

GROUPE LABEXA



BIOLOGIE MEDICALE





Standardizing and Harmonization of Three Laboratories in France Using Lean, Analytics, and Quality Management Systems

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Presented by Jean-Philippe GALHAUD, Director of Medical Affairs, LABEXA Group



Labexa Group introduction



Group Labexa on the Map and in Numbers

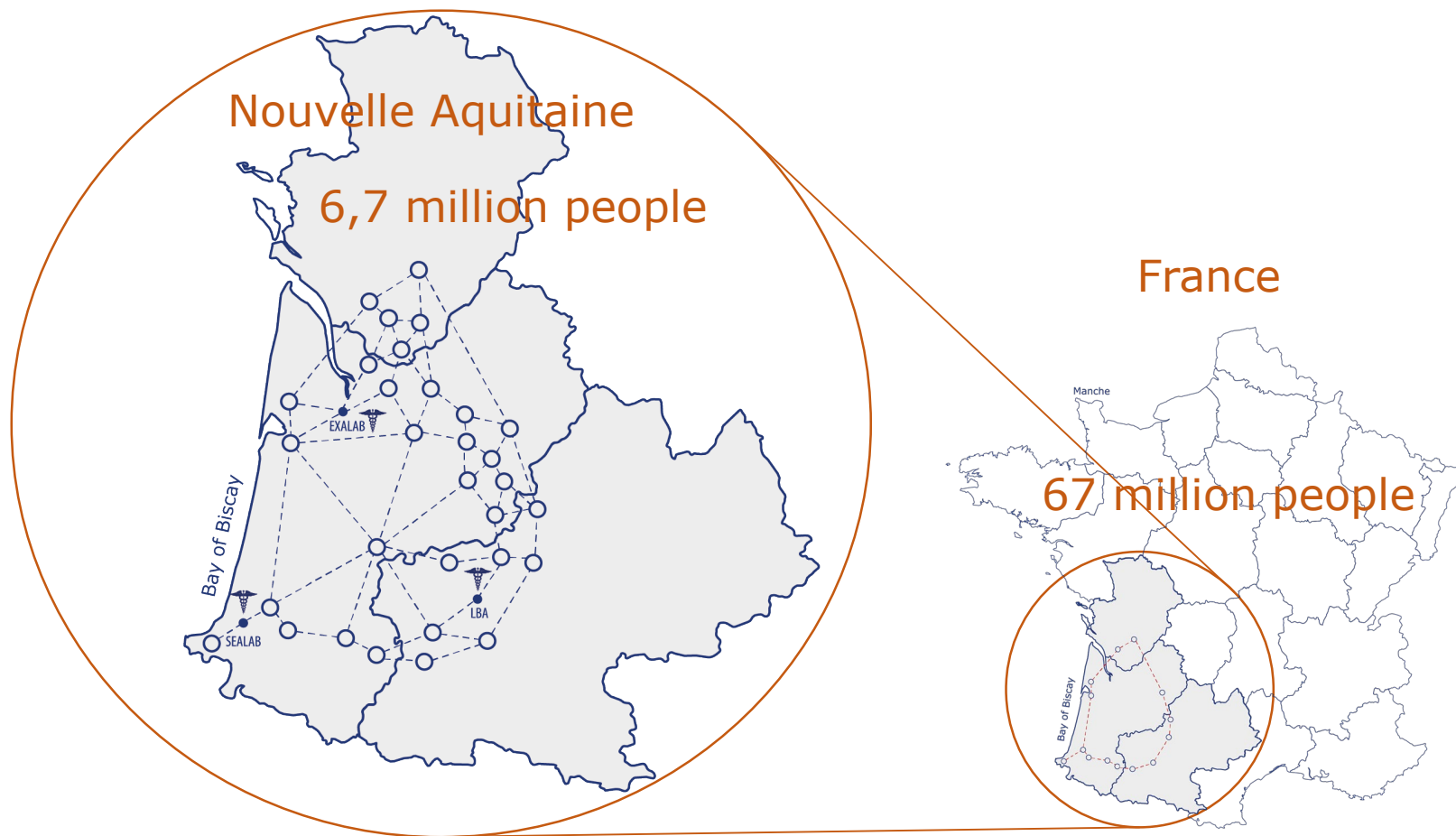


Founded in 1922

#1 Laboratory chain in
Nouvelle Aquitaine

79 laboratories
(Blood Collection Points,
BCPs)

Yearly turnover of LABEXA
is over 100 million Euros





LABEXA Group

Independent, Privately owned Medical Biology Group with a strong regional footprint.
3 subsidiaries
with **Common Values** and a **Unified Production Concept**.

Tubes per Day	8 200	3 300	3 000	14 500
3 LBMs (Laboratoire de Biologie Médicale)				Total
Tubes per Year	2 500 000	1 000 000	900 000	4 400 000

These numbers correspond to more than 2.5 million patients per year (~10 000 patients/day)



* Given numbers correspond to the results of 2018

	Tests per 2018 year	Total, %	Exalab	LBA	Sealab
Chemistry	11 800 000	64,3	6 500 000 (55%)	2 600 000 (22%)	2 700 000 (23%)
Hematology	1 705 000	9,3	950 000 (56%)	355 000 (21%)	400 000 (23%)
Immunochemistry	1 650 000	9,0	950 000 (58%)	350 000 (21%)	350 000 (21%)
Coagulation	910 000	5,0	650 000 (71%)	110 000 (12%)	150 000 (16%)
Serology	580 000	3,2	400 000 (69%)	75 000 (13%)	105 000 (18%)
Capillary	365 000	2,0	200 000 (55%)	90 000 (25%)	75 000 (21%)
Immunohematology	235 000	1,3	150 000 (64%)	35 000 (15%)	50 000 (21%)
Special Chemistry	225 000	1,2	135 000 (60%)	40 000 (18%)	50 000 (22%)
Special Immunochemistry	90 000	0,5	55 000 (61%)	10 000 (11%)	25 000 (28%)
Molecular Biology	62 500	0,3	50 000 (80%)	5 000 (8%)	7 500 (12%)
Special Coagulation	41 000	0,2	40 000 (98%)	-	1 000 (2%)
Others	286 500	1,6	195 000 (68%)	49 500 (17%)	42 000 (15%)
TOTAL	18 342 000		10 495 000 (57%)	3 766 500 (21%)	4 080 500 (22%)



	Production + BCP *			
	Exalab	Sealab	LBA	Total
Lab specialists ("Biologiste médical")	59	24	20	17
Lab Technicians	194	85	50	329
Nurses	66	11	11	88
Receptionists	106	28	37	171
Couriers	24	6	15	45
Cleaning staff	10	7	9	26
Lab Assistants	5	0	0	5
Others (HR, Accounting, etc.)	31	7	7	45
Total	495	168	149	812

2018 numbers



WHAT, WHY, WHO, HOW



Question:

Merge 3 independent subsidiaries

→ 3 labs are accredited (norm 15189 v2012)



 Accréditation n°8-1371
Listes des sites et portées
disponibles sur www.cofrac.fr



 Accréditation n°8-3008
Listes des sites et portées
disponibles sur www.cofrac.fr



 Accréditation n°8-3703
Listes des sites et portées
disponibles sur www.cofrac.fr



SAME ENVIRONMENT



⤵ **decrease of reimbursements**



⤵ **need for new investments :**
(new technology, IT, accreditation etc...)



