

## Laboratory Certification Standards Review Council Meeting Minutes From 8/11/2009

### Attendance

Council Members: Dave Kliber (Chair), Sue Hill (Vice-Chair), Steve Jossart (Secretary) *via LiveMeeting link*, Chris Groh, Kirsti Sorsa, Randy Thater, Judy Tholen

DNR Staff: David Webb, Rick Mealy

Others in Attendance: RT Krueger *via LiveMeeting link* and Tom Priebe (Northern Lake Service), Tom Hungerford (S-F Analytical)

### Summary and Action Items

At this meeting the Certification Standards Review Council:

- o approved minutes of the May 5, 2009 meeting
- o reviewed the fiscal 2009 actual vs. budgeted expenses
- o reviewed program audit performance
- o tentatively scheduled the Council's next meeting for Wednesday, November 11, 2009

### Agenda Items

#### **I. Check in/Agenda Repair**

- A. No modifications to the agenda were required.

#### **II, Review and Approval of Draft Minutes from 5-5-09 Meeting**

- A. A motion to approve the minutes with several minor changes discussed during the meeting was unanimously approved (Thater/Hill).

#### **III. Program Audit Status Report- for FY09 Final and FY10 Year-to-Date**

- A. Rick Mealy presented Council members with program audit statistics and backlog information. He noted that at the close of FY09, the program was just a bit below audit goals (133, 96.3%), while reports issued (138) were right on the mark. Closures (142, 103%) actually exceeded goals for both commercial and strictly wastewater labs. This is especially good news considering we were short staffed for the final 4 months of the fiscal year.
  - ▶ The number of reports due (10 total) is the best (lowest) we've seen in quite some time (15, 11, 28, and 23 due in previous quarters).
  - ▶ The number of open [audit] cases for commercial labs is in good shape at 58% of the annual audit goal. Wastewater labs remain steady with open cases representing about 50% of the annual audit goal.
  - ▶ This marks the first time as a program that the number of labs for which we have audit oversight responsibility has dipped below 400.
  - ▶ The number of audit reports released within 30 days dropped to 67% for the entire year, but that is still a significant improvement over the 5-year trend of only 49% issued within 30 days.
  - ▶ The backlog management plan continues to work very well, which is outstanding when one considers that the program was required to perform at least five (5) audits in response to applications and another two (2) labs required unplanned, follow-up audits.
  - ▶ This is the first time in at least 3 (and likely 5) years that the number of audits due this coming fiscal year (FY10) dropped below the annual audit goal. This trend is projected to continue for the next two years as well.

## FY2009 Cumulative Totals

CENTRAL OFFICE			REGIONAL		
	Total YTD	Goals		Total YTD	Goals
Audits	36	38		97	100
Reports	37	38		101	100
Closures	39	38		103	100
Reports Due	6			4	
Open Cases	22			47	

(Goals based on audit every 3 years)

## FY2009 Quarterly Totals

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
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### CENTRAL OFFICE

Audits	5	6	9	16
Reports	3	15	6	13
Closures	9	7	7	16

	AUG	NOV	FEB	MAY
Pending Reports	15	16	4	10
Open Cases	37	30	29	33

### REGIONAL

Audits	20	27	25	25
Reports	19	29	22	36
Closures	29	22	23	29

Pending Reports	9	12	7	5
Open Cases	45	51	48	48

<u>Total Labs by Responsibility</u>		<u>8/1/09</u>	<u>2/1/09</u>	<u>5/1/08</u>	<u>11/15/07</u>	<u>8/1/07</u>
<b>CO</b>	<b>Central Office</b>	<b>103</b>	<b>109</b>	<b>110</b>	<b>113</b>	<b>118</b>
RC	Regional/Central	-----	-----	-----	-----	-----
NE	Northeast	60	62	65	65	66
NO	Northern	29	29	31	31	31
WC	West Central	63	60	62	61	61
SC	South Central	71	74	75	75	75
SE	Southeast	68	69	69	69	69
<b>Total Regional</b>		<b>291</b>	<b>295</b>	<b>302</b>	<b>301</b>	<b>302</b>
<b>Total Audit Responsibility</b>		<b>394</b>	<b>404</b>	<b>414</b>	<b>420</b>	<b>423</b>
O	Other/Reciprocity	8	8	7	7	8

## FY2010 Cumulative Totals

CENTRAL OFFICE			REGIONAL		
	Total YTD	Goals		Total YTD	Goals
Audits	1	38		5	100
Reports	4	38		1	100
Closures	10	38		12	100
Reports Due	7			8	
Open Cases	23			40	

*(Goals based on audit every 3 years)*

## FY2010 Quarterly Totals

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
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### CENTRAL OFFICE

Audits	1			
Reports	4			
Closures	10			
	<b>AUG</b>	<b>NOV</b>	<b>FEB</b>	<b>MAY</b>
Pending Reports	7			
Open Cases	23			

