

Beaumont

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Area: Laboratory-Quality

Key Words: GEN.20325, GEN.20330

Applicability: All Beaumont Hospitals

Procedure for Laboratory Employees to Communicate Concerns Regarding Test Quality and Laboratory Safety

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

- A. This procedure is to encourage employees to freely voice their concerns about patient safety and quality concerns related to patient testing to laboratory management staff. Management will analyze and investigate these suggestions/complaints, following-up with corrective and/or preventative action, as is appropriate. This activity is incorporated into the laboratory Quality Management plan.
- B. Objective:
1. Continuous improvement of patient safety is our guiding principle in achieving quality and reducing morbidity and mortality. ([Safety Event Reporting-RL Solutions](#)). Employees are encouraged to communicate to management, any concerns or complaints that they may have regarding patient safety, the quality of patient testing or laboratory safety.
 2. Corewell Health uses a decentralized concern/grievance system. Therefore, each hospital department takes ownership of concerns/complaints related to their area of responsibility. This ownership includes reviewing and resolving the concerns/complaints with the complainant. ([Patient Complaint and Grievance Resolution](#))
 3. Corewell Health is committed to assuring ethical and professional clinical and business practices.

II. DEFINITIONS:

Variance: A variance is any process/occurrence inconsistent with the routine operation of the hospital or the routine care of patients. This includes errors that result in actual or potential injury to a patient (or visitor).

III. PROCEDURE:

- A. Individual communicating concern: Communicate concern/complaint to one or more of the following:
1. Appropriate immediate supervisor/manager
 2. If not satisfied with supervisor/manager response to concern, the next level laboratory manager/administration.

3. Laboratory Safety Officer
4. Operations Specialist
5. Compliance Department by calling or emailing. The contact information is located on the internal Corewell Health page under All Applications - All Departments - Compliance (or use the link <https://trustline.alertline.com/gcs/welcome>).
6. Patient/specimen-related errors and safety errors using the RL Solutions
 - a. Refer to [Laboratory RL Solutions Quality/Safety Reports](#)
7. Corewell Health Integrity Help Line via phone (1-877-319-0266 or 800-805-2283) or the web-based portal located on the internal Corewell Health page under All Applications - All Departments - Compliance (direct link <https://trustline.alertline.com/gcs/welcome>).
 - a. Callers will be given the opportunity to speak with a live operator 24/7 and 365 days per year.
8. If defined by each laboratory section, document other concerns (of an *internal* nature) on the respective "internal" quality work form.
9. College of American Pathologists (CAP) and Association for the Advancement of Blood & Biotherapies (AABB)
 - a. Note: The official CAP signs regarding the reporting of quality concerns to the CAP are posted in a prominent location in the laboratory, visible to laboratory personnel.

B. Special Notes:

1. It is strictly prohibited to harass or engage in any punitive action against an employee in response to a complaint or concern made to the College of American Pathologists or to any regulatory organization regarding Quality or Safety.
2. For laboratory sites that are AABB accredited, the personnel shall be given the opportunity to communicate concerns about quality or safety using the options in this procedure and/or contacting the AABB.
3. Anonymous submissions can be reported in various methods such as RL solutions or the Corewell Health Integrity Help Line.

C. Encourage employees to communicate quality and safety concerns.

D. Investigate and analyze employee complaints and suggestions, following-up with corrective and/or preventative action, as is appropriate.

E. Discuss and share suggestions and concerns at staff meetings, encouraging team-discussion.

F. Maintain documentation (records) of employee input and follow-up efforts by supervisors/managers.

IV. REFERENCES:

- A. College of American Pathologists (CAP) Lab General Checklist, Current Version
- B. Compliance Integrity Help Line
- C. [Reporting and Investigating Compliance Concerns Policy](#)
- D. College of American Pathologists (CAP) Quality/Accreditation poster, Current version
- E. AABB Standards, Current version

Attachments

No Attachments

Approval Signatures

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Applicability

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