⤵ **sharing same values**



EXPECTATIONS



- 👤 **Reduce costs** : economies of scale
- 👤 **Add clinical value** : pay for performance vs pay for service
- 👤 **Improve medical service** for patients and physicians
(creation of new department : Auto Immunity)
- 👤 **Reinforce our group**
- 👤 **Reference brand for Laboratory medicine**



👤 Same requirements but different accreditations :

accreditation ref. numbers (1371,3008,3703)

% of accredited exams

calendars are different (different dates of audit visits)

To sum up: different levels of progression

👤 Different Information Systems :

4 different LIS

2 quality software programs

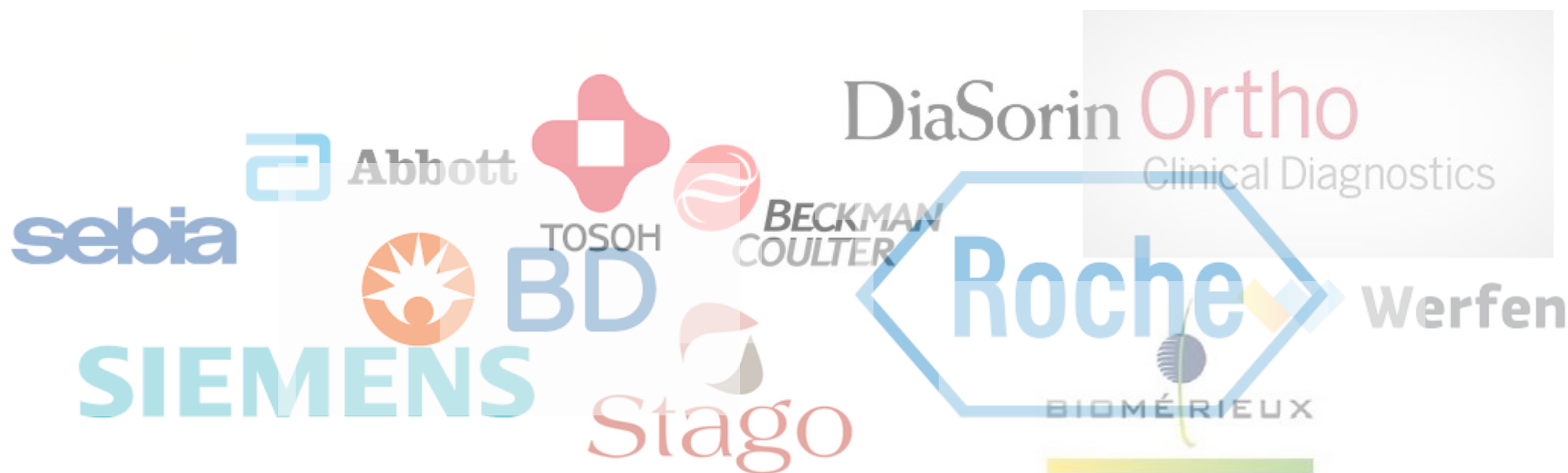
3 HR software packages

3 metrology software programs

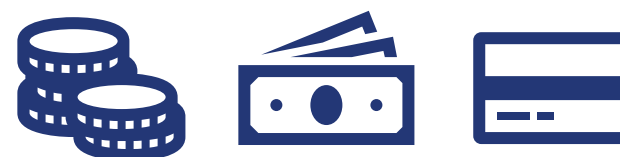




👤 **Different analyzers from different suppliers**



👤 **Different EBITDA**





To initiate the harmonization, we started by

creating a holding company

to manage the subsidiaries in the same way



GROUPE LABEXA

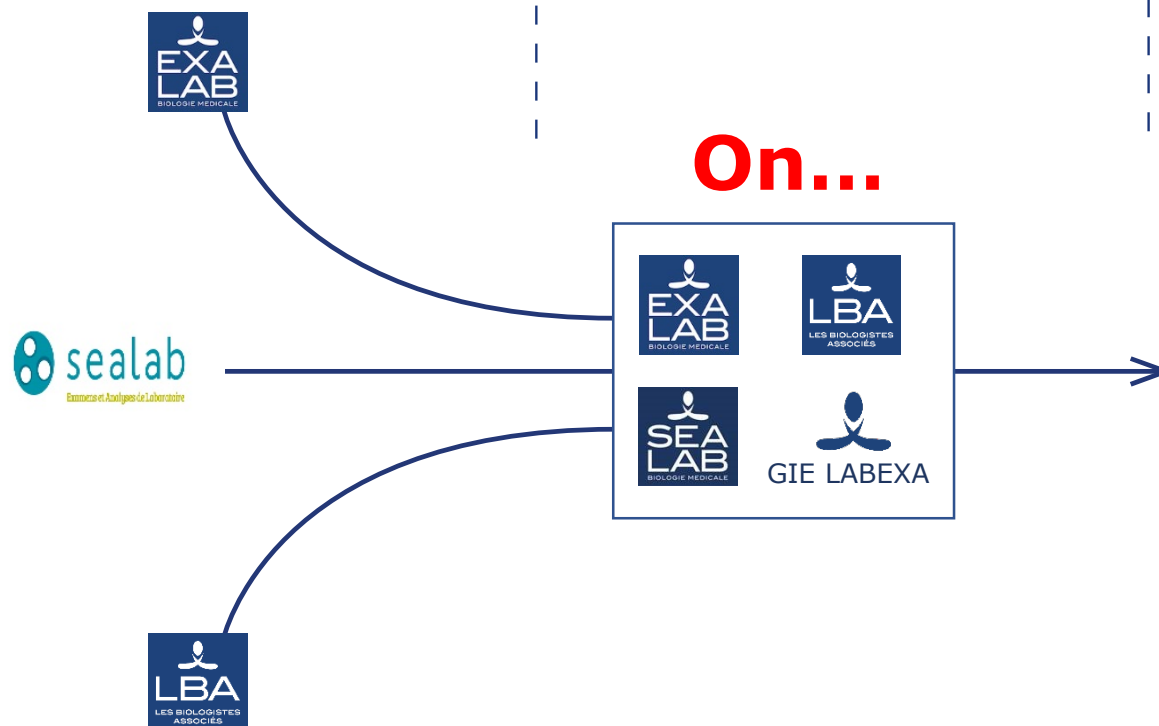




BIOLOGIE MEDICALE

BRAND UNIFICATION

2015 - 2017 | 2018 - 2020 | 2021..





based on accreditation 100 %

(obligatory in France) NF EN ISO 15189 v2012:

« The current international norm relates to medical laboratories that develop their quality management system (QMS) and assess their own skills »

→ Instead of enduring the requirements of the ISO 15189 norm, we have used accreditation to better manage our labs by changing minds and creating a « quality mindset » in our company.





BEFORE

How was Quality perceived?

I wrote what I did and I described everything in big bulky procedures.

Quality management was felt as a new layer of requirements; employees could have the feeling of a constraint

Steering committees looked more at the additional costs than the possible benefits it could bring to the business



NEW MINDSET

100%
QUALITY

 **Quality management with Process Approach:**
Quality is **integrated**.

I use quality management as a tool to better manage my company with clear key processes with a good follow up.

This is the **Process Approach**.

**Overall management and quality management
joined forces and supported each other**



Labexa Group Process Approach



Lean Process Approach:

Normative requirement that can bring improvement.
(ISO 9001 integrated since v 2012 in ISO 15189)

