Driving Quality Improvement

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Who drives quality?
What drives quality?
Is UK Pathology a quality service?
Pathology Quality assurance review

Lacks

- Transparency
- Integration
- Scrutiny
- Oversight
- Effective triggers for reward and sanction
What do pathologists think drives quality?

What do our commercial partners think?

What do managers think drives pathology quality?
I’m interested in knowing what you think are the drivers behind quality in pathology

- Peers
  - e.g. Consultants, Pathology Operational Managers (Head BMS), Quality Manager
- Commercial partners
  - Sales reps, engineers
- Managers
  - Director, Associate director
Peer view

- Accreditation and regulation
- Benchmarking
- Patient outcome data
- Commissioners
- Technology advances
- Personal proficiency
- Staff who care
Commercial partners

- Cost
- Prestige and reputation
- Assurance that results are correct
- Litigation
Managers

- Resounding silence
- Why?
- Lack of understanding?
- Lack of care?
- Assumption that Pathology will take care of it
What drives quality for my managers?

- How the Board think we perform
- Quarterly performance
- Dashboard
- Still subjective
- Conflicts on board time
- The good, the bad and the ugly
What drives quality for my commercial partners?

- Working in partnership
- Flagship sites
- EQA performance
- Value for money
- The right result
- Profit
What drives quality improvement among my peers?

- No-one wants to be the outlier
- Scientists usually strive for improvement
- We care
- Teamworking
- “I don’t want people to think I’m not doing a good job”
Changes in Pathology

- No accreditation
- CPA
- UKAS
CPA

- ‘Owned’ by Pathology
- Friendly
- We grew up with it
- We forgot about it between inspections
- Nice to have
UKAS
Why the disconnect?
Still the same…. 

- People 
- Aims 
- Overall process 
- Outcome
So what’s different?

- The ‘Standard’
- The process of continual scrutiny
- Understanding the scope of your service
- The cost
- Is this a bad thing?
The standard

- Written differently
- Need to understand terminology
- Still open to individual interpretation
- You have to buy it!
The process

- Are you ready for accreditation?
- Regular inspection
- Keeps you on your toes
- Different mindset
The cost

- Annual fee
- Inspection fee
- Cost of clearing non-conformances
- Cost of adding / changing scope
- Focuses you
How has 15189 changed my lab?

- Verification
- Standardisation
- Brought Pathology departments together
- Audit
- Documentation
Verification

**CPA**
- Run a few samples
- Eye ball the results
- Keep the data on a scrappy piece of paper
- Lose the data
- Forget when you made the change

**UKAS**
- Plan
- Collect patient and EQA samples
- Dilution, linearity, precision
- Scrutinise
- Discuss
- Document
- Implement
Standardisation

- Patient pathways
- NICE guidance
- Effective use of finite resources
- Driver for our commercial partners to be more open
Brought Pathology together

- Established a Pathology wide Quality group
- Review all SOP’s together
- Share the burden / pain
- Share the experience
- Learn together
Audit

- Much less regimented approach than CPA
- Targeted audit
- More scrutiny about the process of audit
- CAPA target times and the steps taken
Documentation

Most labs are already doing almost everything they need

Can they show this?

Know your quality system inside out and reference it to ISO 15189
How has 15189 changed me?

1. I think about things such as Uncertainty of measurement.
2. I use uncertainty when talking to F1’s.
3. I have a new stick to use with Trust managers.
What are we focusing on?

- Calibration
- Uncertainty of measurement
- Audit
- Information management and technology
- Pre and post analytical phase
- Documentation
Who drives quality improvement?
Pathology needs **YOU** to drive quality improvement