Environmental Laboratory Technical Advisory Committee
April 17, 2009
10:19 AM to 2:00 PM

ELTAC Members in Richmond: Ken Osborn, Dave Sandusky, Al Verstuyft, P. Schemmer (nomination pending),
ELTAC Members video via conference A. Eaton, S. Baldonado (nomination pending),
ELTAC Member by phone T. Pirondini, M. Banuelos, T. Powers (PM), D. Kimbrough
DPH Members in Richmond: Gary Yamamoto, George Kulasingam, Jane Jensen, Fred Choske
Guests:
In Richmond: B. Ray SWRCB
DPH Members by phone: Dave Spath (AM), Cathy Ewing, Steve Book (AM), Cindy, B. Bowman
Not present: M. Cardenas, R. Bolton, S. Meyer,

1. Welcome (10:11 AM) quorum is 7 (Ken, Dave, Al, Andy, Mark, Gerry;); only six voting members present
2. Minutes – cannot approve minutes without quorum. Chair calls for changes or discussion. Changes noted on misspelled names, words (rags to regs) and others.
3. Announcement, Current Vacancies
    a. Vacancies – *Offering positions; five vacancies; three filed by retirees. Some positions will not be filled due to revenues.*
    b. Nomination of P. Schemmer for S. Hoatson and S. Baldonado for B. Shepherd awaiting bylaw updates and status of two voting members.
4. ELTAC By-law. Who is on the existing committee? Need for P. Schemmer for S. Hoatson and S. Baldonado nomination. Current terms expired 12/2007. Gap in minutes as posted. Committee has voting and non-voting members. Need other state agencies represented. Only W. Ray, WQB consistently attendees. Need to stagger membership. Appointments need to be verified. Need to broadcast vacancies and pool. Originally in DHS, so there are numerous organizational changes. Need more NELAP input and transition into TNI. Consider odd number membership and we are allowed 15 members. Issue of quorum. Time commitment is an issue for agency participation. Agency may not be willing to support time. Increase representation from commercial laboratory and having budget. Current cap is two with ACIL. The bylaws Section 3 specifies 12 members and allows 15. There are several issues: bylaw revisions, terms, organizations, voting members. There need to be more nonvoting members from State agencies (four specified in Section 3) and others participants. G. Yamamoto participates in many committees on behalf of DPH. K. Osborn will do a first draft revision. G. Yamamoto/G. Kulasingam will seek other membership. The associations are represented. Osborne was nominated by CASA, not EBMUD. We need to have voting members identify the nomination organization. We need to clarify bylaws for nomination people out of a pool of organizations. M. Banuelos is representing either waste water or municipal for Central Valley. Need universal transparency for representation. Need a large enough group that represents a diagonal cross section of the labs. Need flexibility sufficient to do business. Term expiration allows for continuation to serve with ELTAC approval until successor is approved. AB1317 established ELTAC. There is a maximum two term limit(4 yr/term).
5. NELAC/TNI Updates
    a. Cleanup of TNI standards for 2010. Last meeting was Miami Beach. Difficult with parallel standards. Three types of changes in standards. Previously 1-6 plus 7 Field Standards, In TNI 5 Quality Systems and 6 AB have been totally rewritten. 6 AB will be

ISO 17011. ISO language is being used extensively. PT 2, On-site 3 and Accreditation have been minor changes using ISO. Field Standards 7 has been worked. LLAC has been driving the changes. These standards may not be adopted as there are state agencies handling sampling. NELAP is sunseting and TNI is beginning. Looking for a resolution to SW 846 3rd 4th update. OSW will be RCR. RCR will provide direction to approval and guidelines. Providing new methods to laboratories, i.e. ECL formerly HML. Place burden on client. Lab will be certified for current methods. Need necessary changes to DPH statute i.e. NELAC to TNI. DPH will be submitting legislation. DPH proposed 11 changes and has 2 moving forward. Other agencies may sponsor on behalf of DPH. There are Federal statutes in effect that do not have corresponding state statute. State statutes will have to updated for SW 846 3rd 4th update because Oregon adopted 4rd, however, no Federal adoption. Laboratories may not receive reciprocity from Oregon and require Oregon AB. This is an AB issue. The state is pressed to review methods to for the legislative change. DTSC wants the current Update 4 methods used. Approach would be method specific changes. (Jane/Cindy) Previously methods were approved on a method specific basis. Survey commercial labs on those methods requested for improved data quality. DOD Sac is requiring update 4 for commercial and municipal labs. ELAB contract to compare current drinking water national program and TNI (249 items). There is an ELAB advisory committee reviewing this process. TNI/ISO/OW/40CFR/ other similarities and comments.