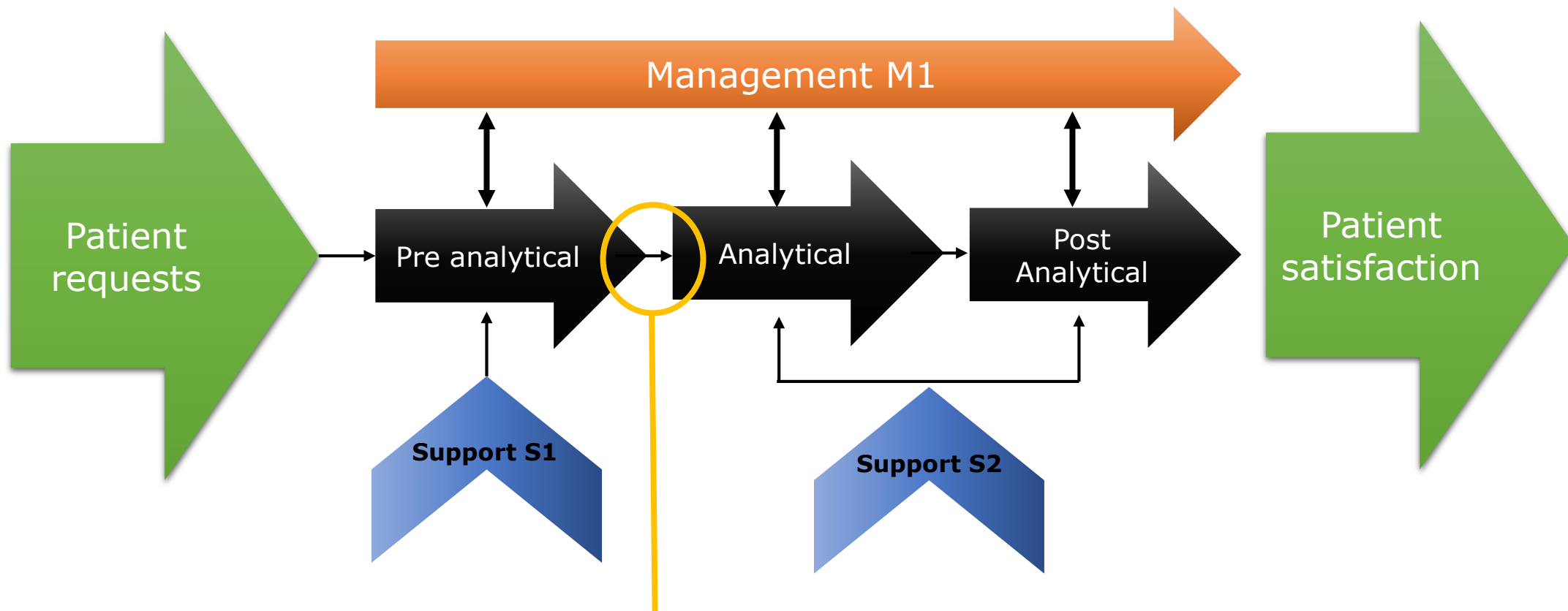
Reminds the company that the main goal for all activities inside a laboratory is to satisfy our customers : patients, prescribers etc...

It's about defining how to mobilise « Know-how » and integrated skills in the running of the laboratory.





Lean Process Approach : main principles



Added value is passed on to the next stage



**In LABEXA :
Harmonization =
The same Process Approach for our 3 subsidiaries**

Never forget **the goal**

Add value

Patient and customer **satisfaction**

Strong commitment to **health care improvement**



**The patient
is at the heart of the LABEXA project**



Set up of lean Process Approach in LABEXA group :

Group processes replacing subsidiary processes.



GROUPE LABEXA

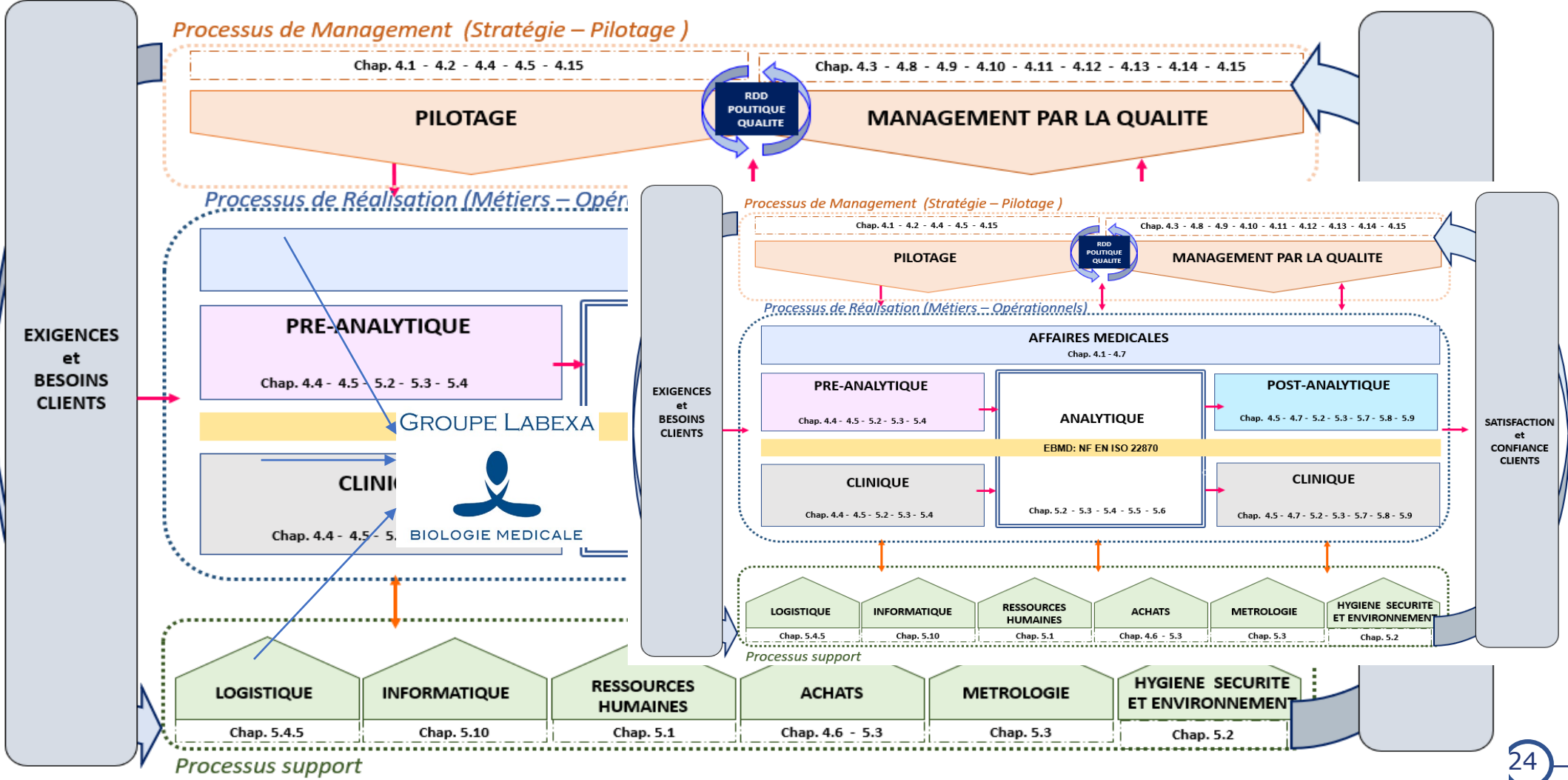


So as to improve organization with harmonization,
sharing experiences and skills





Process Mapping :
Easy way to present our Process Approach





EXA LAB
Biologie Médicale



LBA
LES BIOLOGISTES ASSOCIES



SEA LAB
Biologie Médicale

EXIGENCES CLIENTS

- Organis
- Manage
- Rés
- Pré
- C. Biom
- DH+
- V. Analyse
- B. Biogénétique

LABEXA group Process Approach : **Expected benefits**



Detailed & easy to read working plan for group activities



Clear vision of the interaction between all the activities



Identification of the critical points and risks



LABEXA group Process Approach : **Expected benefits**



Continuous improvement as a work principle



Conditions to allow everyone to situate themselves within the organization and better understand the aims of their activities



Responses to user needs and satisfaction to all customers



Better control of the internal structure already implemented



LABEXA group Process Approach : **Step by step**



Make a T0 of processes in each subsidiary

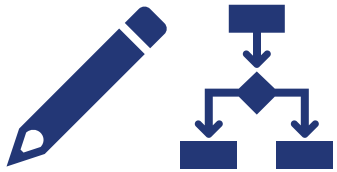


Identify and choose the group process



Identify the group process pilot and deputies for each subsidiary

LABEXA group Process Approach : **Step by step**



Write and describe each group process



Adapt organization by adjusting resources and information needed for good process running



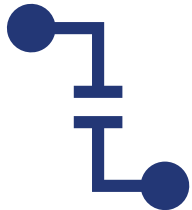
Drive by follow-up: measure and analyze processes to reach our goal ; continuous improvement (PDCA)



