Tool: Wall Calendar Materials 1-06

**SCHEDULED MEETINGS DATES**

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| **Meeting** | **Frequency** |
| Staff Meeting | Weekly – every Thursday |
| Monthly Ancillary Service Management Meeting | Monthly – first Wednesday of the month |
| Meeting with District Medical Officer (DMO) | Quarterly– last Thursday of the Month (March, June, September, December) |
| Meeting with Laboratory Director | Monthly - last Monday of the month |

**EXTERNAL QUALITY ASSURANCE PROFICIENCY TESTING (EQA-PT) CALENDAR**

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| **20XX EQA Proficiency Testing Schedule** | | | | |
|  | **Serology Survey** | **Hematology Survey** | **Microbiology Survey** |
| **Shipping Date** | **February 20th** | **May 13th** | **April 1st** |
| **Reporting Date (must be postmarked by this date)** | **March 6th** | **June 5th** | **April 23rd** |
| **Evaluations Mailed Date** | **April 7th** | **July 6th** | **May 26th** |

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| **LABORATORY EQUIPMENT SCHEDULE** | | | |
| **Equipment Name** | **Performed By** | **Frequency** | **Schedule** |
| CD4 Analyzer | XYZ Manufacturer | biannually | March/ September |
| Hematology Analyzer | XYZ Manufacturer | biannually | March/ September |
| Chemistry Analyzer | ABC Manufacturer | biannually | October/ April |
| BSC Filter Replacement | Biomedical Department | biannually | November/ May |
| Pipette Calibration | National Health Laboratory | biannually | December/ June |
| Centrifuge RPM Validation | Biomedical Department | yearly | December |

Quality Improvement Project Plan Measurement of *TAT on FBC*

Measurement:

How often: *Weekly on Mondays*

Duration: *3 months\_*

Date to review findings *June 2, 20XX\_*

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| **Dates** | **03/03** | **10/03** | **17/03** | **24/03** | **31/03** | **07/04** | **14/04** | **21/04** | **28/04** | **05/05** | **05/12** |
| **Measured parameter value** | **45%** | **60%** | **55%** | **47%** | **42%** |  |  |  |  |  |  |

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| **Scheduling Quality Activities** | | |
| **Checklist Item** |  | **Task to be Scheduled** |
| Does the laboratory communicate with upper management regularly regarding personnel, facility, and operational needs? (SLIPTA 2.4) |  | **Populate Scheduled Meeting Dates** | |
| Are staff meetings held regularly? (SLIPTA 3.8) |  |
| Does the laboratory participate in a Proficiency Testing (PT) scheme or inter-laboratory comparison? (SLIPTA 9.18) |  | **Integrate EQA-PT Calendar** | |
| Is routine calibration of laboratory equipment – including pipettes, centrifuges, balances, and thermometers – scheduled, indicated on the equipment, and verified? (SLIPTA 5.6) |  | **Integrate Laboratory Equipment Schedule** | |
| Is equipment routinely serviced according to schedule and documented in appropriate logs? (SLIPTA 5.8) |  |
| Does the laboratory identify and undertake quality improvement projects (IP)? (SLIPTA 2.3) |  | **Populate Quality IP Plan** | |
| Does the laboratory supervisor routinely perform a documented review of all quality records? (SLIPTA 2.2) |  | **Schedule a review of all applicable records** | |
| Are environmental checks / temperature logs complete, accurate, and regularly reviewed? (SLIPTA 9.1) |  |
| Are stock counts routinely performed? (SLIPTA 7.10) |  | **Ensure stock count has been performed** | |
| Do work schedules show task assignments & coordination of work among lab staff? (SLIPTA 3.1) |  | **Prepare and post the duty roster** | |
| Is there a system for competency assessment of staff (both new hires and existing staff)? (SLIPTA 3.6) |  | **Schedule competency review of all staff (by individual or by section)** | |
| Are quality indicators (TAT, rejected specimens, stock outs, etc.) selected, tracked, and reviewed regularly to monitor laboratory performance and identify potential quality improvement activities? (SLIPTA 11.2) |  | **•Blank logs available for upcoming month;**  **•Receive monthly statistics from workstations;**  **•Compile/Review monthly statistics/ report;**  **•Forward statistics/reports to director;**  **•Discuss potential IP with director at next meeting** | |
| Is there a tool for regularly evaluating client satisfaction and is feedback received effectively utilized to improve services? (SLIPTA 4.4) |  | **Review customer complaint box and report finding to staff** | |