

Quality Management Manual Department of Pathology	Document No. LADM 6020 R Page 1 of 2
Laboratory Administration Pilot Implementation	Origination: 09/29/10 Version: 1

Policy Statement	<p>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.</p> <p>A structured communication system is needed to facilitate dissemination of information to, and gaining feedback from all affected departments.</p>
Purpose	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.
Scope	This procedure applies to all associates in all sections of the Department of Pathology, including affiliates.
Responsibility	<p>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 in this procedure.</p> <p>The Administrative Director and the Medical Director must be notified of all pilots and should provide collaboration and guidance, where needed.</p> <p>Associates are encouraged to function within the structure of this procedure to ensure that they remain participatory and informed of potential changes to their work area.</p>
Definition	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.

Implementation of a Pilot

1. Identify issue to be addressed.
2. Create a pilot team. The team should consist of a Team Leader, at least one non-supervisory associate and one associate external to the affected section.
3. The Team Leader schedules an initial meeting to discuss the issue. The following items should be defined:
 - Root of Issue
 - Solution (s)

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- End Goal (with detailed compliance criteria)
The team utilizes the solutions to develop an action plan. The team completes LADM 6020 F to document items discussed. The team assesses the need to create supporting documents, policies, job aids and flow charts.
- 4. The Team Leader posts the Pilot Binder in the specified section. The Pilot Binder should include:
 - Completed LADM 6020 F
 - Supporting documents
 - Pages for associate comments/feedback
- 5. The Team Leader sends communications to associates, which will include the pilot intentions and instructions. The associates should be notified of the time frame to give their input prior to the pilot start date. The recommended timeframe is at least 11 days. This must include two weekends.
- 6. The Team Leader schedules a second meeting to discuss the initial associate feedback.
- 7. The Team drafts a final pilot plan, incorporating associate feedback where feasible. The final pilot plan must be signed by the Manager (where applicable), Director and Department Chairman.
- 8. The Team Leader sends communication to associates with final implementation information and dates.
- 9. The Team Leader implements changes. Associates are encouraged to continue giving feedback.
- 10. The Team Leader monitors changes throughout.
- 11. The Team Leader schedules a meeting to determine the success of the pilot and review feedback. Success is determined by achieving the initially established goal.
- 12. The Team Leader updates the policies and procedures with the changes developed through the pilot or goes back to step three if the pilot was deemed unsuccessful.
- 13. The Team Leader completes LADM 6002F.

Related Documents

LADM 6020 Q Pilot Implementation

LADM 6020 F Pilot Implementation

LADM 6002 Q Service Change or Addition

LADM 6002 F Service Change or Addition

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