





Management Review

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Outline

Describe the Management Review requirement in

ISO 15189-2012

Agenda of Management Review

Quality Improvement activities

Overview

- ✓ Day 1: Management Review lectures
- ✓ Day 2-3: Preparation of slides
- ✓ Day 4: Lab presentation to Hospital Dir
 - Each lab given only 30 mins
 - Timer for presentation

Management Review

ISO – 15189 Clause 4.9; 4.14.6; 4.1.1.4; 5.2; 5.2.6

"Laboratory Management shall review the Quality Management System at planned intervals to ensure its continuing suitability, adequacy and effectiveness and support of patient care"

Management Review

ISO - 15189 Clause 4.9; 4.14.6; 4.1.1.4; 5.2; 5.2.6

- "Laboratory Management <u>shall</u> review the Quality Management System at <u>planned intervals</u> to ensure its continuing suitability, adequacy and effectiveness and support of patient care"
- 1. Regular <u>management review</u> of "Quality System" [organizational structure, procedures and resources in place to ensure provision good quality service].
- 2. Audit of entire laboratory (12 sections)
- 3. At least one time in 1 year.

Laboratory Role (QAO)

Management Review

- ✓ Ensure that the meeting takes place
- ✓ Responsible for minutes of meeting
- ✓ Identify corrective action required
 - 1. Responsible person
 - 2. Timeline
 - 3. Ensure compliance & follow up
- ✓ Maintain all documentation.
- ✓ Discussions with Laboratory Management for next year plans.
- ✓Same as overall objectives and strategies of the Hospital.

Agenda for MR

- 1. Follow-up actions from previous management review (2019)
- 2. Organization chart (staff number, category, scope of work)
- 3. Year on year comparison of test volumes, types of test.
- 4. Continual improvement on identification and control of nonconformities (e.g. IQC, EQA).
- 5. Internal audits of all sections (e.g. Section 3 for this workshop).
- 6. Assessment of user feedback including of complaints.
- 7. Risk assessment of the whole lab process.
- 8. Reviews by external organizations External Audits
- 9. Inter-laboratory comparison program (PT/EQA)

Agenda for MR (continue)

- 10. Quality Indicators e.g. TAT (e.g. glu, CBC), critical results reporting (% within 1 hour), temp chart recording, blood culture contamination rate.
- 11. Review of requests, suitability of procedures and sample requirements (e.g. specimen rejection)
- 12. Health and Safety and environment.
- 13. Information Technology (e.g. CamLIS problems).
- 14. Equipment issues.
- 15. Performance of suppliers.
- 16. Recommendations for improvement, including technical requirements (e.g. improvement projects).
- 17. Staff suggestions.

Quality Improvement Activities

- 1. Form a team. Must have outcome and completion time.
- 2. Design a study e.g. use of statistic, PDSA, Ishikawa diagram, FMEA.
- 3. Report progress to management and laboratory
- Examples QI projects: correct actions, preventive actions, customer's suggestions or complaints, errors or opportunities for learning from occurrence management program, internal audits deficiencies, nonconformity.

Management Review Output

A record that documents any decisions made and actions taken during management review on:

Management Review Output

A <u>record</u> that documents any decisions made and actions taken during management review on:

- a) improvement of the effectiveness of the quality management system (QMS);
- b) improvement of processes;
- c) improvement of services to users;
- d) resource needs.

Management Review Presentation

Outline

- Summary of 2018 activities
- Some power point presentation tips
- Show charts and graphs construction

