

**Quality System Expert Committee (QS)
Meeting Summary**

April 9, 2018

1. Roll Call:

Paul Junio, Chair, called the meeting to order at 1pm Eastern on April 9, 2018 by teleconference. Attendance is recorded in Attachment A – there were 8 members present. Associate Members present: Silky Labie, Eric Denman, Pepa Sassin, Eric Davis, Carl Kircher and Jenna Majchrzak (New Associate – NJ DEP).

The March minutes were distributed by email. A motion was made by Earl to accept the 3/12/18 minutes as written. The motion was seconded by Shari and unanimously approved.

2. Standard Interpretation Request (SIR)

Paul received SIR 323 from Lynn, but though the LASEC decided this is not an SIR, they forwarded it so the concern could be added to the Parking Lot for consideration when the Standard is updated.

SIR 323:

Volume and Module (eg. V1M2)	V1M2
Section (eg. C.4.1.7.4)	5.10.11 C)
Describe the problem:	
This section requires "Any non-accredited tests shall be clearly identified as such to the client when claims of accreditation to this Standard are made in the analytical report or in the supporting electronic or hardcopy deliverables."	
Many laboratories hold accreditation to the TNI Standard from multiple organizations. Not all of these organizations are state accreditation bodies. In addition, TNI has now recognized non-governmental ABs. A strict reading of this clause would be only tests which are not accredited by ANY accrediting body, recognized or not, state or not, would need to be identified in the report. Is this correct? If this is not the intent, the Standard needs to be revised.	

Paul had the following initial comments he sent by email:

You can't make a Standard apply when it isn't called for. For example, if someone is doing work in a non-TNI state, a TNI AB can't make any requirements on work done by a lab certified by that AB if the work isn't being done for the purposes of that AB. Of course, it's difficult to write a rule like that (This rule doesn't apply when it doesn't apply).

In terms of this specific request, it seems like you must note in some manner if any tests were performed and reported that aren't accredited for the laboratory in question by the applicable AB.

Carl noted that it would be difficult to respond to this with a one size fits all response. In the course of 5 years of keeping that test report, who knows if the client will eventually turn it in to an AB that was not the original recipient.

Silky noted that when a lab makes a claim about accreditation, it seems to her the lab has the responsibility to designate what they are and are not accredited to. This is regardless of whether the client cares or not.

Paul's comment that there will not always be an agreement between the TNI accreditation and the non-TNI accreditation. The TNI AB should have not claims on data only being reported to a Non-TNI AB. This is what he mentioned in his email.

Earl asked if the purchaser of the data has some responsibility to make sure they are getting what they need. If it needs to be done by an accredited lab, they need to be sure the lab is accredited.

Ilona commented that if the lab reports the data to a Non-TNI AB but leaves the TNI accredited lab logo on the report or references the TNI accreditation, then the lab is required to follow the TNI standard in reporting the results. They would need to list any work that was done that is not compliant to the TNI Standard if the report has the logo or reference to the lab's TNI accreditation. Silky and Paul agreed.

Carl commented that if Minnesota has a regulatory requirement that results reported in Minnesota need to be performed by a Minnesota accredited laboratory, then the results can be rejected if the lab reporting results is not accredited. Earl and Paul noted that this is a different situation. A lab needs to state its accreditation status in the state the lab is submitting the data to.

Shari doesn't put the symbol on the report, but lists all their accreditations in the report. She will take a look at a report to make sure it is clear which accreditation applies. No logos/symbols are used. There is some sort of a disclaimer that not all of the certifications apply to the data that is being reported.

Ilona noted this SIR was sent for information purposes and the committee is not necessarily being asked to solve the inquirers issue today.

Paul asked if Shari can send a copy of a report so he can use it as an example to approach the NELAP AC as a possible solution to the issue submitted.

We don't need an answer today, but he wants the committee to start thinking about it. It has been added to the Standard Update Parking Lot.

Jessica gave another example where a contract lab sent her a report where all the certification are listed and analytes are reported with a certification code that matches up with the list of certifications. It is clear which certification(s) is relevant to the data being reported. An impressive way to report this. Paul would like to find alternative solutions that are not as complex.

3. ISO/IEC 17025 and Revision to Module 2

Paul pulled up the new ISO/IEC 17025:2017 language with the intent of continuing to add the TNI language. The intent is to prepare a document that can be used for the next TNI Standard revision.

The committee started with Section 5.4.4. Section 5.4.4, 5.4.5 and 5.4.6 is an example of where language probably needs to be pulled from ISO/IEC 17025:2005. The language was not included in the 2017 version of ISO/IEC 17025, so the language is lost. It is not TNI language it is ISO/IEC 17025: 2005 language.

The tracking for the sections can be found in Attachment D.

4. Action Items

A summary of action items can be found in Attachment B.

5. New Business

None.

6. Next Meeting and Close

The next meeting is planned for May 14, 2018 by teleconference from 1-3pm. Paul will be out the week before, so the agenda will be early or it will go out the morning of May 14th. Ilona will send a Webex invitation the morning of the meeting.

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

Paul adjourned the meeting at 2:11pm Eastern. (Earl - motion , Jessica – second, unanimous approval).

