

**Measurable Elements of AOP.03.08**

1. ① The hospital establishes and implements a written quality control program for the clinical laboratory.
2. The program includes the validation of test methods for accuracy, precision, and reportable range.
3. The program includes the daily surveillance and documentation of test results.
4. The program includes rapid correction and documentation of deficiencies.
5. The laboratory participates in a proficiency testing program or an alternative for all laboratory tests when external quality assessments are not available.
6. The laboratory's proficiency testing results meet satisfactory performance criteria in accordance with laws and regulations.

**Standard AOP.03.09**

The hospital ensures the quality of services provided by contracted laboratories.

**Intent of AOP.03.09**

The hospital has a responsibility to ensure that any service provided by contracted services meets all licensing and legal requirements and meets quality expectations developed by the hospital.

If the hospital uses the services of a contracted laboratory, the hospital has a responsibility to make certain that the contracted laboratory is licensed, accredited, or certified by recognized authorities.

Contracted laboratories must participate in proficiency testing to determine how the contracted laboratory's results compare with other laboratories that use the same testing methods.

The hospital identifies measures to monitor the quality of services provided by all contracted laboratories. Qualified individuals review and act on the results of quality monitoring. This information is used to identify potential process improvements and to make decisions about future contracts with the contracted laboratories.

To be certain the contracted laboratory is licensed and accredited or certified, and participates in an outside proficiency testing program, the hospital must obtain a copy of a license from a recognized licensing authority and of the certificate or letter of accreditation or certification from a recognized laboratory accreditation or certification program.

The hospital defines what measures the contracted laboratory is required to collect and submit to the hospital, as well as how often data are submitted to the hospital. Examples of measures collected to evaluate contracted laboratories include the following:

- Turnaround times for tests, meaning the time it takes for the laboratory to report a result following receipt of the specimen
- Critical results reporting
- Problems with specimens such as missing identifiers or specimen rejections

**Measurable Elements of AOP.03.09**

1. ① The hospital maintains a copy of the license and the certificate or letter of accreditation or certification, from a recognized authority, for all contracted laboratories used by the hospital.
2. ① The hospital maintains documentation that any contracted laboratory used by the hospital participates in a proficiency testing program.
3. The hospital determines the frequency and type of performance expectation data from contracted laboratories. (*See also* GLD.05.00, MEs 4 and 5)
4. The individual responsible for the laboratory or a designee reviews the performance data from contracted laboratories and takes action based on the results. (*See also* GLD.05.00, MEs 4 and 5)
5. ① An annual report of the data from contracted laboratories is provided to the leaders responsible for the management and renewal of contracts.