

*A2LA CMT/Geotechnical Assessor Breakout Meeting*  
**The Sheraton Columbia Hotel**  
**Columbia, MD**

**Saturday, April 4, 2009**  
**(08:00 AM– 5:00 PM)**

**SUMMARY**

**1. Introductions**

The meeting was called to order at 8:15 p.m.; introductions followed.

**2. Review and approval of agenda:** A motion was made to approve agenda (S. Kaiser/J. Lynch). Motion carried.

**3. Approval of 2008 meeting minutes:** A motion was made to approve the previous meeting's minutes (S Kaiser/C. Mlodzik). Motion carried.

**4. Nomination of a new Chairperson.** N. Zuern was re-nominated as Chair.

**\*\*Action Item #1: M Hart-look into whether or not there is a term limit for the CMAC chairperson (by May 31, 2009)**

**5. Review of action items:** (*See Attachment # 2*)

A review of all action items found on the CMAC Action Items Excel spreadsheet took place.

AI1 - There does not seem to be an issue with TATs of the nuclear density gage calibration. There has been some question about the validity of the results as a lot of gages seem to be returned as being "out of tolerance" before the calibration, which means additional work for labs when the gages are returned to them. Unless specific details are provided by the labs affected, there is little that A2LA can do. Minor concerns have also been expressed about customer service at Qal-Tek. Labs should be encouraged to file a formal complaint with A2LA so that we may investigate fully.

**\*\*Action Item #2: still open-based on feedback we are still monitoring what effect only one provider for nuclear density gage calibration is having on our labs.**

AI2/AI3 – Still pending.

AI4 - Closed as of 4/4/2009. However, a new action item was created for determining Chair nominees for 2011. The question was raised regarding how to solicit greater lab participation in the committee. Meetings have been held more local to the labs, but this has not proven very effective. Ideas for consideration included:

- Make it a condition for their accreditation that they must serve as Chair of the committee at least once;
- Ask that W. Vogt solicit more involvement in the Houston area;
- Solicit involvement as a result of recent issues with nuclear density gage calibrations;
- Solicit involvement with regard to the USACE situation;

It was pointed out that labs appear to become actively involved only when there are problems with the system. Once problems are solved, participation drops.

**\*\*Action Item #3: M Hart to request nominations for new chairperson by April 2011.**

AI5 - In progress.

AI6/AI7 – Completed.

AI8 - M Hart is in contact with an individual in Harris County who is reviewing the documents and requirements. It was proposed that the title the R209 document and the initial paragraph on relevant Scopes of Accreditation be changed to include Harris County/City of Houston, specifically (*see attachment #5 and #6*). The City of Houston has approved removal of ASTM D2217 since it has been withdrawn, but no similar feedback has been received from Harris County as yet. Staff has been keeping the City of Houston/Harris County up to date on which labs have been suspended/ made inactive/etc. It was suggested that we speak with City of Houston/Harris County about what tests are relevant so that labs will not have to maintain equipment, etc. up-to-date for tests that are not relevant or performed but that the City/County require to be on their Scope. Per M. Hart, it appears that this list is going to remain unchanged for the time being.

The changes to R209 also include adding a section on remedial action based on Proficiency Testing (PT) results.

Motion to add the section on remedial action based on PT results made by R Jenkins, S Kaiser seconds.

Some attendees expressed the opinion that removal of a test/standard after two failed PT round was not fair. Staff pointed out that requiring the lab to run another sample beyond that point was not acceptable, since the lab would know what the results should be by that time. Options were discussed for removing the affected testing, suspending the lab's accreditation, requiring a reassessment or having an assessor observe the re-running of a PT sample in the case of repeated failures.

R Jenkins withdrew his motion and requested that it be reworded and sent out to the committee at a later time.

**\*\*Action Item #4: M Hart to draft a remedial action policy based on PT results. This will be sent out to CMAC for approval. This statement will need to be added to the PT Annex under construction materials, not the CMT/GEO requirements (by 10/31/09).**

The topic of lab suspension was revisited when P. Unger was present. He reinforced the idea that assessors would not be liable if they suspended a lab or participated in actions that would suspend the lab. Labs can appeal adverse actions and the suspension is stayed through the appeals process (9 member AC panel, then Board of Directors).

