

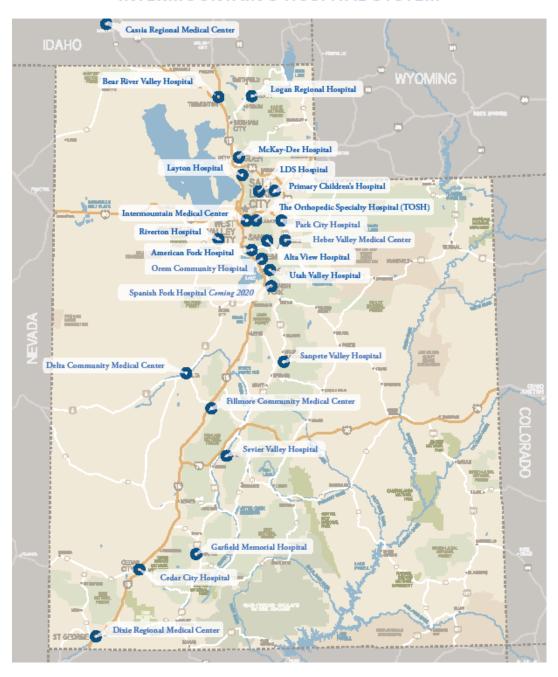
Let's Talk Process! Identifying and Communicating Best Practice Ideas Across Multiple Lab Sites to Standardize Compliance and Policies While Creating a Shared Culture

Lab Quality Confab October 15th

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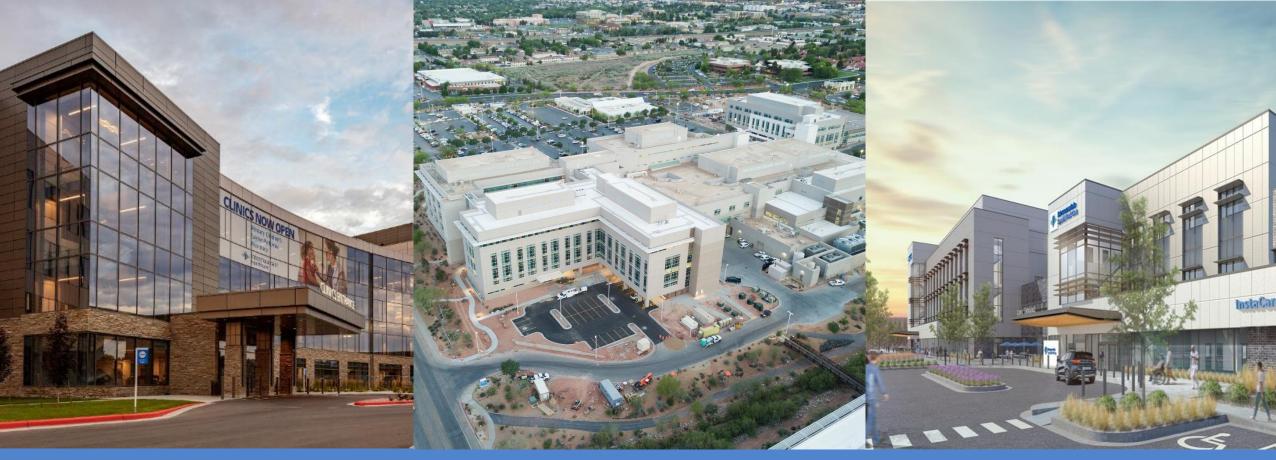


