Laboratory Accreditation Advisory Committee
Minutes for June 24, 2015 – Harrisburg, PA

MEMBERS PRESENT

Anita Martin, Chester Water Authority (Municipal Authority)
Danielle Cappellini, A.E. Kirby Memorial Health Center (Commercial Environmental Laboratory)
Cristin Geletei, US Steel Clairton Works Lab (Industrial Environmental Laboratory)
David Barrett, Mahaffey Laboratory LTD (Small Environmental Laboratory)
Joel Jordan, PA Rural Water Association (Association of Community Water Supply Systems)
Gene Greco, Franklin Township Municipal Sanitary Authority (Association of Wastewater Systems)
Twila Dixon, M.J. Reider Associates, Inc (Technical Expertise in the Testing and Analysis of Environmental Samples)
Bryan Swistock, Penn State University (General Public Member)
Marykay Steinman, Analytical Quality Assistance (General Public Member)

DEPARTMENT OF ENVIRONMENTAL PROTECTION STAFF PRESENT

Aaren Alger, Laboratory Accreditation Program Chief
Martina McGarvey, Director for the DEP Bureau of Laboratories
Laura Edinger, Regulatory Coordinator, Policy Office
Dawn Hissner, Environmental Group Manager, DEP Bureau of Safe Drinking Water
Virginia Hunsberger, Laboratory Accreditation Program
Amy Hackman, Laboratory Accreditation Program
Yumi Creason, Laboratory Accreditation Program

CALL TO ORDER AND ATTENDANCE

The meeting was called to order by Ms. Steinman. Committee members, DEP staff and visitors gave introductions.

REVIEW AND APPROVAL OF 3/11/15 MEETING MINUTES

Ms. Cappellini proposed that the 3/11/15 meeting minutes be revised to show that her comment on microbiology supervisor qualification should read "colony counting, media preparation."

Ms. Cappellini moved to approve the minutes with the proposed revision. Mr. Greco seconded the motion. All present were in favor and the meeting minutes were approved.

DISCUSSION OF CHAPTER 252 DRAFT AMENDMENTS

Ms. Alger explained that the Chapter 252 draft is a pre-draft standard and is not a proposed standard. The Department is discussing the regulatory language and engaging in stakeholder outreach, and so this revision is not the final product. Ms. Alger stated that there are two topics not included in Chapter 252: accepting credit card payments and the use of third party assessors. The Department must consider the effect of third party costs and welcomes any comments from the public. Ms. Alger went through the revised draft to explain the reason behind the Department's changes.

Proposed changes to 252.201, applications

The Department is developing a new database that would allow for the electronic submittal of applications and on-site assessment materials, so the regulation was updated to allow for this format. There were no committee or public comments/questions.

Proposed changes to 252.203(d), accreditation renewal

The Department added a provision for client notification after a change in accreditation status resulting from the expiration of an accreditation certificate. Forty-eight hours was selected because this change in status is a lapse in accreditation or non-renewal. Ms. Steinman asked if there was a form. Ms. Alger responded that there is not a form. The Department would tell the laboratory what language to use and would not limit information. Mr. Barrett explained that the language "on a form approved by the Department" is used throughout the draft. Ms. Alger responded that this would be a question for the Department's attorney on how the wording should read. A member of the public asked if this requirement pertains to any loss of accreditation (such as PT suspension). Ms. Alger responded that this only applies to expiration of certificate.

Proposed changes to 252.204(a), fees

The Department changed the basic microbiology list from analyte names to technologies (membrane filtration, pour plate, etc.). There were no committee or public comments/questions.

Proposed changes to 252.301(h), designation of laboratory supervisor

The Department clarified that the designated staff member to perform the functions of a laboratory supervisor must also be approved by the Department. There were no committee or public comments/questions.

Proposed changes to 252.302(c), whole effluent toxicity qualifications

The Department added supervisor qualifications for laboratories engaged in the testing of whole effluent toxicity. Ms. Dixon asked why the qualifications included a specific requirement for microbiology when WETT deals with fish. Ms. Alger agreed that it should not say microbiology.

Proposed changes to 252.302(e), radiological qualifications

The Department added health physics to possible credit hours. There were no committee or public comments/questions.

Proposed changes to 252.302(h), treatment facility qualifications

The Department removed the provision allowing 12 months after supervisor subclass certificates become available because the operator supervisor exam has now been available for over 1 year. There were no committee or public comments/questions.

