

Quality Assurance Programs for External and Interpretive Pathology in Canada – Is there Room for Improvement?

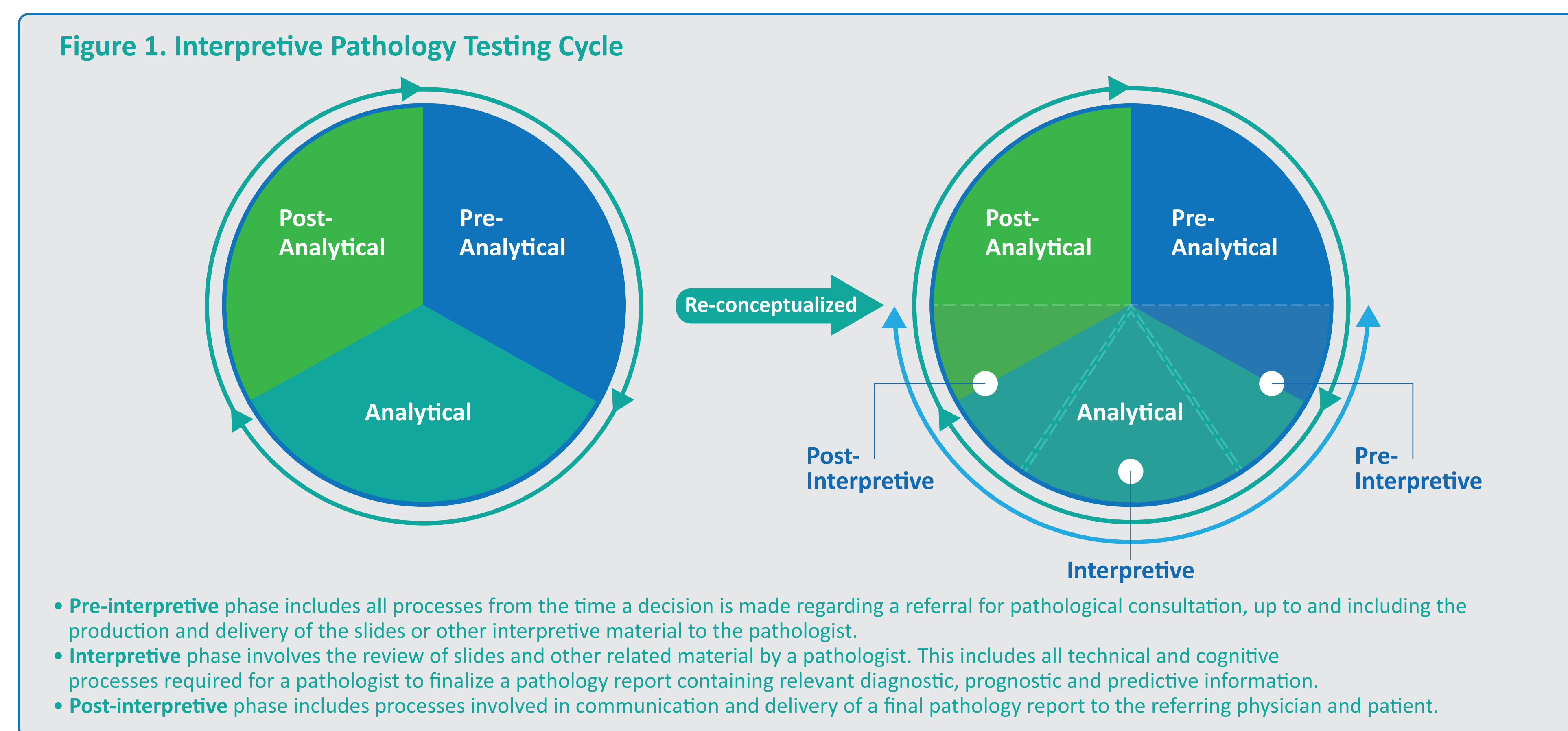
Gunita Mitera, Diponkar Banerjee, Laurette Geldenhuys, Rosemary Henderson, Fergall Magee, Meg McLachlin, Tarek Rahmeh, Esther Ravinsky, Bernard Têtu, Martin Trotter, Robert Wolber, Natasha Camuso, John Srigley
On Behalf of the Quality Initiative for Interpretive Pathology (QIIP) Thought Leaders Group, Canadian Partnership Against Cancer

Background:

Quality initiatives and quality assurance (QA) are wide ranging concepts covering all matters that individually or collectively influence the quality of health services delivery. Quality assurance for many technical and interpretive elements can be evaluated and change can be implemented at various stages throughout the pathology testing cycle. Robust QA programs incorporating both technical and interpretive aspects of QA are integral to accurate pathology diagnosis and quality of care.

The pathology testing cycle can be conceptualized into three distinct phases: Pre-analytical, analytical and post-analytical. However, when considering this cycle from the analytical or interpretive phase, we have re-conceptualized this cycle as: Pre-interpretive, interpretive, and post-interpretive.

