California State Water Resources Control Board Environmental Laboratory Accreditation Program (State Water Board CA-ELAP)

An Overview of the CA ELAP Regulations* Versus the TNI EL 2016 Standard

Third-Party Assessments (TPAs)

The NELAC Institute (TNI) Non-Governmental Accreditation Body (NGAB)



*Title 22 Social Security Division 4 Environmental Health Chapter 19 Certification of Environmental Laboratories Articles 1-16 (sections: 6000 series)

TNI Standard	≠CA Regulatíons
✓ Overvíew✓ Requírements	≠Accreditation Process≠Comparison
Resources ✓ TNI	(CA REG VS TNI)
✓ PJLA	



National Environmental Laboratory Accreditation Program (NELAP)



Volume 1 Management and Technical Requirement for Laboratories Preforming Environmental Analysis (EL-V1-2016)

124

 ΔC

TNI 2016

ISO/IEC 17025:2005

(≠ ISO/IEC 17025:2017)



*NELAC - National Environmental Laboratories Accreditation Conference

CA-ELAP Assessments (CCRs vs. TNI) Third-Party Assessments (TPAs) The NELAC Institute (TNI) Non-Governmental Accreditation Body (NGAB)

By 2023, all laboratories, regardless of technology, must meet TNI* Minus 2.

Assessment scope types:

TNI Minus 2 (plus CA Reg): TNI 2016 minus two exceptions*
 *Exceptions: CCR Article 2 section 64802.05(a)(1) and 62802.15(b)(1)



• TNI Full (plus CA Reg): TNI 2016







This webinar is not a substitute for reviewing and understanding the applicable standards or obtaining training for implementation of a Quality Management System (QMS) in compliance with the TNI Standard.

The information in this webinar does not cover all requirements. It is only intended to communicate a sampling of requirements to provide participants a foundation of understanding in preparation for compliance to the TNI standard.

Requirements discussed in this training were chosen for various reasons, including:

- Common findings
- Higher potential of gaps in current processes compared to CA Regulations





Perry Johnson Laboratory Accreditation, Inc.

Level of Effort











Volume 1

Management and Technical Requirements for Laboratories Performing Environmental Analysis

Module 1: Proficiency Testing

- 4.0: Requirements for Accreditation
 - 4.1 General Requirements
 - 4.2 Sample Handling, Preparation, and Analysis Requirements
 - 4.3 Reporting Requirements
 - 4.4 Record Retention
- 5.0: PT Study Frequency Requirements for Accreditation
- 6.0: Requirements for Corrective Action
- 7.0: Requirements for Complaint Resolution
- 8.0: Requirements for Reinstatement of Accreditation after Suspension or Revocation



Module 1: Proficiency Testing



Module 1: Proficiency Testing

Module 1: Proficiency Testing TNI Minus 2	Module 1: Proficiency Testing TNI Full
Exception CCR Article 2 section 62802.15(b)(1) Comply with 2016 TNI Standard with the following exceptions: (A) Volume 1, Module 1, Section 5.0 - Proficiency Testing Study Frequency Requirements for Accreditation (B) Volume 1, Module 1, Section 8.0 - Proficiency Testing Requirements for Reinstatement of Accreditation after Suspension or Revocation To maintain accreditation, a CAB shall achieve Acceptable Scores in a Proficiency Testing study at least once per year for each Field of Accreditation for which the CAB holds/seeks accreditation. Acceptable Scores in Proficiency Testing studies shall be achieved. **See CCR Article 2 62802.15 Proficiency Testing for additional requirements**	 5.0 Proficiency Testing Study Frequency Requirements for Accreditation 5.1: Initial Accreditation 2 passing results out of the most recent 3 attempts Timelines (>7 days apart, ≤18 prior to accreditation, etc.) 5.2: Continued Accreditation 2 passing results out of the most recent 3 attempts Timelines (biannually, (>7 days apart, ≤7 months apart, etc.) *Whole Effluent Toxicity (WET) = different requirements* *pay attention to closing date vs analysis date requirements* 8.0: Requirements for Reinstatement of Accreditation after Suspension or Revocation (<i>points to 5.1 & 5.2</i>)



Module 1: Proficiency Testing









Volume 1

Management and Technical Requirements for Laboratories Performing Environmental Analysis

Module 2: Quality Systems General Requirements	Module 2: Quality Systems General Requirements	
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4.2 Management	5.2 Personnel	
4.3 Document Control	5.3 Accommodation and Environmental Conditions	
4.4 Review of Request, Tenders and Contracts	5.4 Environmental Methods and Method Validation	
4.5 Subcontracting of Environmental Tests	5.5 Calibration Requirements (ISO/IEC 17025:2005 = "Equipment")	
4.6 Purchasing Services and Supplies	5.6 Measurement Traceability	
4.7 Service to the Client	5.7 Collection of Samples	
4.8 Complaints	5.8 Handling Samples and Test Items	
4.9 Control of Nonconforming Environmental Testing Work	5.9 Quality Assurance for Environmental Testing	
4.10 Improvement	5.10 Reporting the Results	
4.11 Corrective Action		
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4.13 Control of Records		
4.14 Internal Audits		
4.15 Management Reviews		
4.16 Data Integrity Investigations (≠ ISO/IEC 17025:2005)		
Module 3: Quality Systems for Asbestos Testing		
Module 4: Quality Systems for Chemical Testing		

