

TNI Stationary Source Audit Sample Expert Committee (SSAS) Meeting Summary

January 19, 2021

1. Roll call and approval of minutes:

Chair, Sheri Heldstab, called the TNI SSAS Executive Committee meeting to order by teleconference on January 19, 2021, at 2pm Eastern. Attendance is recorded in Attachment A – there were 7 committee members present. Associate Member: Carl Kircher.

The December meeting minutes were distributed for Committee Review. A motion was made by Tom to approve the December 7, 2020 minutes as amended (editorial changes, spelling corrections). The motion was seconded by Mike S. and unanimously approved.

2. Announcements

- SOP 6-100 is final.
- Must vs Shall. One of the expert committees had a member that shared some legal guidance that they are not the same. “Must” is considered more definitive than “Shall”. TNI is defining these terms as the same, but committees are also moving more language over to “must”. Gregg noted that he agreed that there is some wiggle room with “shall” that doesn’t exist with “must”.
- The updated Charter is due March 30th. How about March 1st for an extra meeting? No one on the call had a conflict with that date. The most recent version of the Strategic Plan is available on the TNI website. Review of the 2021 goals may be helpful.
- The membership years are correct in Attachment A of the minutes.

3. SOP 6-101: SSAS Table Management

Sheri noted the format of the CRA is fine on the website, so Sheri corrected it in the SOP instead. No need to follow-up with a new form for William to post.

Tom suggested that the document should change “shall” to “must”. Gregg would prefer that too because he does not agree that “shall” and “must” are the same. Sheri changed all “shall” to “must”.

A motion was made by Tom to approve SOP 6-101 as sent with the agenda and a change of “shall” to “must”. The motion was seconded by Gregg and unanimously approved.

Ilona will wait for a final copy of the SOP and submit it to the Policy Committee for review.

4. Summary of Recommended Changes to the Standard

Sheri asked everyone to review the justifications. Updates were made directly in the document (see Attachment C).

Ilona will add a question to the PTPEC Action Summary to discuss the relationship between PTPEC and SSAS.

Sheri asked if someone could volunteer to monitor chat during the public webinar. Tom is willing to do this. Need to decide how to communicate questions or chat comments during the webinar.

Ilona will send Sheri an example template for the webinar presentation and draft posting language for the TNI website and meeting announcement.

5. New Business.

None.

6. Action Items

Action items were updated and can be found in Attachment D.

7. Next Meeting

The next meeting will be March 1, 2021 at 2:30pm Eastern. Ilona will send out a WebEx invitation the day of the meeting.

The Public Webinar will be on February 16, 2021 at 2pm Eastern. All Committee members will be automatically sent an invitation.

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

Sheri adjourned the meeting at 3:30 pm Eastern. (Motion: Mike S. Second: Gregg. Unanimous)

Attachment A

Participants

TNI

Stationary Source Audit Sample Expert Committee

Members	Rep	Affiliation	Contact Information
Sheri Heldstab (2024) CHAIR Present	Lab	Chester LabNet	sheldstab@chesterlab.net
Tom Widera (2023) VICE-CHAIR Present	Lab	Pace Analytical	Thomas.widera@pacelabs.com
Ilona Taunton, Program Administrator Present		TNI	Ilona.taunton@nelac-institute.org
Ed MacKinnon (2022) Present	Other	TRC Env Corp (Stationary Source Tester)	emackinnon@trcsolutions.com
Gregg O'Neal (2023) Present	AB	NC DAQ	gregg.oneal@ncdenr.gov
Katie Gattis (2023) Absent (Leave)	Lab	Element One Inc.	katie.gattis@e1lab.com
Michael Klein (2023) Present (joined 2:24pm)	AB	NJ DEP	michael.klein@dep.nj.gov
Michael Schapira (2024) Present	Lab	Enthalpy Analytical LLC	Mike.schapira@enthalpy.com
Bill Guyton (2023*) Absent	Other	ERM (Tester)	bill.guyton@erm.com
Brian Miller (2023*) Present	Other	ERA (Provider)	brian_milller@waters.com
Patrick Selig (2024*) Absent	Other	ANAB (AB/PTPA)	pselig@anab.org

Attachment C:

TNI SSAS EXPERT COMMITTEE: OUTLINE OF CHANGES AND IMPROVEMENTS

SSAS Volume 1: Module 1 (Providers)

The revised TNI SSAS Volume 1 Standard combines the requirements for Providers audit samples (Module 1), the Provider Accreditor requirements (Module 2) and the Participant requirements (Module 3).

