Elevate Knowledge through Accreditation, Proficiency Testing, and Education

February 2020

Congratulations to Grey Bruce Health Services (GBHS) first to achieve ISO 15189 Plus™ Diagnostic Imaging Accreditation in Canada

Congratulations to Grey Bruce Health Services (GBHS) the first hospital organization in Canada to achieve ISO 15189 Plus™ Diagnostic Imaging Accreditation status from the Institute for Quality Management in Healthcare (IQMH).

Accreditation to ISO 15189 Plus™ is a mark of excellence recognized around the world. IQMH accreditation embraces the quality principles of the International Organization for Standardization (ISO). We assess the ability of a facility to perform diagnostic imaging with formal recognition of this competence through accreditation to our ISO 15189 Plus™ requirements. It also provides facilities with the tools they need to standardize their processes, address diminishing resources, mitigate risk and drive continual quality improvement; ultimately improving patient safety.

GBHS is a multi-site organization operating six hospitals in the Grey Bruce region. The Owen Sound site is the largest hospital offering regional services with affiliated sites located in Meaford, Markdale, Southampton, Wiarton, and Lion’s Head.

The scope of accreditation at GBHS includes the following diagnostic imaging services:

- Bone Mineral Densitometry
- Computed tomography (CT)

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Anne Robertson, recently retired Director of the Medical Imaging and Cardiology Diagnostic Services at GBHS, was confident the staff would meet the challenge of being assessed against ISO 15189 Plus™ international standards. Anne had the following to say about the process:

The Medical Imaging Department of GBHS has consistently focused on maintaining the highest quality and following established Standards of Practice. When an opportunity arose for our staff to participate in an established accreditation program evaluation, we decided to be one of the first in Ontario to challenge ourselves.

Our staff members were a little reluctant in the beginning because the task was onerous, but the department leaders ensured that they had all of the tools required to be successful. As each area moved through the process, the staff reconfirmed that they were doing a good job and recognized that the IQMH process was allowing them to close the gaps and make sure that instructions for all staff were easily interpreted and complete.

One of the most intimidating parts of the process was that a team of six of our peers came to all parts of our department, including the peripheral sites, and closely observed our procedures for a complete week.

Our staff rose to the challenge and discovered that they could be proud of their achievements; they were consistently using best practices and the confidence gained from participating in accreditation was rewarding.

The overall experience was rewarding and the successful outcome allows the staff the opportunity to inform the patients that they are getting the best possible care, and “bragging rights” for being the first in the province to be awarded ISO 15189 Plus™ Diagnostic Imaging Accreditation.

Director Medical Imaging & Cardiology Diagnostic Services at GBHS, Kathy Beattie, stated the following about the process:

It was wonderful to see the collaboration with the frontline staff and the team leads. By handing the processes and workflows over to the staff to work on together, I felt it gave them a sense of ownership and involvement in the process. It was also great to recognize that we had a solid foundation even prior to commencing the IQMH process and now to look at how far we have come, we should really be proud. It was a lot of work; however, it was extremely satisfying to see how aligned our processes were with provincial best practices.

Michele Best, Charge Technologist and Clinical Coordinator at GBHS shared the following feedback:

Our confidence is definitely elevated. This accreditation was validation of the excellent service we already provide and ensures we will continue to do so.
The IQMH accreditation assessment team was composed of professional peers selected to provide the technical expertise for the entire scope of the services.

Their comments:

• An amazing week spent with great people. A very positive experience.
• Staff were engaged, positive and proud of the patient services they provide.
• I came away very focused and energized by the experience.
• What an experience! An amazing learning opportunity. I look at my department with a new vision.

Staff and assessors celebrated with cake at the completion of the summation meeting!

Congratulations and thank you to GBHS Medical Imaging services for being the first to achieve ISO 15189 Plus™ Diagnostic Imaging Accreditation.
Centre for Accreditation

Changes to the IQMH Accreditation Assessor program

Over the past year, IQMH Centre for Accreditation has been reviewing the processes for the Accreditation Assessor program and some changes have been made in order to ensure our processes are of the highest quality. This article should be read in conjunction with General Policies for Assessors (Politiques générales à l'intention des évaluateurs), available on the IQMH website.