AI9-AI12 - K Drake has submitted his updates for staff review.

At this time we will ask everyone to look over the ASTM standard they are responsible for and make any necessary changes to the checklist since it has been a year since it was last done.

All will stay action items (except J Lynch) with a due date of 6/1/09

**\*\*Action Item #5: M Hart/E Carbonella to revise and implement updated CMT/GEO checklist for release (by 7/1/09).**

AI13 - Criteria Counsel clarified “rental equipment”—the equipment must be available for, at least, the initial assessment; documentation and interviews may be acceptable for subsequent renewal assessments. This interpretation is available on the A2LA website. A discussion followed about labs that have equipment tagged “do not use until calibrated” when it is equipment for test methods that the labs do not run but are required to have on their

Scope for various reasons and whether or not they have to have it calibrated and in service during the assessment. It was requested by those present to come to a consensus on this issue.

Consensus—equipment needs to be calibrated on a regular basis if it has moving parts—and at least one needs to be available and calibrated while the assessor is on site.

**6. A2LA terminology and definition task group formed from Criteria Council (CC) – update and advice of the purpose and status (Zuern)**

Attendees were informed that the CC has formed a task group to create a definitions list that will be available to all (examples: calibration/verification, etc.)

**7. Review of Test Method Review Matrix completion (Hart):**

*See Attachment #1-*

Attendees had a discussion on the examples that were brought up by M. Hart.

Attachment 1 shows a very good example of a completed method matrix and equipment list. Assessors shared shortcuts on what they do to assist others. Each column of the matrix was discussed in detail.

**8. A2LA Equipment Verification Program (EVP) / US Army Corp. of Engineers (USACE) status report (Hart).**

M. Hart explained to the group that we still have not made any more progress. P. Unger was present for this discussion as well and explained the history of this issue. Starting in Summer 2008, A2LA met with Pat Taylor, our main contact with the USACE, and it was decided that the USACE would begin doing oversights of A2LA EVP assessments by the first quarter of 2009; this has not happened yet. There is now a new contact, Dr Peterson (in Vicksburg), who is unresponsive to us. Dr. Peterson would not respond to emails or phone calls by M. Hart, even after P. Unger indicated to him that M. Hart would be emailing him with details.

P. Unger offered to pay for the USACE travel costs and Peterson declined the offer.

P. Unger called Joe Koester in Washington DC (Dr Peterson's supervisor), who was at least familiar with our name. Despite efforts, no commitment was made by the USACE to get this project moving. It appears that a face-to-face meeting is essential, but we are willing to go up the chain politically if need be.

M. Hart discussed issues that resulted from the equipment verification assessment that took place in March 2009. As a result of that assessment, it became clear that a full day must be dedicated to the equipment verification portion.

It was also requested that continuing education units (CEUs) be issued for the time spent in Houston on the training for the equipment verification program.

**\*\*Action Item #6: M. Hart to investigate issuing CEUs for the time spent in Houston for equipment verification training (by 10/31/09).**

**9. Review minor changes in Geotechnical Scopes and Geotechnical Program Requirements. (Hart)**

Already This was already discussed in agenda item 5 above during review of action items.

## 10. Discuss definition of R104, Field Laboratory section 3.5 (Jenkins)

*See Attachment #3*

It was brought up by a new assessor that the definitions within this document are somewhat unclear. The definitions as written were explained in further detail until understood by the assessor.

The question was brought up as to how we handle laboratories that are set up for 6-9 months on job sites such that the testing is considered accredited and part of the Scope of Accreditation. Some of the testing that is done at these sites requires certain calibration and environmental conditions. At this time, based on the current definitions, this type of work is considered field work and each specific location does not need to be listed on the scope.

**\*\*Action Item #7: M. Hart to obtain clarification on satellite/field lab/mobile lab and how it should be listed on the scope, taking into account account the length of time these labs are in existence and where they might be located (by 10/31/09).**

Once Action Item #7 is complete, the committee can further discuss a procedure for adding field laboratories to the Scope of Accreditation.

**\*\*Action Item #8: M. Hart to work to get an area to list specific site locations added to the application paperwork or create a document to notify A2LA when these sites are being set up-10/31/09**

Discussion followed on how field labs would be handled if they were set up between assessments. There would be no application paperwork to complete; would an assessment need to take place? If a client had specifically requested accredited work the definition given in C103 section 3.5 is very lacking and does not give a clear picture of what is expected and what needs to be done.

