Laboratory Accreditation-Role of Pathologist

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RPA and Liverpool Hospitals

Synopsis of Talk

- Current Model of Accreditation
- Supervision Requirements
- On line review
- Surveillance visit
- (Re)Accreditation
    - -Pre
    - -During
    - -Post

Laboratory Accreditation is a Continuous Process

- 4 Year Cycle
  - On line review at 12 & 36 months
  - Surveillance visit at 24 months
  - Reaccreditation visit at 48 months

On Line Review

- Follow up “C” from previous accreditation
- Limited Review of Management System
- Validation/Verification of new methods/equipment
- QAP Performance Review
- Changes in Governance/ Ownership-Incl Supervision
- Technical Assessors may be co-opted

Surveillance Visit

- Review previous “C &M” from previous assessment or online
- Management System-esp Quality Manual
- Technical Issues-QAP
- Staff-Supervision

Assessment (Reassessment)

- On site Peer Review
- Technical Assessors
- Management System
- Changes to Scope of Accreditation
- Supervision

The Role of the Pathologist(s) Providing Supervision is Ongoing

Focus is not only the (Re) Accreditation of Laboratory

Supervision Requirements

- Outlined in NPAAC

  Requirements for Supervision of Pathology Laboratories (2007 edition)

  Requirements for Supervision in the Clinical Governance of Medical Pathology Laboratories(2018 edition)

The Relevant Categories for Pathologists are GX GY B

Supervision Requirements

Designated Person

Medical Practitioner (*G&B= pathologist*) who has responsibility for Clinical Governance and ensures ethical Patient care

Supervising Pathologist

With relevant scope of practice delegated to supervise pathology in G&B laboratories

Ongoing Requirements

- Meet Supervision Requirements
- Familiar with NPAAC Requirements
- Yearly Management Review
- Regular Laboratory Meetings
- Clinical Liaison

Supervision Requirements must be met

- Evidence of Delegation from designated person
- Evidence of Scope of Practice and up to date CPD
- On site presence
- Risk management and mitigation

Supervision Activities

- Performance Management
- Review of Incidents/Audits/Corrective Action
- Risk Management Planning and Review
- EQA &IQC
- Validation /Verification
- Continuing Education
- Communication with Designated Person

Supervision Requirements

- Ethical Practice

  -Patient Rights Paramount

  -Open Disclosure

  -Confidentiality

Supervision Requirements

Risk Management

Clinical Governance

Scope of Practice

Supervision Requirements

- Clinical Governance ensuring service quality and Patient Safety is a prime responsibility of the Designated Person. However all Pathologists must take regard of this responsibility as they have a delegated role and responsibility
- Supervision Requirements are the minimum requirements and in some cases may not meet the Clinical Governance Responsibility.

Laboratory Accreditation is a Continuous Process

- 4 Year Cycle
  - On line review at 12 & 36 months
  - Surveillance visit at 24 months
  - Reaccreditation visit at 48 months

Pathologist and On line Review

- Meet supervision requirements-GX GY B
- Ensure submission is correct
- “C” are resolved/M are considered
- Validation/Verification of new methods
- QAP up to date and reviewed and corrective action(s) carried out and traceable

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Survey Report
RN-1438199

Printable View

Survey Report Detail

Edit

Information

Participant Number	895.2	**Discipline Name**	CHEMICAL PATHOLOGY
Enrolment Year	2019	**Program Name**	General Chemistry and Therapeutic Drugs
Participant	Campbelltown Hospital	**Cycle**	110
Report Version	1	**Run**	0
Report ID	CPGC01100000000895020OEOC01	**File Link**	End-of-Cycle
Amendment Notes	Initial Publication.	**Attachment Link**	

Participant Flag

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Reviews

New

Action	Created Date	Review Version	Review ID	Owner First Name	Owner Last Name	Status	# Attachments	# Notes	Comments	View
Edit	8/06/2019	1	CPGC01100000000895020OEOC01	Ivo	Majurdic	Reviewed	0	0	Satisfactory performance.	View

Survey Report History

Date	User	Action
8/06/2019 2:16 PM	Ivo Majurdic	Changed **Flag** to **Green**.
16/05/2019 9:05 AM	Amazon API	Changed **RCPA Report Number** to **RN-1438199**.
		Created.