Provisional Assessors

A new category of Provisional Assessor has been added to the training program. When an assessor candidate completes the three-day classroom training and passes the exam and evaluation, instead of becoming an Active Accreditation Assessor, they will become a Provisional Assessor. The candidates will not become an Active Accreditation Assessor until they have completed a successful accreditation visit with a Staff Technologist. During this assessment visit, the Provisional Assessor will be evaluated on their techniques by the Staff Technologist, the Team Leader and the assessment visit facility. After the assessment visit is over, the evaluations will be reviewed by accreditation staff to determine whether the Provisional Assessor was successful. Successful candidates will become Active Accreditation Assessors and receive an accreditation assessor certificate. Unsuccessful candidates will be notified. The accreditation Staff Technologists will make every effort to include Provisional Assessors on an accreditation assessment visit within one year of their training. This may not always be possible, depending on the Provisional Assessor’s areas of expertise and the accreditation visits available, thus an assessor can hold provisional status for up to three years.

Assessor Certification Maintenance

Accreditation assessors are expected to be available for at least one assessment visit per year. If an assessor does not complete one visit within a calendar year, they will be asked to complete a refresher activity. This is available in two ways.

1. Attend a one-day face-to-face assessor refresher activity session at the IQMH office or

2. Complete an online refresher activity which will be posted to QView™.

In September, IQMH will send out an email notice to all Active and Provisional Assessors who have not completed a visit that year to inform them that they will need to complete one of the two refresher activities before November 30th of that year in order to maintain their Active Assessor status. This notice will include the dates of any face-to-face refresher activities that are planned for that year.

A reminder email will be sent to assessors who have not yet completed an activity at the beginning of December. If a refresher activity is not completed by November 30th, the assessor risks being withdrawn from the accreditation assessor program.

In addition to this, any Active Assessors who have not participated on an assessment visit for the previous three years, whether they have completed a refresher activity or not, will be considered for withdrawal. This is because IQMH wants to make sure all Active Accreditation Assessors are up to date with the current requirements and expectations of qualities and skills necessary to remain an Active Accreditation Assessor.

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Assessor Information Updates

IQMH Centre for Accreditation communicates with assessors on a regular basis, usually via email. These communications provide program updates and request feedback on the program and its requirements. Confidential information is conveyed via secure password-protected web portal.

IQMH Centre for Accreditation updates its records regularly. Assessors are responsible for keeping their personal information up to date and are asked to inform IQMH Centre for Accreditation when their personal information changes, when they have a change in employment status, and when their areas of expertise change. Email addresses are especially important because most communications from IQMH are now sent by email. Remember that IQMH cannot contact you if we don’t have the correct information.

There is an Assessor Change of Information Form available on the IQMH website for assessors to update their personal information when necessary.

Thank you for your participation in our accreditation assessor program. Without you we would not be able to carry out peer assessment visits for our accredited facilities.

Centre for Education

Internal Auditing Course in London, Ontario - SOLD OUT

The Internal Auditing course in London, ON on April 30-May 1 is sold out!

Contact info@iqmh.org if you’re interested in attending at a future date and to be placed on a wait list.

2020 Courses

Registration is now open for all our 2020 courses. https://iqmh.org/Services/Centre-For-Education/Courses
Centre for Proficiency Testing

PT Take-Away: Interpretation of the new Proficiency Testing Chemistry Survey Reports

One of the most significant changes in 2020 is the redesign of the Proficiency Testing (PT) Chemistry program. A summary of changes to the Serum and Urine Chemistry surveys can be seen in Table 1.

The first Urine Chemistry survey of the year is now closed, and completely redesigned survey reports will be provided to participants. An instruction document has been created to guide participants in interpreting the new survey reports. Participants are encouraged to read the document, Instruction - Interpretation of Proficiency Testing Survey Reports - CHEM, which is available in QView™.

| Survey material analyte concentrations cover all clinically relevant levels | The survey material has changed from spiked liquid human-based to lyophilized human-based. This important change makes it possible to cover all clinically relevant concentration ranges. |
| Improved survey sample stability leads to participant cost-savings. | The new survey material has a stability range of two years, enabling shipment of the testing material once at the beginning of each year. Participants benefit from shipment cost-savings. |
| Larger peer group sizes improve robustness of statistical analysis. | Collaboration with The Royal College of Pathologists of Australasia Quality Assurance Programs (RCPAQP) in distributing the same testing materials and sharing unidentified result data improves the robustness of the statistical analysis by increasing peer group sizes. |
| Customize surveys according to your laboratory’s test menus (serum chemistry only). | Participants now have the flexibility of choosing from a large variety of analytes according to their laboratory’s needs with several price categories. |
| Customized analysis worksheets (serum chemistry only). | Electronic analysis worksheets will only contain the analytes chosen by the laboratory for testing to simplify the process of completing and submitting the worksheet. |
| Improved tool for method code maintenance. | The structure of the method code maintenance screens will provide greater ease of use for participants. |
| **Redesigned survey reports to provide even more relevant results** | The survey report format will change to display results of both the current survey and cumulative results from the previous surveys in the same report. This provides participants with a view of all aspects of their PT performance within the same report. |

