Describing the Incredible Journey in Less Than 30 Minutes

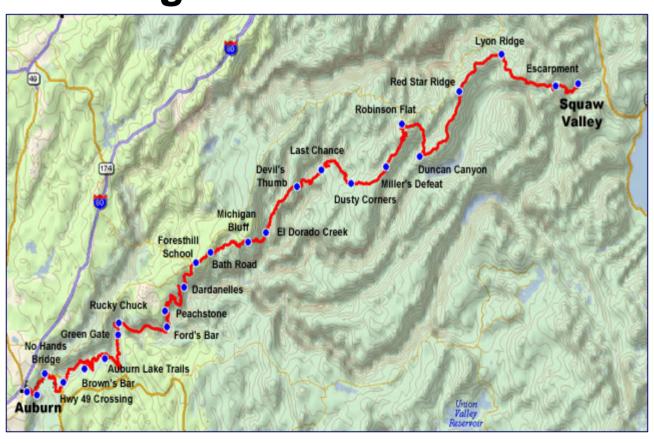


Implementing A Quality Management System For The Laboratory

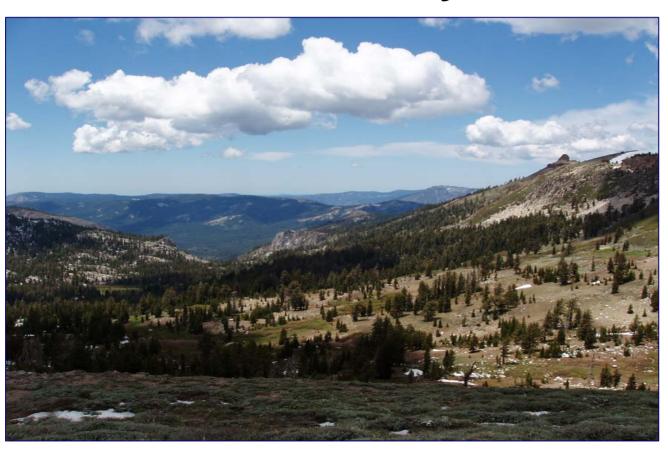
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It takes longer than the usual initiative









The finish is worth the pain



















- 5 hospital laboratories
- □ 1 medical foundation laboratory
- □ Ambulatory lab serves physicians
- □ 20 remote draw sites 1000+ patients per day
- □ 3.8M billed tests per year
- □ \$400M gross revenue
- □ 300 employees



The Start - 2000

- □ 5 hospital laboratories with 5 different approaches to managing quality (QC-focused)
- □ Medical Directors engaged with differing levels of enthusiasm
- Variation
 - Work processes and procedures
 - Document structure and version control
 - □ Position descriptions, training, assessing competency
 - □ Process control, internal assessment
 - □ Cost and quality indicators
- □ Cost was high, while quality and service were variable



The Finish - 2006

- □ 5 hospital laboratories and 1 medical foundation laboratory with a single, standardized approach to managing quality (quality system based)
- □ Medical Directors engaged at an optimal level
- □ No (or little) variation
 - Work processes and procedures
 - □ Document structure and version control
 - □ Position descriptions, training, assessing competency
 - □ Process control, internal assessment
- □ Cost, quality and service significantly improved



Every Incredible Journey Begins with the First Step

First step – redefined *quality*

"The ability to consistently provide laboratory results efficiently and effectively."

Second step – adopted a quality management system model to guide our design and implementation

- Application of a Quality Management System Model for Laboratory Services (CLSI GP26A3)
- A Quality Management System Model for Healthcare (CLSI HS1-A2)



LAB WORK PROCESS

Pre-Analytic Analytic Post-Analytic

Quality Systems Essentials (QSEs)

Organization
Facilities and Safety
Personnel
Equipment
Purchasing and Inventory
Process Control
Documents and Records
Information Management
Non-conforming Events
Assessments
Customer Service
Process Improvement



It takes longer than the usual initiative

- □ Began in 2000
- □ 95% implemented in 2006
- □ Estimated hours development
 - \square My own = 1,500 hours in 7 years
 - □ 0.1 FTE total
 - □ Laboratory Management Team (5) = 600 each in 7 years □ 0.2 FTE total
- □ Estimated hours at implementation
 - □ 8 hours/employee



- □ Began by mapping the laboratory's work process
 - □ Pre-.post-and analytic phases
 - Developed documents of work process
- □ Wrote new technical procedures
 - □ Developed document numbering system
 - Developed standard document templates
- Developed standardized position descriptions
 - □ Based on work process activities and tasks
 - □ Included quality process activities and tasks



- Developed standardized orientation process
- □ Developed training and competency assessment process
 - □ Pre-.post-and analytic phases
 - Developed documents of work process
- □ Developed "Change Management Tool"
 - □ Used to plan quality into every change
 - □ Comprehensive project checklist based on the QSE's



- Developed the integrated and standardized Quality Management Program (QMP) and the Quality Manual
 - □ Developed policy documents for 12 QSE's first
- □ Created the Medical and Operations Management Team
 − oversight of the QMP
 - □ Decision making body for standardization to "best practice"
 - □ Conduct monthly quality review
 - □ Assess the effectiveness of the QMP at meeting the quality goals
- □ March 2007 SMF Lab CAP accredited
- □ November 2008 CAP System accreditation



The Finish is Worth the Pain

- □ Improvement snapshot
 - □ Reduced number of position descriptions, procedures, etc
 - □ Reduced time to train new employees
 - □ Ability to assess competency (pre-, post- and analytic)
 - □ Cost reduced from \$15/uos to \$7.20/uos
 - □ Proficiency testing success rates (5/6 exceed SH avg)
 - □ Employee satisfaction scores increased by >10%
 - □ Testing timeliness
 - □ Patient and physician satisfaction at 2 of hospital labs



Things Learned Along The Way

- □ The quality system model is descriptive, not prescriptive
 - □ Requires each laboratory to create its own, making design decisions along the way
- □ An integrated model
 - □ Like a puzzle more than 1 potential starting place
 - □ Work is not wasted during implementation
- □ Will endure and can be easily updated and refined
- □ Enables standardization to "best practice"
- □ Changes the operational context for quality
 - □ Goes beyond QC and QA



Thank you!

Questions?

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