Proposal for Diagnostic centres: Preventing incidences, risks or even deaths due to AMR burden etc (Part 3)

By

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AOEC & SSHGIEC, 2018

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Problem analysis

Wrong antibiotics or wrong medications are known to cause hazards, risks and even fatality. The consultant acknowledges that AMR burden can lead to increased morbidity, mortality and cost of care.

The solution includes a proposal to diagnostic centres to implement a Prescribing Desk and SMART Assistance to address the still emerging AMR burden.

Proposal

Implement SMART Assistance in 2 steps

Step 1: **Operating norms and best practices**

Step 2: "Knowing your customer" methodologies are emerging in all areas of the industry, the importance of which may be evident in the pharmaceutical industry to provide better services.

A diagnostic centre could define/revise a form to collect profile information from customers depending upon possible response, time available, vulnerability or severity noticed in health condition.

This proposal includes a proposed customer profile that can be used to collect, consolidate and communicate details about the customers who request for culture sensitivity tests or consume antibiotics (frequently).

The profile has certain must fill (*) sections and certain additional information sections. It is expected that filling in the profile may take approximately 10 minutes with assistance.

This customer profile can be logged into high-performing VeriSafe databases that can be assessed to understand and improve the nature of healthcare and actions being taken to ensure right antibiotic policies.

Associating a Customer UId across all diagnostic centres could help management bodies identify customers at a nation-wide, or state-wide, or district-wide, or city-wide level etc, and thereon unify in efforts for the right use of antibiotics and gather information on performance and issues.

DIAGNOSTIC CENTRE DETAILS

Does your organization have any policy or tool to

1 Review its management system documents including the availability of standard operating procedures to improve quality? Yes/No/Not applicable

•2 Review its quality specific documentation to have a better understanding? Yes/No/Not applicable

•3 Carry out inspections of the facilities, sites/ location, circumstances and to have better knowledge of operations? Yes/No/Not applicable

•4 Review and improve methodology to be adopted for quality assessment? Yes/No/Not applicable

•5 Review and check the preparedness of the laboratory to undergo readiness assessment? Yes/No/Not applicable

•6 Review the scope of quality management methodology and to ascertain the requirement of the number of objectiveness/key considerations to be met? Yes/No/Not applicable

•7 Make clear to the laboratory/staff the quality management methodology to be adopted? Yes/No/Not applicable

•8 Help the organization implement continual quality improvement? Yes/No/Not applicable

BEST PRACTICES AND OPERATING NORMS

45. Is the scope of laboratory services commensurate to the services needed by the community in the area? Yes/No/Partially

46. Is the infrastructure adequate to provide such a defined scope of laboratory services? Yes/No/Partially

47. Do adequately qualified and trained personnel perform, supervise and interpret the investigations? Yes/No/Partially

48. Do documented procedures guide the ordering of tests, collection, identification, handling, safe transportation, processing and disposal of specimens? Yes/No/Partially

49. Are results from these laboratory services available within a defined time frame? Yes/No/Partially

50. Are critical results intimated to the personnel concerned? Yes/No/Partially

51. Are results reported in a standardized manner? Yes/No/Partially

52. Are laboratory tests not available within the organization outsourced to other organizations based on their quality assurance programme? Yes/No/Partially

53. Is the laboratory quality assurance programme documented? Yes/No/Partially

54. Does the quality assurance programme address the verification and/or validation of test methods? Yes/No/Partially

55. Does the quality assurance programme address the surveillance of test results? Yes/No/Partially

56. Does the quality assurance programme include the periodic calibration and maintenance of all equipment? Yes/No/Partially

57. Does the quality assurance programme include the documentation of corrective and preventive actions? Yes/No/Partially

58.a Is the laboratory safety programme documented? Yes/No/Partially

58.b Is the laboratory safety programme aligned with the organization's overall safety programme? Yes/No/Partially

59. Do written procedures guide the handling and disposal of infectious and hazardous materials? Yes/No/Partially

60. Are laboratory personnel trained in safe practices? Yes/No/Partially

61. Are the laboratory personnel provided with appropriate safety equipment/devices? Yes/No/Partially

CULTURE SENSITIVITY NORMS

62. Is the scope of these services commensurate to the services provided by the organization? Yes/No/Partially

Do these services comply with legal and other standardized requirements for controlling the AMR burden?
Yes/No/Partially

63. Is the infrastructure adequate to provide such a defined scope of services? Yes/No/Partially

64. Do adequately qualified and trained personnel perform, supervise and interpret the investigations? Yes/No/Partially

Are the SOURCES OF INFECTION possibly known for the customer? Yes/No/Partially

Are the PATTERNS OF ANTIBIOTIC CONSUMPTION known for the customer? Yes/No/Partially

65. Do documented policies and procedures guide identification and safe transportation of specimens for home visits for these services? Yes/No/Partially

66. Are results from these services available within a defined time frame? Yes/No/Partially

67. Are critical results intimated to the personnel concerned? Yes/No/Partially

Are Anti-microbial Susceptibility Test (AST) results generated? Yes/No/Partially/Not applicable

68. Are results reported in a standardized manner? Yes/No/Partially

Are repeat test results specifically tagged and thereon reported in a standardized manner? Yes/No/Partially/Not applicable

69. Are laboratory tests not available within the organization outsourced to other organizations based on their quality assurance programme? Yes/No/Partially

70. Is the AST quality assurance programme documented? Yes/No/Partially

71. Does the quality assurance programme address the verification and/or validation of methods? Yes/No/Partially

72. Does the quality assurance programme address the surveillance of results? Yes/No/Partially

73. Does the quality assurance programme include the periodic calibration and maintenance of all equipment? Yes/No/Partially

74. Does the quality assurance programme include the documentation of corrective and preventive actions? Yes/No/Partially

75. Is the (Infection prevention & control) safety programme documented? Yes/No/Partially

76. Is the safety programme aligned with the organization's overall safety programme? Yes/No/Partially

77. Do written procedures guide the handling and disposal of specimens, possibly infected and hazardous materials? Yes/No/Partially

78. Are personnel trained in safety practices/measures? Yes/No/Partially

79. Are the personnel provided with appropriate safety equipment/devices? Yes/No/Partially

Notes