Proposed changes to 252.302(j) and (k), transcripts

The Department added the requirements that to be an accredited laboratory supervisor you must have a degree from an accredited university or college and if you have foreign transcripts, they must be translated by an approved agency. There were no committee or public comments/questions.

Proposed changes to 252.304(b)(3)(vi)(D)(I), initial demonstrations of capability

The Department removed the requirement that initial demonstrations of capability must be approximately 10 times the detection limit. This was a frequent finding and the Department removed the language so the initial demonstrations of capability would be easier to meet. The Department also added acceptance criteria to section 252.304(b)(3)(vi)(D)(IV) for initial demonstrations of capability. There were no committee or public comments/questions.

Proposed changes to 252.304(b)(3)(vii)(D), continuing demonstration of capability

The Department added clarification for the acceptance of continuing demonstrations of capability using four consecutive laboratory control samples. There were no committee or public comments/questions.

Proposed changes to 252.306, equipment

The Department explained that additions to this section were to clarify existing requirements. Ms. Dixon wanted clarification on 252.306(c) concerning supplies. Ms. Alger responded that the intent of this section was to relate to supplies used to obtain test results (such as sterility for microbiology). Ms. Steinman suggested adding materials "used for analysis" as additional language. Ms. Alger responded that the Department would look into changing this section. Ms. Geletei suggested "analytical testing supplies." Ms. Steinman also recommended changing the first sentence. Ms. Cappellini suggested removing "consistently operate within" from the first sentence.

The public had a question concerning 252.306(f)(4)(v) and the term laboratory notebook. The public wanted to know if this was specifically a notebook or if electronic recordkeeping was sufficient. Ms. Alger responded that laboratory notebook also refers to electronic data. Ms. Geletei referenced a definition for laboratory notebook from Chapter 252 that includes electronic data.

Proposed changes to 252.306(f)(5), pH meter

The Department explained that this section was changed to provide more clarification on what must be recorded. There were no committee or public comments/questions.

Proposed changes to 252.306(f)(8), incubators

The public asked why the Department added working day to the language for this section. Ms. Alger responded that if the laboratory does not consider the weekend as a working day, they are not obligated to come in over the weekend to take temperatures for refrigerators and freezers. This working day requirement does not apply to microbiological incubators which must be recorded each day of use and the regulation includes specific language to explain this requirement.

The public asked if someone was at the laboratory for three hours, would they put N/A in the afternoon time for microbiology incubators. Ms. Alger responded that a temperature must be recorded for microbiology, when samples are being incubated, two times a day separated by four hours. This measurement must be taken by a person or the laboratory may institute a policy and procedure for the use of a continuous reading, and recording, thermometer system or a maximum/minimum thermometer. Ms. Alger reminded the audience that simply taking a temperature does not necessarily meet the method and regulatory requirements for monitoring and controlling the incubator temperatures. If a laboratory chooses to use a continuous read or min/max thermometer, it would have to develop corrective action

procedures for correction of the incubator temperatures when they do not meet the method-defined requirements and how affected samples would be handled.

The public asked if 252 should require AM and PM temperatures as required by Standard Methods. Ms. Alger responded that some laboratories only operate in AM or in PM and did not want to add narrow exceptions to the requirements in the draft that would not actually apply to all laboratories.

The public asked if this incubator requirement was for air incubators or water baths. Ms. Alger responded that this requirement is for both.

Proposed changes to 252.306(f)(9), volumetric dispensing devices

The Department explained that this section was changed because it was originally misworded and this is the current intent of the Department. Ms. Cappellini questioned if graduated cylinder would classify as a volumetric dispensing device. Ms. Alger responded in the affirmative. The public commented that autopipetor is in both sections for accuracy verification for one year and for every three months. Ms. Alger responded that autopipetor and auto dilutors will be removed from the one year section. The public questioned if this section was to test critical volumes or all volumes. Ms. Alger responded that accuracy verification was for critical volumes.

Proposed changes to 252.306(f)(10), graduated sample containers

Ms. Cappellini asked if you would use sample containers for standards and reagents. Ms. Alger responded that all critical volumes used for testing must be verified.

Proposed changes to 252.306(g), supplies

The Department added the language 'laboratory supplies' for clarification. Ms. Dixon re-stated her previous. Ms. Alger suggested changing the language to "supplies essential to obtaining laboratory results." The committee was amenable to this suggestion.

Proposed changes to 252.306(h), reference materials

The Department added 'media' to this section which had been previously and accidently omitted. There were no committee or public comments/questions.

