

### Objectives:

- Participants will be able to identify the top deficiencies cited in a POC program
- Participants will be able to determine why these citations happen
- Participants will hear some ideas for ensuring that these citations do not occur in their own laboratory



### Checklist Changes

#### "Where does it say that?"

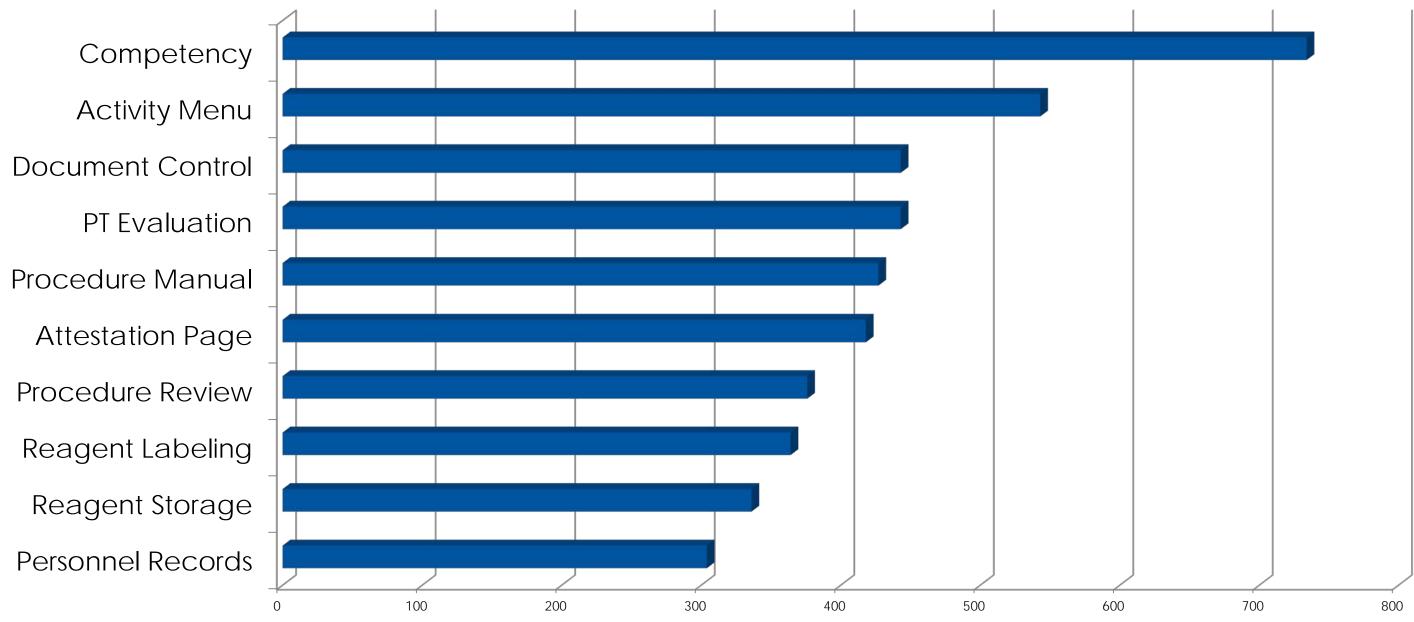
- Summary of Checklist Edition Changes
- All Common Checklist, 4/21/2014 edition
  - 18 New
  - o 20 Revised
- Thermometers
- Instruments and Equipment
- Comparability of Instruments & Methods



## A Question for you...



### Most Commonly Cited Deficiencies





### **Activity Menu**

#### What tests are you currently performing?

- COM.01200
  - All tests in use
  - Discontinued tests removed
  - Call CAP to discuss tests or services not listed on the Master Activities Menu



### Reagent Storage and Reagent Labeling

For waived tests, the laboratory follows manufacturer instructions for handling and storing reagents, cartridges, test cards, etc.

- COM.30250
  - Per manufacturer's requirements
  - Temperatures
  - Change in storage = change of expiration
  - o Audit this!



### Reagent Storage and Reagent Labeling

For non-waived tests, all reagents, calibrators, controls, solutions...

- COM.30300 Labeled with appropriate elements
- COM.30350 Stored and handled per manufacturer
- COM.30400 Used within expiration date
  - Per manufacturer's requirements
  - Temperatures
  - Change in storage = change of expiration
  - o Audit this!



#### PT Attestation

The proficiency testing attestation statement is signed by the laboratory director or designee and the individual performing the testing.

- COM.01400
  - Physical signatures must be present
  - Must be on the original attestation page
  - Designee's must be delegated in writing



#### **Document Control**

The laboratory has a document control system to manage policies, procedures, and forms.

- GEN.20375
  - Control versus Management
  - O How many copies are "out there"?
  - Job Aides / Cheat Sheets
  - Document Control Log recommended



### New Director Procedure Approval

Following a change in laboratory directorship, the new laboratory director approves the laboratory policies and procedures over a reasonable period of time.