In each phase of the cycle, the activities involved are considered from the perspective of “how will these activities impact how a pathologist is able to make an accurate, informed, consistent and timely pathology diagnosis.” (Fig. 1)



Robust quality assurance (QA) programs incorporating all phases of the pathology testing cycle are integral to accurate pathology diagnosis and quality of care a cancer patient receives. In many jurisdictions, there is considerable standardization of the pre- and post-interpretive phases of the pathology cycle through well-developed laboratory accreditation programs and institutional standards. However, the extent of jurisdictional guidance and oversight in quality systems related to the interpretive phase of pathology remains relatively unknown.

Acknowledging the potential lack of standardization in the implementation of QA programs for interpretive pathology, the Canadian Partnership Against Cancer, facilitated the assembly of a pan-Canadian Thought Leaders group tasked with developing a pan-Canadian framework for interpretive pathology QA, as part of the Quality Initiative in Interpretive Pathology (QIIP) project.

Objectives:

To highlight:

- The results of a national survey conducted to investigate and document the landscape of the implementation of interpretive pathology QA programs across Canada
- The accomplishments of the QIIP project to date
- The next steps for developing interpretive pathology quality recommendations for implementation and use across Canada

Methods:

National Survey:

An environmental scan was conducted to determine the types and extent of current large institution and provincial-level pathology QA programs implemented across Canada. An electronic survey was administered to key stakeholders and senior decision makers in cancer pathology. Follow-up interviews were conducted with pathology leaders in each province to verify survey results, deliberate and resolve ambiguous responses. Results were presented to all survey respondents as a feedback mechanism.

Results:

National Survey Results (Fig. 2)