Most of the normative language by The NELAC Institute (TNI) that is specific for the SSAS program has been retained or revised for clarity.

Section	Current Text	Proposed Text	Justification	Comments
6.3.1	Providers shall prepare audit samples that are...	Audit samples prepared by Providers shall be...	Some Testers were interpreting the original verbiage to mean that Providers were required to manufacture audits for all methods - clarification of ambiguity.	
[6.3.6]	[new text]	6.3.6 The Provider may produce the audit in “whole sample” form (i.e., to be analyzed as received) or as a concentrate (i.e., requiring dilution or other preparation prior to any analytical steps being performed on the audit).	Clarifying statement which impacts Volume 1, Module 3.	
6.4.1 NOTE	NOTE: A Provider may, upon request, supply samples, similar in composition to audit samples, which have concentrations outside the ranges in the SSAS Table. By definition, such samples would not be considered audit samples, and are, therefore, outside the scope of this Standard.	[struck from module]	This text came from the water/wastewater PE program and does not apply to SSAS Program.	

Section	Current Text	Proposed Text	Justification	Comments
6.5 NEW	[new text]	6.5 Audit Sample Availability		
6.5.1 NEW	[new text]	6.5.1 At any given time, Providers shall have available a sufficient number of batches to ensure that the laboratories are adequately challenged.	This is a unique necessity for the SSAS Program. Water/Wastewater PE studies are conducted in an entirely different manner, and the language borrowed from their requirements was insufficient for the SSAS Program's needs.	
6.5.2 NEW	[new text]	6.5.2 Each SSAS table concentration range may be split into three groups, the lowest third of the range (low), the middle of the range (mid), and the high end of the range (high).	Providers were struggling to meet the high demand for low concentration audits without having to also produce large numbers of lots of mid- or high-concentration audits that were not being used. By breaking the concentration ranges into three categories, the Providers can manufacture more lots of the concentration levels in high demand.	
6.5.3 NEW	[new text]	6.5.3 Each sub-range (low, mid, high) if used, shall have a minimum of (X) unexpired batches available at all times.	Ensures that all concentration levels have adequate supply to meet demand at any point in time.	
6.5.4 NEW	[new text]	6.5.4 Any sub-range, if used, which has greater than (X) requests in a rolling 12 month period must have additional batches made to provide the adequate challenge for laboratories. One batch per (X) requests in a rolling 12 month period	Ensures that all concentration levels have adequate supply to meet demand at any point in time.	

Section	Current Text	Proposed Text	Justification	Comments
		is sufficient to meet this requirement.		
6.5.5 NEW	[new text]	6.5.5 All sub-range batches, if used, must have certified values sufficiently different from one another such that an adequate challenge to laboratories can be assured.	Decreases the likelihood that a lab will receive multiple audits with the same concentration.	
8.2	The Provider shall provide instructions with each audit sample shipment, describing:	8.2.a) UNCHANGED		
8.2.b) NEW	[new text]	b) that the audit sample be prepared and analyzed per the applicable methods in the SSAS Table;	Previously, the instructions accompanying the audit sample said to "analyze the audit" and omitted the word "preparation". As a result, some labs were not following the preparation steps of the method(s), and simply diluting the audit and running it with no preparation. This is a particular issue with Method 29, which has a lengthy and convoluted preparation prior to analysis.	