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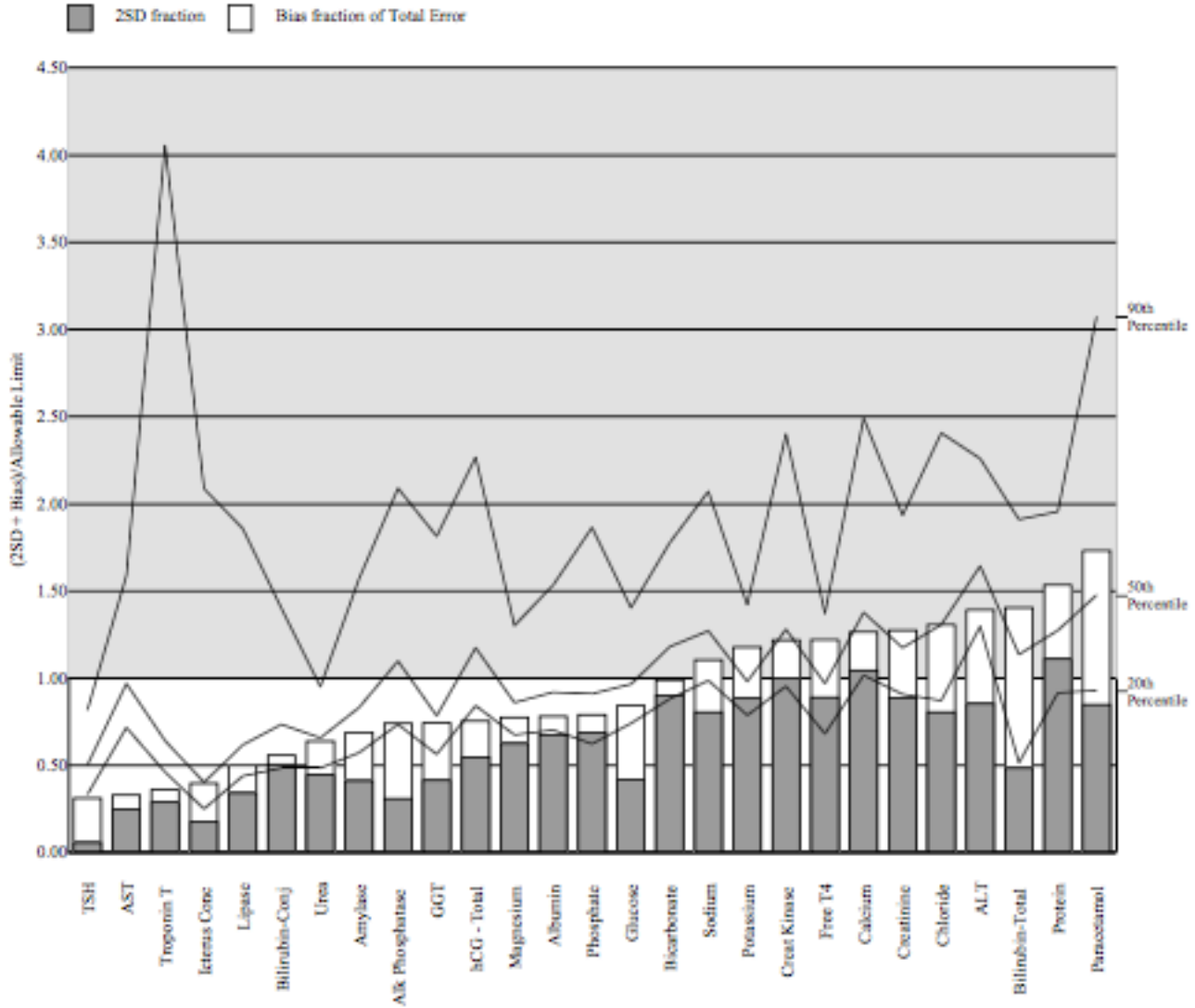
Information

Survey Report	RN-1438199
Review Version	1
Review ID	CPGC011000000008950200EOC01
Review Version	1
Review ID	CPGC011000000008950200EOC01
Status	--None--
Comments	

Save Cancel

PERFORMANCE SUMMARY FOR PARTICIPANT NO. 895.1

(2SD + Bias)/Allowable Limit Assessment - Compared to 20th, 50th & 90 Percentile Rankings



Results based on Labs Method Median - Albumin, Icterus Conc, hCG - Total, Free T4, TSH.
General Chemistry and Therapeutic Drugs Cycle 110 - 7 January - 15 April 2019

Pathologist and Surveillance Visit

- Meet supervision requirements
- “C & M” are resolved
- Validation/Verification of new methods
- QAP up to date and reviewed
- Be Available if Possible

Pathologist and(Re) accreditation Visit

Prior to Visit

-Supervision meets requirements

-Review documentation before submission

-Review Scope of Testing

-Review Previous Accreditation Report

-Management Review

-Point of Care

-QAP

Pathologist and(Re) accreditation Visit

At Accreditation

BE THERE

It is Peer Review

Pathologist and(Re) accreditation Visit

Opening Discussion

-Role of Pathologist

-Any clarifications required

-Discussion of laboratory services

Pathologist and(Re) accreditation Visit

Assessment

- Be available for queries (in person/ other methods)
- Meet with Technical Assessor(the pathologist)
- May be asked about CPD
- Risk Assessment

(G&B laboratories)

Pathologist and(Re) accreditation Visit

Assessment

- Be familiar with POC Service

Pathologist and(Re) accreditation Visit

Accreditation of Laboratory for RCPA Training

Pathologist and(Re) accreditation Visit

Exit Discussion

-Receive Feedback

-Correct Any Misunderstandings

-Consider C&M Conditions

-Consider Risk Assignments

Pathologist and(Re) accreditation Visit

Exit Discussion

-Receive Feedback

-Correct Any Misunderstandings

-Consider C&M Conditions

-Consider Risk Assignments

Pathologist and(Re) accreditation Visit

Post Visit

-Start addressing Cs (esp High Risk) before Final Report

-Develop Plan to meet the C&M in a timely fashion

-”Os” give opportunity for improvement

And Then the Cycle Starts Again