

NATIONAL PATHOLOGY ACCREDITATION ADVISORY COUNCIL

**GUIDELINES FOR APPROVED
PATHOLOGY COLLECTION
CENTRES**

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NATIONAL PATHOLOGY ACCREDITATION ADVISORY COUNCIL

The National Pathology Accreditation Advisory Council (NPAAC) was established in 1979 to consider and make recommendations to the Commonwealth, States and Territories on matters relating to the accreditation of pathology laboratories and the introduction and maintenance of uniform standards of practice in pathology laboratories throughout Australia. An ongoing function of NPAAC is to formulate standards, and to initiate and promote guidelines and educational programs relating to the performance of pathology tests.

Publications produced by NPAAC are issued as accreditation material to provide guidance to laboratories and accrediting agencies about minimum standards considered acceptable for good laboratory practice.

Failure to meet these minimum standards may pose a risk to public health and patient safety.

1. Introduction

- 1.1 This document proposes guidelines for the premises and operations of approved pathology collection centres (ACCs).
- 1.2 The Guidelines list **minimum** requirements to apply to collection facilities utilised in the collection of samples for Medicare-billed testing in accredited pathology laboratories (APLs) or Medicare-equivalent episodes such as those patients of the Australian Government Department of Veterans' Affairs.
- 1.3 Assessment of collection centres may be performed as part of the assessment of laboratories by the National Association of Testing Authorities and the Royal College of Pathologists of Australasia.
- 1.4 There will be an annual self-assessment (subject to random or purpose-based Medicare Australia assessment of compliance) as part of the annual ACC application to the organisation.
- 1.5 Where not specified below, an ACC must comply with all relevant regulatory requirements and safety standards and must be linked to an approved pathology authority/accredited pathology laboratory with effective communication and supervision.
- 1.6 This document will be reviewed regularly with NPAAC policy.

2. Premises

- 2.1 To be adequately lit and clean and to have a temperature-controlled collection environment.
- 2.2 Size of premises to be appropriate for patient throughput.
- 2.3 Appropriate hand-washing facilities to be conveniently available to the collection staff.
- 2.4 An adequate toilet facility to be available for patients, staff and accompanying persons in, or conveniently adjacent to, the collection centre. The toilets should be able to be locked and able to be unlocked from the outside if necessary.
- 2.5 Reasonable provision for the entry of ill and disabled patients to the collection centre.
- 2.6 Provision of privacy during collections but also adequate accommodation of appropriate accompanying person (eg interpreter, guardian) during the collection.
- 2.7 Reception and waiting area to be separate from collection area.
- 2.8 Flat work surfaces to be available for clerical work and separate from flat surfaces for specimen handling. An easily cleaned laminated surface is preferred to wood for specimen handling.
- 2.9 Hours of operation to be displayed.
- 2.10 Certification of approval to be clearly displayed.
(refer Section 23DNK *Health Insurance Act 1973*)

3. Equipment

- 3.1 Refrigerators used for the storage of specimens must not be used for the storage of food, drink or pharmaceuticals. The temperature of these refrigerators should be monitored and the results recorded on each day the centre operates.
- 3.2 A centrifuge compliant with AS/NZS 2243.3 (Microbiology) 2002 is to be available if required. Maintenance and service records must be available on request, including a report of an annual check, and a procedure for handling spills which is documented and understood.
- 3.3 Suitable collection chair and/or couch to be available for patients.

- 3.4 Suitable storage for supplies is to be available, either in a secure area or in a work area accessible only to staff.
- 3.5 Basic first aid materials must to be available in sites in which simple procedures (eg phlebotomy) are performed.
- 3.6 Appropriate equipment for resuscitation to be available in sites where more complicated procedures are performed. A documented emergency procedure should be available and understood.
- 3.7 Telephone access to be available within the collection centre.

4. Materials

- 4.1 Materials required for adequate specimen collection (eg syringes, tubes, swabs, etc) to be available.
- 4.2 All materials to be checked for expiry date at appropriate intervals.

5. Staffing

- 5.1 Staff numbers — collection and ancillary (eg clerical) — to be appropriate to the throughput of the centre.
- 5.2 Staff should be aware of the Approved Pathology Authority (APA) policy with respect to privacy, confidentiality and informed consent.
- 5.3 Initial training and ongoing performance review (with appropriate records of training and assessment) to be relevant with respect to procedures to be performed, and to be in conformance with ISO/IEC 17025 and to ISO 15189 after mid-2005.

When interpreting this guideline it should be recognised that staff training and performance records are often held centrally and will seldom be available at the audit of a branch laboratory or ACC unless prior notice is given.

- 5.4 Staff to be trained to ensure knowledge of basic first aid measures to deal with situations they are likely to encounter in the course of patient specimen collection.
- 5.5 Staff to be able to provide information on charges.
- 5.6 Appropriate identification to be worn by staff.

6. Documentation/instruction

- 6.1 Collection instructions/manual (electronic or hard copy) for all procedures carried out to be available in conformance with ISO/IEC 17025 and to ISO 15189 after mid-2005.
- 6.2 Documented procedures for handling emergencies are to be promulgated, available for immediate reference and understood.
- 6.3 A protocol for management of biohazard exposure (needle stick injuries and body fluid splash injuries) must be available.

7. Health and safety

- 7.1 Conformance to OH&S legislative and regulatory requirements.
- 7.2 Collection staff to wear protective apparel/gloves where appropriate.
- 7.3 Easily cleaned floor covering (eg linoleum or washable rubber matting) is preferable to carpet or rugs.
- 7.4 Advice on immunity to vaccinate against preventable diseases that are prevalent in the community should be available to collection staff.

8. Safety and waste disposal

- 8.1 Approved receptacles for sharps and for contaminated waste must be conveniently located for use and must be out of the reach of children.
- 8.2 Transport and disposal of waste to be carried out in accordance with applicable regulatory requirements.

9. Collection, storage and transport of specimens

- 9.1 To conform to National Pathology Accreditation Advisory Council guidelines.
- 9.2 If samples are to be retained within the collection centre, safety, sample stability and security requirements are to be addressed and appropriately documented. The security procedures specified must ensure that the specimens are accessible only to APA staff and not members of the public.