- Module 5: Quality Systems for Microbiological Testing
- Module 6: Quality Systems for Radiochemical Testing
- Module 7: Quality Systems for Toxicity Testing



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.1 Organization

Policies/Procedures

4.1.5: The laboratory shall:

c) have policies and procedures to ensure the protection of its customers' confidential information and proprietary rights, including procedures for protecting the electronic storage and transmission of results;





Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.1 Organization

Policies/Procedures

Electronic Data

Management

4.1.5: The laboratory shall:

c) have policies and procedures to ensure the protection of its customers' confidential information and proprietary rights, including procedures for protecting the electronic storage and transmission of results; 5.10.7

- Access restrictions/privileges (quest accounts)? 4.13.1.1
- Usernames/passwords (frequency of password changes)
- Software updates 5.5..5 a), 5.5.12
- \blacktriangleright Protection from viruses, malware, etc. 5.4.7
- Securing workstations (locking unattended terminals/workstations)
- 4.5.1.4.6.1 Outsourced security/IT (evaluation of service provider and frequency of evaluations)
- Monitoring System events (e.g., log-on failures or break-in attempts)4.14
- Physical access/security to/of servers
- Backup: 4.13.1.4, 4.13.3 f) xv)
- schedule (including instrument data files from terminals/workstations not on network) and testing of backups (e.g., all applicable networks/folders backed up, backups retrievable)
- recorded to demonstrate that the backup systems contain all required data and backups were successful
- backup isolated from server
- Instrument software audit functions enabled 4.13.2.1
- Electronic signatures policy (e.g., protected from unauthorized use) 4.2.8.4
- Data integrity training (improper clock setting, unwarranted manipulation of information).5.2.7
- > How changes are made and controlled. 4.3.3.4, 4.13.3 f) xv)



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.1 Organization

Policies/Procedures

4.1.5: The laboratory shall:

c) have policies and procedures to ensure the protection of its customers' confidential information and proprietary rights, including procedures for protecting the electronic storage and transmission of results;



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Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.1 Organization

4.1.5: The laboratory shall:

e) define the organization and management structure of the laboratory, its place in any parent organization, and the relationships between quality management, technical operations and support services;



Management (Laboratory Director, Technical Manager, Quality Manager) Support (LIMS, Purchasing, Project Manager, Waste Management) Testing Activities (Sample receipt, preparation, analysis)



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.1 Organization

4.1.5: The laboratory shall:j) appoint deputies for key managerial personnel

Key Personnel	Primary Deputy
Laboratory Director	Technical Manager
Technical Manager	Quality Manager
Quality Manager	Technical Manager
LIMS Manager	Quality Manager
Project Manager	Technical Manager
Purchasing Manager	Quality Manager
Environmental Compliance Officer	Technical Manager



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.1 Organization

4.1.7 Additional Requirements for Laboratories

4.1.7.2 The laboratory's technical manager(s), however named, and/or his/her designee(s) shall:

e) if absent for a period of time exceeding fifteen (15) consecutive calendar days shall designate another staff member meeting the qualifications of the technical manager(s) to temporarily perform this function. If this absence exceeds thirty-five (35) consecutive calendar days, the primary accreditation body shall be notified in writing.





Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements

4.2.8.1

- The laboratory shall establish and maintain a documented data integrity system.
- The data integrity procedures shall be signed and dated by top management.
- > Management shall annually review data integrity procedures and update as needed.



Example Finding: V1M2 4.2.8.1 There was no evidence Management reviewed the data integrity procedures annually (and updated as needed). The last revision was 2011.

Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements

Policies/Procedures

Update

- 4.2.8.3 The quality manual shall contain: a-i
 - b) laboratory's full name and address;
 - e) identification of the laboratory's approved signatories;

f) the signed and dated concurrence (with appropriate names and titles), of all responsible parties including the quality manager(s), technical manager(s), and the agent who is in charge of all laboratory activities, such as the laboratory director or laboratory manager;

h) the laboratory's official quality policy statement,

i) a table of contents, and applicable lists of references, glossaries and appendices.

- 4.2.8.4 The quality manual shall contain or reference: a-r
 - a) all maintenance, calibration and verification procedures used by the laboratory in conducting tests;
 - g) job descriptions of key staff and reference to the job descriptions of other laboratory staff;
 - i) a list of all methods under which the laboratory performs its accredited testing;
 - o) procedures for protecting confidentiality (including national security concerns), and proprietary rights;
 - q) procedures for establishing that personnel are adequately experienced in the duties they are expected to carry out and are receiving any needed training; and

r) policy addressing the use of unique electronic signatures, where applicable.



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements

4.2.8.5 Laboratories shall maintain SOPs that accurately reflect all phases of current laboratory activities, such as assessing data integrity, corrective actions, handling customer complaints, and all methods.



Example Finding: V1M2 4.2.8.5 Laboratory procedures did not always accurately reflect current practices. For example:.....

Inadequate SOP reviews and/or internal audits?