Section	Current Text	Proposed Text	Justification	Comments
8.2.c) 2	2) The audit sample(s) I am reporting was/were analyzed in the same laboratory in keeping with module 3 of this standard under the same calibration, utilizing the same quality control standards, by the same analysts following audit sample instructions as the stationary source test samples.	2) The audit sample(s) I am reporting was/were analyzed in the same laboratory following the requirements of module 3 of this standard.	<p>This text was originally borrowed from the water/wastewater PE program.</p> <p>It is not always possible for the laboratory to analyze the audit "under the same calibration, utilizing the same quality control standards, by the same analysts following audit sample instructions as the stationary source test samples." For instance, if 3 samples out of 12 need to be diluted in a different run with a different calibration, does the audit sample need to be run with those 3 diluted samples also? And if so, which audit result gets reported?</p> <p>By referring back to Module 3 of the SSAS module (laboratory requirements), the new text removes this ambiguity.</p>	
	[editorial changes]	other sections in 8.2 renumbered in keeping with above changes		
8.3 NEW	[new text]	8.3 The Provider shall provide Data Reporting forms that will include:	This requirement should alleviate some of the issues encountered by laboratories and regulators with regards to:	
8.3.a) NEW	[new text]	a) name of the Facility;	Not knowing which project the audit is associated with	

Section	Current Text	Proposed Text	Justification	Comments
8.3.b) NEW	[new text]	b) name of the Tester;	Not knowing which client the audit is associated with	
8.3.c) NEW	[new text]	c) name of the laboratory performing the analysis; and	Not knowing which laboratory the audit is associated with/laboratories receiving audits intended for different labs	
8.3.d) NEW	[new text]	d) name of the Regulatory Agency.	Regulators receiving audit results for projects being overseen by a different regulator.	
8.4.j	send an audit sample from the same manufacturing lot to the same Facility or Laboratory consecutively, or more than once in a calendar month, or more than eight (8) times in a twelve-month period.	[struck from module]	<p>This is a carryover from the water/wastewater PE program and is outside of the control of the Provider, who can only monitor which Tester receives a given lot of audit.</p> <p>The Tester is responsible for the timing by which the laboratory receives a given audit.</p> <p>Most labs are working with more than one Testing Company, who are not coordinating their audit samples with each other.</p>	
10.2.1 NEW	[new text]	10.2.1 Acceptance limits shall be calculated by the provider per the current SSAS Table and shall be rounded to three (3) significant figures.	Clarifying significant figure usage in providing acceptance limits.	

Section	Current Text	Proposed Text	Justification	Comments
10.2.2 NEW	[new text]	10.2.2 The Provider shall evaluate audit sample results “as reported” by the laboratory.	Not all laboratories report to 3 significant figures. The Provider is not responsible for acceptance or failure based on the number of significant figures reported by the laboratory.	
	[editorial changes]	renumbered to 10.2.3 - 10.2.6	editorial change	

TNI SSAS EXPERT COMMITTEE: OUTLINE OF CHANGES AND IMPROVEMENTS

SSAS Volume 1: Module 2 (Provider Accreditors/Accreditation)

The revised TNI SSAS Volume 1 Standard combines the requirements for Providers audit samples (Module 1), the Provider Accreditor requirements (Module 2) and the Participant requirements (Module 3).

Most of the normative language by The NELAC Institute (TNI) that is specific for the SSAS program has been retained or revised for clarity.

Section	Current Text	Proposed Text	Justification	Comments
1.2.a)	The production and supply of stationary source audit samples (hereafter referred to as "audit samples") that challenge the critical components of each source test procedure, from sample collection to sample analysis;	add footnote [1]: [1] If the provider does not or cannot create a gaseous audit capable of challenging the test procedure from sample collection to analysis, an audit may be produced in liquid form to challenge the analytical component of the method. The liquid audit must contain the same analyte in the same or similar matrix as the final collected sample.	Recognizes that, at present, not all audits are capable of being used to challenge the sample collection component of all methods for which audits exist. While this is still the goal of the audit program, it is not fully implemented yet.	

Section	Current Text	Proposed Text	Justification	Comments
4.1	The PT Executive Committee shall determine the content of the approved TNI SSAS Program...	<p>The PTP Executive Committee in conjunction with the SSAS committee shall determine the content of the approved TNI SSAS Program...</p> <p>OR</p> <p>The SSAS Expert Committee, in conjunction with the PTP Executive Committee, shall determine the content of the approved TNI SSAS Program...</p> <p>Discuss w/PTPEC</p>	Originally, the PTEC had oversight over the SSAS Audit program. The SSAS Expert Committee was formed upon realization that SSAS audits were quite different from PT samples/programs.	