Strategy 2018

Baseline Audit



Feb



Baseline Audit



CamLQMS

Kg Cham IQC, EQA



Lab Statistics

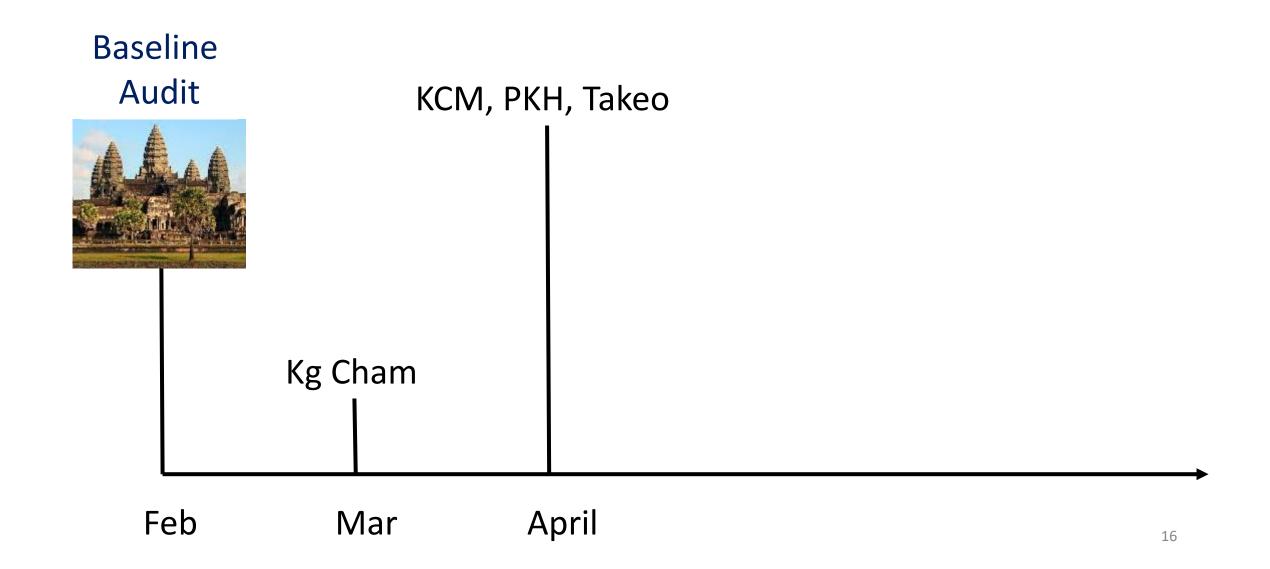
Equipment & evaluation

Stock



Feb

Mar



Example: Lab Walk-through on IQC out-of-range explanation



Pipette calibration check training



Correct pipetting technique

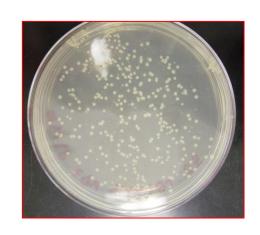


Distiller and clinical lab reagent water







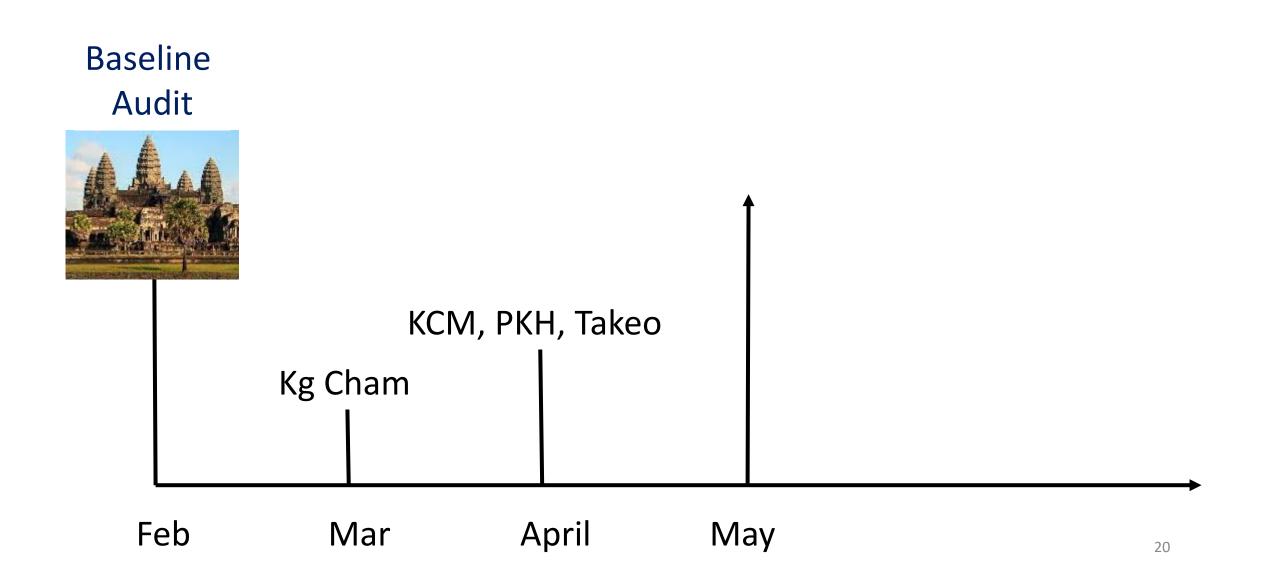