Description of each process



Identify customers and their expectations



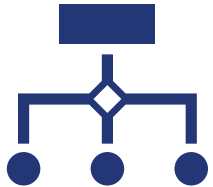
Determine inputs and outcomes



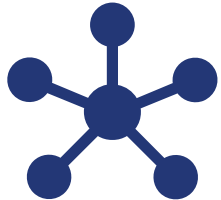
Create the ID card of the process



Description of each process



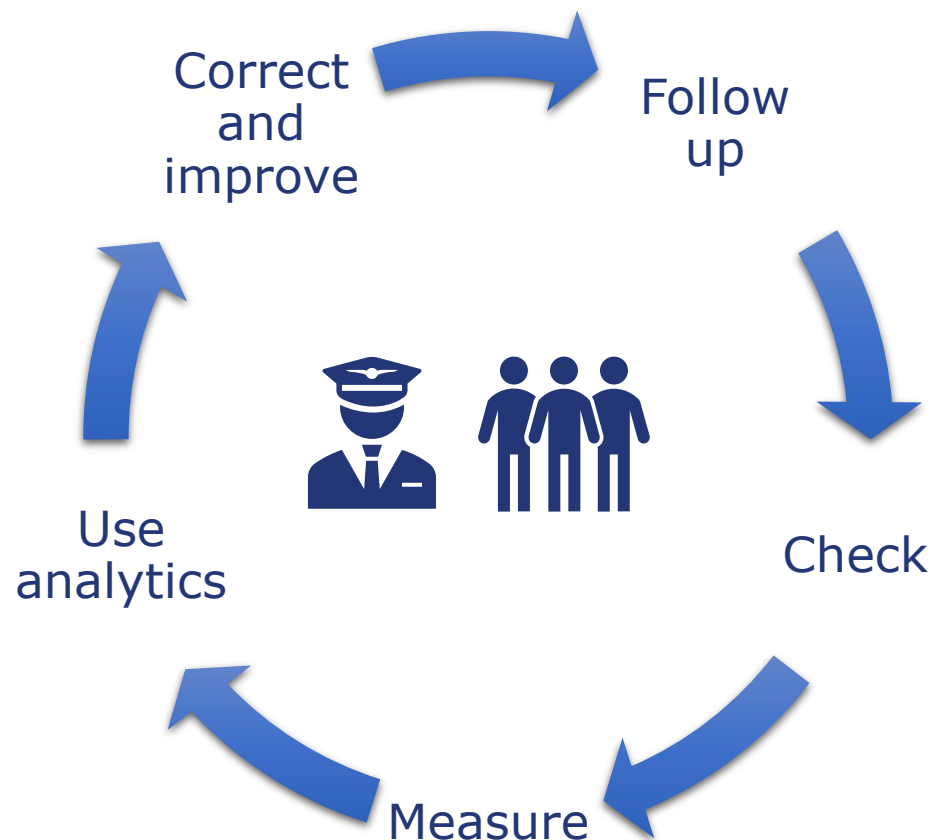
Describe every activity of the process



Determine sequence and interactions of the different processes



Choose criteria and methods to ensure control and check the process with « Risk Analysis »



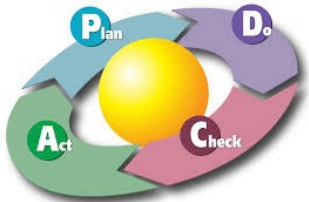
DRIVE THE PROCESS



Each deputy :

- check opposite trends
- define the levers to correct unsatisfactory trends and gaps

Define Quality Indicators : Group QI & sometimes subsidiary QI (depending on the risk analysis)