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements

4.2.8.5 Laboratories shall maintain SOPs that accurately reflect all phases of current laboratory activities, such as assessing data integrity, corrective actions, handling customer complaints, and all methods.

f) In cases where modifications to the published method have been made by the laboratory or where the referenced method is ambiguous or provides insufficient detail, these changes or clarifications shall be clearly described. Each method shall include or reference the following topics where applicable: i-xxiii

vii. interferences;

xv. data analysis and calculations;

xix. corrective actions for out-of-control data;

xx. contingencies for handling out-of-control or unacceptable data.



Module 2: Quality Systems General Requirements



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.3 Document Control

4.3.2.1 All documents issued to personnel in the laboratory as part of the management system shall be reviewed and approved for use by authorized personnel prior to issue. A master list or an equivalent document control procedure identifying the current revision status and distribution of documents in the management system shall be established and shall be readily available to preclude the use of invalid and/or obsolete documents.



Example Finding:

4.3.2.1 – The master list was not current or accurate (*missing procedures and identified obsolete revisions*).

Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.3 Document Control

4.3.2.2 The procedure(s) adopted shall ensure that:

a) authorized editions of appropriate documents are available at all locations where operations essential to the effective functioning of the laboratory are performed;

b) documents are periodically reviewed and, where necessary, revised to ensure continuing suitability and compliance with applicable requirements;

c) invalid or obsolete documents are promptly removed from all points of issue or use, or otherwise assured against unintended use;

d) obsolete documents retained for either legal or knowledge preservation purposes are suitably marked.



Example Finding: 4.3.2.2 b) – Not all procedures had evidence of annual reviews, in accordance with Laboratory procedure ADM-009 Rev. 2.

Example Finding:

4.3.2.2 c) – Obsolete versions of procedures were observed in laboratory areas.



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.3 Document Control

4.3.2.3 Management system documents generated by the laboratory shall be uniquely identified. Such identification shall include the date of issue and/or revision identification, page numbering, and the total number of pages or a mark to signify the end of the document, and the issuing authority(ies).

4.3.3.2 Where practicable, the altered or new text shall be identified in the document or the appropriate attachments.



Example Finding: 4.3.2.3 – Not all procedures included page numbering or issuing authorities.

Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.4 Review of Requests, Tenders, and Contracts

4.4.2 Records of reviews, including any significant changes, shall be maintained. Records shall also be maintained of pertinent discussions with a customer relating to the customer's requirements or the results of the work during the period of execution of the contract.

4.5 Subcontracting of Environmental Tests

4.5.2 The laboratory shall advise the customer of the arrangement <mark>in writing</mark> and, when appropriate, <mark>gain the approval of the customer, preferably in writing.</mark>

4.5.4 The laboratory shall maintain a register of all subcontractors that it uses for tests and/or calibrations and a record of the evidence of compliance with this International Standard for the work in question.

4.5.5 When a laboratory subcontracts work, this work shall be placed with a laboratory accredited to this Standard for the tests to be performed or with a laboratory that meets applicable statutory and regulatory requirements for performing the tests and submitting the results of tests performed.



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.6 Purchasing Services and Supplies

4.6.3 Purchasing documents for items affecting the quality of laboratory output shall contain data describing the services and supplies ordered. These purchasing documents shall be reviewed and approved for technical content prior to release.

Reference Material:

The report (e.g., Certificate of Analysis (COA)) shall contain:

- (1) Identification that results are traceable to the International System of Units (SI) through a nationally or internationally recognized metrology institute (e.g., National Institute for Standards and Technology [NIST]) or by reference to a natural constant.
- (2) Uncertainty of the results.
- (3) Certification date and shelf life/expiration date
- (4) Traceability between the item and the report via the use of a unique identification (e.g., serial, lot, batch, heat, or mill number).

Calibration:

Reference material requirements, plus...

(1) The Contractor's accreditation symbol to

provide traceability that the service was performed under the scope of accreditation.

- (2) Calibration Range
- (3) Tolerance/Acceptance Limits
- (4) As-Found data and condition (pass/fail)
- (5) As-Left data and condition (pass/fail)
- (4) Calibration frequency



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.6 Purchasing Services and Supplies

4.6.2 The laboratory shall ensure that purchased supplies and reagents and consumable materials that affect the quality of tests and/or calibrations are not used until they have been inspected or otherwise verified as complying with standard specifications or requirements defined in the methods for the tests and/or calibrations concerned. These services and supplies used shall comply with specified requirements. Records of actions taken to check compliance shall be maintained.

Reference Material:

The report (e.g., Certificate of Analysis (COA)) shall contain:

- (1) Identification that results are traceable to the International System of Units (SI) through a nationally or internationally recognized metrology institute (e.g., National Institute for Standards and Technology [NIST]) or by reference to a natural constant.
- (2) Uncertainty of the results.
- (3) Certification date and shelf life/expiration date
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- (5) As-Left data and condition (pass/fail)
- (4) Calibration frequency