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Further details regarding Chemistry survey changes can be found here:

- Release of the 2020 Proficiency Testing Catalogue — Changes to Chemistry Surveys

- Bulletin 1 – Changes to CHEM Surveys
  [https://qview.ca/qview/MainForm.aspx?dl=1148212](https://qview.ca/qview/MainForm.aspx?dl=1148212)

- Bulletin 2 – Modifying your facility’s Proficiency Testing method codes
  [https://qview.ca/qview/MainForm.aspx?dl=1150031](https://qview.ca/qview/MainForm.aspx?dl=1150031)

Questions regarding the Chemistry program should be addressed to the Chemistry Consultant Technologist at 416-323-9540, ext. 237 or email [jstemp@iqmh.org / info@iqmh.org](mailto:jstemp@iqmh.org / info@iqmh.org).

Red Blood Cell and White Blood Cell Morphology Wall Charts

Blood cell morphologic identification is a critical component of hematology laboratory practice, and is an important diagnostic aid. Maintaining competency and achieving consistent reporting practices are ongoing challenges in this area. Our wall charts provide photomicrographs composed of normal and clinically significant blood cells and act as quick reference guides while at your microscope.

Find out more about these excellent quick reference guides:
2020 AMMI-CACMID Annual Conference

Sheraton Vancouver Wall Centre
1088 Burrard Street
Vancouver, BC
April 29-May 2, 2020

The only one of its kind in Canada, the AMMI Canada – CACMID Annual Conference where experts in the fields of diagnostic microbiology, antimicrobial stewardship, infectious diseases, infection prevention and control, and public health meet. The conference attracts attendees from across Canada and internationally. It provides updates on a variety of topics to a diverse audience of clinicians, microbiologists, laboratory technologists, public health professionals, infection prevention and control practitioners, students and residents. The conference is governed by the Central Planning Committee, which is composed of representatives from both AMMI Canada and CACMID.

The early bird registration deadline is March 16, 2020.

Visit the CACMID website for more information.

Quality Quote

“Whenever there is fear, you will get wrong figures.”

W. Edwards Deming
Other Industry Events

MLPAO Conference
Explore 2020
Ottawa: June 19-20, 2020
Sheraton Hotel
150 Albert St, Ottawa, ON K1P 5G2
More Information, CLICK HERE

MLPAO Connect Day – North York
Saturday, October 17, 2020
North York General Hospital
4001 Leslie St, North York ON M2K 1E1
Visit the MLPAO website for details - CLICK HERE

2019-2020 CSCC Education Roundtables
Canadian Society of Clinical Chemists
All CSCC Education Roundtables will be held on Thursday and will be one (1) hour in length.
Visit the CSCC website for more information.

IOMH Newsletter
Elevate features articles on accreditation, proficiency testing, quality management and other issues related to medical diagnostic services, treatment of disease, and the promotion of health.

IOMH Offers
Offers provide email announcements for IOMH educational and quality management offerings (symposia, forums, workshops, webinars, posters, guidelines, white papers, case studies) and other related products and services.
Confidence. *Elevated.*

**About Us**

The Institute for Quality Management in Healthcare’s mission is to elevate the integrity of the medical diagnostic testing system by providing rigorous, objective, third-party evaluation according to international standards.

Our services have achieved world-wide recognition: The Centre for Proficiency Testing is accredited by the American Association for Laboratory Accreditation (A2LA); and the Centre for Accreditation is a signatory of the Mutual Recognition Arrangement with the International Laboratory Accreditation Cooperation (ILAC). These achievements set IQMH apart through proven demonstration that it meets rigorous international standards for quality and competence.

IQMH is a not-for-profit corporation without share capital, incorporated under the Ontario Corporations Act.

Our vision is to be the Standard for Confidence, within the international medical diagnostic testing community, through our three independent Centres of Excellence: Accreditation, Proficiency Testing, and Education.

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