep.nj.gov

Attachment B

Action Items – TNI PT Executive Committee

	Action Item	Who	Date Added	Expected Completion	Comments/ Actual Completion
295	Moved from Backburner: PTPA Evaluation Checklist needs to be updated prior to next round of evaluations. (Originally discussed 8/6/13)	Shawn Ilona		New Date: 5/31/19	In Progress (will use 2016 TNI Standards and current SSAS Standards)
349	Review LAMS/FoPT Table Differences document. Provide comments by email and next meeting. Follow-up on subcommittee reports from WET and the FoPT Table Format Subcommittee.	ALL	4/20/17	4/25/17 2/28/18 – For WET? June 2018 for all tables. New target date: 4/30/19	In Progress WET is still being reviewed. Update 1/23/18: Subcommittee expects to have updated FoPT tables with CAS #'s and LAMS changes by 3/15/18. 2/22/19: Still in progress. 6/21/18: Still working with Rami. 3/21/19: Stacie asked if the group should be working on this while ELAB is working through this. 2/20/20- ONGOING - Waiting for WET.
352	Moved from Backburner (originally discussed 2/20/14) : When new limits are established for the	All	2/20/14	TBD ~~(see #350)~~ ~~*350: Prepare formal*	In Progress – Update of SOP 4-101

	Action Item	Who	Date Added	Expected Completion	Comments/ Actual Completion
	FoPTs, what is considered to be a statistically significant change to the old rates? At what point is it appropriate to question new limits? This lends to the TSS discussion a few months ago. Patrick commented that it would make sense to look at changes to pass/fail rates 6 months after new limits are effective. This possible addition to procedures should be evaluated when updating the limit acceptance SOP.			~~*request to SOP Subcommittee regarding updating FoPT tables and applicable backburner items just moved to the Action Items table (#352, 353)*~~	6/21/18: Gil noted that this SOP will be worked on again at the next meeting. An expected completion date will be given at July meeting.
361	Analyte Code changes needed in LAMS. (TKN)	Maria Dan Hickman	7/20/17	9/30/17	Still need to look into TKN issue. 2/22/18 – Maria will confirm. 10/18/18: Maria still needs to confirm. She just got something. 2/20/20 – Maria will report next meeting.
363	Discuss procedural change in how changes are made to LAMS. Consider notifying PTPEC before relevant changes are made and provide a summary of changes at some frequency.			1/31/17	Will talk to IT about getting this in an SOP. 12/21/17: Maria will follow-up on this. 3/20/18: Maria will check this week.

	Action Item	Who	Date Added	Expected Completion	Comments/ Actual Completion
					6/21/18 – still being worked on. 2/28/19 – Maria will follow-up. 2/20/19 – Maria will take care of.
368	Forward Jerry's question to Chemistry FoPT Subcommittee. (Analyte code change for the non-polar extractable materials.)	Maria	8/24/17	9/1/17	Maria will resend to Carl. 6/21/18 – Maria will send to Ilona. 10/18/18: Maria will send Dan's new info. 11/15/18 – Ilona received the info and needs to review it. (April PTPEC meeting.) 2/20/20- Maria working with Dan Hickman on this.
384	Meet with Dan Hickman to get Analyte Codes and then prepare final DRAFT of Micro DW and WW tables. Send to Jennifer for review.	Maria	4/19/18	5/15/18	MTF version of the analytes have been added to the NPW and DW tables.
389	Present recommended LAMS updates to Dan Hickman.	Maria	5/17/18	5/20/18	FoPT format subcommittee provided recommendations . In Progress. Maria sent him tables this month (2/20/20)
~~400~~	~~Follow-up on subcommittee reports from WET and the FoPT Table Format Subcommittee.~~	~~Maria~~	~~11/15/18~~	~~12/18/18~~	In Progress – combined with 349.

	Action Item	Who	Date Added	Expected Completion	Comments/ Actual Completion
422	Send Isomer ARA data to Carl so Chem FoPT Subcommittee can begin work on this.	Maria	6/20/19	7/17/19	2/20/20 -Pending Needs to still be sent to Subcommittee.
430	Review FoPT Table Titles and website headers to be consistent.	TBD	10/31/19	TBD	2/20/20 - Pending
431	Discuss with IT Committee the need for LAMS updates to be communicated to the PTPEC.	Maria	10/31/19	11/20/19	2/20/20 – Maria will talk to Dan Hickman.
432	DW FoPT Table – Lines 17-26 need to be reviewed with LAMS Administrator. PTPEC is going to use what was originally in the table instead of what is currently in LAMS.	Maria	10/31/19	11/20/19	2/20/20 – Pending. Maria will talk to Dan.
433	Send final version of SOPs 4-102, 4-105, 4-107 and 4-108 to Ilona for finalization and distribution to the Policy Committee.	Maria	1/23/20	2/19/20	2/20/20 – Maria will still do this.
437	Reach out to Sennet Kim and ANAB to confirm there is still an issue related to SCM FoPT table metals footnotes for fixed limits.	Shawn	3/26/20	4/15/20	