Distiller

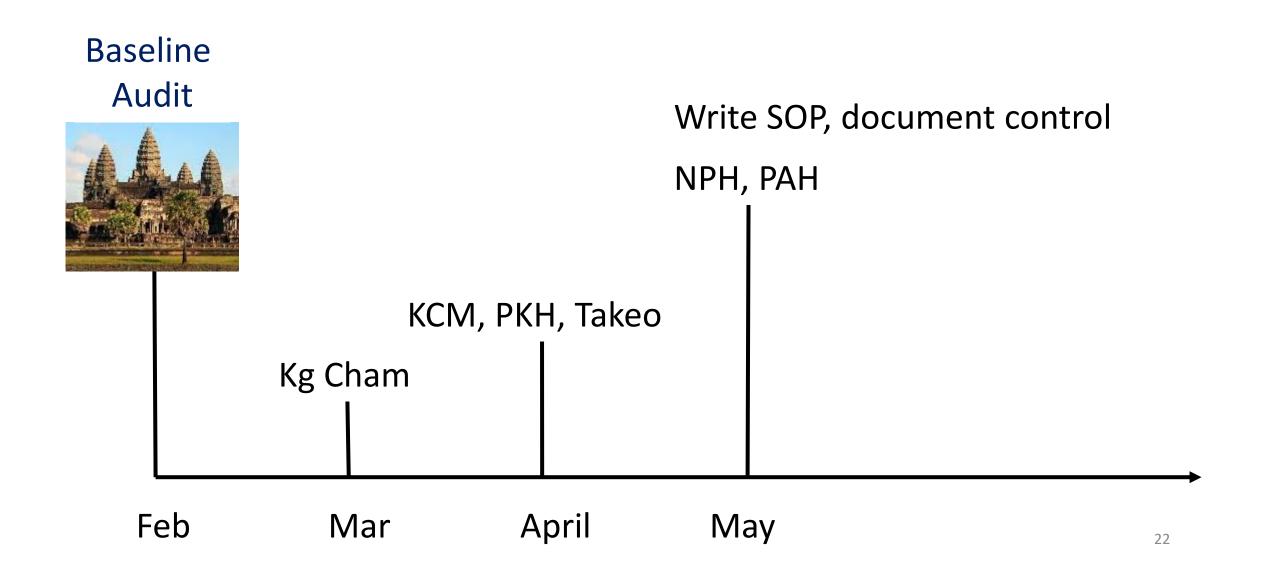
Opaque container

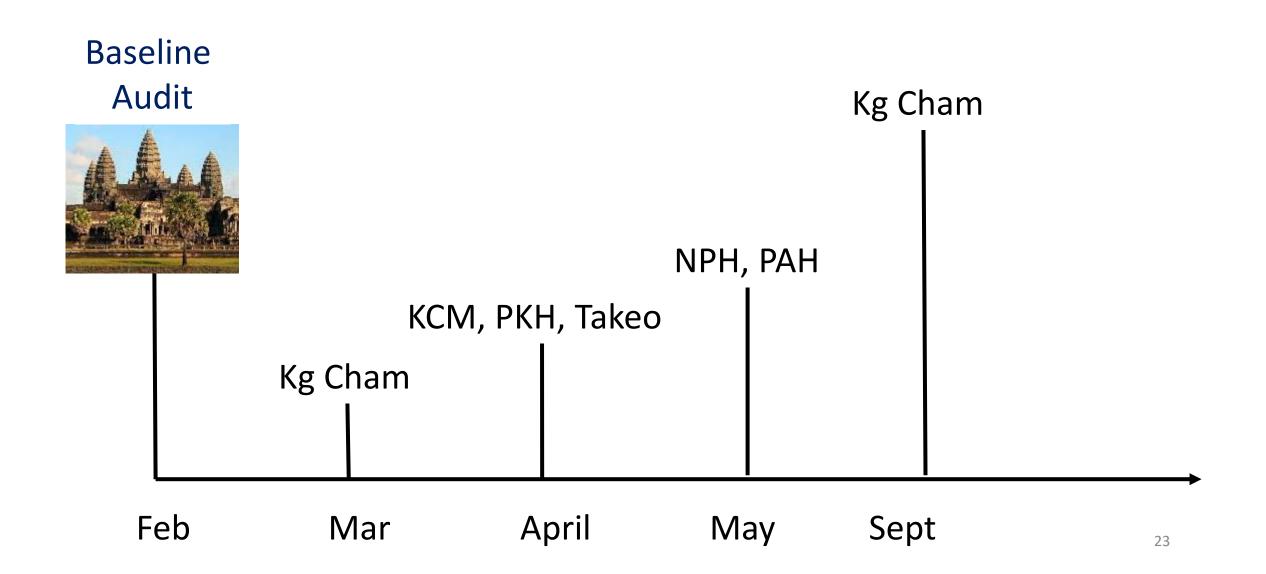
Filtration <0.22uM

Colony counts

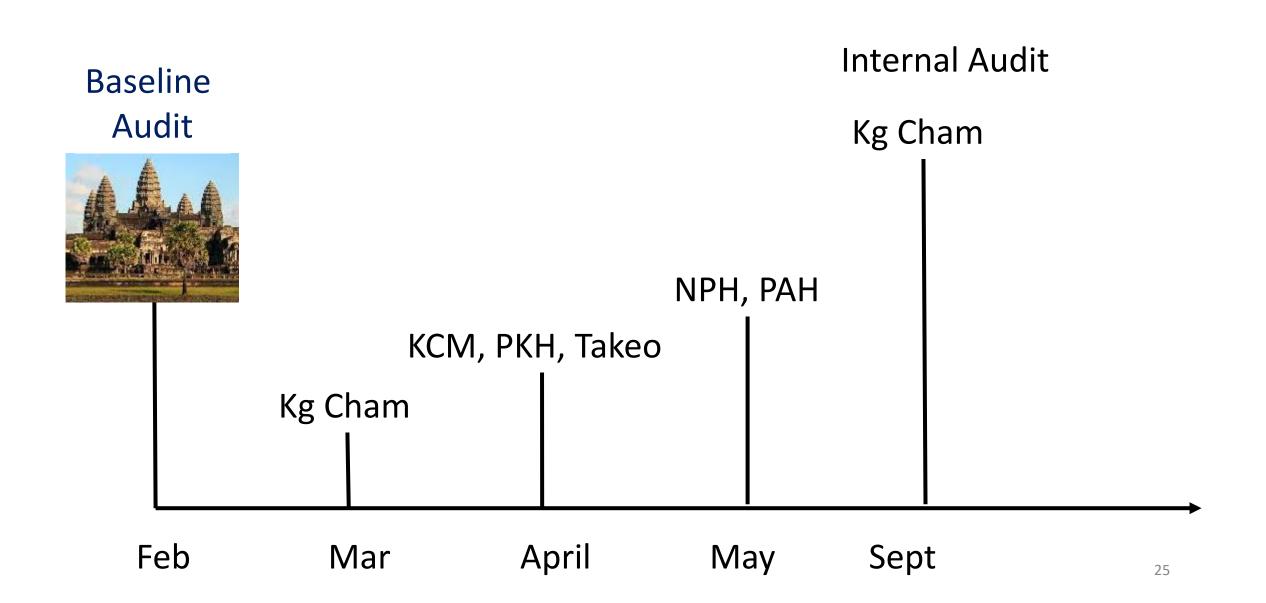


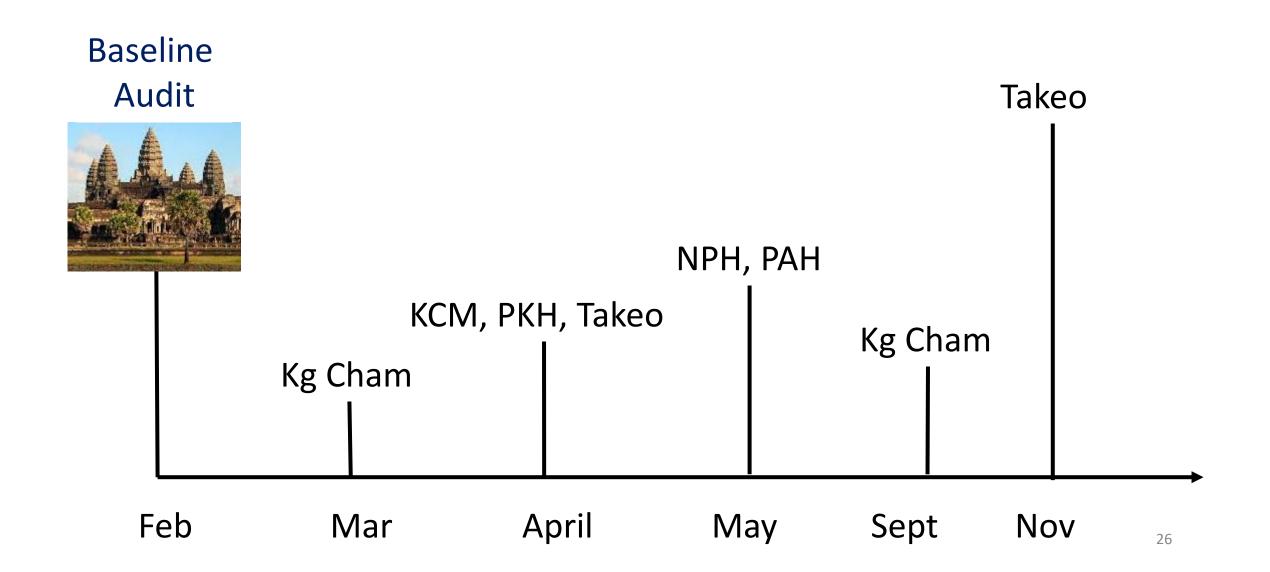








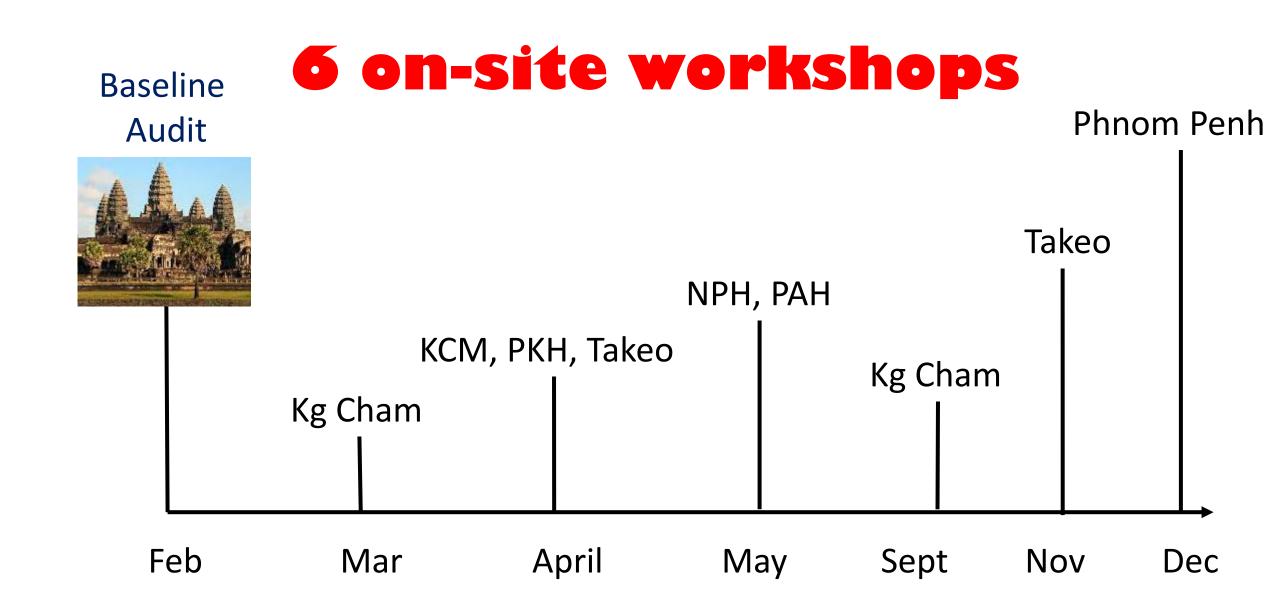


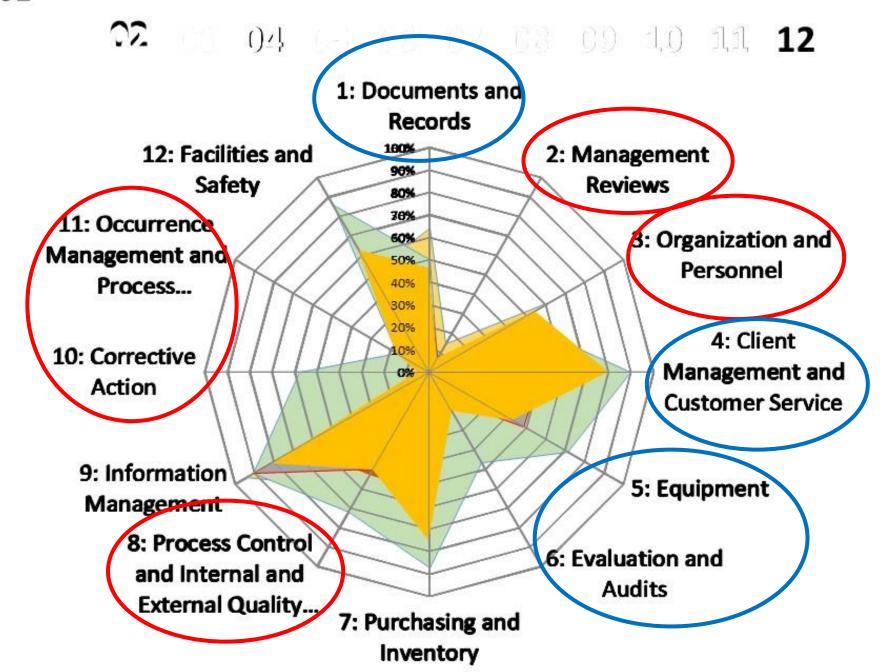


Method verification









CamLQMS Scores

✓ Complete all the 6 on-site training practices (2018)

