Summary of the Laboratory AB Expert Committee Meeting

September 25, 2026
11:30am Eastern

1. Welcome and Roll Call

Aaren Alger, Chair, called the meeting to order at 11:30am Eastern. The attendance is recorded in Attachment 1 – 7 Voting Members and 4 Associate members. A quorum was met.

The agenda was approved by unanimous consent.

The Committee decided to wait until the end of the call to vote on the August 21st minutes and the Houston meeting summary. Time constraints led to a decision to vote on them next month.

2. Assessment Consistency and Communication of Requirements.

Aaren shared concerns arising from recent assessment experiences in which assessors cited laboratories for expectations that had not previously been communicated, changes in interpretation of holding times, and requirements based on informal information about anticipated regulatory changes.

The Committee discussed Section 8.2.3, which requires ABs to provide due notice of changes to their accreditation requirements. The Committee generally supported clarifying that ABs must communicate changes in expectations or interpretations before enforcing them against laboratories.

Carol emphasized that findings must be supported by a written standard or other appropriate, documented reference. This would help laboratories understand the basis for deficiencies and provide a defensible foundation for complaints or appeals. The Committee agreed that the proposed language should not allow findings to be based solely on undocumented interpretations or individual assessor judgment.

There was discussion on whether the Standard should explicitly require assessors to cite applicable requirements when documenting findings. Although this practice is generally addressed through assessor training, the Committee noted that it may be appropriate to establish a clear requirement in the standard itself.

The discussion also highlighted the importance of consistent assessor performance. Members considered whether assessors should receive nonconformity-writing training more frequently than once during their careers. Ilona noted that a separate training session on writing nonconformances had been developed and recorded, providing an additional resource for assessors who need support.

Aaren also noted that discussions with Mitzi Miller during an AB evaluation reinforced the value of assessor qualifications and training. Although feedback at the Houston meeting had raised questions about the need for these provisions, subsequent input supported continued development of the requirements.

3. Accreditation Body (AB) Oversight and Assessment Report Quality

The Committee discussed strengthening requirements for ABs to review assessment reports before issuing them. It was noted that report approval should include an effective review of the quality, accuracy, and consistency of the assessor's findings.

Amy proposed requiring ABs to maintain a documented process for periodic review of assessment reports. Such a process could address the accuracy of cited deficiencies, consistency of interpretation, report quality, and feedback provided to assessors when corrections are necessary.

There was agreement that documentation of these reviews would help demonstrate that ABs are fulfilling their oversight responsibilities. It would also allow evaluators to verify that reviews are occurring systematically rather than relying on a limited sample of reports or the chance discovery of errors during an evaluation.

The Committee agreed that written reports and report-review procedures will need additional language. The proposed approach is to specify the minimum topics that AB procedures must address, rather than prescribing a detailed, step-by-step process. The Committee considered whether extending deadlines would be beneficial or whether the existing 30-day timeframe should remain unchanged.

The Committee needs to complete the documentation associated with changes from ISO language. Ilona, Ryan, and Millie have developed a table identifying areas where ISO language was deleted or significantly modified. The justification portion of the table still needs to be completed.

4. Assessor Qualifications and Equivalency Options

The Committee reviewed Carol's proposed revisions to Section 6.1.3.2 concerning assessor qualifications. The proposal consolidates the restriction on undergraduate laboratory coursework into the introductory language rather than repeating it under multiple qualification options.

Under the proposed language, laboratory experience associated with undergraduate coursework would not count toward the required experience unless the laboratory work was part of a cooperative education program in which the individual was working for the laboratory.

Carol also proposed replacing the broader term “scientific discipline” with “STEM field” to align the terminology with other portions of the TNI standard.

Members supported the overall direction of the revisions. Aaren suggested clarifying that qualifying work arrangements could include paid or unpaid positions, internships, and similar arrangements, so the requirement would not be interpreted as applying only to formally employed personnel.