Module 2: Quality Systems General Requirements



				(CCRs vs. TNI)
Certificate of A	nalysis	Da	ate Issued 9/23/2014	ents
40 NTU Turbidity	Standard	Lo Ex	t: N09A p 9.30.2015	ments
PRODUCT NUMBER:	R-4094	1/966-51		—
QUANTITY:	30)ml		-
APPLICATION:	Used for cali	bration to turbid	ity meter 966	—
	SPECIFICATIONS	s.	VALUES	
Concentration	40 NTU +/-0.4		Conforms	pected or otherwise verified as complying with
				tests and/or calibrations concerned. These
Quality Control Notes				
Tert	Page / Fail	Tolerance Par	Parulta	
Test	rass/raii	Tolerance Nat	ige nesuits	on:
40	Pass	± 0.4	40 NTU	material requirements, plus
Abs 455 (50 mm				intractor's accreditation symbol to
pathlength)	Pass		0.2332	ceability that the service was performed
				scope of accreditation.
Lot Base line Material	Pass		C467460	tion Range
				ce/Acceptance Limits
		_		nd data and condition (pass/fail)
		Т	his document is i	ssued without signature.Warranty: The
		d	etails given here	are merely intended for information
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for damage that may result fro information.	m application based upon	in this #	formation.	

Module 2: Quality Systems General Requirements

4.0 Management Requirements

Calibrations I	by management are performed in accordance with the principles of ISO 90	01:2008. Amountains a Quality Management System accredited to ISO/IEC
17025:2005.	The use of the Accrediting Body's logo is exclusive to calibrations where	the contractual obligations meet the minimum requirements as specified by ISO/IEC
17025:2005 (and the Accrediting Body. For additional information regarding	accredited status visit the A2LA website and view scope 2039.01.

The Measurement Standards used during this calibration are traceable to the International System of Units through NIST, other Nationally and/or Internationally recognized standards.

Reference Material:

- The report (e.g., Certificate of Analysis (COA)) shall contain:
- (1) Identification that results are traceable to the International System of Units (SI) through a nationally or internationally recognized metrology institute (e.g., National Institute for Standards and Technology [NIST]) or by reference to a natural constant.
- (2) Uncertainty of the results.
- (3) Certification date and shelf life/expiration date
- (4) Traceability between the item and the report via the use of a unique identification (e.g., serial, lot, batch, heat, or mill number).

Calibration:

Reference material requirements, plus...

(1) The Contractor's accreditation symbol to

provide traceability that the service was performed under the scope of accreditation.

- (2) Calibration Range
- (3) Tolerance/Acceptance Limits
- (4) As-Found data and condition (pass/fail)
- (5) As-Left data and condition (pass/fail)
- (4) Calibration frequency






Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.6 Purchasing Services and Supplies

4.6.4 The laboratory shall evaluate suppliers of critical consumables, supplies and services which affect the quality of testing and calibration, and shall maintain records of these evaluations and list those approved.

Name	Address	Commodity	Approval Base*	Exp. Date
Calibrations R Us	123 Main St.	Balance, Weight,	ISO/IEC 17025	09/30/2021
	Anywhere, US	Thermometer		
	12345	calibrations		
PTs for You	777 Lucky Ave.	PTs	ISO/IEC 17043	10/30/2021
	Over There, MN			
	77777			
Data Custodians,	555 5 th St.	LIMS and IT services	Audit of QMS	07/21/2022
Inc.	Anywhere, US			
	12345			
Reference	753 Freedom	Traceable reference	Performance	04/15/2022
Material	Somewhere, CA	material	via verifications	
Providers, Inc.	99883		and COAs	



Example Finding:

4.6.4– Not all suppliers of items/services that affect quality were included on the approved list of suppliers or had evidence of evaluation/approval.



Module 2: Quality Systems General Requirements



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.8 Complaints

The laboratory shall have a policy and procedure for the resolution of complaints received from customers or other parties. Records shall be maintained of all complaints and of the investigations and corrective actions taken by the laboratory (see also 4.11).



Example Finding:

4.8– Review of amended report 20200216a identified the amendment resulted from a customer complaint. Also, personnel interviews indicated other customer complaints; however, there was no policy/procedure for handling customer complaints and no records of customer complaints.



