

PROFESSIONAL BOARD FOR MEDICAL TECHNOLOGY
CRITERIA FOR THE APPROVAL OF TRAINING LABORATORIES
GUIDELINES FOR EVALUATORS FOR EVALUATION OF LABORATORIES

GUIDELINES FOR ASSESSORS/ EVALUATORS:

An assessor's responsibilities are evaluation and education. They must obtain and familiarize themselves with the requirements of the relevant syllabi for the practical training of students. He/she must collect and record adequate information to determine whether a laboratory complies with the requirements for accreditation. A laboratory must demonstrate adequate proficiency, and also meet the general guidelines for quality control, qualifications of personnel, methods, safety, and space requirements of the laboratory.

Assessors are instructed to assess compliance with requirements realistically. The overriding principle is to assess each department on the basis of how its quality of service to patients compares with other, similar organisations and to meet the requirements of those where resources, methods or facilities place them firmly in the lower ambit of the quality "distribution curves" and/or those whose organisational and staffing structure is considered unsound.

Educational responsibilities of assessors include explaining the requirements and suggestions for correction of deficiencies. The guiding principle is improvement of service and performance through objective evaluation and constructive criticism. Assessors also serve as guest consultants. They should adopt a positive attitude and deficiencies identified should be regarded as recommendations for improvement. Evaluators should refrain from using the phrase "In my/our laboratory we...". If the procedure followed is acceptable, the procedure need not be changed.

Assessors are required to conduct a systematic evaluation, looking for compliance with the protocol as objectively as possible. It should be understood that the assessment will vary in depth and that in some areas, such as documentation, random checks will be made rather than an exhaustive examination.

Assessors should review the information in the application form from the department to be inspected before the site visit. The method for the inspection will be as follows:

1. How large the department is and the hospital/community it serves.
2. What sort of instruments and methods are used.
3. Are there problems that can be determined from the information given? Special attention should be given to these during the inspection.

For each group of assessors visiting an institution, one will be designated as Team leader, to act as spokesperson for the group. He/she will liaise with the head of the service to be inspected over details of the site visit. Each team of assessors should have a brief meeting prior to arrival at the institution to discuss protocol and any anticipated difficulties. Certain tasks, such as inspection of common areas could be delegated to team members. It is important that the head of the department of the institution is present at the meeting.

Assessors must explain to managers that the evaluation and report will take some weeks to be completed and that a full report with recommendations will (under normal circumstances) be returned

to the head of the department of the institution. In the event that the head of the department being inspected is not the applicant, then the full report will go to the person making the application. A brief statement of the outcome of the inspection will also be sent to the chief executive of the owning institution.

Assessors should arrange a meeting with the head of department and senior scientific staff to discuss the day's proceedings. While no instant analysis of "how did we do?" is permissible, the Team Leader should attempt to summarize his findings and offer thanks for any hospitality enjoyed.

Assessors should tender the observation that they simply make recommendations and that the final outcome of any institution's application depends on the Board.