✓ Remote mentoring:

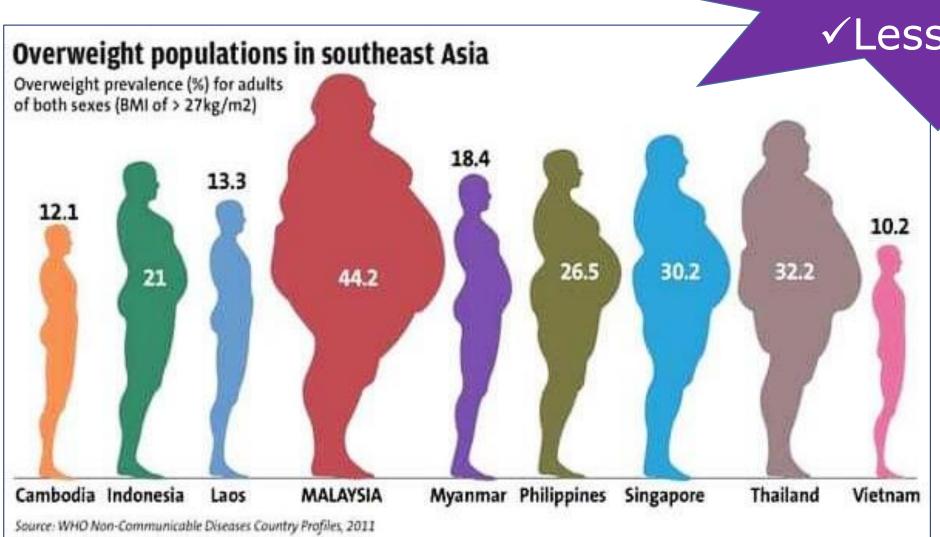
Dec 31, 2018 - March 1, 2019

Tentative Final CamLQMS Audit Schedule 2019				
Date	Lab	Audit Team		
		I-TECH Team	Auditor Trainee	BMLS
Mar 3 – 7, 2019	Kratie	Siew Kim		
	PAH			
Mar 10 -15, 2019	Prey Veng			
	Svay Rieng			
Mar 18 -22, 2019	Kg Cham	Audit		
	Kossamak	Consultant		
	Sihanoukville	Nayah		
	Kampot			
Mar 25 – 28, 2019	Takeo	Audit		
	NPH	Consultant		
	KSFH	Nayah		
	Kandal			

