

IEQAS

Participants' Conference 2011

Introductory Remarks

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External Quality Assessment Scheme

"The primary intention of the activities of an EQA Programme in laboratory medicine shall be to support quality improvements of the services provided by participating laboratories for the benefits of the patients."

Source: IFCC Guidelines for the Requirements for the Competence of EQAP organizers in medical laboratories, 2002

Quality Characteristics in Healthcare

Source: ISO Standard in development

Appropriate, correct care

Availability

Continuity of care

Effectiveness and efficiency

Equity

Evidence/knowledge based

Patient focussed care

Patient involvement

Patient safety

Timeliness/accessibility

IEQAS

The Irish External Quality Assessment Scheme for Laboratory Medicine (IEQAS) was launched in May 1981.

IEQAS is a non-trading, non-profit professional association within the Irish health service.

It monitors the quality of results reported in Irish Laboratory Medicine and offers professional advice and guidance as necessary.

IEQAS

From the beginning, virtually all hospitals in the state have participated in the scheme.

IEQAS is educational rather than regulatory in nature and provides a means of external audit that operates continuously thus helping laboratories to achieve their aim of continuous quality improvement.

IEQAS

Of itself, passive participation in External Quality Assessment is not enough to drive quality improvement.

IEQAS reports must be understood and interpreted correctly so as to prompt corrective actions and guide quality improvement.

The Annual Participants' Conference provides a valuable opportunity for all of us to learn from the experiences of our colleagues and the wisdom of our invited guest speakers.



“Ring the bells that still can ring
Forget your perfect offering
There is a crack in everything
That's how the light gets in.”

Anthem

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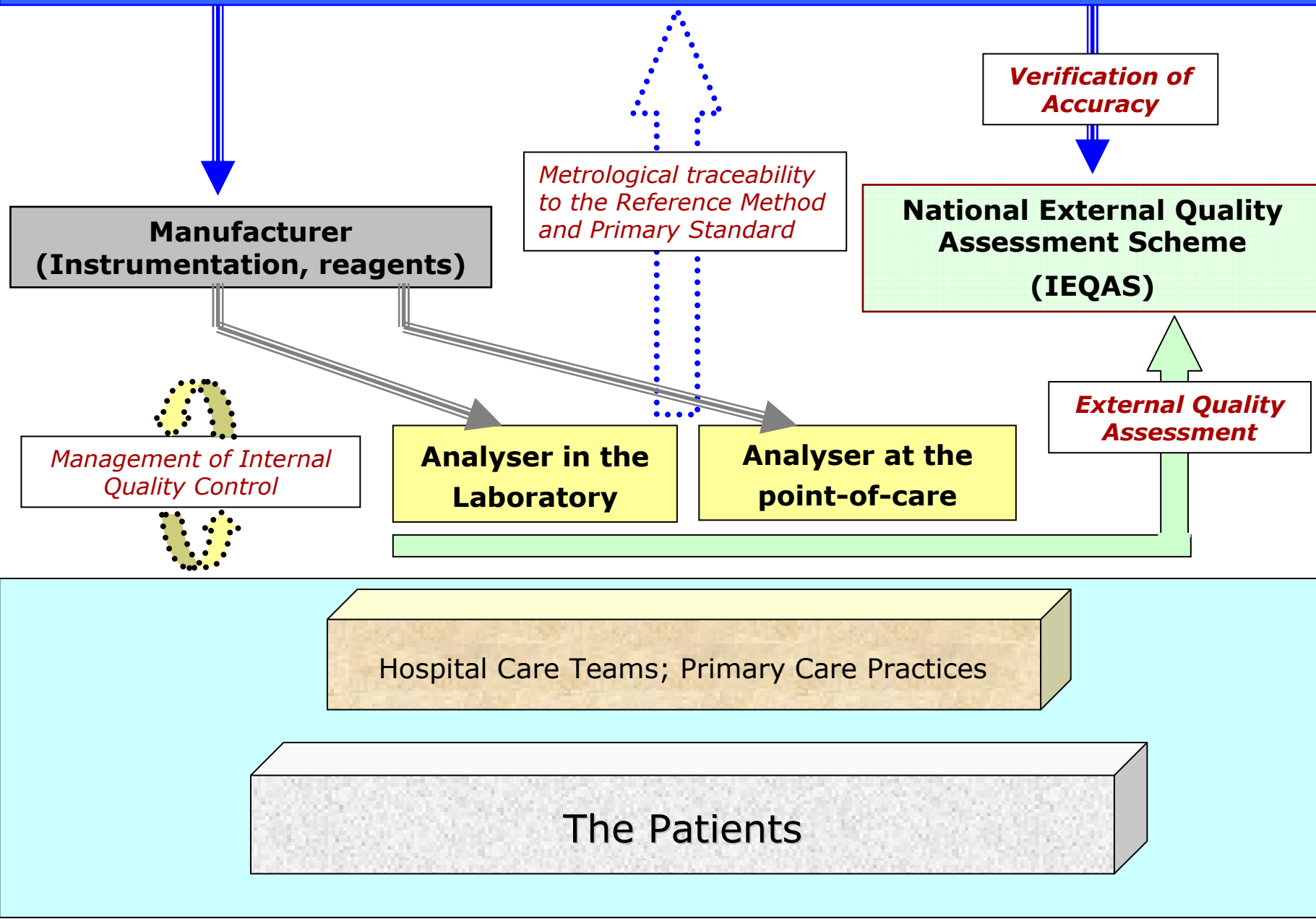
IEQAS