TNI SSAS EXPERT COMMITTEE: OUTLINE OF CHANGES AND IMPROVEMENTS

SSAS Volume 1: Module 3 (Stakeholders)

The revised TNI SSAS Volume 1 Standard combines the requirements for Providers audit samples (Module 1), the Provider Accreditor requirements (Module 2) and the Participant requirements (Module 3).

Most of the normative language by The NELAC Institute (TNI) that is specific for the SSAS program has been retained or revised for clarity.

Section	Current Text	Proposed Text	Justification	Comments
1.3.b)	The final acceptance of a Facility's stationary source air emissions test results by the Regulatory Agency is outside the scope of this Standard	The final acceptance of a Facility's stationary source air emissions test results by the Regulatory Agency is outside the scope of this Standard, and is the responsibility of the Regulatory Agency involved in the Testing event for a given Facility.	clarifying responsibility of Regulatory Agency regarding final acceptance of audit results.	
3.2	[new text]	Concentrated Audit: An audit requiring dilution or other preparation prior to the beginning of any analytical steps.	necessary to differentiate between audit preparation and method-required sample preparation (dilution of audit versus preparation of field samples)	
3.15	[new text]	Whole Sample Audit: An audit which requires no further preparation prior to the beginning of analysis.	necessary to differentiate between audit preparation and method-required sample preparation (dilution of audit versus preparation of field samples)	
4.1 & 4.2	[multiple throughout section 4.1 & 4.2]	changed "Facility" to "Facility or Designee" where applicable.	Most of the activities discussed in Section 4.1 are generally carried out by the Testers, not directly by the Facilities.	

Section	Current Text	Proposed Text	Justification	Comments
Figure 1	Figure 1 & Figure 1 Notes	moved to end of document	editorial change for ease of formatting and readability	
4.1.4	The Facility shall receive the evaluation of the audit sample results from the Provider.	The Facility or Designee, Regulatory Agency, the Stationary Source Test companies, and the Laboratories participating in the stationary source tests shall receive the evaluation of the audit sample results from the Provider.	Results are already being sent to this list of entities. Change in text makes Standard match actual practice.	

Section	Current Text	Proposed Text	Justification	Comments
4.2.2	<p>The Regulatory Agency shall receive and review the Facility's request for audit samples and may provide input regarding the audit samples to the Facility and to the Provider within fifteen (15) calendar days after receiving notice and information about the order from the Provider. It is the responsibility of the Regulatory Agency to evaluate the method, container, matrix, analytes, and requested analyte requested value proposed for the audit sample and to choose, in consultation with the Provider, the analyte values that best audit the test and are blind to the other Participants. If any aspect of the audit sample, except the analyte value, must be changed, the Regulatory Agency shall inform the Facility as well as the Provider so that the Facility can also change the order as the Regulatory Agency requires.</p>	<p>The Regulatory Agency shall receive and review the Facility's or Designee's request for audit samples and may provide input regarding the audit samples to the Facility or Designee and to the Provider within fifteen (15) calendar days after receiving notice and information about the order from the Provider. It is the responsibility of the Regulatory Agency to evaluate the method, container, matrix, analytes, and requested analyte requested concentrations proposed for the audit sample and to choose, in consultation with the Provider, the analyte concentrations that best audit the test and are blind to the other Participants. If any aspect of the audit sample, except the analyte value concentration, must be changed, the Regulatory Agency shall inform the Facility or Designee as well as the Provider so that the Facility or Designee can also change the order as the Regulatory Agency requires.</p>	<p>(Facility changed to "Facility or Designees")</p> <p>"value" changed to "concentration", as the two are not synonymous. Audit samples are ordered based upon concentrations.</p>	

