LabFocus

The Joint Commission

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ACCREDITATION

Laboratory Accreditation resurvey window changing: What you need to know

Starting next year, The Joint Commission is reducing the resurvey window for its Laboratory Accreditation program from six months to three months for unannounced surveys. This change will better meet the needs of laboratory-accredited organizations related to staffing and planning.

Organizations will still be able to select 10 "avoid dates" within the survey eligibility window. Out-of-cycle survey events will not be affected by this change, including:

- For-cause surveys
- Retrospective cytology surveys
- Proficiency testing monitoring surveys
- Accreditation with follow-up survey

So, what else do you need to know?

When is this happening?

The Joint Commission will implement the new three-month resurvey window with applications that have a **due date after Jan. 3, 2019**, and **a laboratory accreditation anniversary date after Oct. 3, 2019**.

These organizations will see an updated survey eligibility range when completing the application. The "Tab 6 - Survey Details - Avoid Dates" webpage will be updated on Jan. 3, 2019, and the organization will be able to choose 10 avoid dates during this survey eligibility range.

What if my organization falls outside the implementation dates?

If your organization's accreditation anniversary date occurs prior to Oct. 3, 2019, your organization will benefit from a three-month resurvey window with the avoid dates included in the 15-month application. Avoid dates will still be provided through the application, "Tab 6 - Survey Details - Avoid Dates." The survey eligibility range will be updated to show the three-month window, starting Jan. 2, 2019.

Organizations that submitted an application before Jan. 3, 2019, will not have the ability to modify the already submitted avoid dates. If your organization previously submitted a Laboratory Application for Accreditation, then there is no action needed at this time.

What's next?

The Joint Commission will continue to make every effort to reasonably accommodate an organization's avoid dates. However, The Joint Commission reserves the right to conduct a survey during an "avoid period" if the reason given to avoid a survey at that time is such that a survey can be reasonably accomplished. Also, The Joint Commission may not honor single avoid dates clustered near the end of the accreditation cycle or other attempts to choose dates that unreasonably narrow the period of time in which schedulers can efficiently accommodate the unannounced survey process.

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For more information about this change or if you have questions, contact Heather Hurley, executive director, Laboratory Accreditation, at hhurley@jointcommission.org.

On-site survey insight from a surveyor: Part 2

Dr. John Russell (Russ) Forney has surveyed laboratories for The Joint Commission for three years. Prior to joining The Joint Commission, Dr. Forney was a Centers for Medicare & Medicaid Services-trained surveyor in South Dakota and Wyoming, covering care settings such as acute care and critical access hospitals, ambulatory surgery centers, long-term care, and clinical laboratories. Dr. Forney's career also has spanned laboratory management, infection prevention, academic appointments, and strategic leadership. His education focus is in clinical parasitology, with post-doctoral experience in tropical medicine and regulatory affairs.

In Part 2 of an interview with Dr. Forney (Read Part 1 in the previous issue of Lab Focus), he talks about best practices for laboratories implementing Individualized Quality Control Plans (IQCPs), as well as ways in which laboratories can prepare for surveys.

Lab Focus: What are some best practices for implementing IQCPs?

Dr. Forney: Ensure all three elements (Risk Assessment, Quality Control plan, Quality Assurance monitoring) of the IQCP are complete and accurate. These elements should be integrated and rational. The QC plan should reflect the laboratory's strategies to reduce risks identified in its assessment, and QA monitoring activities should include those key elements of the QC plan intended to abate risks in the pre-analytic, analytic and post-analytic domains.

It is important to note that the IQCP risk assessment process has confirmed what many laboratorians knew intuitively: the greatest vulnerability for the clinical laboratory is the pre-analytic environment. Further, the pre-analytic domain is often a difficult area to manage in a risk reduction effort. It is common for laboratories to add pre-analytic quality measures to their performance improvement activities to better gauge their success in reducing pre-analytic risks. Metrics to identify specimen rejection rates, blood culture contamination rates, elements of the National Patient Safety Goals (patient identification, labeling and communications) are effective surrogates of pre-analytic quality and focus efforts on the leading edge of analytic processes.

Staff should understand their roles and responsibilities in the IQCP process. For example, if a laboratory focuses on pre-analytic risk-reduction, the phlebotomist will have a fundamental role to ensure the right patient, right specimen, right label, and right timing are achieved. The same holds true for respiratory therapists who collect arterial blood gas samples, and nursing staff who collect rupture of membrane (ROM) specimens, culture swabs, and blood cultures. The pre-analytic domain is large, complex and can be difficult to manage. However, the return on investment for reducing pre-analytic error significantly improves the potential for analytic quality and patient safety.

Finally, laboratory leadership should look at the ways in which IQCP integrate into ongoing quality assessment activities. Integration can be viewed as overlapping existing processes, for example, the use of proficiency test performance and technical competency in validating the efficacy of an IQCP. Some IQCPs are integrated by their design and intent; the quality of commercially-prepared microbiology culture media has a direct impact on the quality of automated microbial identification and sensitivity systems. Diagraming the relationships between IQCPs and other QA processes is a great way to illustrate the integration and complexity of the pre-, post- and analytic systems.

Lab Focus: What are some ways laboratories can prepare for their surveys?

Dr. Forney: For starters, laboratories can become more familiar with the accreditation standards. Download a digital copy of the *Comprehensive Accreditation Manual for Laboratory Services* (*CAMLAB*) and review each of the component parts. The chapter and section overviews are an excellent introduction to the subject area and present the intent behind the standards as a strategic overview. Laboratories can

develop a rotating agenda to selectively review each of the different chapters and sections in the *CAMLAB* and implement a review process that ensures all applicable standards are considered.

Laboratories that utilize the intracycle monitoring (ICM) program in their nonsurvey year are able to explore their concerns and questions with an on-site surveyor. Laboratories report the ICM surveys are valuable, and they appreciate the opportunity to custom focus the survey to best fit their needs and interests.

Some laboratories proactively incorporate variations of tracer methodologies into their ongoing audits and quality assessment activities. Adapting a tracer-like process is an effective data capture method and has the added value of developing staff's familiarity and confidence in their compliance posture. Tracers as QA tools further reduce survey anxiety by repeatedly previewing this process among staff.

Document your activities in a straight-forward fashion; documentation does not need to be a dissertation, but simply a way to capture actions, decisions and elements of problem-solving. Effective documentation captures the thought processes that precipitate actions and decisions — and it provides a legacy for the laboratory and a logic trail for corrective actions, improvement projects, and other essential functions.

All laboratory staff should be encouraged to ask questions during the survey process, as this is an effective way to use the expertise and proximity of the surveyor as an on-site education opportunity. Some laboratories prepare a list of questions prior to survey, adding a self-directed focus tailored to their concerns and experiences. And the laboratory can explore The Joint Commission's digital resources for tips, tools, and techniques to self-assess and rapidly improve areas of concern.

RESOURCES

Lab Focus readership survey available until Dec. 27
The Joint Commission is interested in your thoughts about Lab Focus. We'd like to know if it provides the news you need about The Joint Commission's Laboratory Accreditation program. Please take a few minutes to complete this survey, which will be available through Thursday, Dec. 27. (Contact: Jon DePaolis, jdepaolis@jointcommission.org)

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