Proposed changes to 252.401(f), sample receiving

The Department edited the previous draft because the requirements were too stringent. The original requirement was to check all sample pH and temperature. Ms. Dixon asked if the language should be changed from pH of sample to pH of container because they receive many different containers for a single sample. Ms. Alger responded that the Department would clarify this section. Ms. Geletei suggested adding checking pH before analysis. Ms. Alger responded that not all samples can be checked for pH before analysis because the samples cannot be opened, such as VOCs, without jeopardizing the integrity of the sample. Ms. Alger also explained that she removed the section that required pH checks to be performed at the time of receipt and clarified that this section, as written, allows the laboratory to define in its own procedures how and when the checks will occur based on their operations and type of testing.

The public asked if treatment plants were exempt from this requirement since the collection is on-site. Ms. Alger responded that treatment plants must follow the current requirement. Ms. Martin clarified that in house collection testing would be different and the committee will assist in the development of a

guidance document for sample collection and receipt. Ms. Alger responded that all guidance documents would be prepared after the regulations are finalized.

The public asked if temperature blanks could be used. Ms. Alger responded that the temperature must be taken of the actual samples. Temperature readings from temperature blanks are normally not acceptable because temperature blanks are likely not representative of the samples collected. Specifically, a temperature blank might be added to the cooler at the beginning of the trip and the final sample added to the cooler eight hours later. An acceptable use of a temperature blank would be when all samples are loaded into the cooler at the same time and thus a temperature blank would be representative of all samples. Situations that would be acceptable to use a temperature blank would be when samples are loaded into a cooler to be shipped from one laboratory to another for subcontracting purposes or when all samples in the cooler are from the same sampling site with the same sample collection time. The public asked if the temperature must be taken for every sample. Ms. Alger responded that this is one of the things that was discussed at the last LAAC meeting and that the Department plans to develop a guidance document with the help of the LAAC to explain the many variations of how a laboratory could meet the sample acceptance requirements of Chapter 252. The public asked if residual chlorine must be taken for every SDWA sample – even for tests where residual chlorine is not a factor. Ms. Alger responded that presence of residual chlorine would not necessarily indicate a test is invalid, but that the laboratory must document the condition of the sample upon receipt and that the presence or absence of chlorine in a DW sample is one of those observations that the SDWA program has requested that the LAP add to the sample acceptance requirements. The public responded that this was an issue with collectors and not the laboratories. Ms. Steinman responded that a laboratory could get 100 lead and copper samples and must test each one for residual chlorine upon receipt. Ms. Alger responded that the language may be changed but must be directed to Bureau of Safe Drinking Water first. Ms. Dixon added that acid preservation will affect the strip residual chlorine tests. Ms. Cappellini asked if the Department required DPD or colorimetric testing for residual chlorine. Ms. Alger responded that the draft regulatory language does not specify how the test is done, but that the measurement must be made. The laboratory is required to take a measurement that meets the sensitivity of the test.

The public questioned what would happen if the laboratory did not know whether a source was chlorinated or not. Ms. Hissner responded that for now, documenting the residual chlorine result and reporting it to the client would be enough. The Bureau of Safe Drinking Water would know if the source was chlorinated or not.

Ms. Alger asked Ms. Hissner if all samples must be tested for residual chlorine, specifically for tests where chlorine does not impact the results. Ms. Hissner responded that the Bureau of Safe Drinking Water is concerned about residual chlorine when it affects the results. The public asked if the Bureau is requiring residual chlorine testing at the time of collection. Ms. Hissner responded that the Bureau can only require residual chlorine for compliance testing. Ms. Alger agreed to re-work this section based on this information.

Proposed changes to 252.401(f)(2), sample receiving

The Department clarified that the identity of the receiving personnel must be documented. Ms. Steinman stated that there are two sections (ii). Ms. Alger will change the format.

Proposed changes to 252.401(j), test reports

The Department added requirements for identification of amendments to test reports based on recent problems that DEP staff have had with laboratories issuing unidentified amendments. The Department added the requirement to use a unique identification on the test report (as previous test reports could only

be identified in data by the result) and to require laboratories to identify amendments. Ms. Steinman suggest adding sample identification number as a way to uniquely identify the test report. Ms. Alger responded that the Department could add this to a technical guidance document. Ms. Dixon explained that her laboratory uses an amended stamp and may not necessarily comply with the exact language in section 17. Ms. Alger suggested changing the language to identify reports as having been amended.