### REGIONAL

Audits	5			
Reports	1			
Closures	2			
Pending Reports	8			
Open Cases	40			

<b>Total Labs by Responsibility</b>		<b>8/1/09</b>	<b>2/1/09</b>	<b>5/1/08</b>	<b>11/15/07</b>	<b>8/1/07</b>
<b>CO</b>	<b>Central Office</b>	<b>103</b>	<b>109</b>	<b>110</b>	<b>113</b>	<b>118</b>
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- B. Dave Kliber commented that one WELA member reported that their open audit has been subsequently closed out.
- C. Sue Hill asked if a standardized audit report template is used. Dave Webb responded that, while report format is the same or very similar, everyone uses their own system. There has also been a lot of work on checklists. Hill asked if more checklists (beyond testing for WWTPs) would be developed and available on the website. Webb responded that as new checklists are developed, certainly they would be made available. Auditors are more focused on getting comfortable with the new code and report format.
- D. Dave Kliber commented that the issue of checklists in the past has been related to the need to ensure a level playing field. The use of standard checklists ensures that what is a deficiency for one lab will be a deficiency for all labs. They need to be guidance to some extent, rather than hard and fast forms. Tom Hungerford related a recent WWTP audit experience in which Tom Trainor brought in a list of the "Top 10-20 Most Common Deficiencies". This very beneficial package included detailed requirements for each of the deficiencies discussed.
- E. With respect to the backlog, Dave Kliber commended the program, noting that Illinois was three (3) years behind. Kliber also noted that he thinks we're on the right track, but wanted it on the record that the vacancy created by Diane Drinkman's departure from the program could potentially result in some slippage.
- F. Kliber also requested if future Council data reports could include a column to identify those labs experiencing "special" circumstances which might explain the lab's listing situation.

#### **IV. Budget Variance Report**

- A. Dave Webb reported that, looking at all reports from July 2008 through July 2009, the bottom line is that the program under spent its budget by 19%. He went on to explain that the budget is broken down into three basic "slots": salaries, fringes, and supplies. He added that for outreach efforts, there is no specific budgeting object code, so nothing appears identified as outreach. Dave Kliber asked for clarification purposes if outreach spending is covered under the \$42,000 spent under the supplies line. Webb agreed that is the case.
- B. Kliber also asked why the telecommunications costs were 55% over budget. Webb responded that the increase relates to increased use of program cell phones, conference calls, and our share of allocated bureau costs. Kliber followed up his question by inquiring as to whether we are under budgeting for that line. Webb agreed that that was the case.
- C. Kliber pointed out that in-state travel costs were 39% over budget, and wondered if making audit goals while under-staffed explains that. Webb agreed that was the case, noting that auditors are tending to cover more than one facility audit while out in the field, which necessitates overnight lodging costs. On the other hand, it improves program efficiency. He noted specifically that Camille Johnson recently completed three audits with a single overnight stay.
- D. For staffing costs, Webb noted that Diane Drinkman left in March, meaning that three additional months of salary and fringes had been collected but unspent, amounting to about \$15K. he added that we budgeted for six (6) months of salary for this fiscal year; if we don't feel we can fill the position prior to July 2010, then there could be an additional six (6) months of unspent salary dollars sitting as surplus (unless DOA takes it). Kliber immediately asked whether DOA could take that money. Webb responded that though technically they could do so, it is unlikely to occur. Subsequently, next spring when we review the budget, we need to see how much is available and potentially use it to reduce fees.
- E. Randy Thater asked whether LabCert staff would be subject to furloughs. Webb answered that about 99% of the agency staff is subject to furloughs at 8 days per year for 2 years. He added that the lab community is losing the availability (and costs) of 6 staff members x 8 days each, or 48 staff days between now and July 2010. That will further add to the surplus in the program budget. The impact might be that management has to say "no" to activities such as speaking at WWOA. When it comes down to it, our job is to audit labs.

## V. Variances

- A. No new variances. Webb reviewed the proposed handling of current variances affected by the code revision.

## VI. Certification Renewal Status

- A. Rick Mealy provided a status report on certification renewals for fiscal 2010. This was a challenging year because it represented the first year in which labs actually had to meet the renewal requirements imposed by 2008 revisions to NR 149. Last year, renewal was based on satisfying old NR 149 requirements. Mealy reported that at this time, 320 labs were eligible to be completely renewed for all parameters and technologies. 11 labs owe fees, with the total amount owed being \$14,600 or about 2.5% of budgeted fee revenues. 70 labs need to provide PT results for 1 or more analytes, but about half that number is missing less than 5 PT results. Last year at this time, \$30,000 in fee revenues had yet to be collected; 63 labs could not be completely renewed for all parameters, and 38 labs were missing at least 1 PT result.
- B. Mealy also reported that the single largest challenge was to modify the program's database to properly deal with PT samples for renewal requirements. This was an assignment formerly handled by Diane Drinkman, so it required additional unplanned staff time. Consequently, while the program typically sends labs missing one or more PT results a reminder in early June, we were not able to make that evaluation until late in July.
- C. Mealy also recounted a presentation made to WELA last week explaining that a significant volume of PT data could not be properly uploaded into individual lab files automatically. This problem uncovered a number of changes required by laboratories, PT providers, and the LabCert program. Particularly for organics, the number of analytes that require analysis of a PT need to be increased and made consistent across technologies for a given analyte "class" of compounds.