	Action Item	Who	Date Added	Expected Completion	Comments/ Actual Completion
438	Reach out to NELAP AC to see if any additional progress has been made in dealing the PCB ARA.	Shawn	3/26/20	4/15/20	
439	Send committee applications to PTPEC Voting Members for review.	Shawn	3/26/20	4/15/20	
440	Invite Rami to next meeting to discuss WET Expert Committee data needs.	Shawn	5/28/20	6/16/20	
441	Send formal requests to Chem FoPT Subcommittee: Xylenes ARA (#422) and Uranium Analyte Number	Shawn	5/28/20	6/6/20	9/17/20 – Carl sent FoPT update to Shawn. To be discussed at 10/15/20 meeting.
442	Send out PCB survey.	Shawn	5/28/20	6/17/20	See Item 445
443	Meet with Michelle Potter and Rachel Ellis to review option 2 language for PCB issue.	Shawn	5/28/20	6/17/20	Update: 6/18/20 - Met and new language was presented to the PTPEC. The PTPEC modified it and sent it back to the NELAP AC for consideration. 9/17/20: Shawn will meet again to discuss new language option.
445	Send PCB survey to Ilona so she can arrange to have it sent out.	Shawn/Ilona	6/18/20		9-17-20: Shawn is working on this and will get to Ilona.

	Action Item	Who	Date Added	Expected Completion	Comments/ Actual Completion
446	Review WET information distributed by Shawn for October meeting.	All	9/17/20	10/15/20	
447	Update Xylenes in FoPT table.	Shawn	9/17/20	10/15/20	See 441.
448	Check in with the PT Providers and NELAP AC regarding effective date for PCB footnote update.	Shawn	11-19-20	12-16-20	
449	Send request to Chemistry FoPT Subcommittee to be working on PFAS ARA.	Shawn	11-19-20	12-16-20	

Attachment C

Backburner / Reminders – TNI PT Executive Committee

	Item	Meeting Reference	Comments
7	Add the Field PT Subcommittee to the limit update SOP during its next update.	3/4/10	In Progress
11	Evaluate how labs are accredited for analytes that co-elute.	5-19-11	
13	Charter needs to be reviewed/updated in November.	Ongoing	
18	Shawn noted that PTPEC should have some specific measurements. This should be passed along to the PTP SOP Subcommittee. Nicole noted that we need to determine which items to measure.	6-29-17	

Attachment D. WETT Suggested Proficiency Testing (PT) Instructions for PT Providers

These are suggested steps to standardize PT instructions for Whole Effluent Toxicity DMR-QA/PT testing to assure and increase the comparability and usefulness of the data generated the studies.

Suggested steps include: These can be included in the FoPT table for requirements.

1. Standardize the required number of replicates per test.
2. Standardize the required number of organisms per replicate.
3. Standardize and reduce the age range of test organisms used in the following tests:
    a. DMR-QA Test code 13 and 14 (EPA Method 2000): Pimephales acute tests reduce age range from 1 – 14 days down to 1 – 5 days with a 24 hr range in age.
    b. DMR-QA Test code 46 (EPA Method 2004): Cyprinodon acute test reduce age range from 1 – 14 days down to 1 – 5 (or other such consensus range) days with a 24 hr range in age.

The following additional suggested steps may be best placed into the TNI standard as requirements for the labs to implement.