INTERMOUNTAIN'S HOSPITAL SYSTEM



24 individual hospitals, covering all of Utah and SE Idaho





Layton Hospital

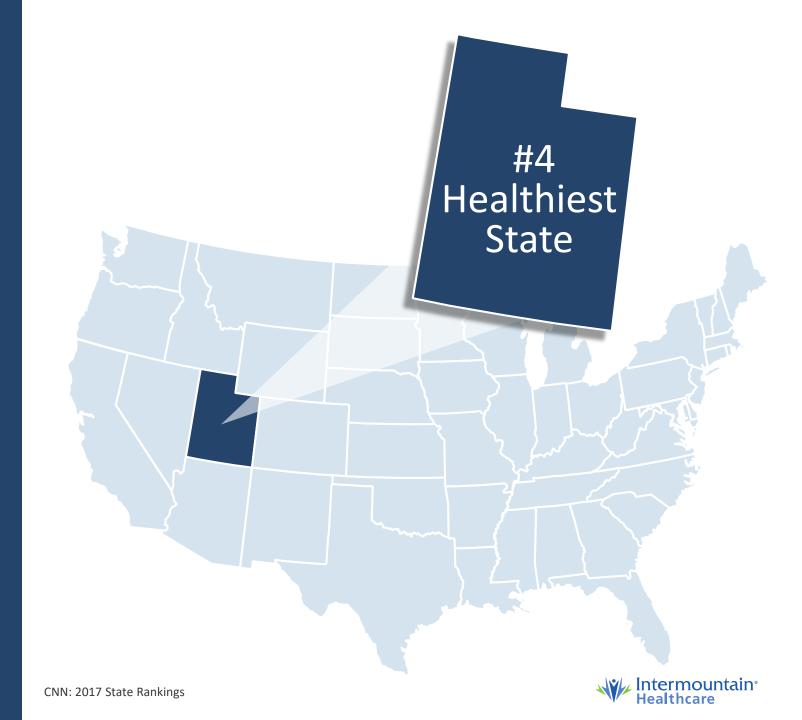
Dixie Regional Medical Center

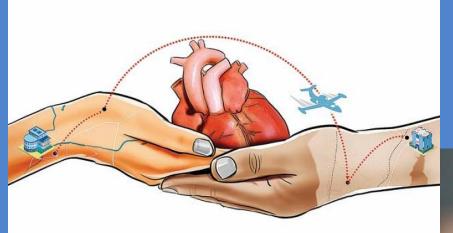
Spanish Fork Hospital

Better Access For Growing Communities Bed sizes from 15-500 Rural to Core Laboratories

Healthy and Literate Population

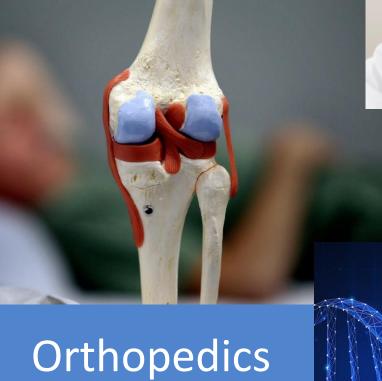
- Youngest population, 31% are under the age of 18
- Among highest birth rates
- Second lowest death rate
- Highest % people with college education
- More than 9 million acres of National forest





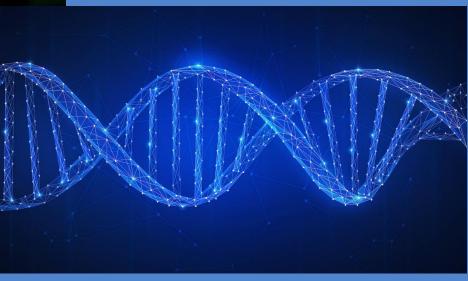
Transplants NICU's







Deliveries Genomics



Intermountain Laboratory Services

- 10 million tests per month
- 1,100 caregivers
- 11 departments
- 211 clinics/urgent care centers
- 8 Practice Councils (Work Groups)



Practice Councils

11 Discipline specific teams

Team Lead is a specialist in discipline

Medical Director, Administrative Director, QA

Representation from all sites



5 Individual Pathology Groups







In 1996 Intermountain laboratories were individually managed.

Laboratories:

- Reported to Hospital Admin
- Wrote their own SOP's
- Decided on their own equipment
- Vendor contracts by facility
- Sporadic participation on practice councils







Step One: Resourcing a Quality Assurance Team

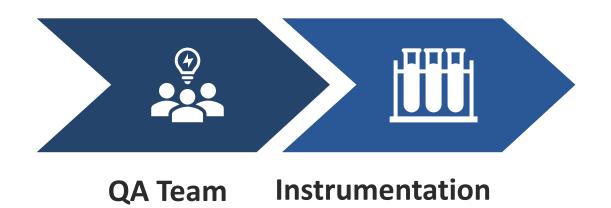
- Report equally to Managers and to Pathology
- Received audit training
- Responsibility for regulatory compliance
- Support all facilities and practice councils



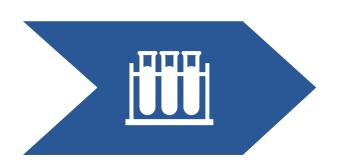
Quality Assurance Department

24 QA specialists supporting hospital laboratories 11 Point of Care specialists supporting hospital nursing staff 11 Technical Consultants specialists supporting the clinic MD's and nursing staff 10 Educator specialists supporting entire lab system