Section	Current Text	Proposed Text	Justification	Comments
4.2.4	The Regulatory Agency shall receive and review the stationary source test results and the audit sample results from the Facility and Laboratory (see Section 4.4.2), and may provide input to the Facility after the test.	The Regulatory Agency shall receive and review the stationary source test results and the audit sample results from the Facility or Designee and Laboratory (see Section 4.4.2), and may provide input to the Facility or Designee after the test.	Clarification that the sample results and audit results are submitted to the regulators by the Facility or Designee AND by the laboratory. Lab is required to report to Tester, Provider, and Regulator simultaneously.	
4.3.2	The Stationary Source Tester shall receive the audit samples from the Provider or the Facility, have them available at the test site during testing, and add them to the batch of field samples sent for analysis, unless otherwise authorized by the Regulatory Agency.	The Stationary Source Tester shall receive the audit samples from the Provider or the Facility, have them available at the test site during testing, store the audit samples in accordance with the Provider's instructions while in possession of the audit samples, and add them to the batch of field samples sent for analysis, unless otherwise authorized by the Regulatory Agency.	Added in requirement that audits be stored properly while in the custody of the Tester, as failure to do so may invalidate the audit, and neither the lab nor the provider have control over the actions of the Tester.	

Section	Current Text	Proposed Text	Justification	Comments
4.4.1	<p>The Laboratory shall receive and analyze the stationary source test samples and the audit samples from the Stationary Source Tester. The Laboratory shall handle, store, and analyze each audit sample in the same batch and in the same manner as the stationary source test samples for the test method and analyte being audited. The Laboratory shall prepare each audit sample for analysis according to the instructions provided by the Provider. The Laboratory shall use the same personnel, sample tracking, sample storage, preparation, analysis methods, equipment, materials, standard operating procedures, calibration techniques, quality control procedures, and quality control acceptance criteria for the stationary source test samples and the audit samples.</p>	<p>The Laboratory shall receive and analyze the stationary source test samples and the audit samples from the Stationary Source Tester. If necessary, the Laboratory shall prepare each audit sample according to the instructions provided by the Provider prior to beginning any analytical steps, including method-specific preparatory steps, if any.</p>	<p>Broken into 3 paragraphs to remove ambiguous references to "prepare" & "preparation".</p>	

Section	Current Text	Proposed Text	Justification	Comments
4.4.1		The Laboratory shall handle, store, prepare and analyze each audit sample in the same batch and in the same manner as the stationary source test samples for the test method and analyte being audited.	Broken into 3 paragraphs to remove ambiguous references to "prepare" & "preparation".	
4.4.1		The Laboratory shall use the same personnel, sample tracking, sample storage, sample preparation and analysis methods, equipment, materials, standard operating procedures, calibration techniques, quality control procedures, and quality control acceptance criteria for the stationary source test samples and the audit samples.	Broken into 3 paragraphs to remove ambiguous references to "prepare" & "preparation".	
4.4.2 - 4.4.5	editorial changes	renumbered to 4.4.4 - 4.4.7	editorial change	

Section	Current Text	Proposed Text	Justification	Comments
6.0	When a Facility, Stationary Source Tester, or Laboratory has a question or complaint regarding an audit sample or Performance Evaluation from the Provider, and when the Facility, Stationary Source Tester, or Laboratory has sufficient cause to question the validity of that audit sample or performance evaluation...	When a Facility, Stationary Source Tester, or Laboratory has a question or complaint regarding an audit sample , and when the Facility, Stationary Source Tester, or Laboratory has sufficient cause to question the validity of that audit sample...	removed references to "Performance Evaluation" because PE samples apply to water/wastewater, not to the SSAS Program.	
Figure 1	[moved to end of document]	Figure 1 & Figure 1 Notes	editorial change for ease of formatting and readability	

Attachment D: SSAS Committee Action Item Summary – 2020

Item	Task Description	Document Number	TNI Contact	Task Added	Start Date	Complete Date	External Communications	Comments
1	Find out which group in EPA is helping the Microbiology FoPT Subcommittee crunch numbers for limits.	SOP 6-100	Sheri	2/12/18	3/19/18	4-20-20		No longer needed. Working with Shawn Kassner and Carl Kircher from Chemistry FoPT Subcommittee.
2	Prepare general summary of what the committee plans to change in the current Standard and why. First DRAFT. – For Public Webinar	SSAS Vol 1 All Modules	Sheri	4/23/18	4/23/18		None	In progress. [discussed and agreed to “on hold” again 2/18/20] [On hold until SOP 6-100 & 6-101 completed]
3	Send ideas on Storage Condition issue to Tom so he can summarize them for an agenda item in July.		Committee	6/18/18			Brian Miller	[On hold until SOPs 6-100, 6-101, & 3 modules completed]
4	Develop SOP 6-100: Conducting Pilot Studies for New Concentration Ranges and Acceptance Limits for Source Sampling Audit Samples	SOP 6-100	Committee	1/22/19	5/7/18	5/4/20	None	4/6/20: Final Draft review by Committee – sent clean and track changes copy. 4/20/20 – completed review, fix pagination and double check glossary, then send to committee for vote on 5/4/20. Unanimous Committee vote in the affirmative on 5/4/20. Ilona sent to Policy, Policy finished review 9-4-20.

