**SAMPLE RECEPTION AND APPROVAL SECTION**

Reporting Period: ……………………………………………………………………………………………………….

|  |  |  |
| --- | --- | --- |
| Number of samples received:  Number of samples received and referred to other labs:  Source: | Viral load:…………………………..  EID:…………………………………  Sickle cell:………………………….  Hepatitis B:…………………………  ………………………………………  ………………………………………………………………………………  ……………………………………… | Referred to:………………………………………………………………………………………………………………  ………………………………… |
| Pending work by meeting time  source | Approval volume:…………………………  Volumes clearance timeline:  Reception volume:………………………..  Volumes clearance timeline: | Beyond 2 days it’s a backlog  Interventions needed to clear backlog for both reception and approval of samples: |
| Number of Non conformities arising from the section.  Mention them | ………………………………………………………...  ………………………………………………………… | Corrective actions: |
| Challenges:  Possible solutions: |  | |

**DATA SECTION**

**Reporting period:……………………………………………………………………………………………………**

|  |  |  |
| --- | --- | --- |
| Number of forms received and captured: | Viral load:…………………………..  EID:…………………………………  Sickle cell:…………………………. |  |
| Number of facilities and hubs sending samples: | Facilities………………………………………..  Hubs…………………………………………… | |
| Pending work by meeting time | Data Entry:……………………………………  Data entry Volumes: …………………………  Volumes clearance timeline:  Beyond 1 day it’s a backlog  Interventions needed to clear backlog: | |
| Number of Non conformities arising from the section and mention them | ………………………………………………………...........................................................  ……………………………………………… | Corrective actions: |
| Challenges:  Possible solutions: |  | |

**LABORATORY SECTION**

**Reporting period:……………………………………………………………………………………………………..**

|  |  |  |
| --- | --- | --- |
| Pending work by meeting time | Worksheet creation  Processing | Volumes:…………………………  clearance timeline:  Beyond 2 days it’s a backlog  Interventions needed to clear backlog: |
| Major equipment status:  Machine down time:  Probable cause: |  | Actions taken during the machine down time: |
| Number of re-cuts and repeat runs | Re-cut runs:  Repeat runs: | Reasons why re-cut/rerun: |
| Number of Non conformities arising from the Laboratory and mention them | ………………………………………………………...  …………………………………………………………  . | Corrective actions: |
| Challenges:  solutions |  | |

**RESULTS QC SECTION**

**Reporting period:…………………………………………………………………………………………………**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Number of results released: |  | VL- DBS | VL PLASMA | | EID | SCD | HBV |
| Total runs made: |  |  | |  |  |  |
| Valid tests: |  |  | |  |  |  |
| Invalid tests: |  |  | |  |  |  |
| Failure rate: |  |  | |  |  |  |
| Reasons why: |  |  | |  |  |  |
| Machine efficiency: |  |  | |  |  |  |
| Kit consumptions  Controls: |  |  | |  |  |  |
| Amplification |  |  | |  |  |  |
| Promega |  |  | |  |  |  |
| Others |  |  | |  |  |  |
| Pending work by meeting time | Approval  Lab QC  Data QC  Results transcription  Volumes clearance timeline:  Beyond 1 day it’s a backlog  Interventions needed to clear backlog: | | | | | | |
| Number of Non conformities arising from results section and mention them | ………………………………………………………...  ………………………………………………………… | | | Corrective actions: | | | |
| TAT | Sample reception  Sample approval  Data entry  Laboratory  Results section | | | TAT for referral samples:  …………………… | | | |
| Statistics from results | EID:…………………………………  Positive EID:  Negative EID:  Negativity rate:  Positivity rate:  Suppression rate  Outliers:  Number of rejected samples:  Invalid samples:  Viral load outliers  Rejected samples  Sickle cell:………………………….  Normal:  Carriers:  Sicklers:  Hepatitis B:………………………… | | | Reasons for rejections:  EID:  Viral Load | | | |
| CME conducted |  | | | Knowledge gained: | | | |
| Challenges:  Possible solutions: |  | | | | | | |

**CUSTOMER CARE DESK**

**Reporting period:………………………………………………………………………………………………………**

|  |  |  |
| --- | --- | --- |
| Number of calls made |  | |
| Number of requests made | EID  VL  Other requests | |
| Complaints from facilities |  | |
| Customer feedback survey findings |  | |
| Hub challenges |  | |
| Number of Non conformities arising from section | ………………………………………………………...  ……………………………………………… | Corrective actions: |
| Other Challenges:  Possible solutions: |  | |

**BIOREPOSITORY**

**Reporting period………………………………………………………………………………………………..**

|  |  |  |
| --- | --- | --- |
| Number of samples archived | DBS COHORTS  PLASMA COHORTS  EID  SCD  HBV  others | |
| Number of retrieved samples | DBS COHORTS  PLASMA COHORTS  EID  SCD  HBV  others | |
| Pending work by meeting | Volumes to archive  Plasma:  DBS  Volumes clearance timeline:  Beyond 1 month it’s a backlog  Interventions needed to clear backlog: | |
| Destructed samples |  | |
| Number of Non conformities arising from section and mention them | ………………………………………………………...  ……………………………………………… | corrective actions: |
| Challenges:  Possible solutions: |  | |

**LOGISTICS SECTION**

**Reporting period…………………………………………………………………………………………………..**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Stock status for all laboratory supplies | Item Name | Stock On Hand | AMC | | Month of Stock |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
| Forecast reports for the lab supplies(To be reported every 1st meeting of a new month) |  |  |  | |  |  |
| Stock in the pipeline |  |  |  | |  |  |
| Stock expiries |  | | | | |  |
| Dispatched items |  | | | | |  |
| Number of Non conformities arising from the section and mention them | ………………………………………………………...  ……………………………………………… | | | corrective actions: | |  |
| Challenges:  solutions |  | | | | |  |

**NETWORKS SECTION**

**Reporting period:………………………………………………………………………………………………**

|  |  |  |
| --- | --- | --- |
| Networks updates |  |  |
| Number of Non conformities arising from the section and mention them | ………………………………………………………...  ……………………………………………… | corrective actions: |
| Challenges:  Possible solutions |  | |

**ENGINEERING SECTION**

**Reporting period………………………………………………………………………………………………….**

|  |  |  |
| --- | --- | --- |
| Auxiliary equipment serviced per schedule |  |  |
| Auxiliary equipment calibrated per schedule |  |  |
| Equipment breakdowns and down times |  | Actions taken |
| Number of Non conformities arising from the section and mention them | ………………………………………………………...  ……………………………………………… | corrective actions: |
| Challenges:  Possible solutions: |  | |