With the required timing in the CMT/GEO industry and with the level of competition—timing needs to be taken into account and whatever process is created needs to be understanding of that.

If we are pushing the benefits of accreditation there needs to be a good way to do this for mobile/field labs to make accreditation accessible.

Trace McInturff joined the discussion and reminded everyone that scope expansions can be done just by providing records to A2LA. And since the labs are already accredited to R104 a record review may be all that is necessary.

## 11. Steel testing (proper wording on Scope, accreditation of inspection services (i.e. UBC Special Inspector, Chapter 17, steel fabrication and erection, AWS and AISC) (Jenkins)

*Examples in attachment # 4*

The question was posed as to how steel testing was to be appropriately identified on the Scope. M. Hart asked that everyone be as specific as possible as to a lab's capability. It was mentioned that the ASTM committee for E329 is trying to add special inspection for welding to the method. It was mentioned that this crosses the boundaries into ISO/IEC 17020 inspection. Concerns were raised over having to charge a lab for an additional accreditation program and addition on-site time.

**12. Assessment of ASTM C42, Drilled Cores. (Jenkins)**

A question was raised regarding what to do if the lab wishes to list C42 on their Scope, yet they subcontract the coring portion. It was clarified that A2LA only accredits the parts of a test method that a lab can actually perform and that the Scope should indicate any limitations that exist.

**13. Subcontracting: Amount of quality system does a coring subcontractor have? (Jenkins)**

See agenda item 12

**14. Refresher on uncertainty criteria. (Lynch)**

John Lynch reminded everyone of the items that require an uncertainty calculation:

- Ovens
- Calipers, micrometers
- Dial Indicators (some) if they do not have anything other than readability
- Force
- Scales/Balances
- Temperatures (not concrete thermometers)

A question was raised regarding the Proctor Hammer. Specifically, if the calibration method itself is listed on the Scope, then the lab must have appropriate measurement uncertainty data.

**\*\*Action Item #9: John Lynch to look at the procedure for D2168 Standard Test Method for Calibration of Laboratory Mechanical-Rammer Soil Compactors again and provide a summary to M. Hart for dissemination to the committee (by 10/31/09).**

**15. Review of Test Method Review Matrix – efficiency in completing it? (Lynch)**

See agenda item 7.

**16. Most common errors encounter by staff (Lynch)**

M. Hart requested that assessors include as much specific objective evidence in their deficiency reports as possible. The assessors discussed the scenario where being too specific in a deficiency can lead to the lab's merely correcting the immediate problem instead of problems within the system as a whole. Other times, there are too many specific items to reasonably list in the deficiency.

**17. Ideal ratio of length of assessment to scope size. (Lynch)**

M. Hart indicated that on-site assessment time is not a matter of concern within this particular field.

**18. What do we do if lab is just not ready for assessment? What do we suggest to staff? What do we say on assessment documentation? (Lynch)**

Assessors initiated a discussion on what should be done if a situation arises when serious issues are uncovered after arriving on-site for an assessment. A2LA staff reminded assessors to immediately call into the office and inform the Accreditation Officer of the situation so that appropriate next steps can be determined. Significant discussion followed regarding the best way to handle these situations so that the labs can benefit from it as well. Ideas included:

- Leaving immediately when it is decided that the lab is not prepared and requiring evidence of a complete internal audit before the assessor will return;

-Requiring labs with significant problems to send their management team to a quality training class, etc.

One assessor asked why laboratories such this are not immediately suspended. M. Hart explained that the lab must address all of the deficiencies then a full follow-up assessment is done and the lab must address any new findings as well. When performing the follow-up assessment, more time may be needed to ensure that all the previous deficiencies have been addressed. If a lab chooses not to respond when they are suspended A2LA will then take the steps to withdraw them from the program.

It was pointed out that care must be exercised in certain areas where accreditation is required for a laboratory to do business. Our mission is not to put labs out of business but it must be understood that, by denying or withdrawing accreditation, that is essentially what we would be doing.