Item	Task Description	Document Number	TNI Contact	Task Added	Start Date	Complete Date	External Communications	Comments
5	Get CRA posted on TNI website.	SOP 2-104	Tom/Ilona	8/6/19	8/6/19	Complete	TNI IT	Request resent on 1/6/20.
6	Request Extension for Tom and Katie's membership terms.		Tom/Ilona	12/16/19	12/16/19	1/7/20	Paul Junio – CSDP Chair	
7	Develop SSAS Audit Sample Provider Accreditor Checklist for evaluation.		Tom/Ilona	1/6/20	1/6/20	1/10/20		Checklist complete 1/10/20. Submitted to Ilona.
8	Work with Shawn Kassner and Carl Kircher on calculations for audit sample limits.	SOP 6-100	Sheri	1/21/20	1/21/20	5/4/20		2/18/20: Shawn doesn't have formula but will help with consistency between SOPs 4-101 and 6-100. 3/2/20: Need to meet with Carl and Shawn to discuss to discuss statistics in SOP 6-100. 4/6/20: Send Appendix A to Carl for review. 4/20/20: Did not hear back from Carl/Shawn/Eric review request. 5/4/20: Still have not heard back. 5/4/20: Committee voted to adopt SOP 6-100. Ilona to send to Policy Committee.
9	Poster for SES Conference		Committee	2/3/20	2/6/20	3/27/20	Tatum Strickler of SES	Poster abstract submitted to SES 2/6/20 Poster submitted to SES 3/14/20 FAQ completed 3/27/20 (2020 conference canceled 3/15/20) Documents will need to be updated for 2021 Conference – move to Backburner.

Item	Task Description	Document Number	TNI Contact	Task Added	Start Date	Complete Date	External Communications	Comments
10	Presentation for the Air Section of the NEMC conference in August re: current SSAS activities.		Sheri	2/6/20	2/6/20	8/4/20	Deb Gaynor of NEMC Maria Freidman of TNI	Abstract submitted 2/7/20 pptx file submitted 7/13/20 Presented on 8/4/20
11	Current charter needs to go up on TNI website.		Tom/Bob Wyeth	2/18/20	2/18/20	5/11/20	William	Bob found updated charter dated 5/26/17. Ilona emailed William for update 4/20/20. Website updated between 5-4-20 and 5-11-20.
12	Short blurb to SES newsletter re: SSAS activity.		Sheri	1/22/20	3/2/20	3/27/20	Yves Tondeur of SES	submission date to hit 1Q20 SES Newsletter 4/1/20 3-27-20 submitted. 4-15-20, gone to print.
13	Review and update SOP 6-101: SSAS Table Management	SOP 6-101	Committee	1/21/2019	5/9/18		Sent to Policy Committee for review.	In Progress – renewed project 5/4/20 Ilona to email Mei Beth to ask about new analyte codes for SSAS table. On hold until IT completes SOP. Next Policy meeting is 11/6/20. 7/6/20. IT Committee reviewing/updating SOP on analyte codes 9-21-20 (discussed in Policy 9-18-20). Not necessary – reworded in SOP. 7/6/20: Include checklist at the end of the SOP for what the committee needs to review/consider. 11/16/20. SOP review complete. Will be voted on during December meeting. 12/7/20. Completed and will be voted on 1/19/20. 1/19/21: SOP 6-101 finalized and ready to go to Policy.