Some power point presentation tips

- 1. Keep it simple
- 2. Choose your fonts
- 3. Use appropriate charts/graphs/tables
- 4. Use color

1. Keep it simple

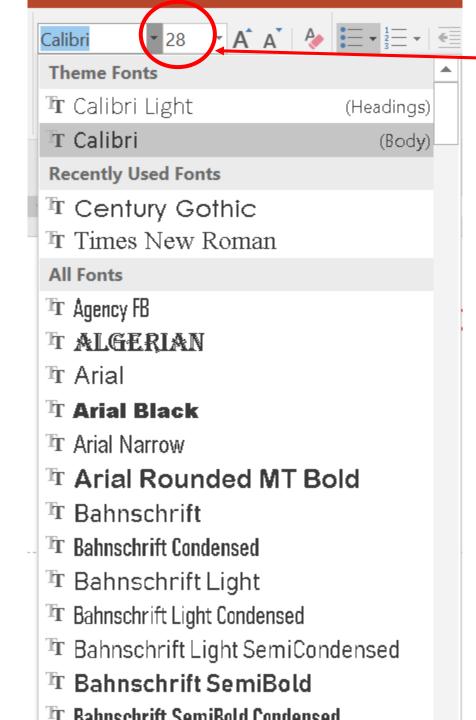


✓Use pictures
✓Less words

2. Choose your fonts

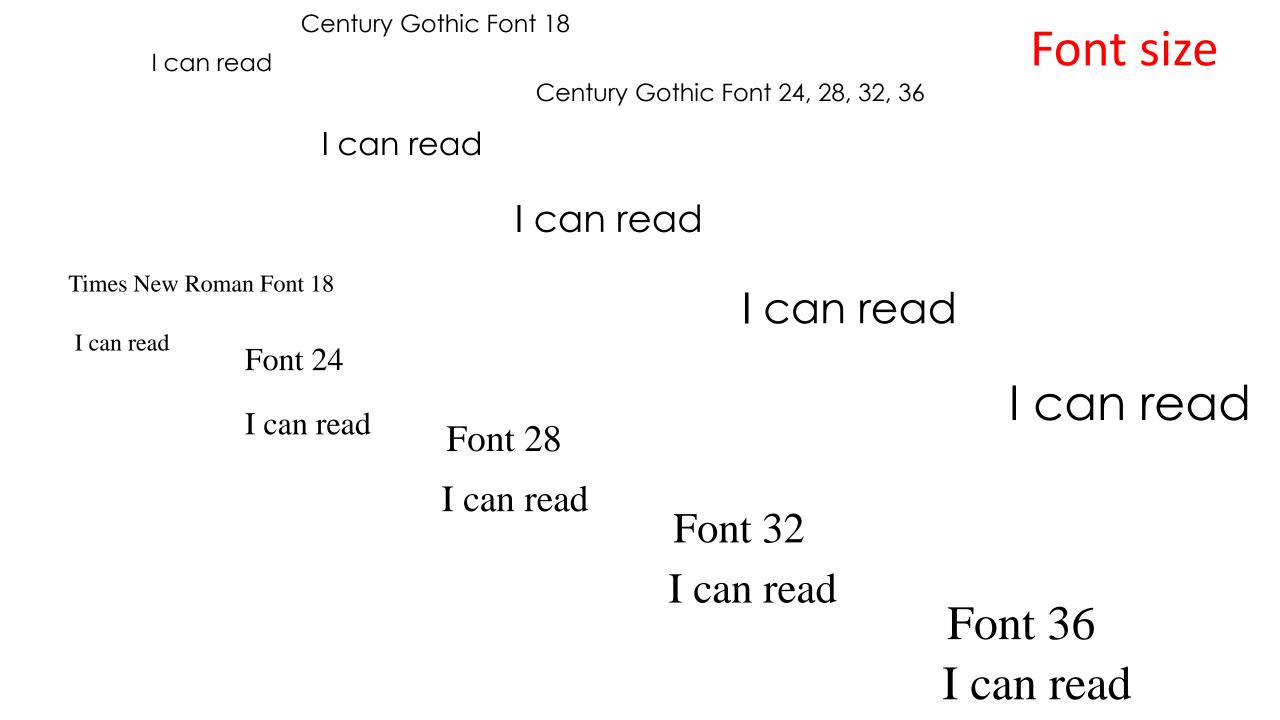
- ✓Use 1 or 2 types of font
- √ Font size: can be seen at the back of the room

