

Quality Management Program (QMP) – Overview

<p>Key Elements</p>	<ul style="list-style-type: none"> • 12 Quality Management Essentials (QME's) that function as the integrated "building blocks" necessary to support the Laboratory's pre-, post- and analytic work processes (i.e., path of workflow) so that they function as expected: <ul style="list-style-type: none"> - Organization - Facilities and Safety - Personnel - Equipment - Purchasing and Inventory - Process Control - Documents and Records - Information Management - Non-conforming Events Management - Assessment – External and Internal - Customer Service - Process Improvement
<p>Key functions</p>	<ul style="list-style-type: none"> • Provides an infrastructure to systematically evaluate and improve quality and the appropriateness of laboratory services by: <ul style="list-style-type: none"> - identifying and resolving problems in patient care (i.e., corrective action), including those that may interfere with patient care services - identifying opportunities to improve patient care (i.e., preventive action) - integrating with the SSR and facility-specific quality initiatives and programs • Ensures compliance with applicable state and local laws and regulations, which may include: <ul style="list-style-type: none"> - notifiable conditions - shipping infectious or diagnostic materials - retention of samples and records - hazardous waste disposal - fire codes - confidentiality of test results
<p>Scope</p>	<ul style="list-style-type: none"> • Covers the entire scope of acute care and ambulatory laboratory services • Implemented in all facilities and sections of the Laboratory, including Point-Of-Care testing.

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Source model	<ul style="list-style-type: none"> • Quality Management System Model for Laboratory Services; CLSI GP26-A3 • A Quality Management System Model for Health Care; CLSI HS1-A2
Quality Manual	<ul style="list-style-type: none"> • Contains the policies, processes and procedures related to the 12 QME's • Communicates the Laboratory's intentions and structure for quality management and provides instructions for activities related to each QME
QME policies	<ul style="list-style-type: none"> • Each QME has a policy that states the intent related to that particular QME and becomes the Laboratory's commitment to adhere to applicable guidelines, standards and requirements <u>and</u> to deliver quality services that meet customer expectations • Answer the question, "What does Laboratory intend to do?" • The guidance provided can be found in: <ul style="list-style-type: none"> - international quality standards and guidelines - national, state and local regulations - CAP and JCAHO accreditation requirements - Sutter Health policy
QME processes	<ul style="list-style-type: none"> • Describe the sequence of inter-related activities required to implement the QME policies: <ul style="list-style-type: none"> - all activities necessary to accomplish the intent of the policy - correct sequencing of the activities for the successful outcome of the process • Answer the question, "How does it happen in this Laboratory?" • Documented in flowcharts, tables or program descriptions
QME procedures	<ul style="list-style-type: none"> • Provide instructions for how to perform the steps in a given process activity • Answer the question, "How do I do this activity?"

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Forms and records	<ul style="list-style-type: none">• Forms are used to record data, information or results, including:<ul style="list-style-type: none">- blank pages or templates- computer screens- labels- tags• Records are forms that have had data, information or results entered into/onto them
Instructional resource documents	<ul style="list-style-type: none">• Provide guidance, reference or instruction to assist in the completion of a procedure
QMP Goals	<ul style="list-style-type: none">• Optimize customer satisfaction<ul style="list-style-type: none">- Physician- Patient- Employee• Optimize patient safety<ul style="list-style-type: none">- improve patient and sample identification<ul style="list-style-type: none">. at the time of specimen collection. at the time of analysis. at the time of results delivery- improve the verification and communication of life threatening or life altering information regarding:<ul style="list-style-type: none">. malignancies. HIV and other infections. Cytogenetic abnormalities. Critical (i.e., Alert) values- improve the identification, communication and correction of errors- improve coordination of the laboratory's role in optimizing patient safety within the Sutter Sac-Sierra Region• Accreditation readiness at all times<ul style="list-style-type: none">- CAP- JCAHO- AABB (where applicable)

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QMP Objectives	<ul style="list-style-type: none"> • Developed in the form of “Performance Indicators” <ul style="list-style-type: none"> - measurable - dynamic - meaningful to the customer - developed for pre-, post- and analytic variables
Linkage to SSR quality initiatives and/or programs	<ul style="list-style-type: none"> • The Laboratory QMP links with, and supports, the goals of the Sutter Sac-Sierra Region’s (SSR) “Better, Safer Care” initiative: <ul style="list-style-type: none"> - no needless deaths - no needless pain and suffering - no needless waste - no unwanted or unwarranted delays - no helplessness
Quality Report	<ul style="list-style-type: none"> • Summarizes performance related to QMP objectives • Reviewed and assessed by the Medical and Operational Management team • Is the foundation for: <ul style="list-style-type: none"> - evaluating the effectiveness of the QMP - performance improvement
Evaluating Effectiveness	<ul style="list-style-type: none"> • Quality is monitored periodically by the Medical and Operational Management (MOM) team • The MOM Team evaluates the effectiveness of the Quality Management Program by: <ul style="list-style-type: none"> - comparing actual progress to stated goals - comparing actual performance to stated objectives (i.e., performance indicators) • Inability to make progress toward goals and/or consistently achieve objectives will trigger an analysis of the QMP and may result in an action plan for improvement
References	<ul style="list-style-type: none"> • CLSI GP26 – A3; Quality Management System Model for Laboratory Services; Approved Guideline – Third Edition (2004) • CLSI HS1 – A2; A Quality Management System Model for Health Care; Second Edition (2004)

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