Proposed changes to 252.401(o), test reports

The Department stated that laboratories are sometimes required to provide guidance to customers through the test reports and the test reports must be clear on what constitutes a qualifier and what constitutes an opinion. The public asked how an opinion should be listed on a test report. Ms. Alger responded that as long as the statement is identified as an opinion it would be up to the laboratory on how to present it in the test report.

Proposed changes to 252.402, chemistry requirements

The Department explained that all the additions in this section are provided to add clarification. Ms. Dixon stated that 252.402(c)(4) should end with "initials" and not "individuals." Ms. Alger agreed. The public asked what the Department defines as an equivalent method as described in 252.402(f). Ms. Alger responded that the Department determines methods to be equivalent based on the same type of analysis (for example, the EPA ammonia electrode method and the standard methods ammonia electrode method).

Ms. Dixon asked why part of section 252.402(f)(8) was removed. Ms. Alger responded that this section doesn't have a requirement – only that data "may" be useable. Ms. Dixon asked if the removal of the language means they cannot qualify results as specified in the section. Ms. Alger responded that laboratories can still report qualified data for non-SDWA samples. Ms. Steinman suggested putting this section into a technical guidance document because its removal might alarm some people. Ms. Alger responded that the reason for changes will be described in the preamble of the proposed rulemaking.

The public asked if it was a requirement to qualify results with high continuing calibration verifications and non-detected results. Ms. Alger responded that all results must be qualified and this does not mean the data is not useable.

Proposed changes to 252.404, microbiology requirements

The Department explained that changes were made to provide clarification. Ms. Cappellini asked if 252.404(c)(7) should refer to the previous pipette provisions. Ms. Alger responded that she would have to check on that allowance.

Ms. Martin suggested language be changed for section 252.404(g)(7) so that if the sterility check failed, the whole lot, not just the sample tray, could not be used. Ms. Alger agreed.

The Department explained that a number of laboratories had issues with media sterility due to transport issues, even though the media came with a sterility certificate (252.404(k)). The Department decided not to allow the use of certificates for this reason. Ms. Cappellini asked if this section should specify "prior to use." Ms. Alger responded that she would check to see if the other sections already specify prior to use.

Proposed changes to 252.501, PT requirements

The Department explained that the new addition was already part of the Department's procedures. There were no committee or public questions/comments.

Proposed changes to 252.601, on-site assessment

The Department explained that there were no new requirements, just clarifying previous requirements. The public was concerned that when analysts give assessors the incorrect information, the assessors could take accreditation away before the laboratory could respond to the findings. Ms. Alger responded that the accreditation officers do not have the authority to remove a laboratory's accreditation on the spot and the laboratory has the ability to correct the accreditation officer in the out-briefing for any misunderstandings. Ms. Alger reminded the committee and public that laboratories are not permitted to be out of compliance.

The Department will add section 252.601(i) back into the standard.

Proposed changes to 252.702, revocation

The Department added in the language to 252.702(b) that the laboratory must maintain correction of the violation. Ms. Steinman asked how long a time period must be between repeat deviations when the Department considers revocation. Ms. Alger responded that this would depend on the deviation and situation. Ms. Steinman replied that this language suggests a laboratory can never have a repeat deviation without revocation. Ms. Alger responded that laboratories must be in compliance at all times and removing this language does not change this requirement. The public commented that one sample out of three years could demonstrate a repeat deviation and a laboratory's accreditaton could be revoked. Ms. Alger responded that all accreditation officers check for systematic problems. If a laboratory finds the accreditation officers are not performing this duty, they should contact the Laboratory Accreditation Program. The public requested that this addition be removed because accreditation officers could overlook the language of "may" revoke accreditation. Ms. Alger reminded the audience that accreditation officers do not make the final determination of accreditation status and do not have the authority to suspend, revoke, or even grant accreditation. Ms. Geletei suggested adding examples of failures that could result in revocation or add language about intent. Ms. Alger explained that the regulation is provided to explain the requirements for accreditation and the consequences for non-compliance. Ms. Alger also explained that failure to maintain corrective action is non-compliance and could result in revocation of accreditation with or without the statement that was added in 252.702(b)(3). Ms. Alger further explained that this statement was added with the intent to clarify the current requirement so that laboratories would understand the importance of maintaining corrective action and the consequences for failure to do so. The public and the committee continued to express concern regarding this addition; Ms. Alger agreed to remove it unless other Department representatives determined that it should remain.