6. PT Updates
    a. Added enumeration of DW microbiology(F.Choske). Twice a year enumeration to source water samples starting. Chemical PT providers Absolute, ERA, RT, NSI, Wibby. For micro add Microcheck and delete Absolute. EPA DMRQA will allow opt out for states with waste water accreditation program. State would review PTs and report findings etc. CA has opted out; state can collect WP data. CA out of scheduled studies in 2010. PT acceptance criteria (tabled).
7. Draft Regulations
    a. Steve, Dave and Cathy Ewing have done the reg updates. Webpage update includes FAQ. Changes to the statute cannot always be done, and prioritization may slow or stop reg. Dave K if DPH cannot get regs change, then another group can sponsor. Bill is drafted to remove offending section. Need a sponsor for 2010.
    b. ELAP draft regs (9/08 were commented on after 1/09) are posted as 3/5/09. Strike outs and underlines are not shown. Major changes: Definition of units of accreditation Article 5 proficiency, Conflict moved from Art. 5 elsewhere, add fields of testing previously omitted (B. Ray), avoid year specification, added application req per Art. 2. Refer to Statue and regs will read update. 3 FAQs 3/5 and 1 FAQ 3/25 were added. Statutory issues with reference to NELAC 2003. TNI is different, NELAC is no longer used, and there is no EPA reference number.
    c. There are changes to Art 9, now Art. 10, and address the 24 hour issue and consistency with drinking water reg. Within 24 hour for particular constituents the regulatory reporting requirement ie. Perchlorates, nitrates and bacteriological sent to third party lab reported out by whom. Tried to improve flexibility. Can the perchlorate reg language be included. No waste water and haz mat reg. Intent was no lab could put a supplier in jeopardy(B. Ray). This prompts the lab to approve quicker and meets the needs of commercial and municipal labs.

d. Art 5 PT, lab shall participate in one min and two max (State cert). Other State regs or programs do not apply. You cannot fail two per year, however, the intent is not to prohibit participation. You must pass one per year and not fail two.
e. May not revert to 2004 version, but will attempt to approve. On-site assessment is only briefly discussed in Sec. 3. Statute requires every other year. Does not parallel Fed or other requiring on a regular basis (two years) No specific requirements for on-site assessment. There has been an enormous problem in the past with on-site. Under initial certification this is no specifically defined. Inspection is not defined. Statute allows ELAP to enter a lab and inspect at any time. ELAP has not complied with statute and Art. 7, the QA Plan requires: lab passes PT, and produces useful and viable data. There is no definition of "useful and viable data" This language is not clear, concise and specific. It is not defensible and OAL could not support. Incorporation of approved methods can define useful and viable data for method. This does not define quality systems and on-site assessment. If the Lab Cert document were adopted, then some of the problem is addressed. Every lab needs to be assessed in the same way. An auditor requires Class A glassware for BOD. Previous draft (2004) had four requirements specified. No requirements to check Colilert for auto fluorescence and other perspective. Need the on-site language with former sections. Labs are supposed to be similar in their production. Expectation is methods will be similar. Lab hallmark should be similar; i.e. HEM values from three labs give different values. 40CFR141 provide uniformity and comparability of data. On-site assessment is key to data. There are a couple of hundred pages in Chapter 5 Quality Systems that provides a consistent program. The standard does not provide for Quality Systems. ELTAC got established because there were problems with accreditation raised in Sept 2003. These are old issues, such as connecting methods with QA. AWWA/APHA/WEF has linked QA to methods. Need analyte, matrix, and method definitions. Original intent was to be accredited by specific analyte, matrix, and method definitions. Fields of testing does not guide through process. ELTAC subcommittee originally worked to draft statute.
f. Art 12 NELAC, see last line where NELAC standards(1.6.2) do not apply then the standards of Department will apply.

8. ELAP Budget Issues – $2.6 M if all positions filled in would be $3M. ELAP is looking at rate package to balance budget. In Richmond, there is a facility cost issue anticipated. Budget authority may increase in 2009/2010. ELAB rate increase will be seen in the future and likely not done in emergency reg process. Fee increase can be allowed through budget act provisions. ELAP had a reserve that cannot be used for . Buy updated computers, send staff to training and other tasks can be paid through reserve.
9. Method Specific Checklists – Great effort by S. Book and others. Full suite was posted on the website without adjustments for the Method Update Rule. For an on-site assessment, the checklist could be used for guidance between lab and assessor. Linda did some revisions to checklist, i.e. 200.7 and sent to labs for input. It is just a tool and may be revision. There was a discussion of modifications like handling blanks, etc. Checklists were written for should and must. QA is not included because it references other documents, and need ed. Specific requirements. The ideal is we should be held to what the method states. If a lab is using different versions of SM, there will still only be the same checklist for some but not all because QA is not all the different editions of the method. Where QA is a fundamental part of the method, then one is accountable. Differences between SM 19th and 20th ed. SM is the preferred method for physical and chemical methods. Checklists set a minimum for what must be done.

Send comments on checklist to Linda. The checklists were a great effort by Dave K and others. Steve thanks for posting checklists.

10. PT Acceptance Criteria (tabled) -
11. Next Meeting – Aug 28, 2009 .

Action Items

1. K. Osborn will do a first draft revision.
2. G. Yamamoto/G. Kulasingam will seek other membership.
3. Need ECL, DTSC, DPH and commercial labs on update 4.