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The Department of Pathology management team believes that
effective communication concerning potential changes to associate's work processes must occur to ensure the continuity of service and quality.  A structured communication system is needed to facilitate dissemination of information to, and gaining feedback from, all affected associates in laboratory departments.
The Department of Pathology must provide a structure for communication of potential changes that may affect current work processes. The structure must provide an organized and transparent forum for associates to provide feedback on proposed changes affecting performance of assigned duties.
This policy applies to all associates in all sections of the Department of Pathology, including affiliates.
The Manager, Supervisor, Lead or Quality Coordinator initiating the pilot is the Team Leader. The Team Leader is responsible for the coordinating the actions required by this policy.  The Administrative Director and the Medical Director must be notified of all pilots and should provide collaboration and
guidance, where needed.  Associates are expected to function within the structure of this policy to ensure that they remain participatory and informed of potential changes to their work area.
A pilot is defined as a small preliminary study conducted in order to evaluate feasibility of proposed process change. Proposed change is frequently in response to quality indicators, occurrences, adverse events, or management changes.
The Pilot Implementation Form is to be initiated prior to or in conjunction with the team's initial discussion meeting. The Pilot Implementation Form and other gathered information concerning the pilot is to be placed in the designated pilot binder in the laboratory section involved in the change. Communication to all affected associates concerning the pilot must be initiated prior to the start date. The binder will include forms for input and feedback concerning the change.  When the pilot is complete a short summary of the pilot findings

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	is to be completed and placed in the binder. The binder is to be retained in the section through the next accreditation cycle for documentation of the process improvement. Any changes to standard work practices that result from the pilot are to be incorporated into the appropriate policies/procedures.
Related Documents	LADM 6020 R Pilot Implementation
	LADM 6020 F Project/Pilot Implementation
	LADM 6002 Q Service Change or Addition
	LADM 6002 F Service Change or Addition