Customer Satisfaction is an Accreditation Essential

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Objectives

At the end of this session participants should;

1. Know a little more about the Diagnostic Accreditation Program (DAP)

2. Describe the DAP laboratory medicine standards for customer satisfaction

3. Understand assessment methodology

4. Decide the evidence to meet customer satisfaction accreditation standards

DAP mission

Enhancing public safety through excellence in diagnostic medicine accreditation

What we accredit

	Public	Private	
Facilities	114	20	
#Sample Collection Sites	45	132	
Total	159	152	311

DAP laboratory medicine standards 2015

General Standards

Organization*

Quality Management System*

Safety

Facilities

Equipment and Supplies

Information Management and Informatics

Quality Assurance

Pre-Examination

Examination

Post-Examination

Sample Collection

Discipline-Specific Standards

Anatomic Pathology

Chemistry

Cytogenetics

Cytology

Hematology

Microbiology

Molecular Diagnostics

Point-of-Care Testing

Transfusion Medicine

DAP laboratory medicine standards 2015

Best practice standards referenced to international and national standards

- ISO 15189-2012 Medical laboratories – Requirements for Quality and Competence
- ISO 22870 Point of Care testing
- ISO 15190 Safety
- ISO 22367 Risk Management
- ISO 9000
- College of American Pathologists Standards
- Clinical and Laboratory Standards Institute Standards
- Worksafe BC
- Government of B C
- College of Physician and Surgeons of BC
- and other recognized standards.

DAP laboratory medicine standards 2015

TRM1.3		Specific training for transfusion activities is provided		
TRM1.3.1	M	There is a documented training program for all personnel involved in all transfusion activities. There are documented processes for initial and ongoing training.	Z902 4.3.2.1, 4.3.6.2 CSTM 2.12(c)	TM10.3.10 REVISED
TRM1.3.2	M	Non-laboratory personnel collecting samples for transfusion medicine examinations are trained and competent in request and labeling requirements.		SCT1.7.1
TRM1.3.3	M	All personnel (laboratory or non-laboratory) who participate in the processing, storage or administration of blood components and products are trained and competent in the relevant procedures.	Z902 4.3.2.3, 14.4(b) CSTM 2.12(b), 2.13	NEW
TRM1.3.4	M	Personnel involved in the packing and transportation of blood components and products receive specific training. This is documented.	CSTM 5.6.1.2 Z902 9.5.1	TM1.1.1

Standard

Criteria

Assessment Methodology

Facility Assessment

Technical and Management Assessors

Interviews with Referring Physicians (2)

Regional Assessment (introduced in 2016)

Medical, Management and Technical Assessors

Desk Top Audit – Proficiency Testing

ROAD – Read, Observe, Ask and Discover

READ the policies and procedures to understand how the organization/facility functions

OBSERVING the process

ASK several of the staff to describe the procedural or process steps, always verifying that the practice matches the written procedure. Interview referring physicians

DISCOVER if the facility has recurring problems and if/what corrective actions were implemented

DAP Customer Satisfaction Standards

Quality Management System

- document control
- records management
- non-conformance management
- assessment (audit) processes
- improvement processes (preventive, corrective, and risk management elements)
- **service and satisfaction processes**

DAP Customer Satisfaction Standards

ORG 4.0 Human Resource Management

ORG 4.6 General orientation and training is provided

At a frequency determined by the facility personnel receive orientation and training on:

M ORG 4.6.3 the quality management system ISO 15189 5.1.5a CLSI QMS01-A4 5.4.3

Read: Orientation and training documentation

Ask: Ask staff to describe their orientation

DAP Customer Satisfaction Standards

ORG 2.0 Organizational Structure

ORG 2.2 The responsibilities of laboratory directors are defined and documented

M ORG 2.2.16 Laboratory directors address complaints, requests or suggestions from personnel and users of laboratory services. ISO 15189 4.1.1.4m

Read: Job Descriptions, Feedback Documentation

Ask: discuss with staff who is accountable and responsible for complaints

You are the Assessor

READ
OBSERVE
ASK
DISCOVER

DAP Customer Satisfaction Standards

QMS 4.0 Communication and Consultation

QMS 4.1 There are provisions for communication with patients and users

M QMS 4.1.1 There are appropriate advisory and interpretative services that meet the needs of patients, users and other parties. ISO 15189 4.1.2.2

Read: Documentation regarding interpretative services, translated instructions

Ask: how staff address the situation where the patient requires a translator or further information

DAP Customer Satisfaction Standards

QMS 4.0 Communication and Consultation

QMS 4.1 There are provisions for communication with patients and users

M QMS 4.1.4 The laboratory solicits information relating to user perception as to whether the service has met the needs and requirements of users. Records of information collected and actions taken are maintained. ISO 15189 4.14.3 CLSI QMS01-A4 5.2.3

Read: Records of information collected and actions taken (surveys)

Ask: Ask staff if they are aware of any changes that have been made as a result of survey feedback

DAP Customer Satisfaction Standards

QMS 4.0 Communication and Consultation

QMS 4.1 There are provisions for communication with patients and users

M QMS 4.1.5 The laboratory ensures that appropriate communication processes are established with its stakeholders and that communication takes place regarding the effectiveness of the laboratory's pre-examination, examination and post – examination processes QMS. ISO 15189 4.1.2.6 CLSI QMS01- A4 6.4

Read: Communication process documentation (scheduled meetings, etc.)

Ask: Interview with referring physician regarding laboratory communication processes and effectiveness of examination processes

DAP Customer Satisfaction Standards

QMS 4.0 Communication and Consultation

QMS 4.2 There is a process for the management of feedback from patients users and other parties

M QMS 4.2.1 There is a procedure for the management of complaints or other feedback received from patients, users and other parties.

ISO 15189 4.8 CLSI QMS01-A4 5.2.4

QMS 4.2.2 Clinicians, patients or other parties are informed of the process to register complaints and feedback. CLSI QMS01-A4 5.2.4

QMS 4.2.3 Clinician, patient and other party inquiries and complaints are addressed promptly and effectively. CLSI QMS01-A4 5.2.4

Read: Documented procedure for management of complaints and feedback. Health Authority Patient Care Quality Office. Interview with referring physicians

Ask: for an example of a feedback form and describe the process for submitting feedback

DAP Customer Satisfaction Standards

QMS 6.0 Quality Management System Improvement

QMS 6.4 There are procedures for conducting periodic management review

M QMS 6.4.2 The QMS data examined in the management review is defined ISO 15189 4.15.2b-o

Evaluations of assessment of user feedback

Monitoring and resolution of complaints

Recommendations for improvement

Questions?


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