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DOCUMENT NUMBER: RL TS/DC PPP - 0002
DOCUMENT TITLE: Review Changes in AABB Standards and CAP Accreditation
DOCUMENT NOTES:

LOCATION: SCPMG-dft	VERSION: 2
DOC TYPE: Transfusion Service	STATUS: Draft

EFFECTIVE DATE: 01 Jul 2018	NEXT REVIEW DATE:
RELEASE DATE:	EXPIRATION DATE:

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OWNER: G938509	CHANGE NUMBER: SCPMG-CR-0441

Review Changes in AABB Standards and CAP Accreditation

Purpose This document will describe the process to review changes in AABB Standards and changes in the CAP accreditation program as identified by the checklists.

Policy

- All changes in AABB Standards are reviewed to determine if they will require a change in policies, processes or procedures.
- All changes in CAP TRM checklists are reviewed to determine if they will require a change in policies, processes or procedures.
- Policies, processes and/or procedures are updated as needed, and sent for review and approvals through the MasterControl document management system.

Process

Preparation of a Gap Analysis Document	
Step	Action
1.	<p>A list of the AABB Standards and/or CAP changes in the TRM checklist that are either new or revised are listed in a document with 3 columns. The Regional Blood Bank Compliance Officer or designee will “create” this document with the following information.</p> <ul style="list-style-type: none"> • The first column contains the new or revised AABB Standard number or the CAP TRM checklist requirement <ul style="list-style-type: none"> ○ The changes from the prior standard/checklist are highlighted or otherwise tracked. • The second column contains comments, with a final evaluation if “Change Needed” or “No Change Needed” • The third column contains applicable process, policy or procedure document titles and/or evidence of compliance (such as meeting minutes, quality reports etc.)
2.	<p>The Transfusion Service Workgroup reviews the draft gap analysis document with the Regional Blood Bank Compliance Officer or designee.</p> <ul style="list-style-type: none"> • The gap analysis document will be reviewed and finalized by the TS Workgroup.

Kaiser Permanente
Medical Care Program
California Division South

SCPMG Laboratory Systems
RL Transfusion Service/Donor Center
Process

Review Changes in AABB Standards and CAP Accreditation, Continued

Process

Update to policies, process, procedures or forms if needed	
Step	Action
1.	Any changes that are identified and made in the policy, process, procedure, or form or a new document is created as needed.
2.	The changes or new documents are review as per standard policy for document change and creating new documents.
3.	The final gap analysis document is uploaded as a reference document in Master Control with the edition of AABB Standards and/or year of CAP checklist in the title.

Authors

All SCPMG Transfusion Service Managers
Regional Blood Bank Compliance Officer

Controlled Documents

Quality Program: SCPMG Transfusion Services
Revising a Document in MasterControl
Creating a New Document Infocard in MasterControl

Uncontrolled Documents

AABB Standards, current ed.
CAP Requirements, checklist, current ed.
Fung, Mark K. Ed. Technical Manual, 19th Ed. AABB ,2017

Distribution

All SCPMG Transfusion Services

MasterControl History of Change:		
Change type: new, major, minor etc.	Version #	Description of Change
Minor	2	Reformatted, updated process steps. RBBCO or designee to be responsible for creation of draft gap analysis document. TS Workgroup to review and finalize.