



III. Issues voted on by the NELAP Board

During the evaluation process, there were five decisions made by the NELAP Board. Table 1 lists the standards and the interpretations made by the Board.

Table 1	
NELAC Reference	NELAP Board Interpretation
2.4.1 To be accredited initially and to maintain accreditation, a laboratory shall participate in two single-blind, single concentration PT studies, where available, per year for each field of proficiency testing for which it seeks or wants to maintain accreditation. Laboratories must obtain PT samples from a PTOB/PTPA-approved PT provider. Each laboratory shall participate in at least two PT studies for each field of proficiency testing per year unless a different frequency for a given program is defined in the appendices. Section 2.5 describes the time period in which a laboratory shall analyze the PT samples and report the results. Data and laboratory evaluation criteria are discussed in Section 2.6 and 2.7 of this chapter.	Requirements for DW PT's are different from requirements in the NELAC standards. Consensus of the NELAP Board was that the NELAP evaluators should document compliance with DW PT requirements. (6.3.2.e states "The NELAP evaluation team shall review the application and supporting documents to evaluate whether the accrediting authority's environmental laboratory accreditation program requires its accredited laboratories to meet the standards set forth by the NELAC standards, Chapter 2, Proficiency Testing, Chapter 3, On-site Assessment, Chapter 4, Accreditation Process and Chapter 5, Quality Systems)
3.2.1 Each assessor must satisfactorily complete a training program approved by the AA responsible for on-site assessments. Each AA shall be responsible for ensuring that the training course used to train its assessors meets the NELAC standards.	The requirements for assessor training are met when the assessor completes the requisite basic and technical training courses within one year of assignment as an assessor, unless the AB can demonstrate that it was not practicable. Additionally, the assessor must complete four supervised onsite assessments before conducting any unsupervised NELAC assessments.
3.3.1 Accreditation bodies must conduct a comprehensive on-site assessment of each laboratory prior to granting accreditation, except as allowed by interim accreditation (Section 4.5.1). In addition, an on-site assessment of each accredited laboratory must be completed at least every two years. Assessments may be conducted more frequently for cause, at the option of the accreditation body.	The 2-year period for On-Site Re-assessment of a laboratory means 2 years plus or minus 6 months. However, Interim Accreditation can be used to extend the time period for re-assessment of the laboratory to a maximum of 36 months after the last On-Site Assessment.
3.5.2(j) presentation of the assessment appraisal form to the responsible laboratory official (for submission to the accreditation body);	Some ABs do not present the assessment appraisal form to the laboratory at the opening conference, rather they were presenting them at the closing conference or at another time.. The NELAP Board advised the evaluation teams to cite it as a deficiency if they observe that the AB is not providing labs with an appraisal form at the beginning of the lab assessment. This allows the AB the opportunity to respond with their reason for doing so. The evaluation team and the NELAP Board will then

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	determine the adequacy of the response and what further action to take.
<p>4.5.1 If a laboratory completes all of the requirements for accreditation except that of an on-site assessment because the accreditation body is unable to schedule the assessment, the accreditation body may issue an interim accreditation. Interim accreditation shall allow a laboratory to perform analyses and report results with the same status as an accredited laboratory until the on-site assessment requirements have been completed. Interim accreditation status shall not exceed twelve months. The interim accreditation status is a matter of public record and shall be entered into the national database.</p>	<p>The 2-year period for On-Site Re-assessment of a laboratory means 2 years plus or minus 6 months. However, Interim Accreditation can be used to extend the time period for re-assessment of the laboratory to a maximum of 36 months after the last On-Site Assessment.</p>