

EORLA LAB LINKS

Quality Assurance Issue

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION



Inside this Issue

<i>How it all Started</i>	2
<i>Extensive Review Process</i>	3
<i>Implementation of the revised Quality Indicators</i>	4
<i>Quality Indicators Performance Summary/ Enhanced Communication and faster Investigations on non-compliant Quality Indicators</i>	5
<i>Next Steps/How could you be Involved?</i>	6

Fall 2014 Quality Assurance Issue

A Fresh Look at Quality and Patient Safety in EORLA

Written by Nathalie Lepage, Chair EORLA Quality Sub-Committee below left, and Lorraine Hart, EORLA Integrated Quality Manager, below right.



Take Home Message

Starting April 1, 2014, EORLA has implemented a standardized series of quality indicators. They represent all aspects of quality, including pre-analytical, analytical, post-analytical aspects as well as patient satisfaction.

EORLA Quality Indicators

How it all Started

Upon the official go-live date of EORLA, back in April 2012, each EORLA site was requested to implement quality indicators that would be useful to monitor quality in their environment. There was no standardized approach and each site developed a series of quality indicators. The *overall* monitoring of quality was problematic since each site implemented different quality indicators, used different methods to calculate the quality indicators, selected different benchmarks, and most quality indicators were addressing the analytical aspect of the laboratory. On the positive side, the previous quality indicators were useful to monitor quality in all EORLA sites. Figure 1, below, illustrates the trend of quality indicators April 2012-March 2014.

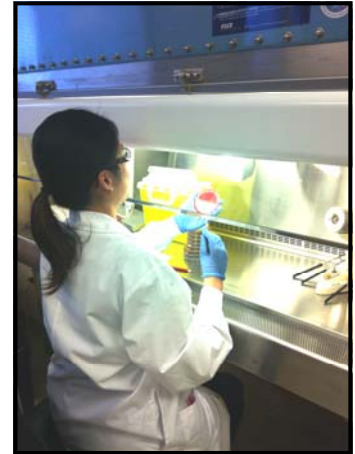
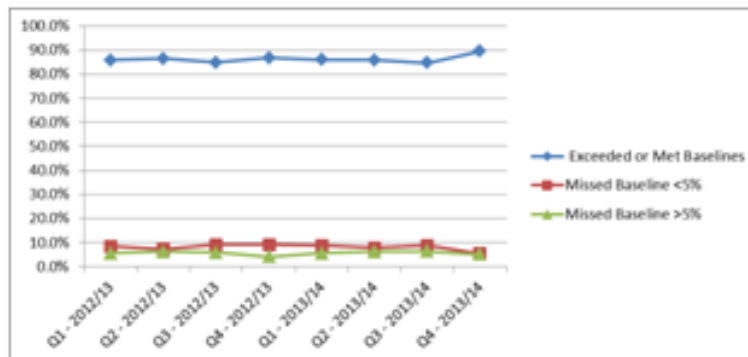


Figure 1. Trending of EORLA quality indicators April 2012-March 2014

Service Level Indicator Trending EORLA Go Live 2012 – Current

Overall Summary of Sites



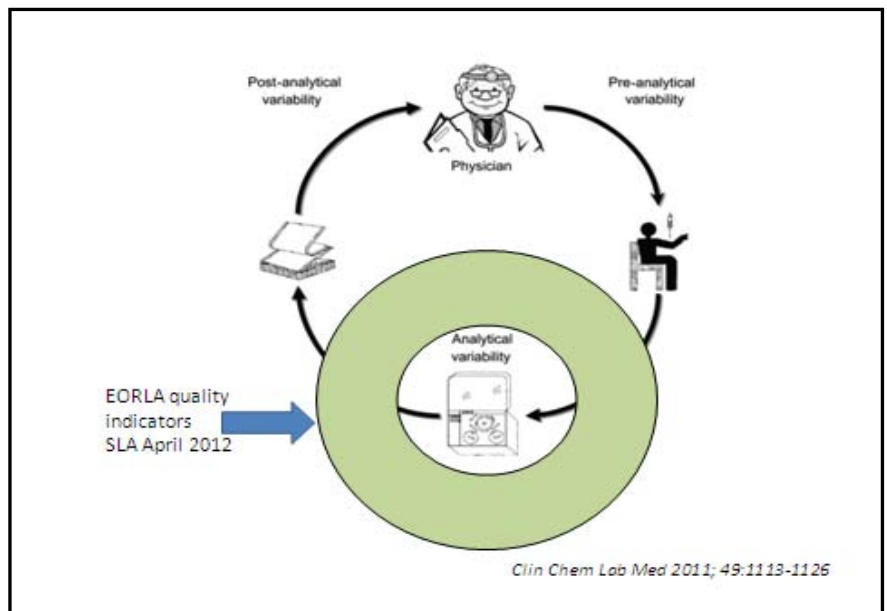
EORLA Quality Indicators, cont'd

Extensive Review Process



The EORLA quality subcommittee initiated a review of the quality indicators to address the observed weaknesses. Each discipline lead was requested to prepare a short list (ideally 2-3 quality indicators) that would be monitored by each EORLA site. Furthermore, the chair of the quality subcommittee drafted a list of quality indicators that would address the quality beside the analytical aspect. As illustrated in Figure 2, below, the quality indicators should encompass all aspects of the laboratory. The EORLA quality subcommittee achieved its goal of designing relevant quality indicators, along with their respective acceptable targets. These quality indicators were successfully rolled in April 2014. Figure 3, (see page 4), provides a comparison overview of the previous and the revised quality indicators.