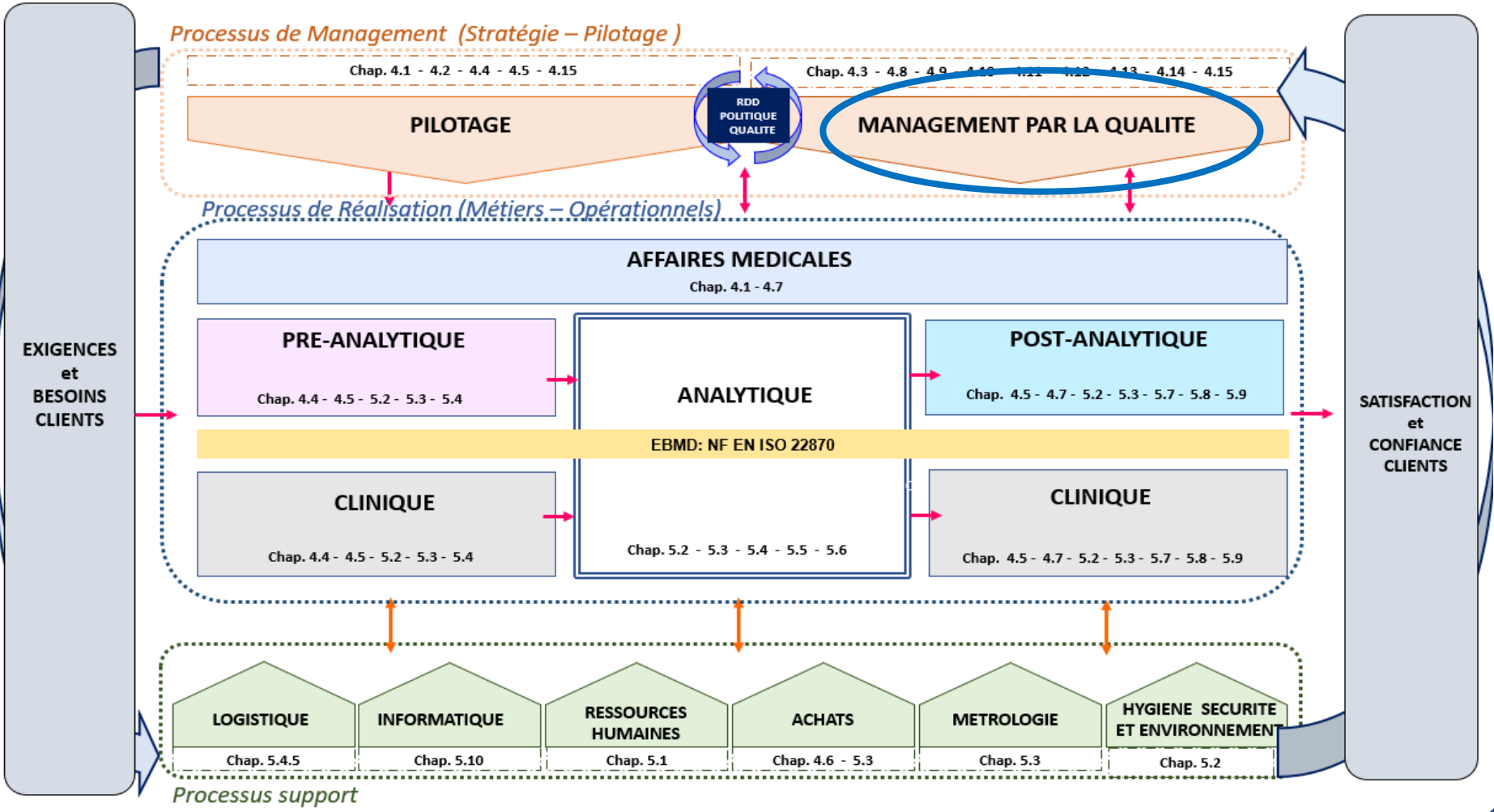
ENSURE PROCESS CONTROL

Monitor processes through surveillance audits

Use analytics to evaluate the impact of non conformity forms

Analyze the impact of NC subsidiaries

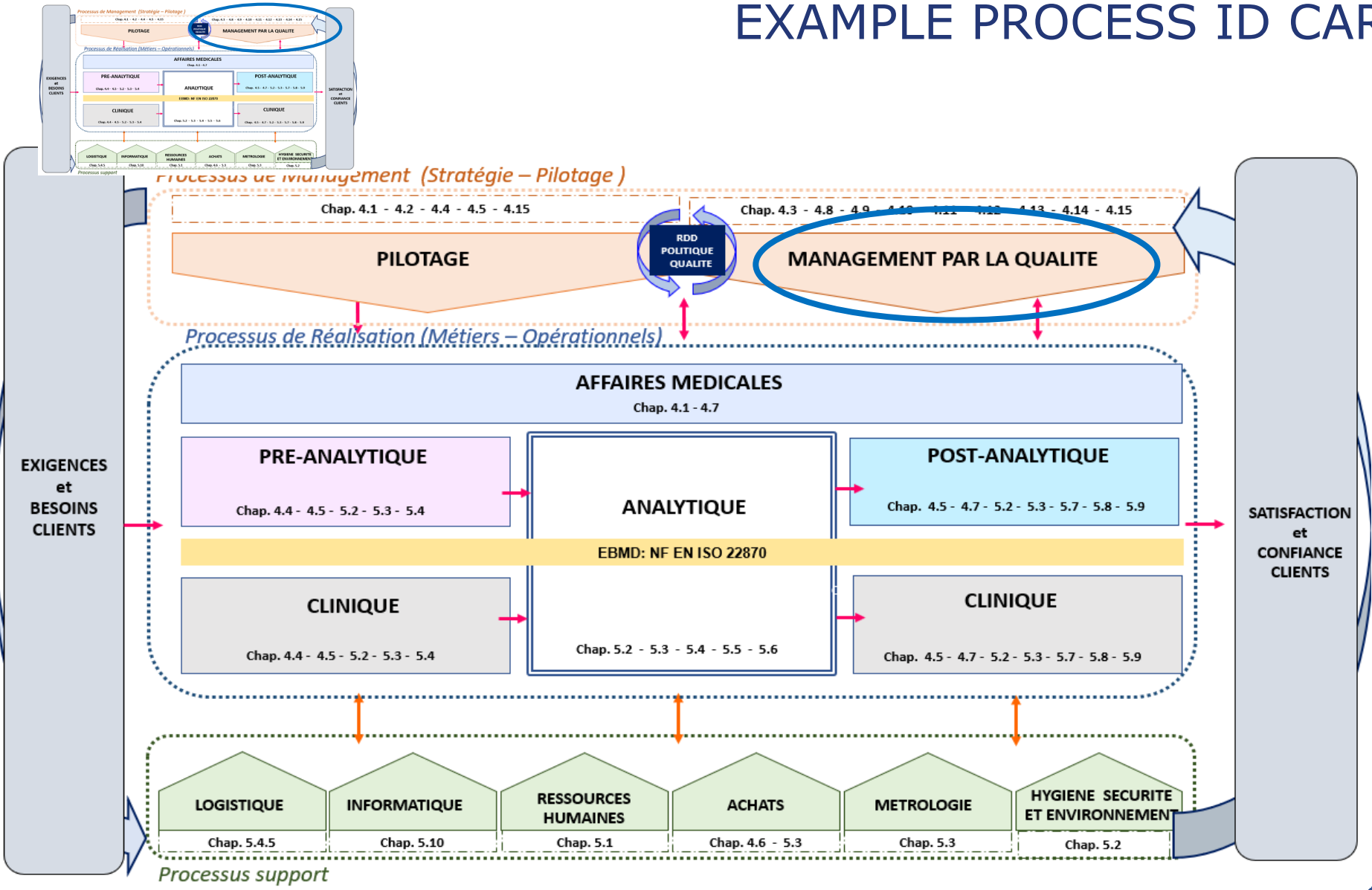
Enforce preventive (PA) and corrective (CA) actions at group and subsidiary levels to obtain the set results and continuous improvement of different processes

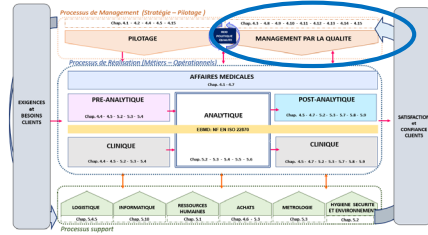




PROCESS APPROACH

EXAMPLE PROCESS ID CARD





PROCESSUS DE MANAGEMENT : MANAGEMENT PAR LA QUALITE

DONNEES D'ENTREE

- Revue de Direction validée et diffusée
- Politique qualité et objectifs validés et diffusés
- Ressources attribuées
- Clients internes et externes
- Communication ascendante et descendante

ACTIVITES

- Gestion des 4 GED et veille documentaire
- Veille réglementaire et normative
- Bilan des non conformités, réclamations, actions correctives et actions préventives
- Réalisation du planning d'audits
- Gestion des risques
- Préparation de la revue de Direction de l'année
- Revue des indicateurs et de leur pertinence
- Réalisation des enquêtes de satisfaction
- Recueil des suggestions du personnel
- Accompagner et aider l'ensemble des départements et des collaborateurs dans le déploiement du SMQ
- Gestion de la portée flexible

DONNEES DE SORTIE

- Clients satisfaits
- Amélioration continue du SMQ et de la qualité des soins prodigués aux patients
- SMQ efficient et conforme à la politique et aux objectifs qualité définis par la direction
- Flux d'informations maîtrisé

Activities are described in group process

→ a risk analysis is performed on processes

Process quality indicators allow to monitor and to act as soon as malfunctions are detected

In each process, and in each risk analysis, mean of controlling can be different and adapted to each subsidiary

PROCESS APPROACH

EXAMPLE PROCESS ID CARD

1 group pilot

1 deputy for each subsidiary

Pilote groupe

Myriam LABAN

Pilotes filiales

EXA LAB = Stéphanie DEMARS COLLE - LBA = Agnès FORTIER - SEALAB = Anne VAN HAMME

Clients

Tout le personnel

Finalité / Valeur ajoutée

S'approprier une démarche dynamique pour mettre en œuvre, évaluer et améliorer en continu l'efficacité du système de management de la qualité et une gestion efficiente des risques.

Procédures générales associées

- LABEXA-PRO-018 « Management par approche processus »
- LABEXA-PRO-008 « Gestion et maîtrise de la documentation »
- LABEXA-PRO-002 « Non-conformité réclamations »
- LABEXA-PRO-003 « Gestion des audits »
- LABEXA-PRO-014 « Gestion des risques »
- LABEXA-PRO-016 « Revue de Direction »
- LABEXA-PRO-010 « Gestion de la portée flexible »
- LABEXA-PRO-020 « Gestion de la sous-traitance »

Indicateurs Thèmes

Cf. LABEXA-INS-111 « Indicateurs qualité »

Les dispositions relatives à la validation biologique des examens sont décrites dans EXA_QUAL-PRO-010 « Validation biologique des analyses ».

Les dispositions relatives à la validation biologique des examens sont décrites dans PG-MU1-001 « Validation biologique »

Les dispositions relatives à la validation biologique des examens sont décrites dans PT-MU1-001 « PR Validation biologique des résultats d'examen ».



Management by Quality = Unified QMS

7M Check list for risks and activities

Man
Machine
Material
Method
Milieu = Environment =
Mother Nature
(the original 5M method)

Management
Monitoring

Risk and activities identified as for the group

Way of controlling is different depending on the subsidiary

7M	Activités (cf. Fiche processus)	Risques identifiés	EXALAB		LBA		SEALAB	
			Moyens de maîtrise	AMDEC (oui/non)	Moyens de maîtrise	AMDEC (oui/non)	Moyens de maîtrise	AMDEC (oui/non)
Main d'œuvre								
Méthodes								
Milieu								
Matériel								
Matières								
Management								
Money								

Risk management :
based on a common model, but identifying different means of control by subsidiary



Management by Quality = Unified QMS

Risk management based on a common model, but identifying different means of control by subsidiary