Module 2: Quality Systems General Requirements

Acceptance Range 0-6°C

4.9.1 The laboratory shall have a policy and procedures that and/or calibration work, or the results of this work, do not con of the customer. The policy and procedures shall ensure that b) an evaluation of the significance of the nonconformi	4.0 Management l	DATE	M4 (0°C to 6°C)	Coments/Observations	DATE	#4 (0°C to 6°C)	Comments/Ob
4.9 Control of Nonconforming Environmental Testing Wo 4.9.1 The laboratory shall have a policy and procedures that and/or calibration work, or the results of this work, do not con of the customer. The policy and procedures shall ensure that: b) an evaluation of the significance of the nonconformi b) an evaluation of the significance of the nonconformi accord 8.0°C KCC BCC BCC BCC BCC BCC BCC BCC BCC BC		8/1/2018		/	9/25/2018	9.0°C	Kg
4.9.1 The laboratory shall have a policy and procedures that and/or calibration work, or the results of this work, do not con of the customer. The policy and procedures shall ensure that: b) an evaluation of the significance of the nonconformi	4.9 Control of Nonconforming Environmental Testing Wo	12/2018	6	-	9/25/2018	9.00	KAC
and/or calibration work, or the results of this work, do not con of the customer. The policy and procedures shall ensure that: b) an evaluation of the significance of the nonconformi 100019 7.0 °C KSC 110019 7.0 °C KSC	4.9.1 The laboratory shall have a policy and procedures that :	g/4/2018	10.0°C	KEC	9/28/2018	9.0°C	Kac
b) an evaluation of the significance of the nonconformi 0.0°C KSC 0.0°S 1.1	and/or calibration work, or the results of this work, do not con of the customer. The policy and procedures shall ensure that:	9/5/2018	8.0.0	KBC	9/30/2018		
990010 7.0°C KSC 9102018 7.0°C KSC 9112018 7.0°C KSC 9112018 7.0°C KSC 9112018 8.5°C KSC 9112018 0.0°C KSC 9112018 0.0°C KSC 9112018 0.0°C KSC 9112018 0.0°C KSC 9112010 0.0°C KSC 91202010 0°C KSC 91202010 0°C KSC 91202010 0°C KSC 91202010 0°C 10°C 91202010 0°C 10°C 91202010 0°C 10°C <td>b) an <mark>evaluation of the significance</mark> of the nonconformi</td> <td>97/2018</td> <td>8.0°C</td> <td>KBC</td> <td>NOLES.</td> <td></td> <td></td>	b) an <mark>evaluation of the significance</mark> of the nonconformi	97/2018	8.0°C	KBC	NOLES.		
PHODER 7.0°C KSC PH102018 7.0°C KSC PH102018 7.0°C KSC PH202018 8.0°C KSC PH202018 9.0°C PH2 PH202018 9		9/9/2018	6	1400			
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artizoria 8.0 °C ACC artizoria 8.5 °C MCC artizoria 0.0 °C MC artizoria 10.0 °C MC artizoria 0.0 °C MC		9/12/201	8.5°C	KSC			
915/2018 916/2018 917/2018 90.0°C 918/2018 9.0°C 921/2018 9.0°C 921/2018 9.0°C 9.0°		9/13/201	8.0 C	KGC		-	
9/12018 10.0°C 10.0°C 10.0°C 9/18/2018 9.0°C 10.0°C 10.0°C 9/18/2018 9.0°C 10.0°C 10.0°C 9/19/2018 9.0°C 10.0°C 10.0°C 9/20/2018 9.0°C 10.0°C 10.0°C 9/21/2018 9.0°C 10.0°C </td <td></td> <td>9/15/201</td> <td></td> <td>-</td> <td>-</td> <td></td> <td></td>		9/15/201		-	-		
9/18/2018 9.0°C KBC 9/19/2018 9.0°C KBC 9/0°C KBC 9/19/2018 9.0°C KBC 9/19/2018 9.0°C KBC 9/21/2018 9/0°C KBC 9/21/2018 9/0°C KBC		9/17/20	10.0°C	KAC.			
920/2018 9.0 °C KBC 921/2018 9.0 °C KBC 922/2018 923/2018 923/2018 923/2018 923/2018		9/18/20	9.0°C	C KRY			
921/2018 1.0 C PSC 921/2018 923/2018 923/2018 923/2018 924/2018 924/2018		9/20/20	9.0 C	KEC	-		
9/23/2018 9/23/2018 9/24/2018 7.0°C KR		9/21/20	018 4.0 C	Part			
		9(23/2	1018	KRC	-	-	-



Module 2: Quality Systems General Requirements





Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.11 Corrective Action

4.11.4 Monitoring of Corrective Actions The laboratory shall monitor the results to ensure that the corrective actions taken have been effective.



Example Finding:

V1M2 4.11.4

The laboratory had not monitored the corrective actions taken in response to the 2019 assessment to ensure that the corrective actions taken had been effectively implemented.



Module 2: Quality Systems General Requirements





Module 2: Quality Systems General Requirements





Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.13 Control of Records

4.13.2.1 The laboratory shall retain records of original observations, derived data and sufficient information to establish an audit trail..... The records for each test or calibration shall contain sufficient information to facilitate, if possible, identification of factors affecting the uncertainty and to enable the test or calibration to be repeated under conditions as close as possible to the original. The records shall include the identity of personnel responsible for the sampling, performance of each test and/or calibration and checking of results.



Example Finding:

V1M2 4.13.2.1

Laboratory records did not always provide sufficient evidence to establish an audit trail or to facilitate identification of factors affecting the uncertainty. For example,

- · Weight set IDs not on balance verification records
- Thermometer IDs not on temperature monitoring records
- Lot #s not on test records
- · Identification of person performing the activity not identified on test records
- Use of model #s vs unique IDs (e.g., SNs, Asset ID)



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.13 Control of Records

4.13.2.3 When mistakes occur in records, each mistake shall be crossed out, not erased, made illegible or deleted, and the correct value entered alongside. All such alterations to records shall be signed or initialed by the person making the correction.



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.13 Control of Records

4.13.3 Additional Requirements

b) The laboratory shall retain all records for a minimum of five (5) years from generation of the last entry in the records.

e) Access to archived information shall be documented with an access log.

f) All information necessary for the historical reconstruction of data shall be maintained by the laboratory.....ixix

xix. a record of names, initials, and signatures for all individuals who are responsible for signing or initialing any laboratory record.

Name	Initial	Signature
Tom Hanks	TH	Tom Hands



Example Finding: V1M2 4.13.3 f) xix) Initials on records were not always traceable on the signature/initial log to identify personnel performing activities.