**\*\*Action Item #10: M. Hart & E. Carbonella will look into ways to work with labs that are in bad shape, especially for labs in the areas where accreditation is required for them to do work. We will pass on the information gathered to the assessors. 10/31/09**

**\*\*Action Item #11: T McInturff to examine wording in the AIM regarding Pre-Assessments to clarify whether this is an option for renewal labs as well as new labs (by 10/31/09).**

**19. “Competence” records; appropriate citing of the deficiencies, appropriate clauses, etc. (Kaiser)**

One of the assessors brought up the question of which section others cite when writing a deficiency against training. The consensus was that Section 5.2.1 doesn't require any objective evidence so Section 5.2.5 is a better section to cite since it requires records.

**20. Interpretation / Consistency Issues**

• **T1 deficiencies for nuclear density gauges**

Discussion took place regarding the perception of deficiencies as “black marks” against a lab. It was pointed out that assessors are fact-finders and are not the accreditation decision-makers. If a lab disagrees with any finding, they can discuss or formally dispute it in discussions with A2LA staff.

• **Retaining rings** no discussion took place

• **Sulfur Capping/Pad caps: design strength or breaking strength**

W Vogt brought up a situation that he overheard at a meeting in the Houston area, it is not clear if they are referring to A2LA assessors or assessments but it was brought up that deficiencies were written when pad caps were chosen that did not end up complying with the requirements.

W Vogt explained that there is talk about changing the wording in the ASTM standard dealing with pad caps. At this point the standard says that a selection of cap should be based on the strength of the cylinder but the selection needs to take place prior to testing the strength of the cylinder. A ballot went out proposing that the selection of the cap be based on specified strength. Out of the 71 ballots returned 70 were for the change and only 1 was against.

W Vogt was the no vote; he said that pad cap selections should be based on the estimated strength not specified strength, opposition argued that this required too much work and thought from the technician. There is now a revised ballot—based on anticipated estimated strength.

W Vogt will be at the ASTM meetings in June when discussion and voting will take place.

21. **CMAC Issues (Teleconference Cancelled - schedule 1 hr for W.Vogt & M.Kesselmayer and assessors if needed):**

- **Concerns re field/mobile labs**  
See agenda item 10 above.
- **City of Houston and Harris County requirements concerning accreditation to ASTM D3740. Given the expanse of time since the program was written, is the program still current, and are laboratories required to perform all test methods shown in the program requirements list, or should this be revised. (Mlodzik)**  
See agenda item 5 above.

21. **Old business:**

No old business

23. **New Business:**

A question was raised regarding whether or not attendees, in reviewing D6938, were comfortable with the calibration/validation/validator concepts. The conclusion of the discussion was that the standard requires the owner to provide a procedure for validation (it does not indicate which specific procedure, however) or have the equipment calibrated annually. J Lynch will follow up with Instru-tek and information will be provided to everyone.

**\*\*Action Item #12: J Lynch to call Instru-tek and determine if they have improved their validator, and request a report for review (by 10/31/09). He will provide the information to the committee after his review.**

M. Hart asked if there is anything else that staff can do to make the assessment info more accessible. Some assessors commented on the cumbersome nature of a CD containing several hundred pages of previous assessment documentation that is not tabbed for ease of reference.

**\*\*Action Item #13: D Valentine to research ways to tab the CD of previous assessment documentation so that the documents are searchable (by 10/31/09).**

M. Hart emphasized that assessors should cite a deficiency for all areas of non-compliance with accreditation requirements. Staff is seeing a wide variety in the number of deficiencies cited by different assessors which is causing concern over assessor consistency.

P. Unger reiterated that ASTM E36 is the home for ASTM standards related to accreditation bodies. There is discussion among other committees to add sections and/or phrasing that interferes with what is already stated in E36. Efforts are underway to eliminate this potential duplication and confusion.

*Summary prepared by Beth Carbonella, A2LA Accreditation Officer.*

**Attendees**

Niel Zuern  
John Lynch  
Robert Jenkins  
Stephen Kaiser  
Kingsley Drake  
Chuck Mlodzik  
John Murphy  
Steve McGeehan  
Michael Hart  
Elizabeth Carbonella  
Woody Vogt  
Mike Kesselmayr  
Bill Inderrieden  
RK Varma  
Steve Steiro