Item	Task Description	Document Number	TNI Contact	Task Added	Start Date	Complete Date	External Communications	Comments
14	Review SSAS table control limits	SSAS Table	Committee	2/18/20				[On hold until after SOPs & Modules sent to respective committees for approval]
15	Update SSAS Charter	SSAS Charter	Sheri	2/18/20				[On hold until after TNI's Strategic Plan is finalized.] 7/20/20: SOP 6-101 5.3.3. Management of the SSAS table is part of the responsibilities of the committee. Needs to be added to the charter.
16	Send Sheri a copy of "to do list" that other committees use.		Ilona	3/2/20	3/2/20	4/20/20		This document converted from Sheri's Excel "to do" list to match other committees' Action Tables.
17	Consider contacting PT Providers about providing Audit Samples after more procedures and modules are complete.		Committee	2/18/20			PT Providers	[On hold until after SOPs & Modules sent to respective committees for approval]
18	Vote in new membership. Seek approval from CSDP Chair.		Committee	4/20/20	4/20/20	5/1/20		Voted in Bill Guyton. Approval from CSDP EC 5/1/20
19	1Q20, 2Q20, 3Q20, 4Q20 SES newsletter blurb		Sheri	4/27/20		1/1/21	Yves Tondeur of SES	Submission due 4/1/20 - done Submission due 7/1/20 - done Submission due 10/1/20 - done Submission due 1/1/21 - done
20	Update email & WebEx lists		Sheri/Ilona/Tom	8/5/20	8/24/20	9/22/20		Sent corrections to CSDEC 8/17/20 Sent corrections to Ilona 9/22/20

Item	Task Description	Document Number	TNI Contact	Task Added	Start Date	Complete Date	External Communications	Comments
21	Vote in new member (Brian Miller). Seek approval from CSDP Chair.		Sheri	8/24/20	8/24/20	8/24/20		CSDEC approved 8/24/20
22	Have SSAS Table w/same format as FoPT's re: current, future, rev# & effective date	SSAS Table	Sheri/Ilona	8/24/20				8/24/20 Sheri will look into this as IT activities slow down. 9/21/20 Work w/Ilona on this
23	Vote on new member (Pat Selig)		Sheri	9/22/20	10/5/20	10/5/20		CSDEC approved 10/5/20
24	Update TNI SSAS Committee info on TNI website		William	9/22/20	6/1/20			Emailed to add Bill to TNI website 6/1/20- emailed again 7/27/20, 8/24/20 Emailed to add Brian and fix Tom's info 8/24/20, add Pat Selig. Discussed w/Ilona on 9/21/20. William backlogged.
25	Discuss possibility of FoPT for SSAS		PTPEC meeting (possibly end of 2020?) Shawn Kassner	9/22/20				Discuss possibility of creating FoPT for "Air & Emissions"
26	Fix "Matrix" → "Quality Systems Matrix" on SSAS Table	SSAS Table	SSAS Committee/William	9/24/20				"Matrix" header of SSAS Table not in agreement with glossary term or with SOP 6-101. 10/19/20 - The CSDP EC said to "make a new definition if needed" during their 10/8/20 meeting. 11/7/20- Sheri will ask at Dec CSDP EC meeting. Sheri to ask at Dec CSDEC meeting: SSAS can change table without going through PTPEC. Yes - 12/7/20

Item	Task Description	Document Number	TNI Contact	Task Added	Start Date	Complete Date	External Communications	Comments
27	Biennial Review	SSAS Table	SSAS Committee	10/5/20				Review SSAS table every 2 years.
28	Review SSAS Modules to prepare for Public Meeting.	Modules 1, 2, and 3	SSAS Committee	10/19/20	1/19/21	1/19/21		10/19/20 - The TNI Lab Standard does specify that PT Providers need to supply data for calculating limits. Does the SSAS Standard have something similar? Should take a look at this when the Standard update is started again. 1/19/21: tables reviewed and finalized for public meeting.
29	Public Meeting tentatively set for mid February.		SSAS Committee	11/2/20	1/19/21			12/7/20- Public meeting set for 2/16/21. 1/19/21: Ilona to send template for presentation and language for posting.
30	Contact EPA re: change to # AS providers in CFR		Gregg O'Neill (Committee member)	1/14/21	12/4/20			Based on info from EPA call on 12/4/20.
31	Discuss Committee relationship with PTPEC.		SSAS Committee	1/19/21	TBD			1/19/21: Ilona will add to PTPEC Action Summary too.