Northern Ireland Blood Transfusion Service	POLICY DOCUMENT

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Document Title: NIBTS POLICY FOR EXTERNAL QUALITY ASSESSMENT SCHEME PARTICIPATION

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CROSS REFERENCES

This Policy refers to the following documents:

Doc Type	Doc. No.	Title
SOP	QA:045	Participation in External Quality Assessment Schemes
SOP	HE:113	Participation in the National External Quality Assurance Scheme for Microbiology
SOP	AN:059	Automated Serology Participation in the UK NEQAS Scheme

Key Change from Previous Revision:

This is a new policy.

1 STATEMENT

NIBTS perform a wide range of laboratory test procedures. Current regulations, standards and best practice require that where an external quality assessment scheme (EQAS) exists for a specific test it should be applied by any laboratory carrying out that test. For many tests more than one EQAS will exist. NIBTS will in such cases select the most appropriate schemes.

Participation in EQAS assists in assuring the quality of test methods, reagents, equipment and staff competency

NIBTS will apply at least one EQAS to each test method it employs where these are available.

NIBTS will monitor the performance within these EQAS schemes.

When a less than satisfactory result is identified an incident report will be generated leading to thorough investigations and actions to reduce the potential for re-occurrence.

All relevant laboratory staff will be kept informed of the EQAS results obtained.

EQAS results for each laboratory will be discussed with staff at the relevant departmental meeting and displayed within the relevant laboratory.

2 OVERVIEW

The NIBTS is committed to the application of quality systems. In conjunction with this the service is required to meet a number of regulatory standards. A number of the systems and standards require the application of External Quality Control schemes within NIBTS. This policy sets out how NIBTS will manage participation in such schemes, ensure that the results obtained are appropriately reviewed and, where unsatisfactory results are obtained, these are investigated and appropriate actions taken to address the cause.

In addition to this policy NIBTS have several Standard Operating Procedures(SOPs) which relate specifically to participation in EQAS schemes as listed below:

SOP QA:045 Participation in External Quality Assessment Schemes
SOP HE:113 Participation in the National External Quality Assurance Scheme for Microbiology
SOP AN:059 Automated Serology Participation in the UK NEQAS Scheme

Other operational SOPs may have references to EQAS schemes within specific sections.

3 RESPONSIBILITY

- Heads of Department, Laboratory Manager and Quality & Regulatory Compliance Manager responsible for identifying appropriate EQAS schemes.

- Heads of Department responsible for ensuring participation in relevant scheme and providing schedules for participation to the Quality Department.

- Head of Department responsible for providing results from EQAS exercises to Quality Department and raising an incident where result indicates less than satisfactory performance.

- Head of Department responsible for discussing results from EQAS exercises with staff at relevant departmental meetings and displaying results within laboratory in a position accessible to staff.

- Quality & Regulatory Compliance Manager/Deputy/RAC Lead responsible for collating results from EQAS exercises for inclusion in Quality Metrics Report.

4 POLICY

4.1 SELECTION OF APPROPRIATE SCHEMES

The Quality & Regulatory Compliance Manager will, in conjunction with, the Biomedical Scientist in charge of each laboratory, or his/her deputy, and the Laboratory Manager define the quality assessment schemes the NIBTS will participate in.

Biomedical Scientist in charge of the laboratory or his/her deputy will ensure registration with identified schemes and confirm to the Quality & Regulatory Compliance Manager the frequency and dates of expected samples (if possible).

The Quality Department will log all expected EQAS exercises on tables maintained by the Quality Department.

The Quality & Regulatory Compliance Manager will maintain a list of approved external quality assessment exercises.

Note: It should be noted that due to the nature of the materials tested routinely in NIBTS e.g. very low white cell counts or very high levels of coagulation factors, that results obtained may in some cases be at variance with expected results.

4.2 TESTING OF SAMPLES

Samples must be tested as soon as possible after receipt or on the date specified by the scheme.

Samples must be tested as per routine test procedures.

Biomedical Scientist in charge of the laboratory or his/her deputy must ensure that exercises are rotated through all staff in their department or those responsible for performance of the appropriate tests. This will be recorded.

4.3 MONITORING AND REVIEW OF RESULTS

Biomedical Scientist in charge of the laboratory or his/her deputy must ensure that the Quality & Regulatory Compliance Manager and where appropriate the Laboratory Manager receive copies of all external quality assessment scheme reports.

Tables will be updated by the Quality Department to reflect the completion of the exercise.

External quality assessment scheme results must be displayed on laboratory notice boards and brought to the attention of all relevant staff.

Results of external quality assessment schemes must be discussed at relevant department meetings.

If unsatisfactory results are encountered an Incident Report **must** be raised and appropriate investigations undertaken by the Biomedical Scientist in charge of the laboratory or his/her deputy.

The Quality & Regulatory Compliance Manager/Deputy or RAC Lead will collate all external quality assessment schemes results. These will be presented in the Quality Metrics Report.

5 EQUALITY SCREENING OUTCOME

This policy has been drawn up and reviewed in light of the statutory obligations contained within Section 75 of the Northern Ireland Act (1998). In line with the statutory duty of equality this policy has been screened against particular criteria. If at any stage of the life of the policy there are any issues within the policy which are perceived by any party as creating adverse impacts on any of the groups under

Section 75 that party should bring these to the attention of the Head of HR & Corporate Services.

The Northern Ireland Blood Transfusion Service is committed to the promotion of equality of opportunity for staff, donors and service users. We strive to ensure that everyone is treated fairly and that their rights are respected at all times. We believe that it is important that our policy is understood by all those whose literacy is limited, those who do not speak English as a first language or those who face communication barriers because of a disability. On request it may be possible to make this policy available in alternative formats such as large print, Braille, disk, audio file, audio cassette, Easy Read or in minority languages to meet the needs of those not fluent in English.

6 TRAINING REQUIREMENTS

Laboratory Heads of Department and Deputies, Laboratory Manager must read and understand this policy.

Regulatory Affairs & Compliance Lead must read and understand this policy.

Quality and Regulatory Compliance Manager and Deputy must read and understand this policy.