

# Beaumont

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Applicability All Beaumont Hospitals  
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## Laboratory Internal Assessments and Self Audits

Document Type: Procedure

### I. PURPOSE AND OBJECTIVE:

Self-Audits are performed as part of the College of American Pathologists (CAP) accreditation process and are required for laboratory accreditation. The laboratory conducts an interim self-inspection and records efforts to correct deficiencies identified during that process. The interim self-inspection is an important aspect of continuing education and laboratory improvement.

### II. PROCEDURE:

- A. Per CAP requirements: The laboratory conducts an interim self-inspection and documents efforts to correct deficiencies identified during that process.
- B. The laboratory performs an internal assessment at CAP recommended intervals. These records are kept for review by the inspectors during the bi-annual external inspection process.
- C. The Self-Inspection takes place in all the departments of the laboratory.
- D. Documentation of performance of the interim self-inspection with correction of deficiencies is a requirement for maintaining accreditation. The laboratory must document that personnel responsible for each laboratory section have reviewed the findings of the interim self-inspection.
- E. Self-Inspection documentation is maintained by the Operations Specialist.
- F. The CAP distributes Self-Inspection Checklists, in advance, for use by inspectors.
- G. Self-Inspection may be performed by Pathologists, PhDs, Managers, Supervisors and Lead Medical Technologists or others trained to perform inspections.

- H. Upon completion of the Self-Inspection, the Self-Inspection Verification form is signed and dated by the site Medical Director, and is submitted to CAP.
- I. The AABB requires self-audits in the years when a formal inspection or assessment is not performed. These records are kept for review by the inspectors during the bi-annual external inspection process.
- J. Inspection preparation for the Joint Commission (JC) includes a self-evaluation coordinated by the hospital as part of general Joint Commission accreditation activities. The laboratory may or may not be visited as a part of JC inspection.
- K. Additional self-audits may be developed and performed, as appropriate when system problems are identified.
- L. For Outreach, refer to [Outreach Laboratory Internal Quality Audits](#).

### III. REFERENCES:

- A. The Joint Commission
- B. CAP (College of American Pathologists)



#### Approval Signatures

| Step Description                     | Approver                                     | Date      |
|--------------------------------------|--|-----------|
| CLIA Site Licensed Medical Directors | Muhammad Arshad: Chief, Pathology            | 9/27/2024 |
| CLIA Site Licensed Medical Directors | Jeremy Powers: Chief, Pathology              | 9/26/2024 |
| CLIA Site Licensed Medical Directors | Ann Marie Blenc: System Med Dir, Hematopath  | 9/26/2024 |
| CLIA Site Licensed Medical Directors | Hassan Kanaan: OUWB Clinical Faculty         | 9/23/2024 |
| CLIA Site Licensed Medical Directors | Ryan Johnson: OUWB Clinical Faculty          | 9/16/2024 |
| CLIA Site Licensed Medical Directors | Subhashree Mallika Krishnan: Staff Physician | 9/16/2024 |
| CLIA Site Licensed Medical Directors | Masood Siddiqui: Staff Pathologist           | 9/16/2024 |
| CLIA Site Licensed Medical Directors | John Pui: Chief, Pathology                   | 9/16/2024 |

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|--|--|-----------|
| CLIA Site Licensed Medical Directors                     | Kurt Bernacki: System Med Dir, Surgical Path | 9/16/2024 |
| Policy and Forms Steering Committee Approval (if needed) | Michele Sedlak: Lab Quality Coord            | 9/16/2024 |
|  | Sarah Britton: VP, Laboratory Svcs           | 9/9/2024  |
| Operations Directors                                     | Joan Wehby: Dir, Lab Services                | 9/3/2024  |
| Operations Directors                                     | Brittnie Berger: Dir Sr, Lab Operations      | 8/14/2024 |
| Operations Directors                                     | Amy Knaus: Dir, Pathology Service Line       | 8/9/2024  |
| Operations Directors                                     | Christopher Ferguson: Dir, Lab Services      | 8/9/2024  |
| Operations Directors                                     | Elzbieta Wysteppek: Dir, Lab Services        | 8/8/2024  |
|  | Michele Sedlak: Lab Quality Coord            | 8/8/2024  |

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## Applicability

Dearborn, Farmington Hills, Grosse Pointe, Royal Oak, Taylor, Trenton, Troy, Wayne