Proposed changes to 252.703(c), suspension

The Department explained that the language added into this section was to add flexibility to the Department's enforcement requirements for laboratories and allow suspension instead of revocation for some non-compliance to the regulations. As currently written, the Chapter 252 regulation only allows for revocation of accreditation. There were no committee or public questions/comments.

Proposed changes to 252.706(b), recordkeeping

The Department explained that the language added into this section is not an exhaustive list but was meant to clarify what constitutes historical reconstruction. The public asked if this section would require laboratories to document the start and stop times of each separatory funnel shake. Ms. Alger responded that this section only requires time documentation when the method specifies a required time limit. Ms. Dixon asked if this section applied to the extraction of each batch of samples or each sample. Ms. Alger

responded that this section would require documenting the time of the whole batch, not each sample and agreed that this section needed to be reworded.

The public commented that there was a formatting error under section 252.706(c). Ms. Alger agreed that it must be reformatted.

Proposed changes to 252.707(b), subcontract laboratories

The Department received a request to add in the requirement for test reports to document the name of the subcontracted laboratory along with the accreditation number. Mr. Barrett suggested removing this requirement. Ms. Dixon agreed citing that DWELR does not require reports to list the name of the subcontracted laboratory. Ms. Cappellini added that the use of the accreditation number already identifies the laboratory. Ms. Alger responded that she would remove this addition.

Proposed changes to 252.708(a)(3), reporting

The Department explained that this addition was an oversight from the previous version and radiochemistry should have always been added to this section. There were no committee or public questions/comments.

Proposed changes to 252.708(a)(4), reporting

The Department explained that this addition (and the rest of the additions for section 252.708(a)) is for clarification. Ms. Dixon asked what "review" means in this section. Ms. Alger responded that the intent of the regulation is to allow laboratories with a procedure to review data after initial analysis have 15 minutes to perform this review before the one-hour requirement starts. Ms. Dixon asked what you do if you do not have a second reviewer available. Ms. Alger responded that this section may be confusing and will be clarified.

The public asked that section 252.708(a)(6) clarify that any qualifier has to be approved – whether it be a flag or documented in a case narrative. Ms. Alger responded that she would rewrite this section.

Proposed changes to 252.306(j) and (k), incubators

The Department explained that the new requirements are added because the Department has observed situations with overloading of samples in incubators and ongoing fluctuations of incubator temperatures outside of the method requirements. The Department explained that the temperature recovery study was suggested after seeing these issues with incubators out of specification. The Department also provided section 252.306(j) as a proposal for laboratories to validate the incubators they currently use instead of requiring the strict requirements of Standard Methods, such as water jacketed incubators. Ms. Martin asked what the impetus was for inclusion of the two-hour recovery time. Ms. Alger said that it seemed like a reasonable time for recovery and was open to suggestions for other recovery times. Ms. Dixon asked if a laboratory could keep adding samples throughout the day as long as it does not reach the maximum number of samples before overloading. Ms. Alger responded that the laboratory would have to make sure the temperature was within specification the whole day.

The public responded that these sections seem to only reflect issues for commercial laboratories and that small water treatment plants or wastewater treatment plants would only have one sample daily or weekly. The public asked if the small treatment plants would be required to perform these studies for water baths. Ms. Alger responded that the plants would also have to perform these studies.

The public asked what "service" meant in section 252.306(j)(1) and if monthly maintenance such as draining a water bath and cleaning it would require a laboratory to perform another distribution study. Ms. Alger explained that the intent was to perform another study after actual service due to a malfunction or change of a setting. Mr. Barrett responded that service could be interpreted differently and any word added to this section should be added to the definitions. Ms. Cappellini suggested adding a provision that would exclude routine maintenance. Ms. Dixon suggested removing the word "service" and leave repair in the language.

Ms. Alger asked what the committee thought about the two-hour recovery time. Ms. Dixon and Ms. Cappellini responded that two hours was a good start. Ms. Alger asked the members of the committee and the public to check their own laboratory incubators for recovery time and let her know if two hours is not enough time. The public commented that the Quantitray tests for Colilert may take extra time because some are not pre-warmed before going into the incubator. Ms. Alger responded that she has heard this concern from IDEXX as well. The public asked if the positive control could be used to tell you that the incubator is working properly. Ms. Alger responded that the positive controls are not stressed organisms and would behave differently than real bacteria in an environmental sample. Ms. Dixon stated that her laboratory gets a mix of samples, so a study could be all membrane filter samples but that would not represent the daily use. Ms. Alger responded that the Department would expect to see a representative study.