Figure 2: Results of the National Survey

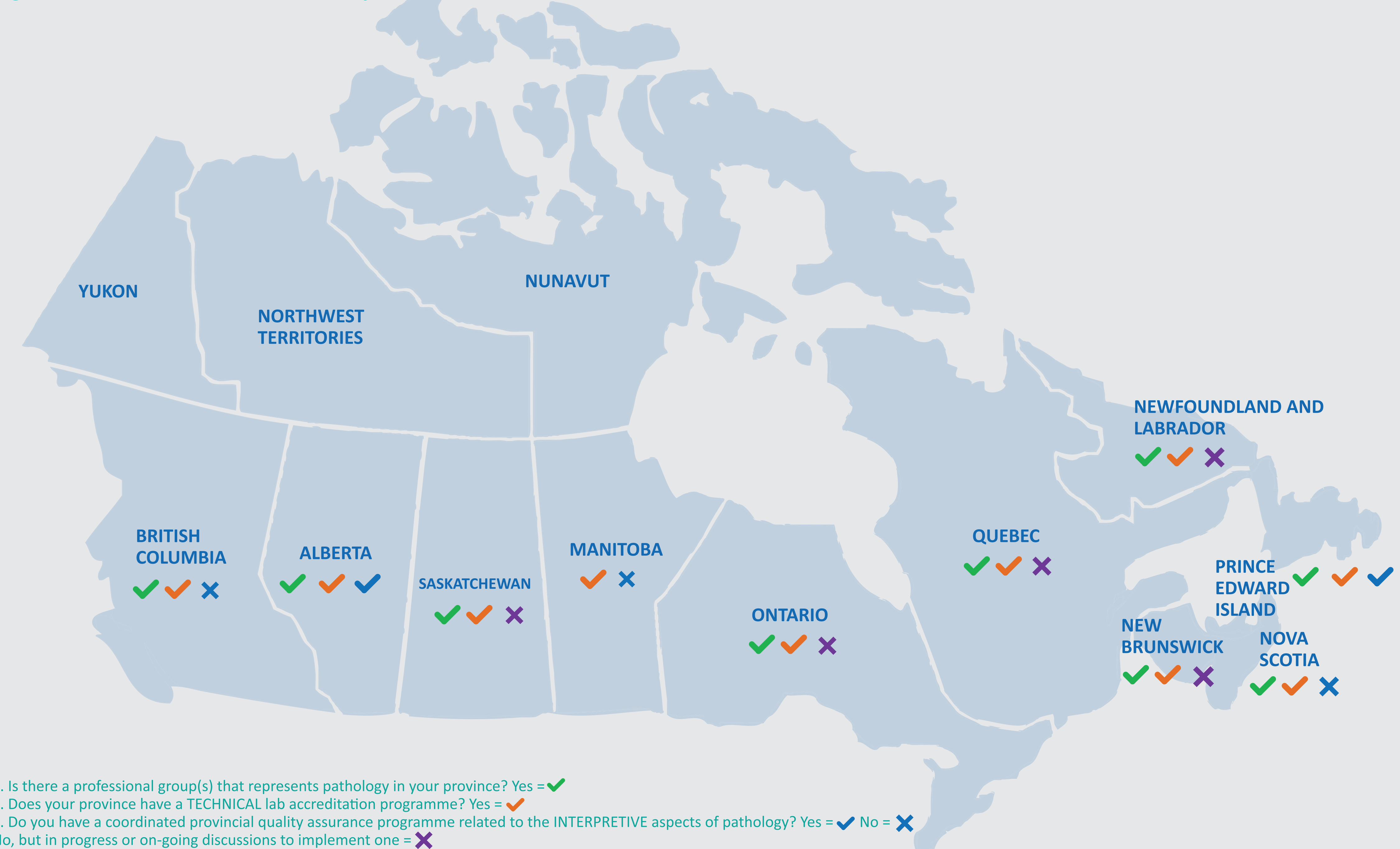
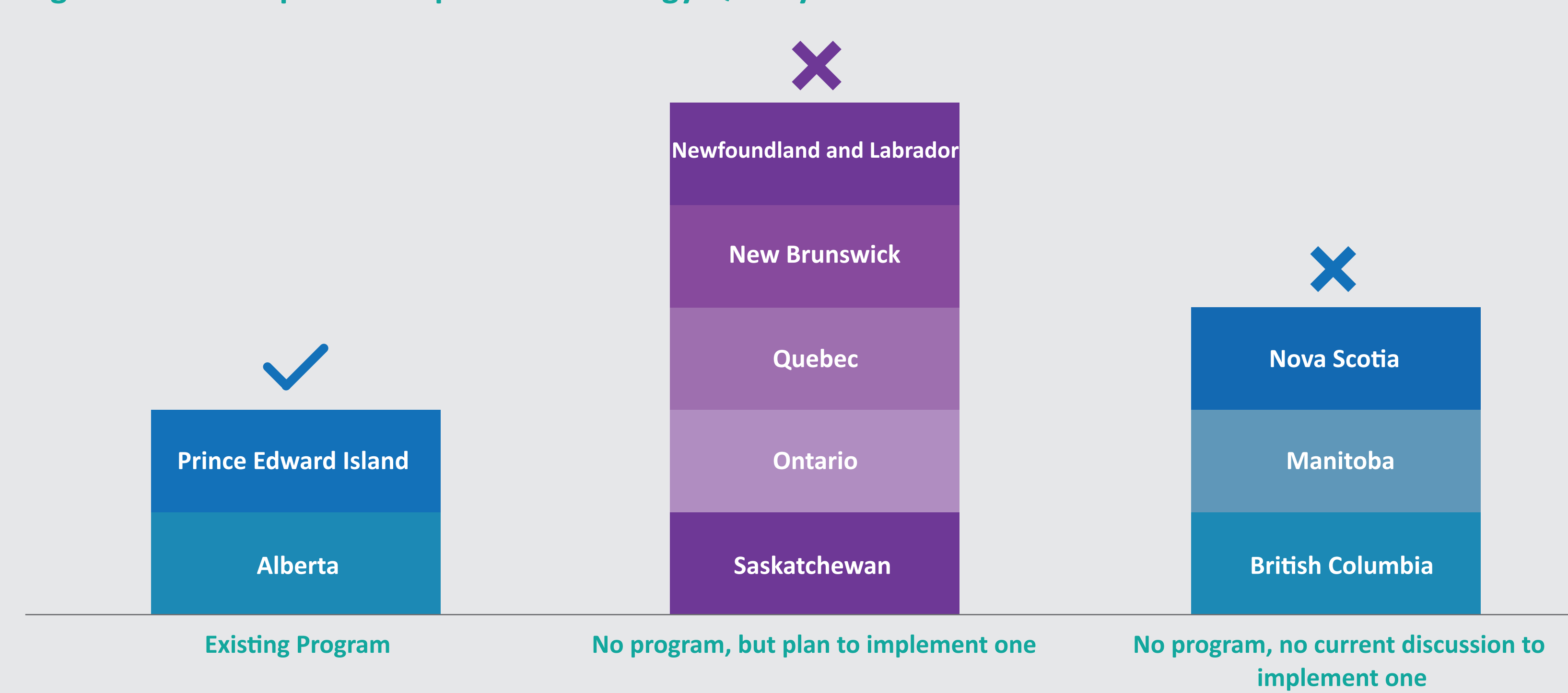


Figure 3: Landscape of Interpretive Pathology Quality Assurance Across Canada



Discussion:

This is the first study to document the current jurisdictional guidance and oversight in quality systems related to interpretive pathology in Canada. Large pan-Canadian variations remain in the degree of integration as well as the future planned activities to develop and integrate interpretive pathology QA programs within provinces.

Next Steps To Address This Issue:

Next steps will include the development of a pan-Canadian recommendations framework for interpretive pathology QA to help guide senior decision-makers in implementing interpretive pathology quality programs. This should also be integrated into existing provincial external quality assurance programs. The QIIP Thought Leaders, along with other pan-Canadian experts, have developed a framework for the recommendations and a consensus process is currently underway to develop a list of minimum standard recommendations to be included.