ACTIVITIES (cf. Fiche processus)		7M	Identified risks	EXALAB		LBA		SEALAB	
			MEANS OF CONTROL	FMECA (Y/N)	MEANS OF CONTROL	FMECA (Y/N)	MEANS OF CONTROL	FMECA (Y/N)	
PHLEBOTOMY	MAN	Unskilled laboratory staff	Trained, qualified and authorized personnel	NO	Trained, qualified and authorized personnel	NO	Trained, qualified and authorized personnel	NO	
		Uninformed external nurses	Nurses provided with an instruction manuel on phlebotomy rules and process	NO	Nurses provided with an instruction manuel on phlebotomy rules and process	NO	Nurses provided with an instruction manuel on phlebotomy rules and process	NO	
		Accidental Blood Exposure (ABE)	Trained, qualified and authorized personnel	NO	Trained, qualified and authorized personnel	NO	Trained, qualified and authorized personnel	NO	
	METHOD	Missing phlebotomy procedure	LABEXA-PRO-012	NO	LABEXA-PRO-012	NO	LABEXA-PRO-012	NO	
	MILIEU ENVIRONMENT MOTHER NATURE	Patient confidentiality issues in phlebotomy rooms	Soundproof and secure phlebotomy rooms Audit compliant Exalab sites	NO	Soundproof and secure phlebotomy rooms Audit compliant LBA sites	NO	Soundproof and secure phlebotomy rooms Audit to be done for some SEALAB sites	YES	
		Unsatisfactory metrology monitoring	Better thermometer monitoring in storage rooms	NO	Better thermometer monitoring in storage rooms	NO	Better thermometer monitoring in storage rooms	NO	



Management by Quality = Unified QMS

Risk management based on a common model, but identifying different means of control by subsidiary

ACTIVITIES (cf. Fiche processus)		7M		Identified risks		EXALAB		LBA		SEALAB					
				MEANS OF CONTROL		FMECA (Y/N)		MEANS OF CONTROL		FMECA (Y/N)		MEANS OF CONTROL		FMECA (Y/N)	
PHLEBOTOMY	MACHINE	unsuitable equipment with ABE risk	Needles with safety systems Adapted Trash can and gloves First aid kit available	NO	Needles with safety systems Adapted Trash can and gloves First aid kit available	NO	Needles with safety systems Adapted Trash can and gloves First aid kit available	NO							
		Out-of-stock of phlebotomy devices	Stock management Cf. LABEXA-PRO-036 Regularly controlled stock	NO	Stock management Cf. LABEXA-PRO-036 Regularly controlled stock	NO	MaitStock management Cf. LABEXA-PRO-036 Regularly controlled stock "	NO							
		Suppliers' recommendations are not followed	Specification sheet management. Medical devices vigilance data base and medical diagnostic devices vigilance data base.	NO	Specification sheet management. Medical devices vigilance data base and medical diagnostic devices vigilance data base.	NO	Specification sheet management. Medical devices vigilance data base and medical diagnostic devices vigilance data base.	NO							
	MATERIAL	Non compliant sample (wrong tube, insufficiently filled up, ...)	Trained, qualified and authorized staff	NO	Trained, qualified and authorized staff	NO	Trained, qualified and authorized staff	NO							
			Phlebotomy instruction manual at disposal		Phlebotomy instruction manual at disposal		Phlebotomy instruction manual at disposal								
		Regular training for provided for nurses		Regular training for provided for nurses		Regular training for provided for nurses									



Management by Quality = Unified QMS

Risk management based on a common model, but identifying different means of control by subsidiary

ACTIVITIES (cf. Fiche processus)		7M	Identified risks	EXALAB		LBA		SEALAB	
				MEANS OF CONTROL	FMECA (Y/N)	MEANS OF CONTROL	FMECA (Y/N)	MEANS OF CONTROL	FMECA (Y/N)
PHLEBOTOMY	MANAGEMENT	No steering committee for pre-analytical process	Group leader appointed and subsidiaries leaders appointed. Regular process review. Process Quality Indicators follow up.	YES	Group leader appointed and subsidiaries leaders appointed. Regular process review. Process Quality Indicators follow up.	YES	Group leader appointed and subsidiaries leaders appointed. Regular process review. Process Quality Indicators follow up.	YES	
	MONEY	Overuse of blood sample tubes	Respecting instruction manual of phlebotomy. Quality indicators monitoring. Implementation of a group production process.	NO	Respecting instruction manual of phlebotomy. Quality indicators monitoring. Implementation of a group production process.	NO	Respecting instruction manual of phlebotomy. Quality indicators monitoring. Implementation of a group production process.	NO	



Management by Quality = Unified QMS

FMECA (Failure Modes, Effects and Criticality Analysis)

		ANALYSES DE RISQUES														RECOMMANDATIONS			
Mode de défaillances = 7M	Potential failure modes = activities	Potential effect(s) of failure = risk	Severity	Severity	Severity	Potential cause(s) of failure	Occurrence	Occurrence	Occurrence	Current process control	Détection	Détection	Détection	Criticality	Criticality	Criticality	Action taken	Porteur de l'action	Completion date
MANAGEMENT	Activités de PRELEVEMENT: Absence de pilotage du processus pré-analytique Absence de management du processus Défaillance du processus	Processus défaillant Difficulté à harmoniser les procédures et les compétences	5	5	5	Changement de pilote régulier sur chaque filiale. Manque de stabilité NO prise en compte de problématiques filiales mal connues et non remontées au niveau du groupe	5	5	5	Contrôle réalisé par le département qualité avec suivi d'indicateurs	5	5	5	125	125	125	Désigner un pilote du processus par filiale Mettre en place des réunions mensuelles du processus avec les 4 pilotes	Pilote du processus groupe	01/10/2019
METHOD	Confidentialité des salles de prélèvement	Salle de prélèvement ne répondant pas aux exigences de confidentialité (locaux non adaptés, pas de fermeture de porte, ...)			10	Locaux non conformes			2	Visite de chaque site Audit de site			5			52	Vidéo de chaque site afin de visualiser les locaux non visités Harmonisation des audits	Ingénieur PROCESS Directrice Qualité	01/10/2019 30/11/2019



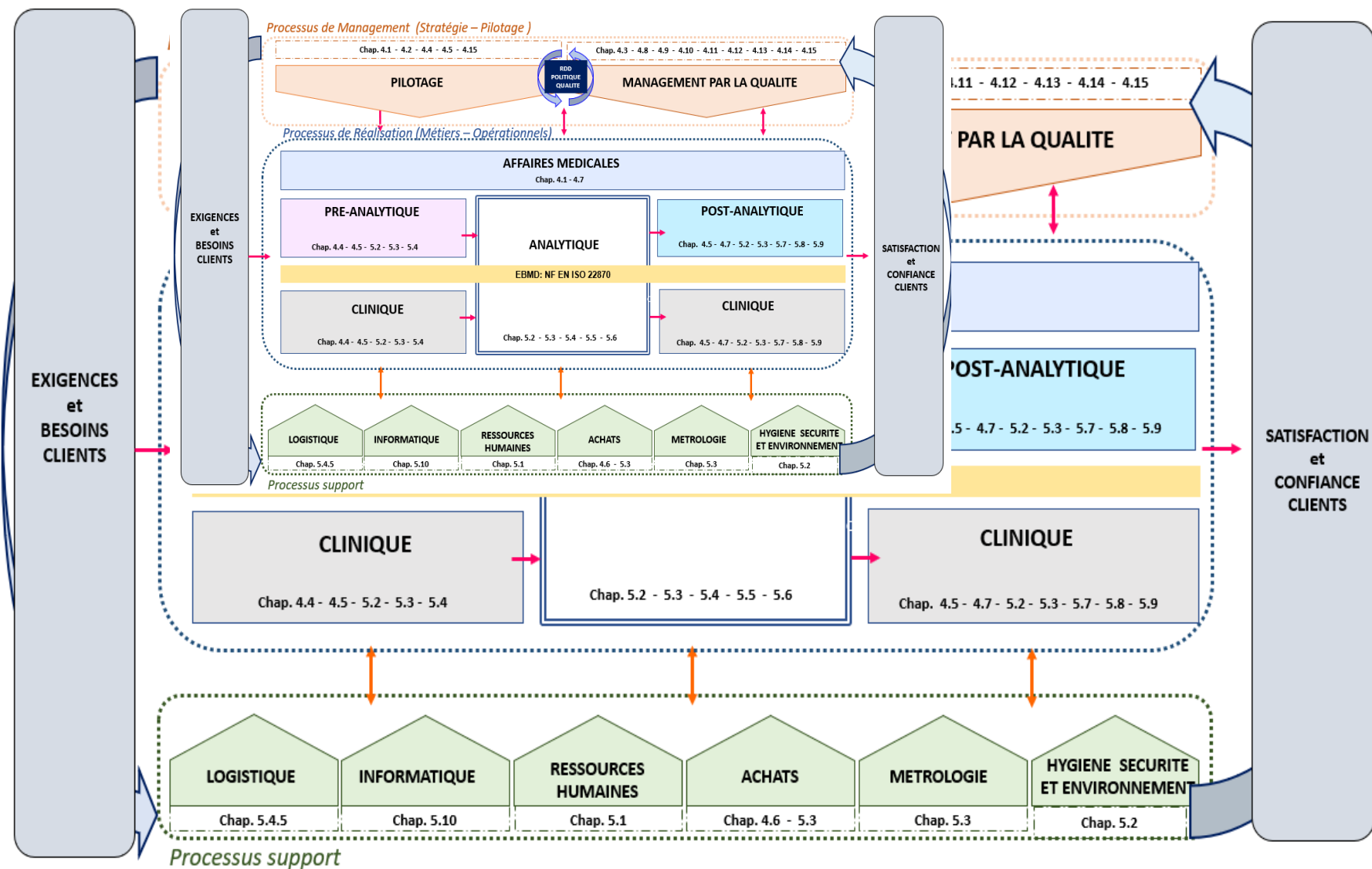
In LABEXA :

