Improving the Quality of Laboratory Services through SLMTA Implementation

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INTRODUCTION

• In 2009, Uganda MOH adopted the WHO initiative for supporting labs to achieve international accreditation (ISO 15189) in a stepwise approach through the SLMTA program, and a total of 100 labs have been enrolled through 3 cohorts.

• The USAID funded Strengthening Uganda’s Systems for Treating AIDS Nationally (SUSTAIN) project works in partnership with MOH, to strengthen laboratory systems at 18 public health laboratories in Uganda; prioritizes support for lab accreditation through SLMTA, as a core component of the project scope.
INTRODUCTION…

<table>
<thead>
<tr>
<th>Range</th>
<th>Score</th>
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<tbody>
<tr>
<td>0 – 150 pts</td>
<td>&lt; 55%</td>
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<tr>
<td>151 – 177 pts</td>
<td>55 – 64%</td>
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<td>178 – 205 pts</td>
<td>65 – 74%</td>
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<tr>
<td>206 – 232 pts</td>
<td>75 – 84%</td>
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<tr>
<td>233 – 260 pts</td>
<td>85 – 94%</td>
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<tr>
<td>261 – 275 pts</td>
<td>≥95%</td>
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End Point
National, Regional or International Accreditation Body

Stepwise Process
Scores (%)
0 Star: 65-74 %
1 Star: 75-84 %
2 Star: 85-94 %
3 Star: ≥95 %
4 Star: 85-94 %
5 Star: ≥95 %
INTRODUCTION

Problem statement
• Quality laboratory services are critical to effective disease diagnosis and patient management, however compromised by deficiencies/NCs in Laboratory Quality Management Systems (LQMS).
• Baseline SLMTA assessments rated all 18 SUSTAIN project supported labs at 0 Star, while at Midterm only 1 lab (7%) at 3 Star, below the National targets for the different health facility levels (Star 5 for NRHs & RRHs, Star 3 for GHs & HC IVs), and the project in-house target of ≥ 3 Stars for all labs.

Improvement Aim
• To improve all 18 SUSTAIN project supported laboratories to 3 Stars and above, by September 2016.
METHODS

- The 18 laboratories were enrolled on the SLMTA program through different cohorts; 5 on cohort 1 (2011), 9 on cohort 2 (2013) and 4 on cohort 3 (2015).
- Baseline data was collected from the 18 laboratories using the WHO/AFRO SLIPTA checklist.
- Supported Labs to participate in the 3 mandatory SLMTA Workshops, under the different cohorts (64 lab staff)
- Supported Training follow-up visits by the MOH central teams
METHODS…

- Conducted SLMTA complementary trainings (Internal Audit, Biosafety/Biorisk mgt, Logistics Mgt)
- Conducted onsite SLMTA Mentorships, targeted to NCs identified from baseline and internal audits; 10 contact days following @ workshop
- In-country assessment of the 18 laboratories was conducted by MOH/CPHL (February/Mar 2016), for end line (cohort 2, n=9), Midterm (cohort 3, n=4), and continuous assessment (cohort 1, n=5), to determine progress towards achieving the requirements for accreditation (ISO15189 Std).
RESULTS/ACHIEVEMENTS

- Proportion of laboratories with **3 stars or more** at end line assessment (Cohort I&II), increased from **7%** (1/14) to **50%** (7/14); 5 stars(01), 4 stars(01), 3 stars(05), 2 stars(05), 1 star (02).

- 4 Cohort III labs not yet assessed for end line, but internal audits show improvement in SLIPTA audit scores; **1 star (02), 0 star (02)**.
SLIPTA STAR STATUS AT MIDTERM VS ENDLINE

Cohort 1
Cohort 2
Cohort 3

SUSTAIN – Strengthening Uganda’s Systems for Treating AIDS Nationally
RESULTS/ACHIEVEMENTS…

- Best performed SLIPTA checklist sections;
  4) Client mgt & Customer service (77%) 7) Purchasing & Inventory (75%) and 9) Information mgt (72%)

- Worst performed sections; 2) Management reviews (41%), 6) Evaluations & audits (52%) and 10) Identification and Control of Non Conformities, Corrective & Preventive actions (56%)
AVERAGE % SCORE BY WHO/SLIPTA CHECKLIST SECTION
DRIVERS FOR IMPROVEMENT?

- Training of resident mentors \( \text{ongoing CAPA.} \)
- Training of internal auditors
- Close collaboration with MoH to implement SLMTA activities (trainings, follow-ups & mentorships) as scheduled
- Engagement of top hospital management to support human resource concerns
- Sharing best practices from “model” labs
LESSONS LEARNT/RECOMMENDATIONS

❖ Lessons learnt
  • Regular on-site mentorships are a major ingredient for improving LQMS
  • Supportive supervision from health facility management is critical in driving improvement projects
  • Major barriers to progress towards accreditation are around; management reviews, evaluation & audits, Identification & Control of NC, CAPA.

❖ Recommendations/way forward
  - Fast track the accreditation process for the 7 labs that achieved 3 stars and above at end line assessment;
  - Rollout SLMTA 2 training for all 18 labs;
ACKNOWLEDGEMENTS

- USAID
- Uganda MoH
- Health Facility mgt
- Central & resident mentors
- ASLM 2016 conference committee
THANK YOU FOR LISTENING