Internal Quality Assurance Framework

Management and Academic Pathology

The Royal College of Pathologists of Australasia received funding from the Department of Health, under the Quality Use of Pathology Program (QUPP) to develop a comprehensive framework for internal quality assurance, focused on the morphological disciplines of Histopathology, Cytopathology, Haematology and Forensic Pathology. The overall governance of this project was provided by the College, and was supported by a Steering Committee that included representatives of the morphological disciplines. The Board of Education and Assessment and the Board of Directors further decided to develop separate discipline specific Frameworks for the other disciplines of pathology.

It has become evident that some pathologists in active pathology practice work predominantly in management and/or academic branches of the profession not adequately catered for by the other discipline-specific IQA Frameworks. The purpose of this document is to give pathologists working in these areas guidance on appropriate peer review and clinical audit activities and how to document these, to help monitor performance, drive improvement and support collaborative on-going professional practice.

Implementation of the Management and Academic Pathology IQA Framework will be undertaken in 2017 in consultation with the Fellowship.

For any queries about the Framework or the project, contact the DCEO, Dr Bronwen Ross at bronwenr@rcpa.edu.au

Framework Features

The Framework records these activities under 2 sections:

Section 1: relates to peer review activities, participation in 10 hours per annum required.

Section 2: relates to clinical audit activities, participation in 10 hours per annum recommended.

Please refer to the tables on the following pages for information on examples of suitable activities and further document requirements.

FRAMEWORK
Internal Quality Assurance Activities
MANAGEMENT AND/OR ACADEMIC PATHOLOGY

Section 1: Peer Review activities
Requirement: Minimum 10 hours per annum peer review activities (can be taken from either or both sections)

Activity	Quality activity monitor related	Suggested document requirements
MANAGEMENT		
Management peer review activities	• Formal peer performance appraisals; eg 360 degree reviews; employer based formal performance review (pathology management related)	Date, time and duration and brief description of activity. Do not include confidential information
Assessment and examination	• Participation as a NATA/RCPA, ACHS or similar assessor	
	• Participation in clinical aspects or formal performance review of a individual or group of clinicians or of a critical incident/s related to pathology	
	• Activities related to management of an organisations QAP activities and review of results	
	• Laboratory visits for benchmarking purposes	
Clinical governance and Policy	• Appearance before an inquiry, investigation or court where expert pathology evidence is being sought • Active participant in National quality activities eg. Representative or expert on National or State/ jurisdictional committee for improved patient care/safety relating to pathology such as NPAAC (and its subcommittees), ACSQHC, National Blood Authority, NSW Clinical Excellence Commission, BOD/BPPQ (RCPA) etc • Clinical accuracy/ editorial of medical writing for education, marketing, tenders	
Other activities not listed above	• Provide a short description of the activity	
ACADEMIC		
Assessment and examination	• Participation as an examiner, for RCPA or other College or Tertiary institution relating to pathology	Date, time and duration of activity Do not include confidential information
Supervision	• Supervision of pathology aspects of major research project or PhD thesis or RCPA trainee	
Academic peer review activities	• Formal Academic peer performance appraisals • Other academic peer review eg feedback by peers and students on teaching and research; review of theses, manuscripts or grant applications; revision of theses, manuscripts or grant applications in response to peer review, active review activities/critiques related to Internal Research Seminars or scientific meetings; review of curricula • Receipt of awards or prizes for teaching or research • Participation in Internal or External (eg NHMRC) Research Governance committee • Participation in an investigation/ inquiry into research integrity/ research misconduct	
Other activities not listed above	• Provide a short description of the activity	

Formal Peer Review	• Validated 360^{o} peer review completed	360 degree report

FRAMEWORK Internal Quality Assurance Activities MANAGEMENT AND/OR ACADEMIC PATHOLOGY		
Section 2: TECHNICAL MEASURES – Clinical audit activities **Recommended: Minimum 10 hours per annum combined Technical Measures/Service Performance (can be taken from either or both sections)**		
Activity	**Examples of quality monitors related to lab based non-conformances**	**Suggested document Requirements**
MANAGEMENT		
Monitoring technical systems through audit data	• Incident monitoring – activities relating to incident monitoring and prevention including meetings, data analysis, reporting	Date, time and duration of activity Do not include confidential information
	• Activities relating to the qualitative evaluation of IVD or clinical products and services as part of vendor selection and procurement activities	
	• Other quality, risk and safety management activities including meetings, data/report review	
	• Benchmarking of technical performance through audit review	
	• Human resources activities associated with assessment of staffing levels in relation to ensuring quality and safety within enterprises	
	• Innovation and data-based technology assessment: re impact, benefits and risks of new technologies to enterprise or sector	
	• Operational performance review –assessing enterprise technical quality compliance, eg service level agreement reporting and assessment	
Other activities not listed above	• Provide a short description of the activity	
ACADEMIC		
Monitoring technical systems through audit data	• Monitoring and reporting safety of clinical trials	Date, time and duration of activity Do not include confidential information
	• Monitoring and reporting adverse events and unexpected outcomes in research activities	
	• Technical audits of IT systems relating to teaching and research related to pathology	
	• Internal quality audits of research activities for - Experiment methods and validation of results - Reagents/supplies/ assay performance - Reoptimisations of assays	
Other activities not listed above	• Provide a short description of the activity	

Section 2: SERVICE PERFORMANCE - suggested examples are provided below of types of service activities that may be monitored and specific data collected		
MANAGEMENT		
Audit of Service Performance	• Policy development – activities associated with the development and review of standard operating procedures, operational policies and procedures (operations, research, clinical services, • Standards – activities associated with the interpretation, development, review or implementation of quality or operational performance standards • Compliance – activities (interpretation, provision of advice, data analysis, monitoring, audit) relating to ensuring compliance with legislation, standards, guidelines etc, • Information technology and informatics governance – participation in activities related to the management and evaluation of clinical elements of IT systems performance, system improvement, design, risk management and quality improvement • Care standardisation – developing standards and models service to reduce variation in service levels or standards of care within an enterprise • Population health – developing and implementing services and systems to improve health outcomes in populations (activities related to informatics, IT, policy, best practice, clinical standards implementation, service development, commercial evaluation, payer engagement, consumer engagement, market research etc)	Date, time and duration of activity Do not include confidential information
Other activities not listed above	• Provide a short description of the activity	
ACADEMIC		
Audit of Service Performance	Designing and implementing safety and quality aspects of pathology related research	Date, time and duration of activity Do not include confidential information
	Designing and implementing changes to pathology related research protocols in response to detection of errors/ unexpected results etc	
	Monitoring compliance with guidelines and standards relating to research and teaching activities. Eg NHMRC data recording guidelines, AMC standards Policy development in relations to guidelines and standards relating to teaching and research activities	
Other activities not listed above	• Provide a short description of the activity	

Establishing a Management and Academic IQA Framework that will be used to routinely review processes in the field should facilitate improved professional practices. It provides a mechanism for peer review, introduces a mechanism for benchmarking processes to measure improvements, reduces the risk of errors in the clinical environment, thereby improving the quality of patient management and/or outcomes.

Activities performed from the IQA Framework will be linked to the RCPA CPD Program and will likely be an important part of any Revalidation Framework the College may need to adopt in the future.

The completion of these activities could form part of the RCPA audit substantiation for the CPD Program in the future.