

# Laboratory Certification & Registration Standards Review Council Meeting Minutes

Tuesday, September 24, 2024

- Attendance – 26 participants
  - 9 Council members (7): Tad Schwartzhoff, Jon Anderson, Craig Obry (Vice Chair), Na Zhang, Brooke Klingbeil, Alex Zenner, Jennifer Buchholz
    - Absent - Christine LesCamela (Chair), Matt Schmeichel
  - 6 DNR staff (5): Rebecca Fahney, Patty Doerflinger, Autumn Farrell, Zana Sijan, Tom Trainor
    - Absent – Brenda Anderson
  - Guests (14): Chrystal Sheaff (former WY DEQ), Cody Danielson (former OK DEQ), Erin Mani (WSLH), Camille Danielson (WSLH) Julie Klimek (Davy), Mary Powers (Madison MSD), Rick Mealy (RGM Consulting), RT Krueger (NLS), Alfredo Sotomayor (Milwaukee MSD), Sharon Mertens (Milwaukee MSD), Steve Hefter (NLS), Steve Heraly (Badger), Ronessa Strozier (Madison PH), Paul Junio (Pace)
- Agenda repair
  - No changes.
- April 16, 2024, minutes
  - No changes.
- Council member update
  - New members:
    - Brooke Klingbeil replaces Paul as Demonstrated Interest representative.
    - Na Zhang replaces Brenda as WSLH representative.
    - With Brenda leaving the council, the Secretary appointment is vacant. Craig asked for volunteers to fill this role. Brooke volunteered and will serve as Secretary.
- Outstanding issues from last meeting
  - Duplicates, method blanks, and laboratory control samples will not be required for TSS contrary to previous discussions at these council meetings. NR 149 exempts method blanks and laboratory control samples. TSS duplicates have not been enforced since 2008, and the program will continue with this position. Labs may choose to follow either the TSS method required 2.5 mg residue limit, or the program required 1 mg residue limit inferred in NR 149. WPDES permits will be updated to require a 2.5 mg/L reporting limit instead of a 2 mg/L reporting limit. Labs can still report a <2 mg/L limit if they want to.
    - Alex asked if TSS benchsheets available on the website will be updated. Tom said we will plan to post updated benchsheets on the website by January 2, 2025. If you don't see them by then please reach out to Tom or Autumn.
    - Alfredo indicated that he is not in favor of the program's position on this quality control. He believes data quality increases with additional QC samples. Alfredo said he believes 40 CFR Part 136.7 requires that laboratories incorporate method blanks and laboratory control samples for TSS. Paul said he shares the same sentiment. Tom said he is aware of the 136.7 language, but he doesn't believe it is as binding as the others think. CFR 136.7 indicates that *“one or more of the twelve QC elements may not apply to a given method and may be omitted if a written rationale is provided indicating why the QC element(s) is/are inappropriate for the specific method.”* In addition, 136.7 indicates that the 12 QC elements are necessary, *“where applicable.”* Furthermore, the program feels that NR 149 provides the authority not to require method blanks and laboratory control samples. CFR 136.7 does not address duplicates. Rick Mealy indicated that he is in support of the program decision to exempt these QC elements for TSS. Tom said the program appreciates the feedback provided and will take the comments into consideration.

- Lab Cert program metrics
  - FY 2024 complete, July 2023 – June 2024: Large Scope
    - Audited = 89%, Reports Issued = 86%, Closed = 95%, Revised Application Audits = 15.
    - Reports issued within 60 days = 94%.
  - FY 2025 partial, July 2024 – August 2024: Large Scope
    - Audited = 117%, Reports Issued = 50%, Closed = 133%, Revised Application Audits = 1.
    - Backlog of labs = 6, up from 2 at last meeting.
    - Reports issued within 60 days = 100%.
    - Audits not closed over 1 year from report date = 0.
    - Active labs = 116.
    - New labs applied to program since last meeting = 3.
    - Labs dropped from program since the last meeting = 0.
  - FY 2024 complete, July 2023 – June 2024: Small Scope
    - Audited = 75%, Reports Issued = 81%, Closed = 78%, Revised Application Audits = 3.
    - Reports issued within 30 days = 95%.
  - FY 2025 partial, July 2024 – August 2024: Small Scope
    - Audited = 90%, Reports Issued = 70%, Closed = 100%, Revised Application Audits = 1.
    - Backlog of labs = 9, down from 10 at last meeting.
    - Reports issued within 30 days = 100%.
    - Audits not closed over 1 year from report date = 0.
    - Active labs = 207.
    - New labs applied to program since last meeting = 0.
    - Labs dropped from program since the last meeting = 3.
- Other business
  - Lab Cert program staffing changes:
    - Brenda Anderson was hired to replace Janelle Nehs.
    - Brandy left and recruitment for her position is currently open. See wisc.jobs, job opening ID 15527 to apply; recruitment closes October 7.
    - Rebecca Fahney was hired to replace Zana as Lab Services Coordinator.
  - 2024 summary of approved PT providers and required PTs:
    - Sigma-Aldrich is no longer offering PT services. Tom mentioned that two of the providers haven't provided PTs to us in over two years. Tom was wondering if at any point in the future we should remove them from our approved list. Paul said that he supports leaving all approved PT providers on the list even if they are not currently used. Tom said then it shall be so.
    - Tom indicated that the PT requirements have not changed since last year.
  - Explosive compounds by LC/MS:
    - The R&R program requested that Lab Cert offer certification for explosive compounds by LC/MS. Explosive certification by GC/MS and LC will continue to be offered. LC/MS technology achieves lower detection limits that the R&R program wants. The question was asked, "how are labs to know what technology to use?" Tom said that with any analysis request, labs need to verify with their client if accreditation is required, and if so, what detection limits are needed. Then a proper technology can be chosen for the analysis.
  - Lead and Copper Rule update:
    - Ann Hirekatur is the Program Manager for the Lead and Copper Rule Section; (608) 419-2452, [Ann.Hirekatur@wisconsin.gov](mailto:Ann.Hirekatur@wisconsin.gov)
    - Ann asked Lab Cert to present to council the slides she put together. If anyone has questions on this rule, please reach out to Ann.
    - As of October 16, 2024, public water systems must comply with the new federal "*Lead ALE (action limit exceedance) Tier 1 public notice rule.*" This rule applies to all community and non-transient non-community public water systems. A Tier 1 public notice is required when the lead ALE (15 ug/L, in late 2027 this will change to 10 ug/L) occurs in 10% or more of samples during the