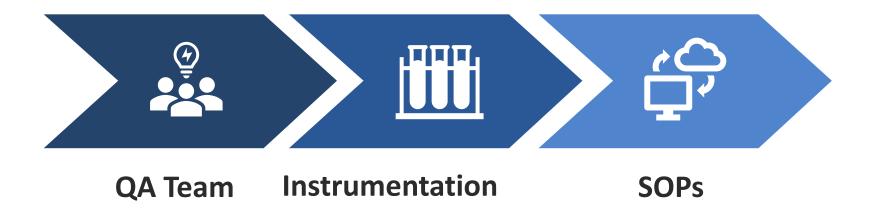




Step Two: Standardize Instrumentation

- Selected vendors that could provide instruments for the smallest to the largest facility
- Consolidated vendor contracts
- Standardized QC materials









Step Three: Standardize SOPs

- Identified format and introduced to practice councils
- QA took responsibility to edit and assist
- Consensus building
- Wrote and re-wrote and re-wrote again





Step Three: Standardize SOPs

- Standard instrumentation SOPs were written in practice councils
- Developed document control with electronic signatures
- SOPs were made available electronically throughout the corporation

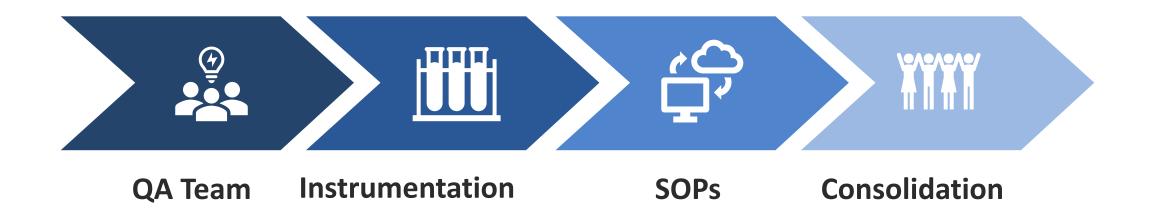




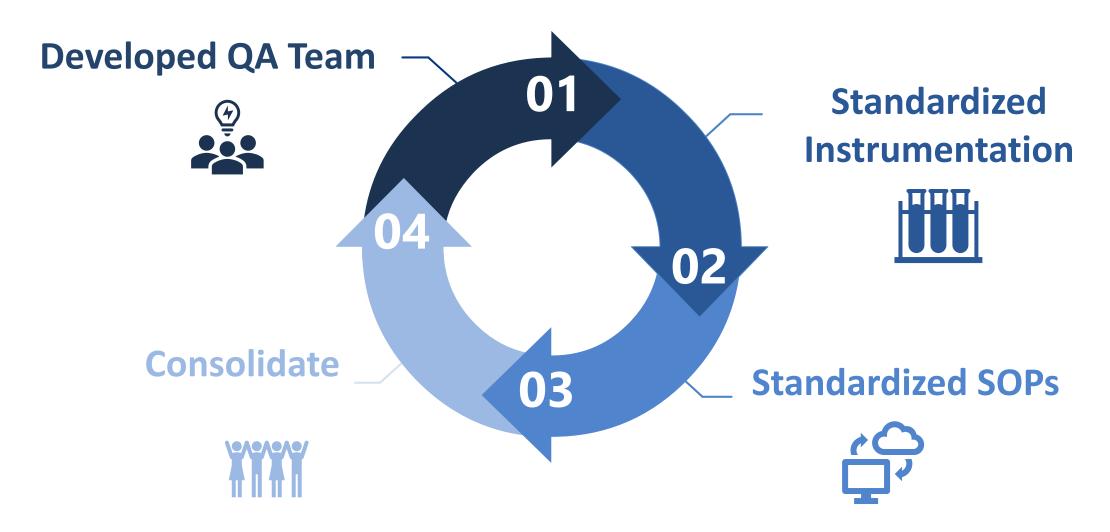
Step Four: Consolidation

- 2018 Laboratory Shared Services was created
- All labs report to Executive Director
- Standardized scheduling
- Standardized management structure
- Developed a "Need to Know" communication











QUESTIONS?