Module 2: Quality Systems General Requirements



Perry Johnson Laboratory Accreditation, Inc.

Policies/Procedures

Module 2: Quality Systems General Requirements



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.14 Internal Audits

4.14.1 Such audits shall be carried out by trained and qualified personnel who are, wherever resources permit, independent of the activity to be audited.

4.14.5 Additional Items

c) The internal audit schedule shall be completed annually.



Example Finding:

V1M2 4.14.1 (and TNI V1M2 5.2.2 & 5.2.5) The laboratory had not formulated goals with respect to the education, training and skills for the laboratory personnel performing internal audits and there were no available record of training and authorization for the internal auditors.



Module 2: Quality Systems General Requirements

4.0 Management Requirements

4.15 Management Reviews

4.15.1

The review shall take account of:

- the suitability of policies and procedures;
- > reports from managerial and supervisory personnel;
- > the outcome of recent internal audits:
- \succ corrective and preventive actions;
- > assessments by external bodies;
- 4.7 Service to Client vs > the results of interlaboratory pmparisons or
- > changes in the volume and
- \succ customer feedback:

 \succ complaints;

- recommendations for improvent;
- other relevant factors, such as quality control activities, resources, and staff training.

4.8 Complaints

4.15.2 Findings from management reviews and the actions that arise from them shall be recorded.

Note: ISO/IEC 17025:2017 Management Review has additional inputs/outputs



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.2 Personnel

5.2.4 The laboratory shall maintain current job descriptions for managerial, technical and key support personnel involved in tests and/or calibrations.

5.2.5 The management shall authorize specific personnel to perform particular types of sampling, test and/or calibration, to issue test reports and calibration certificates, to give opinions and interpretations and to operate particular types of equipment. The laboratory shall maintain records of the relevant authorization(s), competence, educational and professional qualifications, training, skills and experience of all technical personnel, including contracted personnel. This information shall be readily available and shall include the date on which authorization and/or competence is confirmed.



Module 2: Quality Systems General Requirements

5.0 Technical Requirements	5.0 Technical Requirements
TNI Minus 2	TNI Full
 Exception CCR Article 2 64802.05(a)(1) (A) Module 2, Section 4.1.7.2(f) - Technical Manager Qualifications (B) Module 2, Section 5.2.6 - Technical Manager Requirements 	 4.7.2.1f) meet qualification requirements as specified in Section 5.2.6.1. 5.2.6.1 Technical Manager Qualifications a-f
 CCR Article 5 64812.00 Minimum education and experience Laboratory Analyst Certificate from CWEA or	Various educational and laboratory experience for different
Laboratory Quality Analyst Certificate from CA-	types of laboratories (e.g., inorganic, microbiological,
NV/AWWA.	radiological, asbestos)
see CCR Article 2 62802.05 Quality Systems and Article 5 64812.00 Laboratory Personnel for additional requirements	



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.2 Personnel

5.2.7 Data Integrity Training

Data integrity training shall be provided as a formal part of new employee orientation and shall also be provided on an annual basis for all current employees.

The initial data integrity training and the annual refresher training shall have a signature attendance sheet or other form of documentation that demonstrates all staff have participated and understand their obligations related to data integrity.

At a minimum, the following topics and activities shall be included: a-e

e) specific examples of breaches of ethical behavior such as improper data manipulations, adjustments of instrument time-clocks, and inappropriate changes in concentrations of standards.



Example Finding: V1M2 5.2.7 Evidence of annual data integrity training was not available for all personnel (e.g., ICP/MS analyst (last record = 2019), project managers and LIMS manager (no records)).

Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.3 Accommodation and Environmental Conditions

5.3.2 The laboratory shall monitor, control and record environmental conditions as required by the relevant specifications, methods and procedures or where they influence the quality of the results.





5.3.3 There shall be effective separation between neighbouring areas in which there are incompatible activities. Measures shall be taken to prevent cross-contamination.

5.3.4 Access to and use of areas affecting the quality of the tests and/or calibrations shall be controlled.

5.3.5 Measures shall be taken to ensure good housekeeping in the laboratory.



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.4 Environmental Methods and Method Validation

5.4.2 Selection of Methods

- 5.4.3 Laboratory-Developed Methods
- 5.4.4 Non-Standard Methods

5.4.5 Validation of Methods

5.4.5.2 The laboratory shall validate non-standard methods, laboratory-designed/developed methods, standard methods used outside their intended scope, and amplifications and modifications of standard methods to confirm that the methods are fit for the intended use.

5.4.6 Estimation of Analytical Uncertainty

5.4.6.2the laboratory shall at least attempt to identify all the components of uncertainty and make a reasonable estimation, and shall ensure that the form of reporting of the result does not give a wrong impression of the uncertainty.



Module 2: Quality Systems General Requi

5.0 Technical Requ

5.5 Calibration Requirements

5.5.2 Equipment and its software used for testing, calibration and sampling shall be capable of achieving the accuracy require and shall comply with specifications relevant to the tests and/or calibrations concerned.

