

Accreditation Body Mentoring Session Topic 1 Proficiency Testing Management

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NHDES

General Requirements

- Drinking Water

EPA Certification Manual (40 CFR); one passing PT per year

- Non-Potable Water

NPDES; one passing DMR-QA per year

- ✓ Other ABs may have these requirements or a variation of these requirements

General Requirements

- For NELAP laboratories, the NELAC website PT Tables list the matrix / method / analyte combinations for the required and experimental PTs that are available
- For some analytes, a PT may not be listed or available

General Requirements

- Laboratories are required to participate in 2 studies per year approximately 6 months apart
- Must successfully achieve two acceptable rounds per analyte from the past three round
 - Note: Past three rounds in last 18 months
 - With a PT deadline (Oklahoma by July 15th)
 - Schedules are set by the labs (NH ELAP)

General Requirements

- Supplemental studies are acceptable
 - Oklahoma must be at least 30 days apart
 - NELAP laboratories; 15 days apart
- PT studies must be from a NELAP approved PT provider
- Corrective Action reports must be submitted to the Accreditation Body

General Requirements

- Oklahoma Drinking Water Accreditation must participate in the WS studies. OK General Water Quality/Sludge Testing (non potable water/ solid matrix) must participate in the WP studies.
- NH ELAP only accredits for drinking water and non-potable water matrices at this time.

General Requirements

- OK Petroleum Hydrocarbon Category must analyze soil and water samples for analytes/method/technology
 - This is Oklahoma's first step towards NELAP style PT requirements
 - When PT analytes become available then the laboratory is required to participate
- New analytes become available ?

Evaluation

- Oklahoma PTs are evaluated annually
- Oklahoma Analytes are evaluated as Acceptable or Not Acceptable
- NELAP laboratories have their PTs evaluated per Chapter 2 of the standards
- NH ELAP evaluates PTs on an on-going basis

Recording Results

- NH ELAP and OK DEQ process the results manually, at this time, for each laboratory and records the results in spreadsheets

Reporting Errors

- Many errors can exist in this protocol
 - Errors of data entry by the AB, the laboratory staff or by the provider staff
 - Errors of submission of data
 - PT vendor e-mails lost
 - PT not received
 - Error in lost / misplaced / misfiled data
 - Failure to review entire PT report by lab staff

Results reported for an unaccredited method are not processed (NH ELAP)

Correction of Data

- When renewal certification is received at laboratory...
- The laboratory staff needs to review their analyte list carefully
- Contacting the AB immediately to review any issues

Corrective Actions

When a laboratory fails a PT analyte the laboratory must to run a corrective action to figure out why the PT failed.

There are many excuses out their for the failure, however **“I don’t know what happen”** is not an acceptable excuse.

Corrective Action reports allow the laboratory to determine where an error does exists.

Comments or Questions