Example: size 24 or bigger

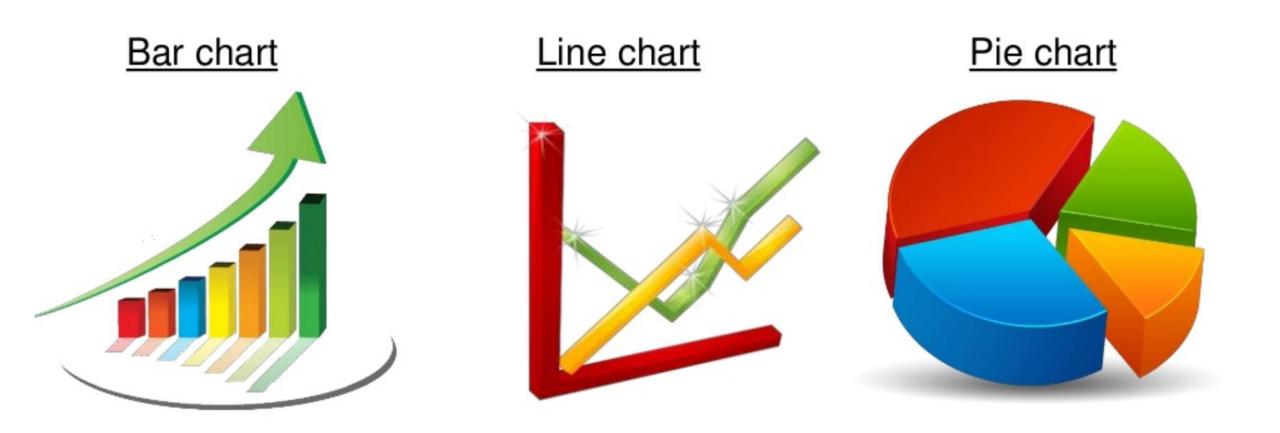


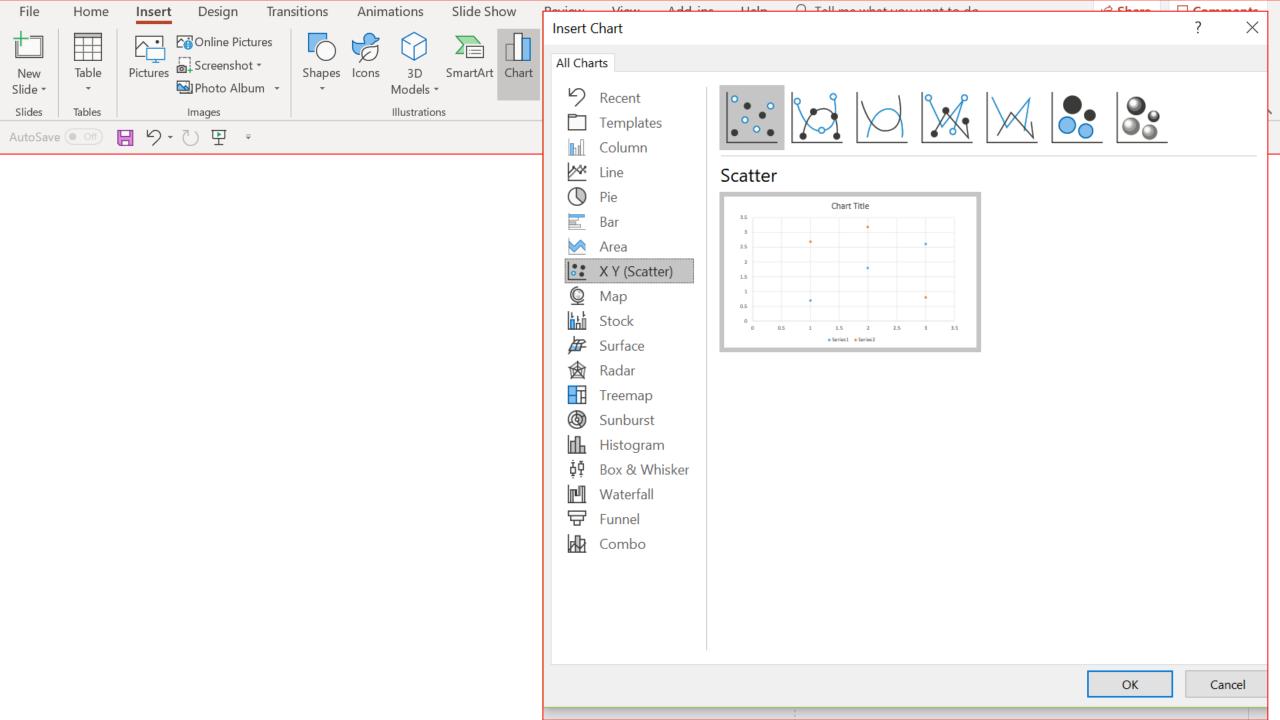
Font size

Fonts

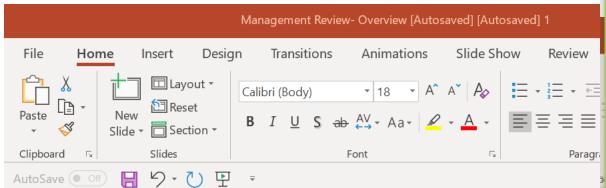


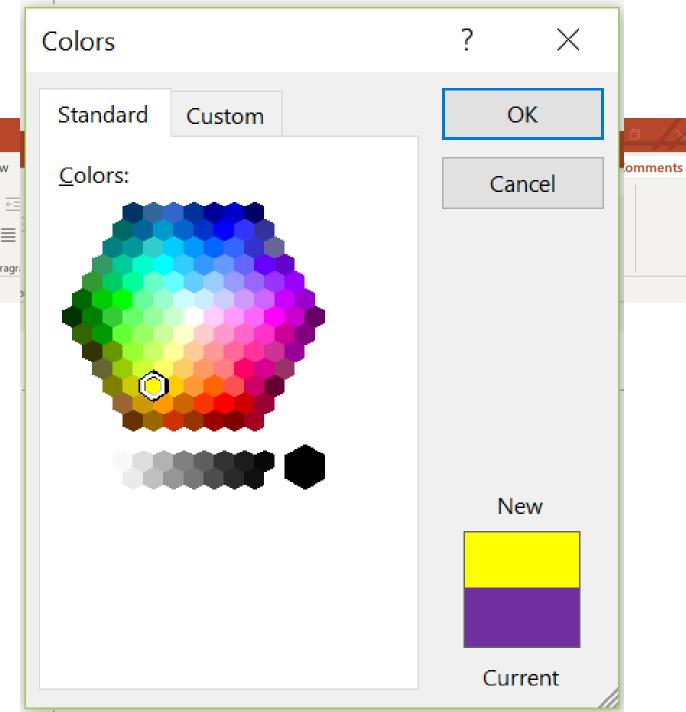
3. Use appropriate charts/graphs





4. Use color



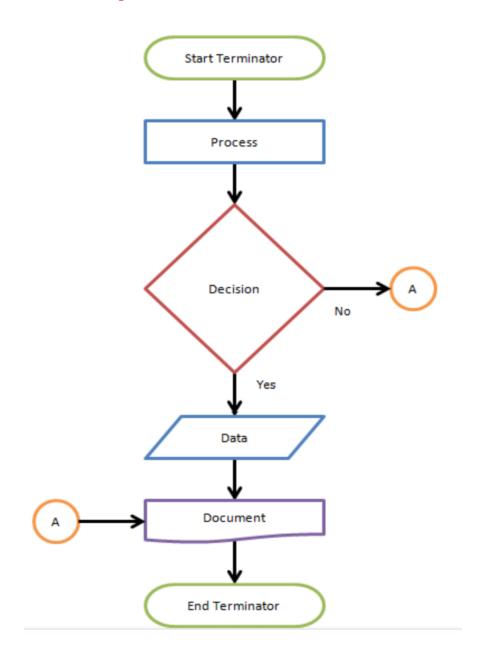


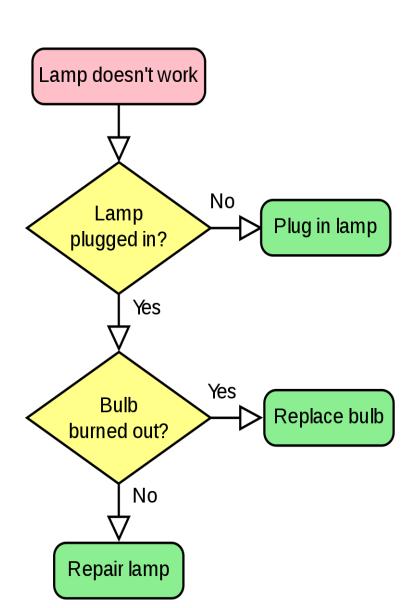
Work Process

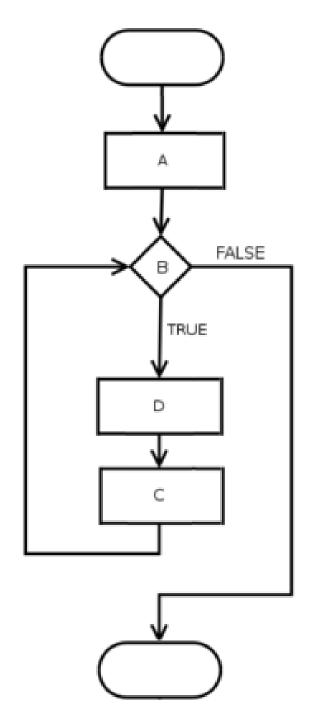
Sub-Process Start/End **Process Document** Decision (question) Data On-page reference Off-page reference

Click

Examples: Work flow charts







Effective implementation/operation according to ISO 15189

Examples of assessment: 1. Internal audits

2. Occurrence management

3. Document control

4. Risk management

Effective implementation/operation according to ISO 15189

1. Internal audits

- Assessing implementation and effectiveness of process.
- All 12 sections in 1 yr.
- Results are based on facts and data.
- Continual improvement to perform better.

