

Laboratory Accreditation Bureau (L-A-B)

Recognized by:



















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. REPORT DATE 2. REPORT T		2. REPORT TYPE		3. DATES COVERED 00-00-2011 to 00-00-2011		
4. TITLE AND SUBTITLE				5a. CONTRACT NUMBER		
Laboratory Accreditation Bureau (L-A-B)				5b. GRANT NUMBER		
				5c. PROGRAM ELEMENT NUMBER		
6. AUTHOR(S)				5d. PROJECT NUMBER		
				5e. TASK NUMBER		
				5f. WORK UNIT NUMBER		
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Laboratory Accreditation Bureau (L-A-B),11617 Coldwater Rd. Ste 101,Fort Wayne,IN,46845				8. PERFORMING ORGANIZATION REPORT NUMBER		
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)				10. SPONSOR/MONITOR'S ACRONYM(S)		
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)		
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited						
13. SUPPLEMENTARY NOTES Presented at the 2011 DoD Environmental Monitoring & Data Quality Workshop (EMDQ 2011), 28 Mar? 1 Apr, Arlington, VA. U.S. Government or Federal Rights License						
14. ABSTRACT						
15. SUBJECT TERMS						
16. SECURITY CLASSIFIC	17. LIMITATION OF	18. NUMBER	19a. NAME OF			
a. REPORT unclassified	b. ABSTRACT unclassified	c. THIS PAGE unclassified	Same as Report (SAR)	OF PAGES 15	RESPONSIBLE PERSON	

Report Documentation Page

Form Approved OMB No. 0704-0188

Introduction of L-A-B

- Improving Laboratories through Accreditation since 1999
- Located in Fort Wayne, Indiana
- Specializing in Testing and Calibration
 Lab Accreditation
- TAG and Assessor Motto: Confidence, Competence, Communication, and Consistency

L-A-B Organization

- Doug Leonard, President/COO
- Pat Douglass, Sales Manager*
- Jason Stine, Testing Program Manager
- Zaneta Popovska, Testing Program Manager*
- Ryan Fischer, Metrology
- Randy Long, Metrology
- Kelli Jennisch, Technical Coordinator
- Linda Mumma, Office Manager
- Jessica Balyeat, Receptionist
- Sara Geist, PT Coordinator*

L-A-B Organization

- 45 Active Assessors (8 for DoD ELAP)
- 61 TAG Members
- 11 TAG Members specifically for the DoD ELAP program with a variety of backgrounds
- TAG membership is open to all Technical Advisors. Must agree with code of conduct, confidentiality and our mission

DoD ELAP Program

- ISO/IEC 17025:2005 and DoD QSM along with L-A-B Policy requirements (ILAC/APLAC/NACLA recognition requirements)
- Program has been brought into current accreditation process
- Additional DoD QSM requirements fit well in current 17025 process ... just much, much more. Sector Specific.

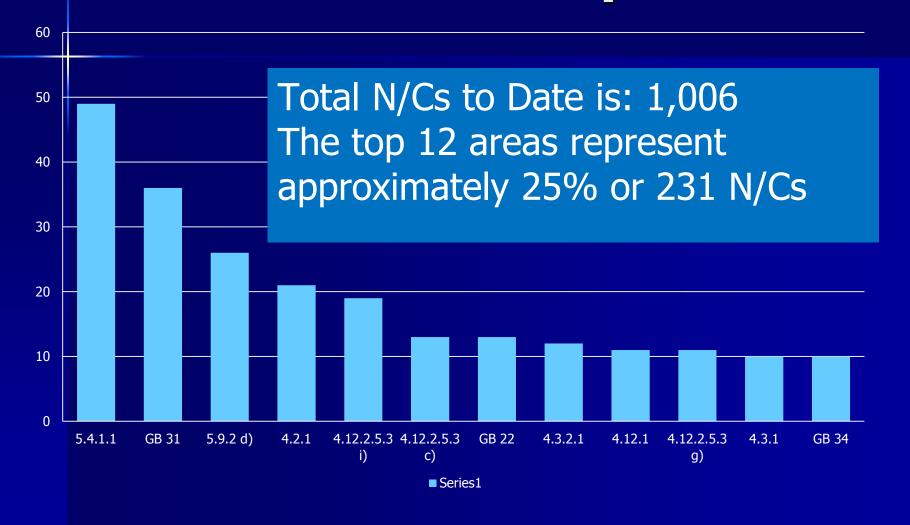
Outcome (L-A-B case)

