

- LB.3.2.2 The laboratory director of a moderate or low complexity laboratory (laboratories with no anatomical pathology and transfusion medicine services) is a licensed/registered clinical scientist or laboratory specialist.
- LB.3.2.3 The sections' heads/supervisors are qualified (by education, training and experience) in the discipline of their assigned sections.
- LB.3.2.4 The laboratory staff participate in relevant hospital committees.

LB.4
The laboratory has a system for personnel audit trail.

- LB.4.1 The system allows for the identification of who performed a critical task/step.
- LB.4.2 The system allows for the identification of when, where, and why the task/step is performed.

LB.5
The laboratory has a comprehensive training and competency assessment program.

- LB.5.1 The laboratory implements an orientation, training and competency assessment program that ensures:
 - LB.5.1.1 Satisfactory completion of training program for all lab personnel in their assigned area.
 - LB.5.1.2 Training on new equipment or method.
 - LB.5.1.3 Competency assessment of all laboratory personnel before working independently and annually thereafter.
 - LB.5.1.4 Corrective action plan and reassessment in the event of unsatisfactory performance.
 - LB.5.1.5 Utilization of the appropriate competency assessment tools, including technique observation for technical competency, assessment of personnel's knowledge about the contents of the procedures and instruments operation manuals (written/verbal exam), and assessment of personnel's problem solving skills (unknown samples).
 - LB.5.1.6 Laboratory personnel performing tests or tasks requiring color discrimination undergo a color discrimination test.

LB.6
The laboratory has a system for the receipt of incoming supplies and services, inventory management, and tracking of critical materials.

- LB.6.1 The laboratory implements policies and procedures on documenting the receipt, inspection, and testing (as applicable) of incoming critical material or service.
- LB.6.2 The laboratory implements policies and procedures on inventory management and tracking the use of critical materials, supplies, and reagents to ensure the following:
 - LB.6.2.1 Materials are used within their expiration dates.
 - LB.6.2.2 New reagents lot numbers are tested against old lots or suitable reference materials before use.
 - LB.6.2.3 Kit components are used within the kit lot number.
 - LB.6.2.4 Lot number use is traceable to patient/blood donors or inclusive dates of use.

LB.7
The laboratory has reagents and solutions management system.

- LB.7.1 The laboratory implements policies and procedures to ensure that prepared/reconstituted reagents and solutions are labeled, as applicable, with:
 - LB.7.1.1 Content