QUALITY ASSESSMENT REVIEW WITH STAFF

PURPOSE

The laboratory must have a mechanism for documenting and assessing problems identified during quality assessment review and discussing them with the staff. The laboratory must take corrective actions that are necessary to prevent recurrences.

POLICY

The Quality Assessment review will be documented, reviewed, assessed for problems and the necessary corrective action taken, if required. The findings will be discussed with the staff at the time of review.

Medical Center:

- Quarterly QA report presented to Laboratory Director of Operation by Quality Assurance Coordinator.
- · Review QA findings at staff meeting
- Review QA findings during Huddles
- · Corrective action when needed
- Annual evaluation review

Documentation:

- Monthly QA report
- Staff meeting minutes
- QA Incident/Investigation Report

MOB:

- The findings will be discussed with staff at time of review.
- During huddles

Documentation:

- Director MOB Checklist
- Supervisor MOB Checklist
- MOB Visit Checklist

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Document History Page

Change type: New, Major, Minor etc.	Changes Made to SOP - describe	Name of responsible person/date	Med. Director Authorized Reviewed/Date	Lab Manager Authorized Reviewed/Date	Date change Implemented
Minor	Regional Template revision	JUDITH REMOLAR 7/2/2018			
Minor	Removed: Twice a year and add bullet- during huddles, change manager to director of operations	Lorie Padilla 11/3/2013			
Major	Changed Med Center QA Reporting from Monthly to Quarterly.	Judith Remolar 8/31/18			

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