monitoring period. When 10% or more of the samples exceed the ALE, public water systems are required to inform consumers, EPA, and the DNR.

- DNR is asking if it would be possible for laboratories to report all sample results at the same time for a given monitoring period. Laboratories would need to hold reporting of sample results until all analyses are completed and then report them all. Ann asked for feedback on this so she can be apprised of the lab community's concerns.
- RT, Camille, Paul, and Sharon expressed concerns that labs are then being asked to hold data if there is an exceedance, which is opposite of what is required. If labs were to do this, it may be perceived by the public in a negative light in that laboratories are "censoring" reporting of data. It also puts the responsibility for compliance on the laboratories instead of the public water system as the end user. This ask assumes that all samples are being sent to the same lab, which is not always the case. Labs also expressed a liability concern if they were to perform this ask. The suggested corrective action from this council meeting was for the DNR to "hold" their exceedance calculation until the end of the monitoring period instead of calculating it in real time as data is reported.
- It would be great if laboratories could encourage and educate public water systems to collect samples early in the monitoring period when possible. All sample results must be analyzed and reported by the lab no later than 10 days after the end of the monitoring period to avoid the public water system from receiving violations from the DNR. Brooke mentioned she would share this information with circuit riders. Brooke also said if facilities are submitting samples late, they may need to request rush results and pay more for them due to the rush. In some cases, the labs may not have the capacity to perform the rush request. All things to keep in mind.
- Camille asked if the entire Lead and Copper Rule would be enacted on October 16, especially the sampling process update for requiring a first and fifth draw. Tom didn't think the whole rule would be required. Our current understanding is that the first and fifth draw portion of the rule will not go into effect until 2028.
- Standard Methods quality control:
  - Tom indicated that the Lab Cert program does not have the authority to require total phosphorus and ammonia matrix spikes (MS) and matrix spike duplicates (MSD) based on the reference to 4020 QC tables. Tom indicated that Standard Methods has made a conscious decision to use the word "consider" in some methods and not in others as a way of communicating their intent on required QC. DNR can recommend the use of 4020 QC tables, but we cannot mandate or require "consider" language.
  - Alfredo and Sharon shared their concern about data quality if labs are not performing matrix spikes and matrix spike duplicates. Alfredo and Sharon agreed that the program should be following 40 CFR Part 136.7. Tom again responded that 136.7 indicates that *"one or more of the twelve QC elements may not apply to a given method and may be omitted if a written rationale is provided indicating why the QC element(s) is/are inappropriate for the specific method."* In addition, 136.7 indicates that the 12 QC elements are necessary, *"where applicable."* Furthermore, for the MS/MSD QC elements, 136.7 specifically indicates that the MS/MSD *"may be used for suspected matrix interference problems to assess precision."* Again, the word "may" be used for the MS/MSD whereas it is not used for any of the other QC elements. Rick commented that matrix spikes are not needed after considering the other QC being completed by labs that indicate they can run the tests. Tom also asked what is the laboratory to do if the MS/MSD fail? How would continuously qualified data for the MS/MSD add any value to the sample results? What is the data user to do with qualified sample results for MS/MSD failures in relation to accepting the sample results?
- Brandy
  - Tom provided some parting thoughts from Brandy to the council.

- Guest comments

- Rick said that he applauds the program for doing their due diligence and historical review before making a final decision on TSS and Standard Methods QC tables.
- Rick also asked if the program could find a way to provide all laboratories with information on significant issues before a final decision is made so the program could get input from those who wanted to provide it. Zana and Tom indicated that they would find a way to proactively communicate with the lab community in the future, but everyone needs to keep in mind that our workload balance needs to be considered.

- Next meeting will be held November 12, 2024, at 9 am.