



Opportunities For Improvement: Most Frequent Findings From The Joint Commission Laboratory Surveys

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The Joint Commission Overview

- ▶ Accredit over 2,700 CLIA certificates
- ▶ Survey utilizes Tracers to assess the entire process from lab to bedside
- ▶ Professional surveyors experience over 75 laboratories annually, allowing them to be consistent and share best practices
- ▶ On-site correction possible during the multi-day visit
- ▶ Blood administration is observed both as part of the hospital survey and the laboratory

Tip: Hospital standards related to blood administration

- ▶ **EC.02.05.03 Emergency power for blood storage systems**
- ▶ **HR.01.02.01 Special training provided for transfusion administration**
- ▶ **MS.05.01.01 Medical staff involved in PI activities for blood & blood use**
- ▶ **PC.02.01.01 Transfusions administered per law & medical staff policy**
- ▶ **PC.05.01.09 HIV/HCV Notification (Look back) policies**
- ▶ **PC.03.01.01 Transfusion administration equipment is available for operative and other high-risk procedures**
- ▶ **PI.01.01.01 Organization collects data on blood and blood use, and all reported and confirmed transfusion reactions**
- ▶ **RI.01.03.01 Informed consent process**
- ▶ **NPSG.01.01.01 Two identifiers used to ID patient for transfusion**
- ▶ **NPSG.01.03.01 Two persons verify patient ID and product for transfusion**
- ▶ **UP.01.01.01 Standardized pre-op verification list, including blood product availability (and other laboratory reports)**

Most Common Requirements for Improvement (RFI)

- ▶ 6799 total laboratory RFI in 2009
- ▶ Approximately 20% of standards resulted in 80% of findings
- ▶ 386 RFI in BB specific standards = 5.7% of total lab findings
- ▶ Top 10 BB findings represent 63% of all blood bank findings

BB Specific RFI

Top 10:

- QSA.5.01.01, EP 1
- QSA.5.15.01, EP2
- QSA.5.13.01, EP1 and 2
- QSA.5.08.01, EP3
- QSA.5.01.01, EP4
- QSA.5.01.01, EP5
- QSA.5.08.01, EP1 and 2
- QSA.5.13.01, EP 6
- QSA .5.13.01, EP1,2, and 7
- QSA.5.13.01, EP4

Note: 2009 RFIs used different numbering scheme which has been translated into 2010 taxonomy.

Top 10 RFIs continued

1. Written policies and procedures for the blood transfusion service are consistent with current American Association of Blood Banks' (AABB) standards.
2. The written interpretation is made a permanent part of the patient's clinical record.
3. In all instances, the laboratory is notified immediately of suspected transfusion reactions whether the physician responsible for the patient deems it necessary.
4. The organization documents all transfusion-related activities.
5. The blood transfusion service director conducts and documents an annual review of policies and procedures.
6. The written policies and procedures are followed.

Top RFIs, continued

7. Written policies and procedures are followed for transfusion protocol (including using filters and warming).
8. Evidence exists that transfusion staff have been trained and are competent in the procedure.
9. The written policies include detailed criteria for recognizing a suspected transfusion reaction.
10. The monitoring of patients receiving blood is documented.

Tips for Survey

- ▶ Staff follows all procedures as written for testing and hanging blood.
- ▶ Be in compliance with the AABB technical regulations
- ▶ Ensure documentation is complete
- ▶ Review transfusion reaction management for protocols from bedside into the laboratory and back
- ▶ Blood administration will be observed as part of the hospital survey as well