1. Require labs to affirm that DMR-QA/PT tests were conducted according to the specified test conditions listed in the PT instructions.
2. Require labs to document if any deviations from required test conditions occurred and whether a deviation invalidated the test or not. Some deviations from test conditions would invalidate a test such as incorrect number of replicates used, incorrect number of test organisms per replicate, incorrect test organism age, etc. would not.
3. Require labs to document each test's test acceptability criteria data, for example:
    a. For the negative laboratory performance control in acute tests, document the % survival.
    b. For the negative laboratory performance control in chronic tests, document the % survival and the mean weight per surviving test organism or the mean 3rd-brood reproduction per surviving C. dubia.
4. Require labs to document the sublethal PMSD evaluation for tests where PMSD bounds are established in the EPA test method and when a chronic NOEC test endpoint was reported.
    a. If a test's PMSD is less than or equal to the lower PMSD bound for the test method reported, then the lab must document that the relative % difference from the control of each test concentration tested and that the % relative difference reported for the NOEC is greater than the lower PMSD bound.
    b. If a test's PMSD is above the maximum PMSD bound for the test method then the NOEC shall not be reported.
5. Require labs to document the evaluation of interrupted dose-response curves for tests where an interrupted dose-response occurs and an NOEC test endpoint is reported. The lab shall document the statistical significance or non-significance of every test concentration subsequently to the PMSD evaluation in #4 above
    a. Lab shall evaluation dose-response curves per EPA 821-B-00-004 Method Guidance and Recommendations for Whole Effluent (WET) Testing (40 CFR Part 136).
6. Require labs to document the source of test organisms used in a DMR-QA/PT test.

SMK Response

I have read 2016 TNI Vol 1 Mod, Vol 1 Mod 7 and the proposed changes to the standard and the FoPT tables. A couple of things to note, the FoPT tables are not just for PTPs anymore. The 2016 Vol 1 Mod 1 references that laboratories shall use the tables for the purposes of reporting data multiple times. So, the 2016 TNI standard directs laboratories to the FoPT tables currently.

Historically, the ABs and the PTPAs (A2LA and ANAB) have frowned upon PTPs providing laboratories more guidance then they thought went beyond instructions; such as helpful hints etc. The items 1 – 3 as listed below are not helpful hints to perform the method, they are an attempt to standardize the test conditions for the sake of statistical evaluation. The WETT expert committee can work with the PTPEC to evaluate whether these should be added to the table. We will then seek the input from the AC, the understanding must be that these criteria are needed to develop study-based statistics that allow for comparability and appropriate evaluations for the WETT labs. I have specific questions surrounding these for statistical impact but will save those for the WETT committee. If these are added to the FOPT table TNI and the PTPs will need to direct people to the table for their review. The Vol 3 specifically allows for the table to supersede it for acceptance criteria determination in section 5.9.2.2 "Analyte- or study-specific evaluation criteria defined in the TNI FoPT Tables shall supersede the criteria in this Section." This was done purposely to allow for more rapid changes to the acceptance criteria.

1. Standardize the required number of replicates per test.
2. Standardize the required number of organisms per replicate.
3. Standardize and reduce the age range of test organisms used in the following tests:
    a. DMR-QA Test code 13 and 14 (EPA Method 2000): Pimephales acute tests reduce age range from 1 – 14 days down to 1 – 5 days with a 24 hr range in age.
    b. DMR-QA Test code 46 (EPA Method 2004): Cyprinodon acute test reduce age range from 1 – 14 days down to 1 – 5 (or other such consensus range) days with a 24 hr range in age.

The remaining standard changes are covered in Vol 1 Mod 1 and Mod 7 to some extent, but let's review. My initial comment is that if the labs are required to document this information for PTs, who is going to evaluate it, deem it acceptable or not, and to what criteria? So there are a few questions surrounding these additions. My presumption is that the ABs would review these as part of their normal assessment.

Item# 1 is in 2016 TNI Vol 1 Mod 1 section 4.2.1 and can be removed as redundant.

Item #2 The requirement to document deviations from a method is required in TNI 2016 Vol 1 Mod 2 section 5.4.1. "Deviation from test and calibration methods shall occur only if the deviation has been documented, technically justified, authorized, and accepted by the customer. "So this is also a redundant clause to the current standard. The other issue I have with this item is who is going to be the arbiter of what method deviations are technically acceptable or not to the test results for the PTs. This must fall to the ABs as the PTPs do not have the technical expertise to evaluate these deviations nor is this their role.

Items# 3 – 6 are somewhat addressed in Mod 7 but nowhere near as much as here. I do believe that these are great QC tacking and practices that labs should be performing all the time. And perhaps these should be amended into Mod 7!? Again, I am going to ask what is the purpose, evaluation criteria, and who is reviewing the data? It also appears to be a great place to start a corrective action for a PT failure. These in general are potentially great improvements to the WETT program and standard, I am not sure that Vol 1 Mod 1 is the place for these and just be used for PT.

The next steps should be for Kirstin and I to validate what our committees think if these changes and return that information to this group. Everyone took the time to ask good questions, provide good answers and it is important for Kirstin and I to review these between us and then with our individual committees.

Regardless, I would also like Rami and the WET Expert committee to evaluate whether the items 3 – 6 should be adopted as the normal QC practices for Mod 7 or for corrective action investigation for failed PTs.