One very tangible example of application

The Unified Production Concept



UNIFIED PRODUCTION CONCEPT LINKS WITH PROCESS APPROACH





STANDARDIZED PRE-ANALYTICAL

- Same treatment in each BCP
- Unique serum tube = less references
- Simplified logistic
- Reduce number of tubes = simplify production process
- Simplify inventory

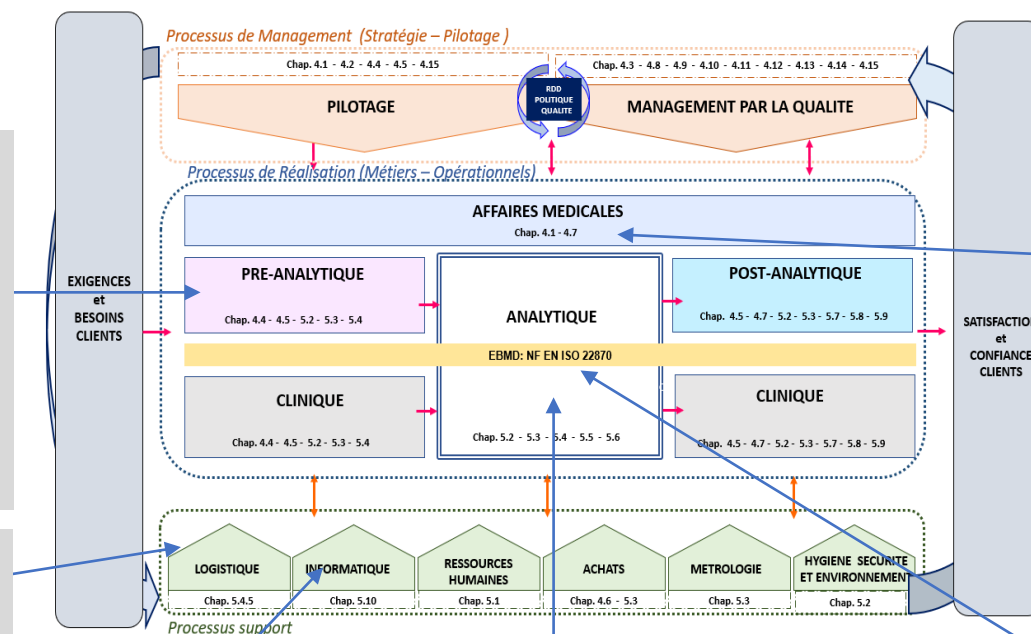
A PERFORMING LOGISTIC

- Frequent tours = smoothing the activity
- Less tubes
- Adapted to environment (city or countryside)

A RANDOM BARCODE

- 12 digits
- Without any visible logic
- Recognized on each analyzer
- Allows subcontracting
- Simplify treatment

UNIFIED PRODUCTION CONCEPT LINKS WITH PROCESS APPROACH



A UNIFIED CATALOG

- Logical classification of unique assay
- Scientific coherence
- Get conforming samples
- Base for IS unification
- Allows to unify pre and post analytical phases
- The reference, impossible to modify

EFFECTIVE CORELABS

- Less corelabs
- Less analyzers
- Less QC
- Stand alone sorters (instead track)
- Horizontal unification: same analyzers in each corelab, connected (MW software) and correlated
- Optimize auto-validation
- Back up between the corelab (not internal)
- Simplify quality procedures
- 100 % accredited
- promote POCT devices

AN ADAPTED SORT LOGIC

- Adapt flows to optimize work in corelab
- Smooth workflow for PULL logic (continuous tube arrival)
- Generate consistent workflows
- Smaller team but more committed
- Adapt timetable and schedule for all the team



A UNIFIED CATALOG

- Logical classification of unique assay
- Scientific coherence
- Get conforming samples
- Base for IS unification
- Allows to unify pre and post analytical phases
- The reference, impossible to modify

UNIFIED PRODUCTION CONCEPT

Unified for all labs														
Main Catalogue														
* * *														
Department	Subdepartm ent	Test type	UC_Test_Name	Simple test/Launche d test	Biomaterial	Productio n Test Type	Technique	Condition Test	Conditio on	PP Index	Invoice Index	Test Code	Unique Assay Code	Family_C OFRAC
Biochemistry	Biochemistry	1	Creatinine		Serum	10				1		1001		1001
Biochemistry	Biochemistry	1	Creatinine		Heparin Plasma	10				1		1006		1001
Biochemistry	Biochemistry	1	Creatinine		Urine 24	10				1		1002		1001
Biochemistry	Biochemistry	3	Creatinine Clearance		Serum + Urine 24	30				0		1003		
Biochemistry	Biochemistry			Creatinine	Serum	10				1		1001		1001
Biochemistry	Biochemistry			Creatinine	Urine 24	10				1		1002		1001
Biochemistry	Electrophoresis	3	Electrophoresis		Serum	20				1		1003		1003
Biochemistry	Biochemistry			Total Protein	Serum	10				1		1004		1004
Biochemistry	Biochemistry	1	Total protein		Serum	10				1		1004		1004
Hematology	Hematocytology	4	NFP		EDTA Sang Total	20				1		2001		
Hematology	Hematocytology			NU	EDTA Sang Total	20						2002		2002
Hematology	Hematocytology			FO	EDTA Sang Total	20						2003		2003
Hematology	Hematocytology			PLQ	EDTA Sang Total	20						2004		2002
Hematology	Hematocytology	3	Retic		EDTA Sang Total	20				1		2005		2005
Hematology	Hematocytology			NU	EDTA Sang Total	20						2002		2002
Hematology	Hematocytology	5	NU		EDTA Sang Total	20				0		2002		2002
Hematology	Hematocytology	5	FO		EDTA Sang Total	20				0		2003		2003
Hematology	Hematocytology	1	PLQ		EDTA Sang Total	20				1		2004		2002
Hematology	Hematocytology	1	Hematocyte		EDTA Sang Total	20				1		2005		2002
Immunology	Viral Serology	1	HIV AB Screen		Serum	10				1		3001		3001
Immunology	Viral Serology	2	Hiv Confirmation		Serum	10				1		3002		3002
								HIV AB Screen	Positive			3001		
			CHLAMYDIA TRACHOMATIS : GENOME (DETECTION QUALITATIVE)		Urine					1		4001		4001
			CHLAMYDIA TRACHOMATIS : GENOME (DETECTION QUALITATIVE)		Vaginal Swab					1		4002		4001
			CHLAMYDIA TRACHOMATIS : GENOME (DETECTION QUALITATIVE)		Urethral Swab					1		4003		4001