The committee did not have comments regarding the temperature distribution study requirement provided by the Department in section 252.306(k).

OTHER BUSINESS AND CONCLUSION

The public asked why some fees are 35% higher and why there are new fees. Ms. Alger responded that the Department is required to cover the cost of the program, so the fees had to go up with rising costs of assessments. Ms. Alger commented that the Department is currently down five assessors from the last fee update in 2010. Two vacancies are currently in the process of being filled. While a reduction in staff might reduce the cost to the program, the amount of work has not reduced. The cost of travel, rent, office supplies, salaries, and benefits also factor into the cost of the program. The new fees for complex microbiology demonstrate the addition of cryptosporidium to the Department's list of accreditations after EPA no longer provides primary oversight for. Ms. Alger explained that cryptosporidium takes much more time than any other test to assess. The public asked how the accreditation fees are distributed within the Department and how the funds are collected and distributed (i.e. through the general fund). Ms. Edinger responded that this type of information is usually included in a fee report that is provided to the Environmental Quality Board. Ms. Alger responded that she would look into how to get this information.

Ms. Alger updated the committee and public on the data qualifier requests for SDWA. The Department has received 185 requests and 22 are still currently pending. Seven of the requests did not require qualifiers, one request was withdrawn, 26 were denied, and 106 were approved. Most of the requests were for organic chemistry results. The public asked how long the process takes. Ms. Alger responded that initially it would be one or two days, but with the current work load it could take a couple of weeks. The public asked for the number of requests that were in-state and ones that were out-of-state. Ms. Alger responded that she did not have those numbers, but most of the requests were from in-state laboratories. Ms. Alger ensured that all out of state laboratories were notified of this requirement in a letter and the Department has taken action against out of state laboratories that have reported results without a qualifier request to DWELR.

DATA QUALIFIER DISCUSSION

Ms. Alger requested the committee and public's input into the qualifier codes. The public asked if this list was generated from laboratories. Ms. Alger responded that the list was generated by the Bureau of Safe Drinking Water and edited by the Laboratory Accreditation Program. The public asked if it was the intent of the Department to mandate this language. Ms. Alger responded in the affirmative. The public asked what the >8 hour qualifier meant. Ms. Alger responded that the eight hours represents the time limit that a sample should get to temperature. The eight hours was based on the hours of a working day. If a sample is not properly cooled and arrives over eight hours later, this is an indication that there was something wrong with the cooling process.

Ms. Dixon suggested adding an additional qualifier to the list for when the name of sample collector is not provided to the laboratory. Ms. Alger responded that this is not required to be on the test report and is not a qualifier. Ms. Dixon responded that this was a finding at her last on-site assessment. The public commented that they also been told during on-site assessments that this is required. Ms. Alger responded that she knows it is a requirement to have this information on the chain of custody but it is not required to be qualified on the test report. Ms. Alger will look into these laboratories' reports.

OTHER BUSINESS AND CONCLUSION

Ms. Edinger notified the committee and public that the new Technical Guidance Policy was released and comments are due July 14, 2015. There will be a webinar on June 30, 2015 at 2 PM. Anyone interested in the webinar can go to the DEP main webpage and click on webinars. You can also review the new eComment tool.

Ms. Hissner updated the committee that the Bureau of Safe Drinking Water has a technical advisory committee and has created a laboratory reporting manual. The Bureau's committee would like input from LAAC and stakeholders. Ms. Alger announced that the next meeting on September 30th will likely be all day and will involve the Bureau of Safe Drinking Water's reporting manual and the Policy committee's presentation. The public asked if there would be a phone line in. Ms. Alger responded that a phone line would be dependent on the Department's policy.

Ms. Hissner notified the committee and public that Chapter 109 now has 3 regulation packages and the first, the revised Total Coliform rule is under review and will be published for comment. Ms. Edinger responded that everyone can view this document online.

Ms. Dixon asked if the Department has had input from laboratories about the quantitation limits. Ms. Alger responded that she has not sent anything yet and this may be included as part of the discussion in September.

Ms. Alger reminded the committee and public that Fecal Coliform will no longer be allowed as confirmation for presence/absence tests in Drinking Water as of April 1, 2016.

The next meeting will be held on September 30, 2015.

ADJOURN

Mr. Barrett motioned to adjourn the meeting. Ms. Dixon seconded the motion.