

| | |
|---|--|
| Audit Title: EQA practice in Scotland | |
| Lead Auditor: Neil Syme | Audit date(s): August-October 2019 |
| Please indicate if Local / Regional / National Audit Please indicate which hospital & location or region Scotland | Report Author: Name: Neil Syme Email: neil.syme@lanarkshire.scot.nhs.uk |
| Aims of the Audit: To better understand how laboratories are handling increasing EQA requirements, and to determine whether best practice guidelines may be derived. | |
| Audit Method and Outcome(s): A survey of 15 questions was distributed to each territorial health board (14 in total) in Scotland. Questions covered the management, review, and documentation of EQA scheme participation. <ul style="list-style-type: none"> • Thirteen responses were received from 10 health boards, representing 25 laboratories. • All Scottish laboratories participate in the major UK EQA schemes, in accordance with ISO 15189, with additional specialist schemes used where required, though there was variation in how schemes were selected. • Only half of respondents reported having a designated EQA officer, which was typically an informal role. • Most laboratories register EQA in their LIMS. • Just over half of respondents indicated they have made changes to EQA practice in response to UKAS findings; generally in record-keeping, documentation, and monitoring. • Informal sample exchange schemes were set up where no formal scheme existed (note formal schemes are now available for the two main examples, ALP isoenzymes and macroprolactin). • Monitoring and review of EQA was similar across all laboratories. Tracking the review process was mostly performed electronically. • Most laboratories do not monitor the TAT of EQA review. • Most laboratories use scheme scoring systems to monitor EQA performance, with a minority also calculating Z scores. | |
| Audit Recommendations / Standards: <ol style="list-style-type: none"> 1. Define a core set of criteria and review period for assessment of EQA schemes for core biochemistry tests. 2. Laboratories should have a designated EQA officer(s) to oversee EQA practice. 3. Laboratories should register EQA specimens in their LIMS. 4. Laboratories should log and track EQA reports and reviews electronically. 5. Laboratories should monitor TATs for EQA review. | |
| Please indicate to whom and when audit presented &/or circulated &/or published: Results of the audit were presented and discussed at the ACB Scotland Regional Meeting on 5 th March 2021. This summary was distributed to the Scottish Audit Group in July 2021. | |
| Audit recommendations / standards ratified by ... and when: ACB Scotland Audit Group – Dec 2021 | |

| |
|---|
| |
| Date of audit report: 30 th June 2021 |
| Audit documents for upload to http://www.acb.org.uk/whatwedo/science/audit.aspx <i>Please include as attachments with this Audit Summary form if authors and the organising committee would like information to be publicly accessible on the ACB website Audit section.</i> Presentation Standards/Recommendations Blank Survey Questionnaire |