- 83 Applications (sites) still coming in
- 21 Sites Accredited to date
- 4 labs still in the process
- Labs have improved. Labs have proven they can and do meet the requirements. The are competent to perform environmental testing. Many have moved from compliance to continuous improvement.

Common Non-Compliances

- 5.4.1.1 Standard Operating Procedures
- Gray Box 31 Equipment
- 5.9.2 d) Quality Control Protocols
- 4.2.1 Quality System
- 4.12.2.5.3 i) Reagent Records
- 4.12.2.5.3 c) Instrument Records

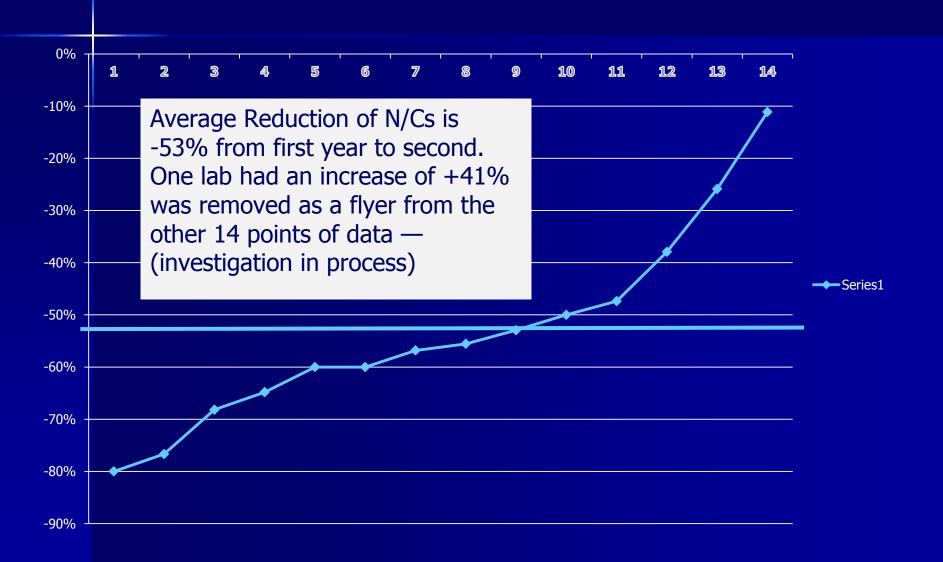
Common Non-Compliances



Program Trends

- Typically labs have reduced the number of N/Cs from 1st year to 2nd.
- Generally N/Cs have gone from traceability requirements and fundamental quality system issues to more record keeping and equipment related
- Compliance to Continuous Improvement starting

Program Trends



Complaints from the Laboratories

- Cost/Time of Assessment
- Duplicity with NELAC
- Time to Change A Scope
- Time to Get on DENIX
- Laboratory clients still not specifying current version of DoD QSM

Complaints from Assessors

- Documentation extensive to review
- Not enough time and money
- Should be able to combine with NELAC
- Need a better way of tracking PT and reporting

Complaint from a Laboratory's DoD Client

- Corrective Action sent to laboratory client from lab not adequate or appropriate for complaint
- Involved and complicated but basically;
- The root cause investigation at the laboratory did not dig deep enough

L-A-B Internal Improvements from Complaints

- Created new streamlined internal documentation to assure efficiency in scope changes (20+) outside of normal cycle
- Created fully functioning automatic PT tracking database working with PT providers and TNI ... automatic uploading of data and tracking.

Feedback and Next Steps

- Great Feedback ("A to A+") from labs.
- Work to further our consistency within our accreditations and over all accreditations (this meeting and this week)
- Improve Laboratories through Accreditation