The support of all the professional bodies in Irish Laboratory Medicine has been crucial to the success of the scheme.

The IEQAS Steering Committee coordinates the work of various Review Groups and Specialist Sub-Committees.

The demand for IEQAS services has grown considerably in recent years and this has presented new challenges for the Scheme and its staff at a very difficult time for the publicly-funded health services.

International Reference Measurement System



IEQAS HbA1c Scheme (August 2011)

Sample A	Mean	CV	Range
Target (Ref Lab)	67.1		
Menarini (n=13)	67	3%	64-70
Tosoh (n=7)	70	1%	69-71
DCA Vantage (n=48)	64	4%	57-70

Sample B	Mean	CV	range
Target (Ref Lab)	67.5		
Menarini (n=13)	68	2%	66-70
Tosoh (n=7)	70	2%	68-73
DCA Vantage (n=48)	67	3%	62-72

Importance of setting quality specifications in Laboratory Medicine

“The concept of quality in laboratory medicine contains many facets

A central and important aspect is the measurement procedure and the outcome of measurements.

It is difficult and almost non-productive to discuss quality unless goals or specifications are set.”

Kallner, A. (IUPAC), McQueen, M. (IFCC) and Heuck, C. (WHO); 1999

The Stockholm Consensus Conference, 1999

Strategies to Set Global Analytical Quality Specifications in Laboratory Medicine [Scand J Clin Lab Invest 1999;59:585]

Level	Sub-Level	Model
1	Evaluation of the effect of analytical performance on clinical outcomes in specific clinical settings	
2	Evaluation of the effect of analytical performance on clinical decisions in general	
	2a	Data based on components of biological variation
	2b	Data based on analysis of clinicians' opinions
3	Published professional recommendations	
	3a	From national and international expert bodies
	3b	From expert local groups or individuals
4	Performance goals set by	
	4a	Regulatory bodies
	4b	Organisers of EQA Schemes
5	Goals based on the current 'state of the art'	
	5a	As demonstrated by data from EQA or Proficiency Testing scheme
	5b	As found in current publications on methodology

Strategies to Set Global Analytical Quality Specifications in Laboratory Medicine

Level	Sub-Level	Model	Advantage
5	Goals are based on the current 'state of the art'		
	5a	As demonstrated by data from EQA or Proficiency Testing scheme	<i>'Based on what others tell us they achieve'</i>
	5b	As found in current publications on methodology	

Scand J Clin Lab Invest 1999;59:585

Strategies to Set Global Analytical Quality Specifications in Laboratory Medicine

Level	Sub-Level	Model	Advantage
4	Performance goals set by		
	4a	Regulatory bodies	<i>'Based on what is routinely achievable'</i>
	4b	Organisers of EQA Schemes	

Scand J Clin Lab Invest 1999;59:585

Strategies to Set Global Analytical Quality Specifications in Laboratory Medicine

Level	Sub-Level	Model	Advantage
3	Published professional recommendations		
	3a	From national and international expert bodies	<i>'Based on best experience available'</i>
	3b	From expert local groups or individuals	

Scand J Clin Lab Invest 1999;59:585

Strategies to Set Global Analytical Quality Specifications in Laboratory Medicine

Level	Sub-Level	Model	Advantage
2	Evaluation of the effect of analytical performance on clinical decisions in general		
	2a	Data based on components of biological variation	<i>'Based on what the doctor will do with the result'</i>
	2b	Data based on analysis of clinicians' opinions	<i>'Based on improving signal to noise ratio'</i>

Scand J Clin Lab Invest 1999;59:585

Strategies to Set Global Analytical Quality Specifications in Laboratory Medicine

Level	Sub-Level	Model	Advantage
1		Evaluation of the effect of analytical performance on clinical outcomes in specific clinical settings	<i>'Based on what will happen to the patient'</i>

Scand J Clin Lab Invest 1999;59:585

“When as kids we came to an orchard wall that seemed too high to climb, we took off our caps and tossed them over the wall, and then we had no choice but to follow them.”

From: Frank O'Connor's *'An Only Child'* (1961)