Attachment A

**Participants
Quality Systems Expert Committee (QS)**

Member	Organization	Expiration	Representation	Email
Paul Junio (Chair) Present	Northern Lake Service	2019	Laboratory	paulj@nlslab.com
Jessica Jensen (Vice Chair) Present	Meridian Analytical Labs	2021	Laboratory	jessica.j@meridiantesting.com
Kristin Brown Present	Utah DOH	2021	Accrediting Body	kristinbrown@utah.gov
Lizbeth Garcia Present	Oregon Dept. of Environmental Quality	2019*	Accrediting Body	LIZBETH.GARCIA@dhsosha.state.or.us
Kathi Gumpfer Absent	ChemVal Consulting	2021*	Other	kgumpfer@chemval.com
Chris Gunning Present	A2LA	2021	Accrediting Body	cgunning@a2la.org
Earl Hansen Present	Retired	2021*	Laboratory	papaearl41@hotmail.com
Sara Hoffman Absent	Kansas DHE	2019*	Accrediting Body	sara.hoffman@ks.gov
Jacob Oaxaca Absent	California State Water Board	2019*	Accrediting Body	Jacob.Oaxaca@Waterboards.ca.gov
Shari Pfalmer Present	ESC Lab Sciences	2021	Laboratory	spfalmer@esclabsciences.com
Dale Piechocki Absent	Eurofins Eaton Analytical	2020	Laboratory	DalePiechocki@eurofinsUS.com
William Ray Absent	William Ray Consulting	2020*	Other	Bill_Ray@williamrayllc.com
Matt Sowards Absent	ACZ Laboratories, Inc.	2020	Laboratory	MattS@acz.com
Michelle Wade Present	Wade Consulting	2021*	Other	michelle@michellefromks.com
Alyssa Wingard Absent	NAVSEA LQAO	2021*	Other	alyssa.wingard@navy.mil
Ilona Taunton (Program Administrator) Present	The NELAC Institute	n/a	(828)712-9242	ilona.taunton@nelac-institute.org

Attachment B

Action Items – QS Expert Committee

	Action Item	Who	Expected Completion	Actual Completion
25	Follow-up with Bob Wyeth and Jerry Parr about experience vs. course hours for Technical Directors.	Paul	TBD	
26	Provide in writing, thoughts regarding options for Technical Director approval.	Robin	TBD	
38	Continue SIR 246 and 296 discussions.	All	TBD	
40	Get PT root cause analysis example from Scott Hoatson.	Paul	8/31/17	
45	Review Ch 1 Application section for the use of “shall” and “may”. Are uses correct?	Paul, Sara	11/20/17	
49	Send response to SIR #321 to Lynn and LASEC.	Paul	3/19/18	Complete (3/13/18)
50	Send table of contents from ISO/IEC 17025:2017 to Paul.	Chris	3/19/18	Complete
51	Send example of Shari’s report to NELAP AC to confirm format of listing all certifications without logo’s is an acceptable process to report certifications for work being done.	Shari Paul	5/11/18	

Attachment D:

TNI Language - 2016	ISO 17025- 2017 Sec 4	ISO 17025- 2017 Sec 5	ISO 17025- 2017 Sec 6	ISO 17025- 2017 Sec 7	ISO 17025- 2017 Sec 8	Where is it now?	Could be
4.1.7.1		4	3		1	5.6	5.2, 6.2.4, 5.5 b
4.1.7.2		4	4			5.6	5.2, 6.2.4, 5.5 b
4.2.8.1	2	2		1	4	4.1.5	
4.2.8.2		5			4	6.2.4	
4.2.8.3					9	8.2.1	5.5c, 8.2.4
4.2.8.4		5		1	2	8.2.1	5.5c, 8.2.4
4.2.8.5				1	8	7.2.1.2	8.2.2, 7.2.1.1
4.5.5			2	7		6.6.2 b	6.6.3d
4.11.6				2	8	8.7.4	8.7.0
4.11.7						8.7.16	8.7.4
4.13.3	1			1	7	7.5.1	7.5.2
4.14.5					8	8.8.3	8.8.1, 8.8.2
4.15.3					8	8.9.1	
4.16		2		4	1	4.1.5	4.2
5.2.6.1		3	5			6.2.2	6.2.6
5.2.6.2		2	7			6.2.2	6.2.6
5.2.7	2	4	2			4.1.5	6.2.5
5.4.4	1			4	1		points to inclusion of ISO language
5.4.5	1			7			points to inclusion of ISO language
5.4.6				7			points to inclusion of ISO language
5.5.13.1		1	2	3		6.4.6	
5.6.4.1		1	3	4		7.7.1	7.7.2
5.6.4.2		1	5	1		7.7.1	7.7.2
5.7.4			1	6		7.7.3	
5.8.5			1	7		7.4.2	
5.8.6				8		7.4.1	7.4.3
5.8.7.1		1		7		7.4.3	
5.8.7.2				9		7.4.3	
5.8.7.3				8		7.4.3	
5.8.7.4				9		7.4.3	
5.8.7.5				7	1	7.4.3	
5.8.8		1		7		7.4.2	7.4.5
5.8.9				8		7.4.1	7.4.4
5.9.3				6	2	7.7.1	7.2.1.5
5.10.10				9		7.8.2.1	