The Committee then considered Ilona's suggestion for allowing credentials or other equivalencies to satisfy certain educational requirements. Members discussed the need to ensure that a credential demonstrates appropriate technical knowledge and assessor

competencies rather than simply confirming familiarity with reading methods or interpreting standards.

Ilona explained that TNI's credential development involves defining the required knowledge, skills, and abilities and developing examinations to assess those competencies. Coursework may help candidates prepare for a credential, but the credential itself should demonstrate that the required competencies have been achieved. She also noted that technical and interpersonal competencies could be incorporated into the credential-development process with appropriate involvement with the TNI Credentials Committee.

Members raised concerns about whether a single credential should substitute for multiple college-level STEM courses. They also questioned whether vendor training courses intended to develop technical skills should count toward formal educational equivalencies. The Committee distinguished technical training, such as instruction on specific analytical instruments or methods, from broader communication and management skills.

The discussion resulted in general support for considering a credential-based alternative when accompanied by substantially greater professional experience. A range of six to eight years of experience had been discussed previously as a possible requirement for candidates using this pathway. Members considered the additional experience an important safeguard to ensure that the credential option maintains the intended level of qualification.

Aaren agreed to combine Carol's revisions and Ilona's suggestions into a revised draft for Committee review.

5. Assessment Report Review Procedures and Documentation

Building on the discussion of report quality, the Committee considered how the standard should define the responsibilities of ABs for reviewing and approving assessment reports.

There was agreement that the Standard should establish a requirement for procedures addressing report review and approval. Those procedures should include sufficient detail to demonstrate that reports are evaluated for accuracy, appropriate citations, consistent interpretation, and overall quality.

Amy and Aaren agreed to develop proposed language. Their work will focus on defining the minimum elements that AB procedures must address and identifying appropriate documentation to demonstrate that reviews have occurred.

The Committee also discussed the value of performance indicators and periodic reviews to identify recurring assessor errors. Such reviews could help ABs identify assessors who need additional training, correct inconsistencies, and improve the reliability of assessment findings.

6. Corrective Action and Reporting Timelines

The Committee discussed the proposed 45-day timeframe and whether it should be retained or returned to 30 days.

Carol noted that laboratories are accustomed to working within the existing 30-calendar-day timeframe and generally plan accordingly. Others recalled feedback from the Houston meeting indicating that many stakeholders considered 30 days sufficient and did not want assessment processes extended unnecessarily.

The Committee also discussed the need for consistent treatment across laboratories and ABs. Any flexibility for weekends, holidays, or other circumstances would need to be applied fairly and consistently.

The Committee agreed to make the 30-day versus 45-day timeframe a voting item at the next meeting so members can consider the issue before voting.

Separately, the Committee discussed the requirement that ABs reinstate accreditation within 30 days after a laboratory has satisfied the conditions for reinstatement. Members distinguished this responsibility from the separate 60-day period associated with reviewing proficiency testing results. They agreed that the two timeframes address different processes.

Members supported retaining the 30-day reinstatement requirement. Laboratories should not experience unnecessary delays after resolving the issues that led to suspension. MIchella noted that the EPA certification manual provides a 30-day reinstatement timeframe.

Millie has begun preparing a summary of changes between the previous version of the standard and the current revised Draft version. This summary will be needed before the Draft Standard can be posted.

7. Accreditation Decisions and Interpretation of “Without Undue Delay”

The Committee continued reviewing proposed language concerning accreditation decisions, including the phrase “without undue delay.”

The discussion favored requiring ABs to establish procedures defining relevant decision timelines rather than attempting to specify a single timeframe for every circumstance in the Standard.

The Committee also reviewed several previously discussed editorial and technical items. These included clarifying the distinction between failure to respond and failure to submit, confirming previously revised language regarding reasons for denial, and addressing how ABs identify the basis for fields of accreditation (FOAs).

Regarding FOAs, members discussed whether each individual line item must identify the primary AB on which it is based. The Committee favored allowing ABs to document these relationships through different methods, including a separate supporting document or letter, rather than requiring every reference to appear directly on the scope. The

documentation should still clearly identify the relevant primary AB or bodies supporting the accreditation.

