## Attachment H – Sampling Toolkit

### H.vi: School Sampling Package Review Checklist

Review performed by: (Name/Title)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Name and certification number of the NJ Certified Laboratory who performed the analytical testing:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. QAPP signed by all parties involved in sampling (Program Manager, Project Manager, Individual School Project Officers, Laboratory Manager, Laboratory QA Officer):**Y or N**

If N, obtain.

1. Completed Plumbing Profile (Attachment B): **Y or N**

If N, provide details on what is missing:

|  |
| --- |
|  |
|  |
|  |

If **Y,** should include:

1. What is the material of service line: **Y or N**
	1. Is the school served by a lead service line? **Y , N , or Unknown**
		1. Must provide documentation for either Y or N answer. If Unknown, provide the plan for getting this information.

|  |
| --- |
|  |
|  |

* + 1. What is the material of potable water pipes: **Y, N , or Unknown**
	1. Was lead solder used in the plumbing system? **Y , N , or Unknown.** If Unknown, provide the plan for getting this information (i.e. conduct lead swab checks on solder throughout the building).

|  |
| --- |
|  |
|  |

* 1. Are brass fittings, faucets, or valves used in the drinking water system? **Y or N**
1. What are the Make and Model of Drinking Water Fountains/Water Coolers: **Y or N**
	1. Checked all the drinking water fountains and coolers against the EPA list of recalled fountains: **Y or N**
		1. If Y, any fountains that were on the list were taken out of service and the information was recorded in the school’s file.
2. Any areas deviating from normal usage in the drinking water system: **Y or N**
	1. If Y, identify where. Verify that these areas were flushed properly.
3. Are any outlets out-of-service: **Y or N**
	1. If Y, identify where. Verify that these areas are still out of service. If permanently out of service, verify that theses outlets are planned to be decommissioned or replaced and if being replaced they will be sampled when placed in service. If temporarily out of service, verify that these outlets will be sampled when they are placed back in service.
4. Have any plumbing repairs and replacements been performed within the last year: **Y or N**
	1. If Y, identify where.

|  |
| --- |
|  |
|  |

1. Is Water Outlet Inventory (Attachment C) for the school completed with all information filled in? **Y or N**

If N, provide details on what is missing.

|  |
| --- |
|  |
|  |
|  |

1. Is the Filter Inventory (Attachment D) thoroughly completed: **Y or N**

If N, provide details on what is missing.

|  |
| --- |
|  |
|  |
|  |

1. Is the Flushing Log (Attachment E) thoroughly completed: **Y, N or NA**

Only applicable for facilities or specific locations in a facility that are not routinely used (e.g. concession stands) or deviate from normal usage (e.g. buildings closed for holiday break).

If Y, does it include duration and location of flushes? **Y or N**

If N, provide details.

|  |
| --- |
|  |
|  |
|  |

1. Is there a completed laboratory report & data package for each sampling event including Chain of Custody sheets, field notes, results report and Excel spreadsheet: **Y or N**

If N, provide details on what is missing.

|  |
| --- |
|  |
|  |
|  |

**Laboratory Report & Data Package Review**

1. Is the Laboratory Report & Data Package complete: **Y or N**
	1. If N, provide details on what is missing and contact lab if necessary.

|  |
| --- |
|  |
|  |
|  |

1. Does the number of samples on the results report from the laboratory match the number of samples on the Chain of Custody? **Y or N**
	1. If N, identify which sample(s) are missing. Add these sampling locations to the *Follow-Up Sampling list*.

|  |
| --- |
|  |
|  |
|  |

1. Is there a field blank? **Y or N**
2. Are results reported in units of µg/l or ppb? **Y or N**
	1. If N, remind lab to report results as µg/l or ppb.
3. Are results reported to at least 3 significant figures? **Y or N**
	1. If N, contact lab.
4. Are there results above 100 µg/l? **Y or N**
	1. If Y, compare the result on the Microsoft Excel spreadsheet with the result of the laboratory report. Both results should be identical. If the results do not agree, call the laboratory to verify the correct result.
5. Were the field/ Chain of Custody notes compared with the sampling results? **Y or N**
	1. If Y, are there any notes and sampling results that indicates a outlet needs to be re-sampled? Add these sampling locations to the *Follow-Up Sampling list*. (i.e. notes indicate outlet was leaking or water was discolored)
6. Are there outlets that could not be sampled because they were not operational? **Y or N**
	1. If Y, outlets will be need to be sampled as part of follow-up sampling. Add these outlets on the *Follow-Up Sampling list*.
7. Are there sample codes not identified on the Key Code? **Y or N**
	1. If Y, contact sample collector and individual school coordinator to identify.
8. Verify that water outlets requiring pre-stagnant flushing were properly flushed: **Y or N**
	1. Are there outlets that were sampled and after reviewing the field notes it is apparent they required pre-stagnant flushing but were not flushed? **Y or N**
	2. If Y, these outlets need to be resampled as part of follow-up sampling. Add these outlets on the *Follow-up sampling list*.
9. Compared initial first draw samples with follow-up flush samples (if collected): **Y or N**
10. Are there outlets with an elevated initial first draw sample? **Y or N**
	1. If Y, was a follow-up flush sample taken at these outlets? **Y or N**

If N, these outlets need sampled follow-up flush sample taken as part of the follow-up sampling. Add these outlets to the *Follow-up Sampling list*.

1. Are there any outlets with follow-up flush sample results greater than the first draw sample results? **Y or N**
	1. If Y, identify the internal plumbing material using the school’s plumbing profile.
2. Match up the filters with the exact locations they are installed using the school’s filter inventory. Determine the following:
	1. Exact date installed: **Y, N, or Unknown**
	2. If N, return to location and identify.
	3. If Unknown, assume the filter will need to be replaced.