- TLC.11485
  - Moved from COM to TLC
  - Recommend completion within 3 months of change
  - Recommend Document Control Log



#### Personnel Records

Personnel files are maintained on all current technical personnel and personnel records include....

- GEN.54400
  - Copy of academic diploma or transcript
  - License, if required by state
  - Summary of training and experience
  - Certification, if required by state or employer
  - Records of continuing education



### Personnel Records (Continued)

Personnel files are maintained on all current technical personnel and personnel records include....

#### GEN.54400

- Description of current duties and responsibilities as specified by the laboratory director
  - What procedures is the individual authorized to perform?
  - Is supervision required (processing, testing, result reporting)?
  - o Is supervisory or section director review required to report?



### Competency Assessment

The competency of each person performing testing to perform his/her assigned duties is assessed.

- GEN.55500
  - Annual assessment for waived testing (6 month not required)
  - Annual assessment for non-waived (semi-annual in 1<sup>st</sup> year)
  - All six elements for non-waived (less for waived)
  - On going process



### Competency Assessment (Continued)

The laboratory director must ensure that the individuals performing competency assessments are qualified through education and experience to meet the defined regulatory requirements.



### Competency Assessment (Continued)

- High complexity assessments by section director, or individual meeting general supervisor requirements for high complexity
  - Doctoral / Master's / Bachelor's degree in clinical laboratory science or chemical, physical or biological science and 1 year training and experience in high-complexity
  - Associate's degree in Medical Laboratory Technology and 2 years laboratory training and/or experience in high complexity testing.



### Competency Assessment (Continued)

- Moderate complexity assessments by individual meeting the qualifications of a technical consultant for moderate complexity testing
  - Doctoral / Master's degree in clinical laboratory science or chemical, physical or biological science and 1 year training and/or experience in non-waived testing in designated specialty
  - Bachelor's degree in clinical laboratory science or chemical, physical or biological science and 2 years experience in nonwaived testing in designated specialty





MLT in hematology



 Associate degree MLT can assess competency for high complexity (hematology differentials) but not moderate complexity (automated hemogram)



- MLT in hematology
- RT in blood gas lab



 Associate degree Respiratory Therapist can not assess competency for ABG testing



- MLT in hematology
- RT in blood gas lab
- RN in POC



 Bachelor degree Nurse (BSN) can assess competency for non-waived POC testing



- Bachelor degree Nurse (BSN) can assess competency for non-waived POC testing
- Associate degree Nurse (RN-ADN or LVN) can not assess competency for non-waived POC testing



### Who decides complexity level?



### Who decides complexity level?

http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfclia/Search.cfm



#### Performance Assessment of Supervisors / Consultants

The performance of section directors / technical supervisors, general supervisors, and technical consultants is assessed and satisfactory.

- GEN.55525 \*\*NEW\*\* 04/21/2014
  - Delegated responsibilities must be in writing
  - Refers to role in management of patient testing
  - Unsatisfactory performance must be addressed in corrective action plan



### Monthly QC Review

Quality control data are reviewed and assessed at least monthly by the laboratory director or designee.

- Most checklists \*\*Revised\*\* 04/21/2014
  - New language in the note: "The review of QC data must be documented and include follow-up for outliers, trends, or omissions that were not previously addressed."
  - Delegation of functions must be in writing (TLC.11425)



## A Question for you...



#### Glucose Meters

- Manufacturer's intended use and limitations
  - Glucose meter is waived complexity when used as specified by the manufacturer for specimen types validated by manufacturer and approved/cleared by FDA
- Modifying manufacturer's instructions
  - Off label use = Laboratory Developed Test
  - Validate per COM.40250



### Glucose Meters (Continued)

- Review manufacturer's intended use and limitations
  - Diabetic patients only?
- Define "Critically-ill
  - Check manufacturer's limitations to ensure population is defined



### Waived + Modification = High Complexity

- Method validation requirements
- Analytical Measurement Range (AMR)
- Lot to lot reagent verification
- Meter to meter comparisons



### Waived + Modification = High Complexity

- Testing personnel requirements for high complexity
  - Competency requirements all six elements semi- and annually
  - Minimum Associates degree or High School diploma if testing prior to 4/24/1995
    - Individuals performing high complexity testing on or before April 24, 1995 with a high school diploma or equivalent with documented training may continue to perform testing <u>only on</u> <u>those tests</u> for which training was documented prior to September 1, 1997 (CLIA Regulation 42CFR493.1489(b)



## A Question for you...



#### **IQCP**

- CAP is in the process of formulating a plan to address IQCP
  - The plan is not yet ready for release
- 2014 checklist No new requirements for IQCP
- 2015 checklist Some IQCP guidance expected









### Questions? accred@cap.org or 800-323-4040 ext. 6065





# Thanks for your participation and your attention...now...bring in the things you put in your trunk and dig up those records in the garden!