The Committee reviewed language addressing remote assessments and suspensions. There was support for retaining a non-exhaustive list of possible suspension reasons, using wording such as “include but are not limited to,” to provide useful examples without restricting ABs to the listed circumstances.

8. Review of Records and Document Consistency

Aaren asked whether a Committee member could review the Draft Standard to identify all provisions requiring records to be maintained. The purpose would be to verify that the Standard comprehensively addresses recordkeeping requirements. No volunteer was confirmed during the discussion.

The Committee also discussed inconsistent terminology used throughout the Draft when referring to Volume 1 and related standards. Ilona confirmed that she would address terminology and cross-reference consistency during the final editing stage, before the final vote.

The Committee clarified that Millie's extensive document was intended to support the comparison of ISO 17011 language that had been removed, revised, or adapted, rather than serve as a comprehensive summary of all changes to the draft standard.

Members noted that the accompanying table still needed explanations for why specific ISO language had been removed or changed. Aaren offered to begin working on those justifications.

9. New Business

None

10, Next Meeting

The next planned teleconference meeting will be October 16, 2026, at 1pm Eastern.

Aaren adjourned the meeting at 1:11pm Eastern.

Attachment 1 LAB Expert Committee Roster

Name/Email		Affiliation	Present 9/25 - Quorum
Aaren Alger, Chair Aaren.s.alger@gmail.com		Other – Alger Consulting & Training	Yes
Socorro Baldonado sbaldonado@mwdh2o.com		Lab – Metropolitan Water District, La Verne, CA	Yes
Kathryn Chang Kathryn.chang@et.eurofins.us		LAB – Eurofins	Yes
Sviatlana Haubner Sviatlana.Haubner@cincinnati-oh.gov		LAB – Cincinnati Metropolitan Sewer District	Yes
Michella Karapondo Karapondo.michella@epa.gov		Other – EPA OGWDW TSC/Cincinnati	Yes
Ryan Lerch Ryan.lerch@deq.ok.gov		AB – OK DEQ	Yes
Michael Perry mperry@labworks.com		Other - Labworks, Inc.	No
Millie Rose Mille.Rose@illinois.gov		AB – IL EPA	No
Amy Steuerwald amy.steuerwald@health.ny.gov		AB – NY DOH	Yes
Program Administrator: Ilona Taunton Ilona.taunton@nelac-institute.org	N/A	TNI	Yes
Associate Members:			
Paul Bergeron Paul.bergeron@la.gov		AB – LDEQ	No
Debbie Bond dbond@southernco.com		LAB – Alabama Power	Yes
Nilda Cox nilda.cox@et.eurofinsus.com		Lab – Eurofins Eaton Analytical LLC	No
Yumi Creason ycreason@pa.gov		Other	No
Taryn Hurley taryn.hurley@deq.ok.gov		AB – OK DEQ	No
Paul Junio paul.junio@pacelabs.com		LAB – Pace Labs, Inc.	No
LeeAnn Kline lkline@mjreider.com		M J Reider Associates	Yes
Jasmina Kuljanac Jasmina.Kuljanac@stpete.org		City of St. Petersburg Water Resources Department (Florida)	No
Marlene Moore mmoore@advancedsys.com		Other – Advanced Systems, Inc., Newark, DE	No
Zaneta Popovska zpopovska@anab.org		AB – ANAB	No

Mei Beth Shepherd mbshep@sheptechserv.com		Other – Shepherd Technical Services	No
Nicholas Slawson nslawson@a2la.org		AB – A2LA	No
Carl Kircher		AB - Florida	Yes
Cathy Westerman cathy.westerman@dgs.virginia.gov		AB – VA DCLS	No
Carol Gebhart carol.gebhart@alsglobal.com		ALS	Yes
Vanessa Hayes vanessah@ide-tech.com		IDE - Americas	No