Figure 2. Pre-analytical, analytical and post-analytical aspects of quality in the laboratory

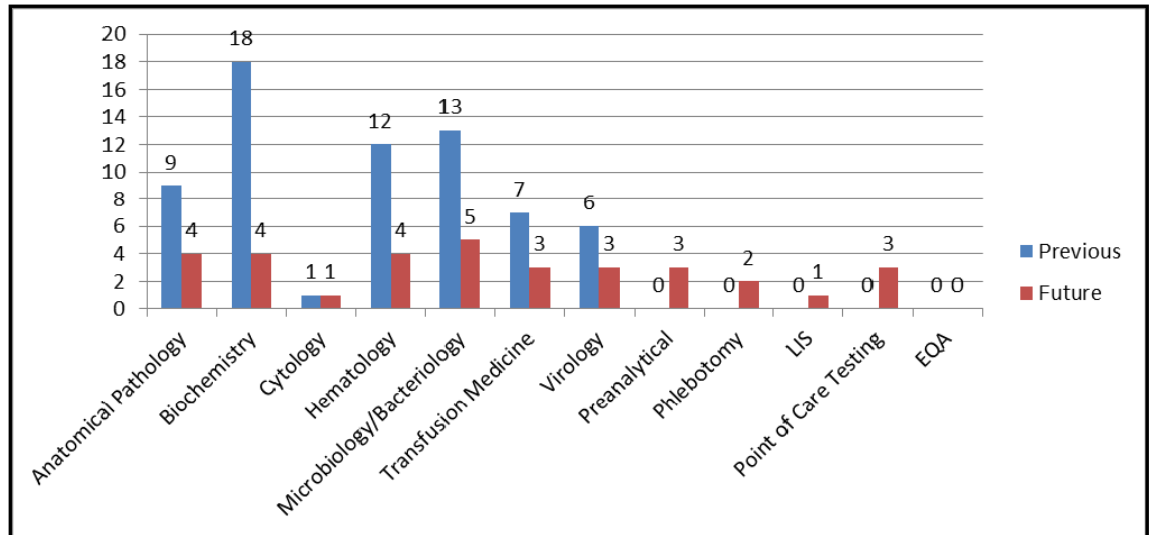


Advantages of the newly implemented quality indicators:

- Moving from 66 unique quality indicators to 34 standardized indicators
- 16 of 34 indicators remain the same
- 17 new quality indicators to be monitored
- Targets identified for all indicators
- External quality assessment (EQA) integral part of each discipline

EORLA Quality Indicators, cont'd

Figure 3. Comparison of the quality indicators April 2012 (blue) Vs April 2014 (red)



Implementation of the Revised Quality Indicators

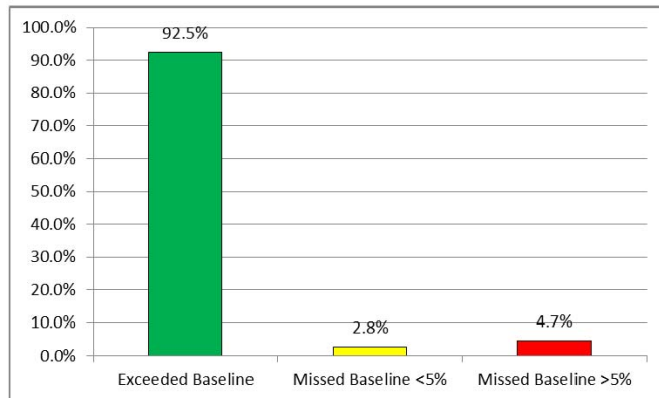
To ensure that EORLA has the capacity to adequately monitors its quality indicators, a tight procedure has been implemented, that involves the following medical, scientific, technical staff:

- Laboratory director at each EORLA site
- Senior or charge technologist at each EORLA site
- All site laboratory operations managers
- All regional discipline laboratory operations managers
- EORLA integrated quality manager
- All regional discipline leads



EORLA Quality Indicators, cont'd

Q1 Quality Indicators Performance Summary



Enhanced Communication and Faster Investigations of Non-Compliant Quality Indicators

A revised process has been implemented to facilitate the review of quality indicators and to ensure those that are non-compliant are investigated in a timely fashion.

- Laboratory directors are informed when the latest quality indicators have been released
- Laboratory directors will review all quality indicators
- Laboratory directors and delegate will process with root cause analysis of non-compliant quality indicators
- Discipline leads will be involved when the same quality indicators are non-compliant from multiple EORLA sites

EORLA Quality Indicators, cont'd

What are the Next Steps?

The revised quality indicators have been designed as the “**dashboard quality indicators**”. They represent the quality indicators that will be reviewed regularly by the EORLA board and the senior leadership at each EORLA site, to ensure that quality is maintained and enhanced over the years.

The regional discipline committees will initiate a review of potential additional quality indicators, that may be relevant to be monitored at each EORLA site. These “**discipline quality indicators**” could be important to implement during a time-defined interval (i.e. 1 year post implementation of a new methodology), to monitor a limited number of EORLA sites (i.e. not every EORLA site is performing the analysis), to review needs for standardization (i.e. impact of different processes on quality at some EORLA sites), or other reasons.

How Could You be Involved?

Patient quality care is essential. Each EORLA employee needs to be involved! These are some steps that you could take to encourage your site to be involved:

- Ensure the site operation manager, regional discipline laboratory operations manager (or delegate) is posting the quality indicators monthly
- Participate to the laboratory investigation when one quality indicator is not meeting its acceptable target
- Inform the discipline leads and the laboratory directors when there are quality indicators that could be monitored at your site
- Ensure all staff are following the laboratory policies, processes and procedures

