UBC-Course Quality Improvement Project

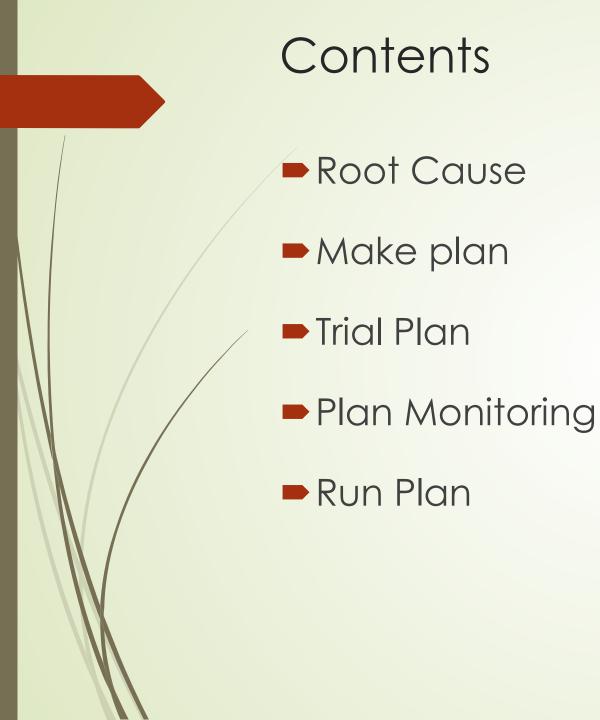
Improve IQC Performence

Takeo Lab: Seang Sosorphea

Khutsorn Samnang

Date: 17-June-2019

Venue: NIPH-Phnom Penh



Root Cause

✤ IQC Indicator: 100 % Jan-April, Average IQC done IQC Hematology: 64% IQC Biochemistry: 92% Corrective Action: 0% ♦ Why? Limited Knowledge > Staffs involvement

➢ Budget

Make a Plan





✤To achieve target 100%

To improve corrective action

Document and record

Main Action Plan

Discussion in QA team meeting

Make a training

Apply

Monitoring

Run plan

Benefit vs Risk

		Benefit	Risk
	Lab	1-More accurate2-More precise3-Strong team work4-Improve LQMS	1-Time delay 2-Increase budget 3-Equipment
/	Customer-In (Staffs)	1-Release result withconfident2-Honor3-More profit	1-Work load 2-Stress 3-More accountability
	Customer-Out (Physician- Patient)	1-Reliable result 2-Improve treatment	1-Timely delay

Action Plan

Action	Indicator	Responsible	Dead Line	Date Follow Up		
QA team meeting	-Know specific cause -Meeting record	K. Samnang	May-2019	May-2019, done		
Train: Quality Assurance	-Training material -Training record -Evaluate course data	S. Sosorphea	May-2019	23,24,28-May-2019, done		
QC material supply	-No out of stock data -Stock management report	E. Puthey	Jun-Aug 2019			

Action Plan

Action	Indicator	Responsible	Dead Line	Date Follow Up
Apply Improve IQC performence	-IQC sheet record (100%) -NC record (100%)	-K.Samnang, QAO -Supervisor of Units -Responsible staffs	June-Aug 2019	
Short- Monitoring data	-NC recorded data -IQC indicator data	-K.Samnang -QA Team	June-Aug 2019	
Long- Monitoring	-IQC indicator annual report	-K.Samnang -QA Team -Supervisor of units -Staffs each unit	Dec 2019	

Thank You!

