

B.C. LAKE STEWARDSHIP & MONITORING PROGRAM

Field Sampling Quality Assurance Inspection Checklist

This form is provided for groups to self-audit field procedures to ensure reliable and accurate data collection. Self-audits are recommended once per open-water season (or once per group if volunteers are rotating). ENV will endeavor to conduct an independent audit annually.

1.0 SITE VISIT INFORMATION	
Audit Date	Purpose
April 14, 2021	<input type="checkbox"/> Self-check <input type="checkbox"/> ENV check-in
Lake Name	Program Level
e.g., Tabor Lake	<input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3 <input type="checkbox"/> Level 4 <input type="checkbox"/> Level 5
Volunteer Group Name	
e.g., Beaufort Watershed Stewards (BWS)	
Nature of Volunteer Group	
<input type="checkbox"/> Community Group / NGO <input type="checkbox"/> Indigenous Group <input type="checkbox"/> Academic Institution <input type="checkbox"/> Individual <input type="checkbox"/> Industry <input type="checkbox"/> Other: _____	

2.0 SAFETY CHECKLIST	
A) BOAT SAFETY <input type="checkbox"/> N/A	Check Yes/No COMMENTS:
Vehicle/trailer parked in a safe location	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Second person always present	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Notes safety hazards (e.g. inclement weather) and adjust plans as needed	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Valid boat operation and safety certificates (see <i>Transport Canada's Safe Boating Guide</i>)	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Lifejacket or PFD for each person on board	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Minimum equipment requirements met (see <i>Transport Canada's Safe Boating Guide, and WCB regulations</i>) ^{1,2}	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
First aid kit always on board	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Trip information, including names of all persons present, and intended return time are known by an individual on shore	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No

¹ In Canada, the safety equipment required on board depends on the type and length of your boat.

² A fire extinguisher is required if the vessel has an inboard motor or fixed fuel tank or heating / cooking appliance that uses a liquid or gaseous fuel.

3.0 FIELD SAMPLING CHECKLIST

3.0 FIELD SAMPLING CHECKLIST		Check Yes/No	COMMENTS:
A) SECCHI DISK <input type="checkbox"/> N/A			
Secchi measurements taken between 10:00 am and 2:00 pm		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Secchi measurements taken on shaded side of boat with no sunglasses		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
B) TEMPERATURE / D.O. PROFILE <input type="checkbox"/> N/A			
YSI calibrated while at the lake, right before each sampling event (same day)		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
YSI stabilized before values recorded		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Records D.O. in mg/L (not %)		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
C) WATER SAMPLES (LEVEL 3 ONLY) <input type="checkbox"/> N/A			
Samples early in week to avoid transit delays		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Samples only at designated site; location deviations are always recorded		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Bottles clearly labeled before wetting		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Caps removed just prior to sampling and protected from contamination		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does NOT pre-rinse bottles before sampling		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Bottles filled to correct level and securely capped immediately after filling		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Care taken not to contaminate inside of bottles/caps with exhaust, fingers, etc.		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Records sample date and time (24-hr clock)		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Records field data, observations, and possible contamination sources if present		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
QA/QC Samples	Uses the same grab sample to fill both the REG and REP samples (water within the water sampler/Van Dorn)	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Ensures BLANK sample does not come into contact with lake water	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Records a unique time for the REP, BLF, and REG samples (none should match)	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
D) POST WATER SAMPLING <input type="checkbox"/> N/A			
Lab requisition filled out correctly and completely		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Takes photos of lab requisition and field sheet (if completed on paper)		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Water samples packed with enough ice/cold packs to maintain a temperature of 4°C		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Samples shipped within 24 hours of sampling		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reusable sampling and safety equipment are kept CLEAN, dry, and securely stored for future use		<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	

Comments or Concerns <input type="checkbox"/> N/A	
Inspection Completed By (Name of Auditor):	
<i>Name(s)</i>	<i>Signature(s)</i>
Inspection Reviewed By (Names of Volunteers/Collectors):	
<i>Name(s)</i>	<i>Signature(s)</i>