Logical classification for each test
Analytical informations
Production informations
Pre-analytical informations



STANDARDIZED PRE-ANALYTICAL

- Same treatment in each BCP
- Unique serum tube : less references
- Simplified logistic
- Reduce number of tubes : simplify production process
- Simplify inventory



UNIFIED PRODUCTION CONCEPT

LBM		EXALAB	LBA	SEALAB	
	LBM	EXALAB	LBA	SEALAB	
	CITRATE	2	2	2	
	Additifs		0.109 M		
	E.D.T.A	2	2	2	
	Additifs		K2		
	FLUORE	1	1	1	
	HEPARINE +/- (GEL) CLINIQUE	2	1	1	
	SST 7ml	1	1	1	
	SEC	1	1	1	
Situation UNIFORMISEE		9	8	8	
TOTAL		22	10	15	LABEXA
NB of tubes (per year)		3 490 700	653 600	1 305 700	5 450 000
With unique SST2		2 816 878	653 600	927 487	4 397 965
Tube savings		- 673 822	0	-378 213	-1 052 035



EFFECTIVE CORELABS

- Less corelabs
- Less analyzers
- Less QC
- Stand alone sorters (instead track)
- **Horizontal unification:** same analyzers in each corelab, connected (MW software) and correlated
- Optimize auto-validation
- Back up between the corelab (not internal)
- Simplify quality procedures
- 100 % accredited
- promote POCT devices

UNIFIED PRODUCTION CONCEPT

2017	CORELAB	MICROBIO	ANALYZERS
EXALAB	10	3	289
LBA			
SEALAB			

09/2019	CORELAB	MICROBIO	ANALYZERS
EXALAB	5	1	151
LBA			
SEALAB			



BIOLOGIE MEDICALE



SIEMENS



DiaSorin



		EXALAB			LBA		SeaLab		
		LE HAILLAN	St Aug	Blaye	MDM	NERAC	Condom	BAYONNE	Aressy
Biochimie	CPK CREATINE PHOSPHOKINASE								
Biochimie	CREATININE								
Biochimie	CREATININE ENZYMATIQUE								
Biochimie	CRP								
Biochimie	Delta4 androsténédione								
Biochimie	FER								
Biochimie	FERRITINE								
Biochimie	FR								
Biochimie	GAMMA GLUTAMYL TRANSFERASE (γGT)								
Biochimie	GENTAMICINE								
Biochimie	GLUCOSE								
Biochimie	HAPTOGLOBINE								
Biochimie	IMMUNOGLOBULINE A (IgA)								
Biochimie	IMMUNOGLOBULINE G (IgG)								
Biochimie	IMMUNOGLOBULINE M (IgM)								
Biochimie	LACTATE								
Biochimie	LACTICODESHYDROGENASE (LDH)								
Biochimie	LIPASE								
Biochimie	LITHIUM								
Biochimie	MAGNESIUM								
Biochimie	MICROALBUMINURIE								
Immuno/Séro	AC HBC								
Immuno/Séro	AC HBC IgM								
Immuno/Séro	AC HBS								
Immuno/Séro	ACCP								
Immuno/Séro	ACE								
Immuno/Séro	ACTH								
Immuno/Séro	AFP								
Immuno/Séro	AG HBS								
Immuno/Séro	Antistreptolysines								
Immuno/Séro	ATG (Ac anti-thyroglobuline)								
Immuno/Séro	ATPO								
Immuno/Séro	BNP								
Immuno/Séro	BW								
Immuno/Séro	CA 125								
Immuno/Séro	CA 153								
Immuno/Séro	CA 199								
Hemostase	DDIM								
Hemostase	activité anti-Xa								
Hemostase	Facteur II								



DiaSorin



		EXALAB		LBA	SeaLab
		LE HAILLAN	St Aug	NERAC	BAYONNE
Biochimie	CPK CREATINE PHOSPHOKINASE				
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Immuno/Séro	AC HBC IgM				
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Hemostase	DDIM				
Hemostase	activité anti-Xa				
Hemostase	Facteur II				



Executive Board Commitment





INVOLVEMENT OF THE BOARD OF DIRECTORS

SET UP A UNIFIED GOVERNANCE



Shared values from all the leaders : independence, efficiency, high performance



Patient is at the heart of our daily commitment



Governance flow chart is now part of the statute of each subsidiary



INVOLVEMENT OF THE BOARD OF DIRECTORS

ALLOW RESOURCES



Material resources



Human resources

Needed for development of an organization and a management answering to requirements of NF EN ISO 15189, considering the needs and demands of customers (patients, physicians, hospitals, authorities)



INVOLVEMENT OF THE BOARD OF DIRECTORS

STRONG COMMITMENT OF THE BOARD OF DIRECTORS

They decided together to go for the quality policy



Same team quality for application in each subsidiary



Policy and goals give the group the main direction for the organization, the expected results and the required resources to realize the objectives

Based on the results of risk analysis, the Board of Directors expresses how the satisfaction of the customers demand is at the heart of its concerns.



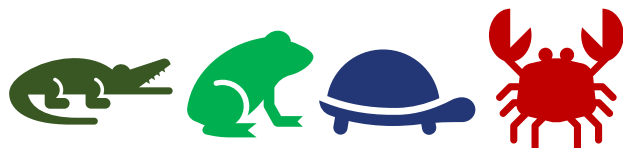
Involvement of the Board of Directors



**Group quality management
cannot be done without a strong
commitment from all the Board Directors**



Constraints and challenges



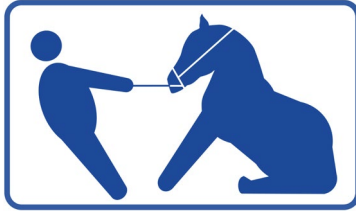
Different quality softwares (2)

Documentation heterogenous, non unified, need to be simplified

Harmonize skills

Different LIS (4)

**Data security and protection between subsidiaries
(GDPR rules...)**



Changes : resistance to change



Distance between BCPs and corelabs



Communication : adapt communication tools



Tools : to adapt to new organization



Results and achievements



Process Approach organization is the cornerstone of all activities in LABEXA Group enabling :

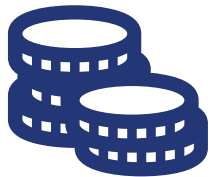
- 👤 Performance to be driven ;
- 👤 Organization to be better controlled ;
- 👤 Transversality to be defined for all activities in the company



Make the whole process more suitable to satisfy our customers
(patients – physicians...)



Optimize the distribution of resources available



Optimize costs



Results and achievements

REALIZED OUTCOMES



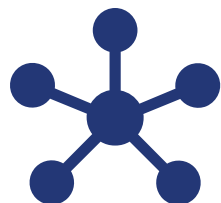
Increase the involvement of all actors



Reduce stress and tensions due to partitioning by subsidiary



Develop communication (inter and intra branch)



Formalize the interactions between each process



Control risk management through risk analysis



Define priorities



RESPONSIVENESS

Increase and improve responsiveness on actions to run



Conclusion



Results and achievements

Achieving the goal
Now, our system is



STURDY



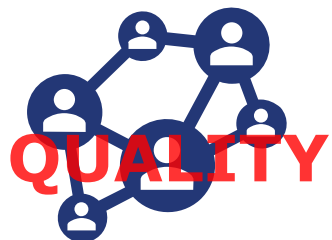
100 % accreditable for each subsidiary



Teams are involved in a continuous improvement process



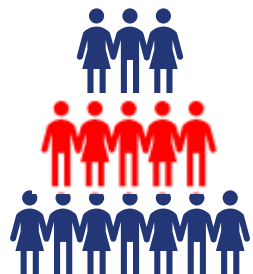
Achieving the goal



Quality has become a corporate culture



We are ready for internal and/or external merger



We are ready for quality management with a smaller team



Thanks !

Any questions ?

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Quality team of LABEXA Group