Webb asked how the Council would prefer to discuss things like the PT issue and analyte groups. He suggested that the program could lay out options and deadlines and present to the council. Dave Kliber wanted to be sure that the Council was involved in these discussions to the extent possible. He suggested the program bring forward suggested changes to the November council meeting, or communicate with the council prior to that if necessary. It was discussed that since these issues affect mainly larger commercial labs and are limited to multi-component analyte methods, that only a subset of Council members would be interested in providing input.

- D. Tom Priebe asked if the program was considering establishment of more analyte "groups". Mealy responded that the program had considered this last fall and opted to continue with the groups identified to date. This is something that could be re-evaluated annually.
- E. Priebe also expressed concern about the differences in how Wisconsin grades PT results relative to the grading protocols established by NELAC and which PT Providers follow. Priebe request that we consider adopting the NELAC protocol, specifically that aspect which credits laboratories for correctly identifying the absence of certain analytes from PT samples for multi-component methods.

## VII. Other Program & DNR Business

- A. Agency furloughs – Discussed earlier.
- B. Staff vacancy – Webb indicated that there was not a lot to report. He hasn't proceeded towards requesting to fill/cut/change the position in order to see whether a larger number of labs withdraw from the program. The program will always be under or over-staffed. We need to avoid the latter as it impacts fees. Webb suggested that soon it will be time to make a firm plan. The plan for the next 12 months is to meet our audit goals despite being short a position. We believe that will not be as onerous as it seems if we increase our efficiency.

If the program were to expand, such as adding microbiology (non-drinking water), for example, this could significantly impact how we proceed. Arguably, we should be looking into requiring/offering certification for wastewater microbiological testing. Currently, no one certifies or evaluates that testing. We would have to be careful not to forge down the path of filling our vacancy now and later have hindsight suggest we should have pursued filling the position with an individual who offered a background in microbiology.

It's possible that we could use an LTE to provide coverage for the area we cannot with existing staff. Certainly we do not need a straight up replacement but we could use something between nothing and full replacement.

- C. Council member terms – Three council members' initial terms expired July 1, 2009 (Groh, Kliber, and Hill). DOA contacted Webb and asked if we wish to renew those terms. That decision was approved by a council vote in May 2009. Webb will follow up with DOA and get formal letters of re-appointment for a second term.
- D. Administrative Code Updates – Webb noted that NR 528 (Stormwater Retention Pond Sediments a new code) was approved by the Natural Resources Board. Changes to NR 219 took effect June 1, 2009. NR 809, along with NR 810 and 811 is being revised and will be going out for public comment in short order.

#### **VIII. Council Member Issues**

- A. Kirsti Sorsa masked if any changes were coming regarding NR 102 (Microbiology testing). Webb responded that one of the reasons that no progress has been made is due to haggling at the federal level regarding which organism to focus in for monitoring and how permit limits should be established. Webb also pointed out that a lot of agency knowledge and experience was lost when Toni Glymph and Greg Kester left the agency. While Kester's vacancy has since been filled, Glymph's role has not.
- B. The question was raised regarding when NR 149 would be re-opened for revision, and the process which would be used to do so. Webb indicated that he was amenable to re-opening NR 149 but until the workload associated with certification renewals subsides, it's not appropriate. Webb was not prepared to address the formal process for such an effort, but commented that it would not include a huge Rules Advisory Committee (RAC) as was done previously. He suggested that one option would be to present a "redline/strikeout" version and offer an extended public comment period. Regardless of approach, the first step is to submit a "pink sheet" to agency administration. The pink sheet serves as a formal notice to the Natural Resources Board that a revision is under way. Potentially, the program may be in a position to submit a pinksheet during the holiday or January timeframe. It all comes down to when he and Mealy have the time to work together on it.
- C. Dave Kliber requested that the "Open Item" list be reviewed at the November 2009 meeting. He asked that the list be sorted to move those items which have been addressed to the bottom

#### **IX. Next Meeting Date**

- A. The next Council meeting was tentatively scheduled for Wednesday, November 11, 2009 at the DNR Science Operations Center (2801 Progress Road, Madison).