

Quality Qorner

Toot Your Horn!

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The winter holidays will soon be upon us, with celebrations that include family, travel, fun, feasting, and, hopefully, time for reflection on our good fortune to be alive in a free country. At year's end we also look ahead into the next year and celebrate its arrival with the ringing of bells, exploding of fireworks, and tooting of horns.

How about if, in addition to tooting your New Years' party horn, you also toot a horn for your laboratory? Surely, there is one thing you do in your laboratory that improves patient care or safety, reduces the cost of poor quality, or adds to the laboratory's bottom line. If your laboratory has undertaken such a project in the past year, wouldn't you like the opportunity to share your results and get some well-deserved recognition for it?

The need for quality improvement in the laboratory environment is pervasive. Increased workforce shortages scream for more efficient processes. Budgets continue to be constrained because a considerable part of outflow is due to the cost of failure when something was not done right the first time. Test volumes continue to increase from busier emergency departments, more acutely ill patients, and influx from outreach programs. These issues add to the pressure from evidence-based medicine and pay-for-performance. Wouldn't you like to find answers to quality questions from laboratories that have tackled some of these problems and have implemented creative solutions?

Consider the CLMA's Good Practice Sharing (GPS) program as a means to toot your laboratory's horn about quality. It was developed by the CLMA's Patient Safety and Quality (PS&Q) Committee and introduced early in 2007. The GPS acronym suits the program's mission to offer CLMA members a means to navigate the rough waters of how to increase quality and patient safety in a turbulent financial environment.

Let's leave the evidence-based, highly-statistical studies of what constitutes best laboratory practice to the nationally-funded research studies. However, these studies are too few, too slow in publishing results, and likely too expensive for laboratory professional organizations to conduct. Alternatively, we can share information on good practices that demonstrate improvement, based on key quality standards, in an interactive environment that encourages networking amongst laboratory peers. Examples of Good Practices already submitted from laboratories like yours include reduced data errors in specimen processing, critical value notification and documentation, patient-specific narrative interpretations, blood culture contamination rates, and stat turnaround time in the core laboratory.

Why should your laboratory submit a Good Practice to the database? Your contribution helps improve patient care and safety throughout the health care industry—not only in your

own hospital—and this is good for all patients. Your laboratory's name gets positive exposure in a national database—this is good for morale, and for your hospital's marketing efforts. One last important reason to submit a Good Practice is that the only way to get recognition for laboratory medicine professionals is to participate in projects that get national laboratory exposure—this is good for the future of our profession.

CLMA members can submit a Good Practice by going to their Web site (www.clma.org) and clicking on the GPS icon on the left side. You will need to enter the project name, dates, and description, and provide “before” and “after” data and information. A PS&Q subcommittee will review your submission and respond with any questions or notice of acceptance of your Good Practice into the database. A small cash reward for an accepted submission is provided. CLMA members can also access the Good Practices already accepted into the database.

Several years ago, the AABB began a forum for member institutions to get their respective horns tooted. The Commendable Practices file of the Accreditation section on the AABB Web site (www.aabb.org) contains submissions made by AABB assessors when they encounter a commendable practice during an accreditation assessment that improves any combination of efficiency, effectiveness, patient safety, or quality. AABB members can go to this regularly-updated file to learn what their peers are doing to enhance quality in transfusion medicine and adapt these activities to suit their facility's respective environment. It's an honor to be asked to consent to have your facility's commendable practice showcased in the file, so strive to have a good practice to share with your assessor at your next AABB accreditation assessment.

New year, new beginnings, new opportunities. Make a resolution to make your laboratory staff feel good about all its hard work and contribute a submission to the CLMA Good Practice Sharing program. Toot your “Good Practice” horn and get some well-deserved kudos!

This Month's Quality Quote:

“Lack of something to feel important about is almost the greatest tragedy a man may have.”

—Arthur E. Morgan

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