Effective implementation/operation according to ISO 15189 - continued

2. Occurrence management

- Resolution of nonconformities.
- Root cause analysis (RCA).
- Process of quality improvement.
- Corrective action and preventive action.

Effective implementation/operation according to ISO 15189 - continued

Document control

- Procedures signed on time,
- Eliminate outdated information.
- Finding a document during an accreditation visit.
- Staff can find the document in the shortest time.

Effective implementation/operation according to ISO 15189 - continued

4. Risk management

- There is process owner, process map, and identify its risk points.
- Identified during internal or external audits (e.g. EQA)
- Identify future risks based on past errors.
- All staff to support identifying risks

Name what are the good How does the lab achieve quality activities

these?

• What?

Things to do

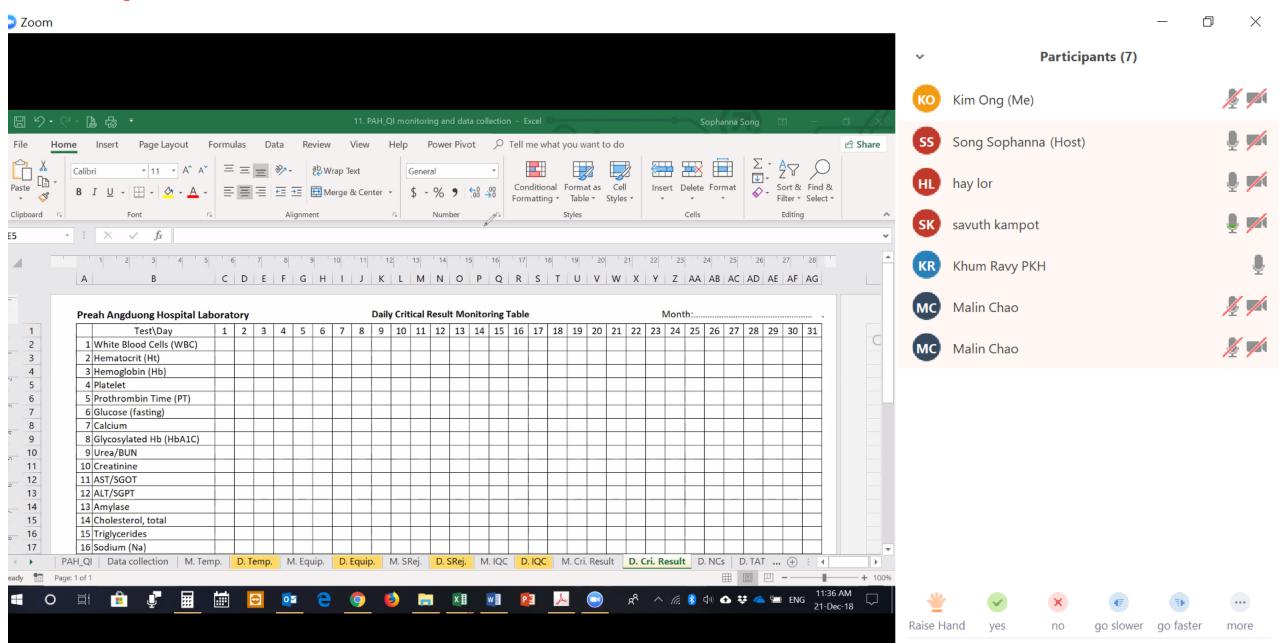
Summary

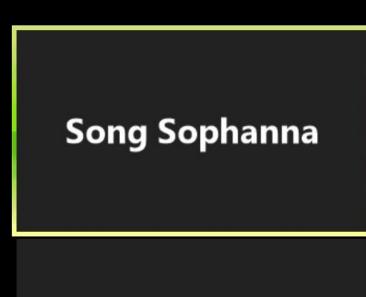
Why do Management Review?

