On-Site Assessment Committee

What We've Been Up to and Where We're Going…

What We've Been Up To: Part I

- Assessor Survey

TNI SURVEY FOR ASSESSORS

The TNI On-Site Assessment Committee is interested in evaluating the effectiveness of the TNI assessment process across the country. We need your help. Your responses to the questions below will be used to determine our current status and areas for improvement.

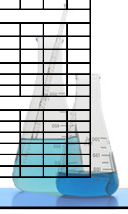
EPA Region your accreditation program is in:_____
Do you belong to an AA? Yes No
Mark the technical disciplines in which you are proficient:

A. Chemistry
B. Microbiology
C. Toxicity Testing
D. Air Testing
E. Asbestos Testing
F. Radiochemical Testing

Approximately how many labs a year on average do you personally audit? _____ Approximately how many labs does your program audit? _____

With "1" indicating strong disagreement and "5" indicating strong agreement, please respond to the following questions

#	Please Indicate Your Assessment Experience with the Following:	1	2	3	4	5
I.	**ASSESSOR COMPETENCE AND TRAINING NEEDS**					
1	Only qualified assessors are used to assess each *technical* area.					
2	Additional training is not required.					
3	General knowledge and skills are adequate to perform assessments.					
4	Additional training in assessing to the TNI Standard is not required.					
5	Have you taken the TNI (NELAC) Basic Assessors training course?					
6	Good communication exists between assessors who do TNI (NELAC) Standard based assessments in my state.					
7	Good communication exists with assessors from other states who also do TNI Standard based assessments.					
II	**ASSESSMENT TIME MANAGEMENT**					
1	For announced assessments, the laboratories are provided adequate advance notification of the assessment.					
2	An assessment plan is developed and documented which provides a detailed scope for the assessment.					
3	Laboratories provide logistical support that accommodates the assessment.					
4	The team leader identifies the technical experts needed, if any, along with their areas of responsibility.					
5	Laboratories do not attempt to slow the assessment progress.					
6	Laboratories inform assessors of any safety concerns or CBI considerations at the opening conference.					
III	**ASSESSMENT IMPLEMENTATION**					
1	My accrediting authority has an adequate and useful standard operating procedure (SOP) for conducting assessments.					
2	The assessment frequency and application response timelines are in conformance with the standard.					
3	An opening meeting is held with the laboratory.					
4	Attendance is documented at both the opening and closing conferences.					
5	Assessment evidence and findings are collected and documented.					
6	The assessment does not cover fields of accreditation for which the laboratory has not applied.					



7	Documented objective evidence or observable facts support assessment findings.						
8	Individual and group interviews are defined and their purpose explained.						
9	Assessment proceedings are carefully controlled.						
10	Sufficient time to focus on the assessment is allotted.						
11	Methods and procedures in operation are routinely observed during an assessment.						
12	The applicable sections of the TNI assessment checklist are completed during the assessment.						
13	Findings are clearly explained to the laboratory as the assessment progresses and at the closing meeting.						
14	There are enough assessment team members to complete the entire assessment scope within the time limit originally specified.						
15	Guidance on corrective actions for findings is provided to the laboratory.						
16	Assessment findings are presented at the closing meeting.						
IV	**ASSESSMENT REPORTING**						
1	Findings are included in the report for items that are not in the NELAC standard. 1= No, 5 = Yes						
2	Assessment reports are submitted to the laboratories within 30 days.						
3	Assessment reports include noteworthy accomplishments of the laboratory.						
4	The laboratories respond within 30 days to the assessment report.						
5	Laboratory conformance to the corrective action report is confirmed.						
V	**ETHICS**						
1	Laboratories do not attempt to find out specific information regarding another laboratory's business or assessment findings.						
2	Laboratories are informed of any potential assessor business connections, interests, or affiliations that might be a conflict. 1=No, 5= Yes						
3	Disputes with laboratory personnel do not frequently occur during assessments.						
4	Disputes resulting from an assessment are successfully resolved in a timely manner.						
VI	**INAPPROPRIATE PRACTICES**						
1	When assessing a laboratory do you look at integrations at the electronic level?						
2	What percentage of labs that you have surveyed in the past year did you discover were generating inappropriate data or analytical manipulations? 1 = 0-20%, 2 =21-40% , 3 = 41-60% , 4 = 61-80% , 5 = 81-100%						
3	Does your AA have a standard process for uncovering inappropriate practices? This includes both intentional manipulations and sloppy work. 1= No, 5=Yes						
4	What do you and your program do when inappropriate practices are discovered at a laboratory? Please use comments box.						

Comments:

Thank you for completing this survey.

What We've Been Up To: Part II

- Assessor Technical Course Guidance
  - Introduction
  - Asbestos
  - Inorganic non-metals
  - Metals
  - Microbiology
  - Organic
  - Radiochemistry
  - Toxicity
  - Examination Guidance

What We've Been Up To: Part III

- Laboratory Assessment Guidance
  - The old volume 1 Module 2 has been turned into a guidance document on how laboratories are assessed from the laboratory's point of view
  - It summarizes the ISO language while keeping the Committee developed language intact

Where We're Going: The Cliff Notes

- Laboratory Survey
- The Basic Assessor Training Guidance
- Write a Manual for Assessors
- Review AB On-site Assessment SOPs for Consistency