5.5.7 Equipment that has been subjected to overloading or mishandling, gives suspect results, or has been shown to be defective or outside specified limits, shall be taken out of service

It shall be isolated to prevent its use or clearly labelled or marked as being out of service until it has been repaired and shown by calibration or test to perform correctly.

The laboratory shall examine the effect of the defect or departure from specified limits on previous tests and/or calibrations and shall institute the "Control of nonconforming work" procedure.

100			-	9	and the second
DATE	84 (0°C to 6°C)	Connents/Observations	DATE	64 (0°C to 6°C)	Comments/Ob
8/1/2018		>	9/25/2018	9.0°C	Kac
3/2/2018	/		9/26/2018	9.0°C	St.
v3/2018		-	9/27/2018	8.0°C	KBC
B4/2018	10.0°C	KC	9/28/2018	9.0°C	KCC
9/5/2018	8.0°C	K&C.	9/29/2018		2
0.6/2018	8.0°C	KBC	9/30/2018		SCEW.
97/2018	8.0°C	KBC	Notes:		1000
0/8/2018		-	-		-
9/9/2018	2	107.88			
B10/2018	7.0°C	KBC	-		-
9/11/2018	7.0°C	KKC	-		
9/12/2018	8.5°C	Kee	-		
9/13/2018	8.0°C	KBC	-		
9/14/2018	8.5.6	KGC.	-		
9/15/2018		2	-		
9/16/2011	-	1/00	-		_
9/17/201	2.0.01 °	Right .	-		
9/18/201	9.0°C	KAA	-		
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9/22/20		-	-		
9/24/20	10 7.0.0	KRC			Sector Street

Acceptance Range 0-6°C



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.5 Calibration Requirements

5.5.2 Equipment and its software used for testing, calibration and sampling shall be capable of achieving the accuracy required and shall comply with specifications relevant to the tests and/or calibrations concerned.

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The laboratory shall examine the effect of the defect or departure from specified limits on previous tests and/or calibrations and shall institute the "Control of nonconforming work" procedure.





Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.5 Calibration Requirements

5.5.2 Equipment and its software used for testing, calibration and sampling shall be capable of achieving the a accuracy required and shall comply with specifications relevant to the tests and/or calibrations concerned.

5.5.4 Each item of equipment and its software used for testing and calibration and significant to the result shall, when practicable, be uniquely identified.

5.5.5 Records shall be maintained of each item of equipment and its software significant to the tests and/or calibrations performed. The records shall include at least the following: a-h

a) the identity of the item of equipment and its software;

b) the manufacturer's name, type identification, and serial number or other unique identification;

f) dates, results and copies of reports and certificates of all calibrations, adjustments, acceptance criteria, and the due date of next calibration;

g) the maintenance plan, where appropriate, and maintenance carried out to date;

h) any damage, malfunction, modification or repair to the equipment.

5.5.6 The laboratory shall have procedures for safe handling, transport, storage, use and planned maintenance of measuring equipment to ensure proper functioning and in order to prevent contamination or deterioration.



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.5 Calibration Requirements

5.5.8 Whenever practicable, all equipment under the control of the laboratory and requiring calibration shall be labelled, coded or otherwise identified to indicate the status of calibration, including the date when last calibrated and the date or expiration criteria when recalibration is due.

Indication Only

Not for quality purposes

Limited Cal (approved range = $35-85^{\circ}C$)



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.5 Calibration Requirements

5.5.13.1 Support Equipment

c) On each day the equipment is used, balances, ovens, refrigerators, freezers, incubators, and water baths shall be checked and documented.

d) Temperature measuring devices shall be calibrated or verified at least annually.

i. If the temperature measuring device is used over a range of 10°C or less, then a single point verification within the range of use is acceptable.

ii. If the temperature measuring device is used over a range of greater than 10°C, then the verification must bracket the range of use.

e) If quantitative results are dependent on their accuracy, such as in standard preparation or dispensing or dilution into a specified volume, the laboratory shall verify volumetric measuring devices as follows: i-iv

ii. disposable or single-use volumetric equipment shall be verified once per lot, prior to or in conjunction with its first use;

iii. mechanical devices shall be verified prior to first use and on a quarterly basis; mechanical devices used at more than one volume shall be verified at volumes bracketing the range of use, and at the mid-point of the volumes used by the device.

f) All other support equipment shall be calibrated or verified at least annually..... bracketing the range of use.



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.6 Measurement Traceability

5.6.3 Reference Standards and Reference Materials

- > traceable to SI units of measurement
- > have procedures for safe handling, transport, storage
- 5.6.4.2 Documentation and Labeling of Standards, Reagents, and Reference Materials a-f

a) The laboratory shall retain records for all standards, reagents, reference materials, and media, including the manufacturer/vendor, the manufacturer's Certificate of Analysis or purity (if available), the date of receipt, and recommended storage conditions.

d) All containers of prepared standards, reference materials, and reagents shall bear a unique identifier and expiration date.



PJLA

- PL-2 Policy On Measurement Traceability
- PL-3 Policy on Measurement Uncertainty for Calibration and Testing Laboratories
- > LF-123 Traceability Acceptance Criteria Form

Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.7 Collection of Samples

Note: Sampling is a defined procedure whereby a part of a substance, material or product is taken to provide for testing or calibration of a representative sample of the whole.





Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.8 Handling Samples and Test Items

5.8.2 The laboratory shall have a system for identifying test and/or calibration items. The identification shall be retained throughout the life of the item in the laboratory. The system shall be designed and operated so as to ensure that items cannot be confused physically or when referred to in records or other documents. The system shall, if appropriate, accommodate a sub-division of groups of items and the transfer of items within and from the laboratory.

5.8.5 a) The laboratory shall have a documented system for uniquely identifying the sample containers that hold samples to be tested, to ensure that there can be no confusion regarding the identity of such samples at any time. This system shall include identification for all samples, sub-samples, preservations, sample containers, tests, and subsequent extracts and/or digestates.

5.8.6 The laboratory shall have a written sample acceptance policy that includes the following: a-g
 f) procedures to be used when samples show signs of damage, contamination or inadequate preservation;

5.8.9 The laboratory shall have SOPs for the disposal of samples, digestates, leachates and extracts or other sample preparation products.



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.9 Quality Assurance for Environmental Testing

5.9.1 The laboratory shall have quality control procedures for monitoring the validity of tests and calibrations undertaken. The resulting data shall be recorded in such a way that trends are detectable and, where practicable, statistical techniques shall be applied to the reviewing of the results.



Note: Many control chart trend rules (e.g., Shewhart control chart rules).



Module 2: Quality Systems General Requirements

5.0 Technical Requirements

5.10 Reporting the Results

5.10.2 Each test report or calibration certificate shall include at least the following information, unless the laboratory has valid reasons for not doing so: a-k

c) unique identification of the test report or calibration certificate (such as the serial number), and on each page an identification in order to ensure that the page is recognized as a part of the test report or calibration certificate, and a clear identification of the end of the test report or calibration certificate;

5.10.9 Amendments to test reports and calibration certificates

Material amendments to a test report or calibration certificate after issue shall be made only in the form of a further document, or data transfer, which includes the statement: "Supplement to Test Report [or Calibration Certificate], serial number... [or as otherwise identified]", or an equivalent form of wording. Such amendments shall meet all the requirements of this International Standard.

5.10.11 c) 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.







Module 4: Quality Systems for Chemical Testing

5.0 Technical Requirements					
1.4 Method Selection					
1.5 Method Validation					
1.5.1 Validation of Methods					
1.5.2 Limit of Detection and Limit of Quantitation (However Named)					
1.5.2.1 Detection Limit (DL)					
1.5.2.1.1 Initial determination of the DL					
1.5.2.1.2 Ongoing verification of the DL					
1.5.2.2 Limit of Quantitation (LOQ)					
1.5.2.2.1 Initial verification of the LOQ					
1.5.2.2.2 Ongoing verification of the LOQ					
1.5.2.3 Verification of DL/LOQ					
1.5.2.4 Documentation					
1.5.3 Evaluation of Precision and Bias					
1.5.4 Evaluation of Selectivity					
1.6 Demonstration of Capability (DOC)					
1.6.1 General					
1.6.2 Initial DOC					

1.6.3 Ongoing DOC

Module 4: Quality Systems for Chemical Testing



Module 4: Quality Systems for Chemical Testing



Module 4: Quality Systems for Chemical Testing





Module 4: Quality Systems for Chemical Testing




CA-ELAP Assessments (CCRs vs. TNI)

Module 4: Quality Systems for Chemical Testing





CA-ELAP Assessments (CCRs vs. TNI)

Module 4: Quality Systems for Chemical Testing







- Implementation Resources
- Guidance Documents
- TNI FoPT tables <u>https://nelac-institute.org/content/NEPTP/fopt.php</u>
- Standard Interpretation Requests (SIRs) <u>http://www.nelac-institute.org/content/NELAP/interpret.php</u>
- Training <u>http://nelac-institute.org/content/eds-home.php</u>





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Forms

- PJLA Proficiency Testing Plan LF-81
- Traceability Acceptance Criteria Form LF-123

Policies

- · Proficiency Testing Requirements for Applicant and Accredited Laboratories PL-1
- Policy On Measurement Traceability PL-2
- · Policy on Measurement Uncertainty for Calibration and Testing Laboratories PL-3
- · Policy on Calibration Scopes of Accreditation PL-4

Procedures

- Accreditation Procedure General SOP-1 General
- Accreditation Procedure DoD ELAP SOP-1 DoD ELAP
- Accreditation Procedure EPA NLLAP SOP-1 EPA NLLAP
- Accreditation Procedure FCC SOP-1 FCC
- Accreditation Procedure Inspection Bodies SOP-1 Inspection Bodies
- Accreditation Procedure Medical SOP-1 Medical
- Accreditation Procedure MP SOP-1 MP
- Accreditation Procedure TNI EL SOP-1 TNI EL
- Accreditation Procedure TNI NEFAP SOP-1 TNI NEFAP
- The FDA Accreditation Scheme for Conformity Assessment Program (ASCA) SOP-1 FDA ASCA
- Proficiency Test Provider (PTP) Accreditation Procedure SOP-1-PTP
- Appeal Procedure SOP-10
- Complaint Procedure SOP-9
- Use of Accreditation Claims and Symbols SOP-3
- Suspension, Withdrawl or Reduction of Accreditation SOP-11





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