What are the components in Management Review?

Do a presentation on Management Review

Friday Dec 21, 2018 zoom calls





Kim Ong



Malin Chao

Samrach (Lab S...

IN Thida PAH

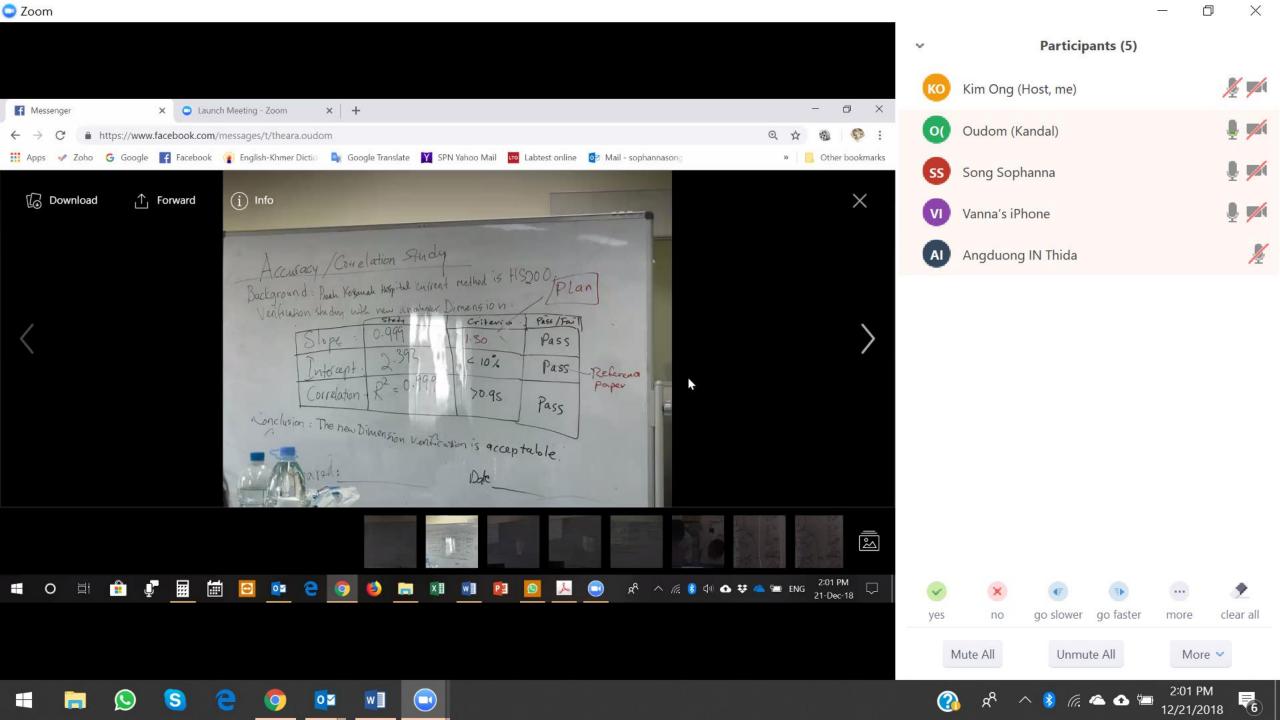
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sam rach SVR lab

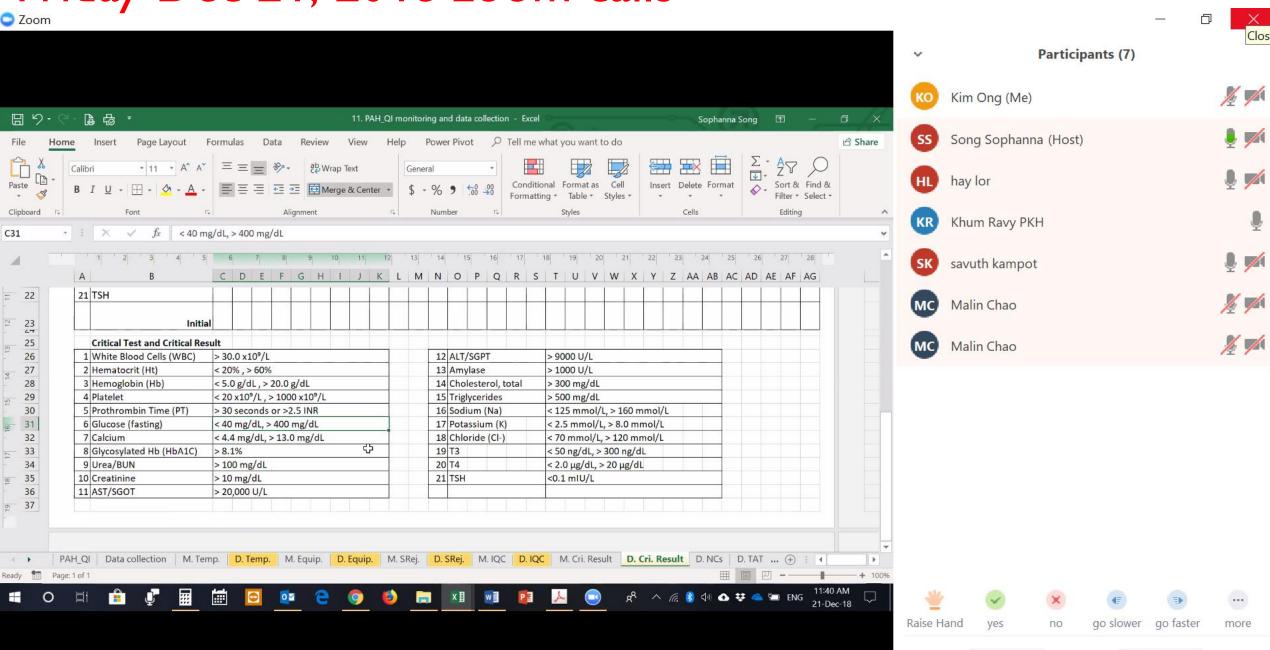
Malin Chao







Friday Dec 21, 2018 zoom calls



Unmute Me

Reclaim Host

