

**SUAN SUNANDHA
RAJABHAT UNIVERSITY**

EAD 5628

**Internal Quality Assessment
External Quality Assessment**



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Internal quality has to do with the way that the system has been constructed. It is a much more granular measurement and considers things like **clean code, complexity, duplication, component reuse**. This quality can be measured through predefined standards, linting tools, unit tests etc





External Quality Characteristics: Correctness, Usability, Efficiency, Reliability, Integrity, Adaptability, Accuracy, and Robustness.

Internal Quality Characteristics: Maintainability, Flexibility, Portability, Re-usability, Readability, Testability, and Understandability.

Internal Quality Assurance

The internal quality assurance (IQAS) includes **all the measures that are taken to ensure** that the results of laboratory instruments or point-of-care tests are correct and reproducible from one measurement to another.



Internal Quality Assurance (IQA) is the process of monitoring the teaching, learning, and assessment activities that a learner at a training provider will undertake. ... This internal member of staff is called the Internal Quality Assurer, but may just be known as the Quality Manager.



The function of Internal Quality Assurance is to:



- Monitor the quality of assessment judgements
- Ensure consistent and reliable assessment judgements are made across a provider
- Highlight any problems, trends and development needs of assessors
- Ensure all procedures and policies within a provider are adhered to and maintained by staff.

Internal quality assurance measures learner achievements, assessor judgements, assessor knowledge and the standard of processes and procedures within a provider. This is in order to ensure learners can achieve qualifications, assessors are making the correct assessment judgements and a provider is offering a high quality service. IQA activities also ensure staff working within a provider are qualified and competent.

Internal Quality Assurance Reviews:



- The knowledge, experience and competency of Assessors
- How well learners meet the assessment criteria and learning outcomes of a qualification
- The assessment judgements made by assessors
- The standards of assessment and delivery sessions
- The records and reports kept by a provider, such as IQA Reports, sampling plans etc.

The four main elements related to internal quality assurance include:

- **Sampling** – Reviewing learner evidence and assessor judgements and feedback
- **Standardisation** – Ensuring all assessors who deliver and assess on a qualification are doing so to the same standards.
- **Observation** – Observing assessor practice ensures that delivery and assessment of a qualification or course is done so to the correct standard
- **Feedback** – Obtaining and analysing learner feedback on their experiences within a provider.

IQA includes monitoring the training and assessment activities and the quality of evidence learners produce. Internal quality assurance helps to ensure that assessments and IQA activities are valid, authentic, sufficient, fair and reliable.



Internal quality assurance measures the quality, delivery, processes, procedures and learner achievements.

Key Concepts and Principles of Internal Quality Assurance of Assessment include:-

- ensuring quality standards throughout the learner journey
- ensuring accuracy and consistency of assessment decisions made by assessors
- identifying issues and trends that develop
- supporting and developing assessors and tutors





- ensuring accountability for assessment decisions and quality standards, awarding body procedures and policies are maintained
- ensuring achievement made by learners and judged by assessors is recognised and meets the grading criteria

- ensuring the correct and appropriate assessment strategies are used by assessors
- ensuring confidentiality of the learner and provider are maintained at all times
- ensuring sampling both interim and summative is occurring.





Internal quality assurance principles include; ensuring standardisation activities take place, assessment decisions embrace inclusion, equality is promoted with learners and the diversity of learners is valued by all staff. IQA ensures fairness is apparent in all assessment judgements and that clear and auditable records are held securely within a provider.

Other principles of IQA include maintaining health and safety practices, ensuring all Centre employees have access to training and CPD activities. IQA must also ensure assessors and staff members are motivated and that clear communication between all provider employees takes place regularly.



External Quality Assessments

What are external quality assessments?



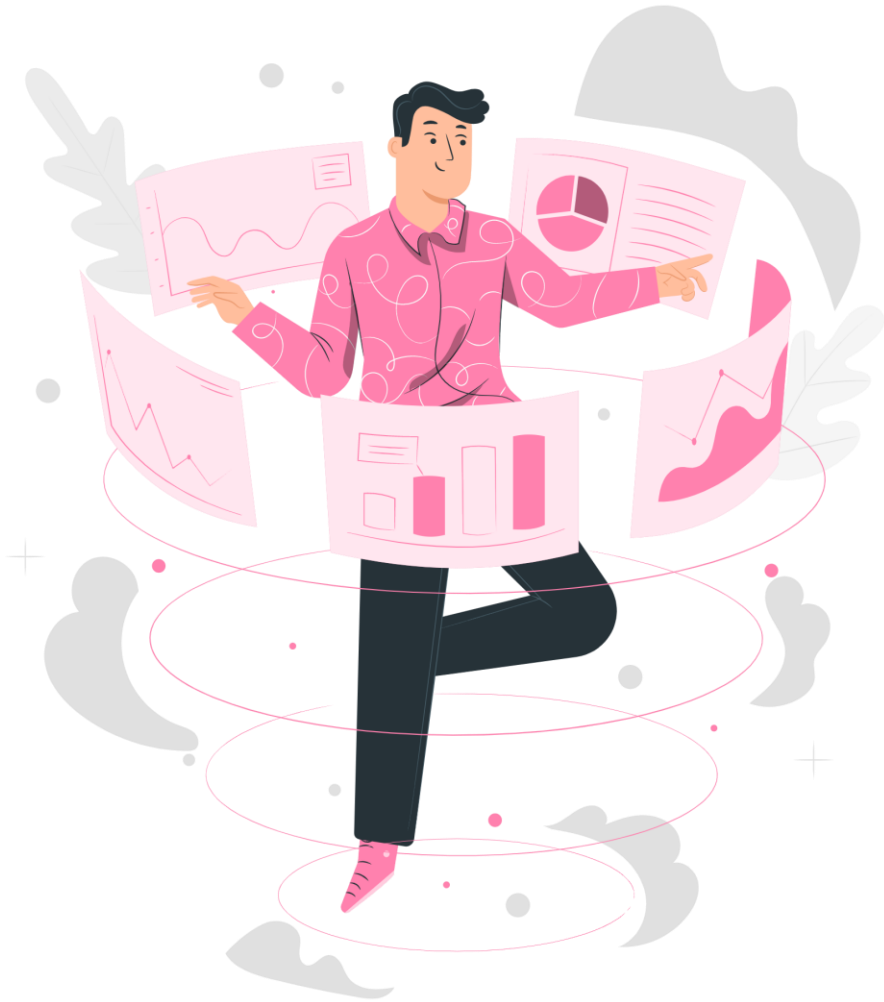
The term external quality assessment (EQA) is used to describe a method that allows for comparison of a laboratory's testing to a source outside the laboratory. This comparison can be made to the performance of a peer group of laboratories or to the performance of a reference laboratory.

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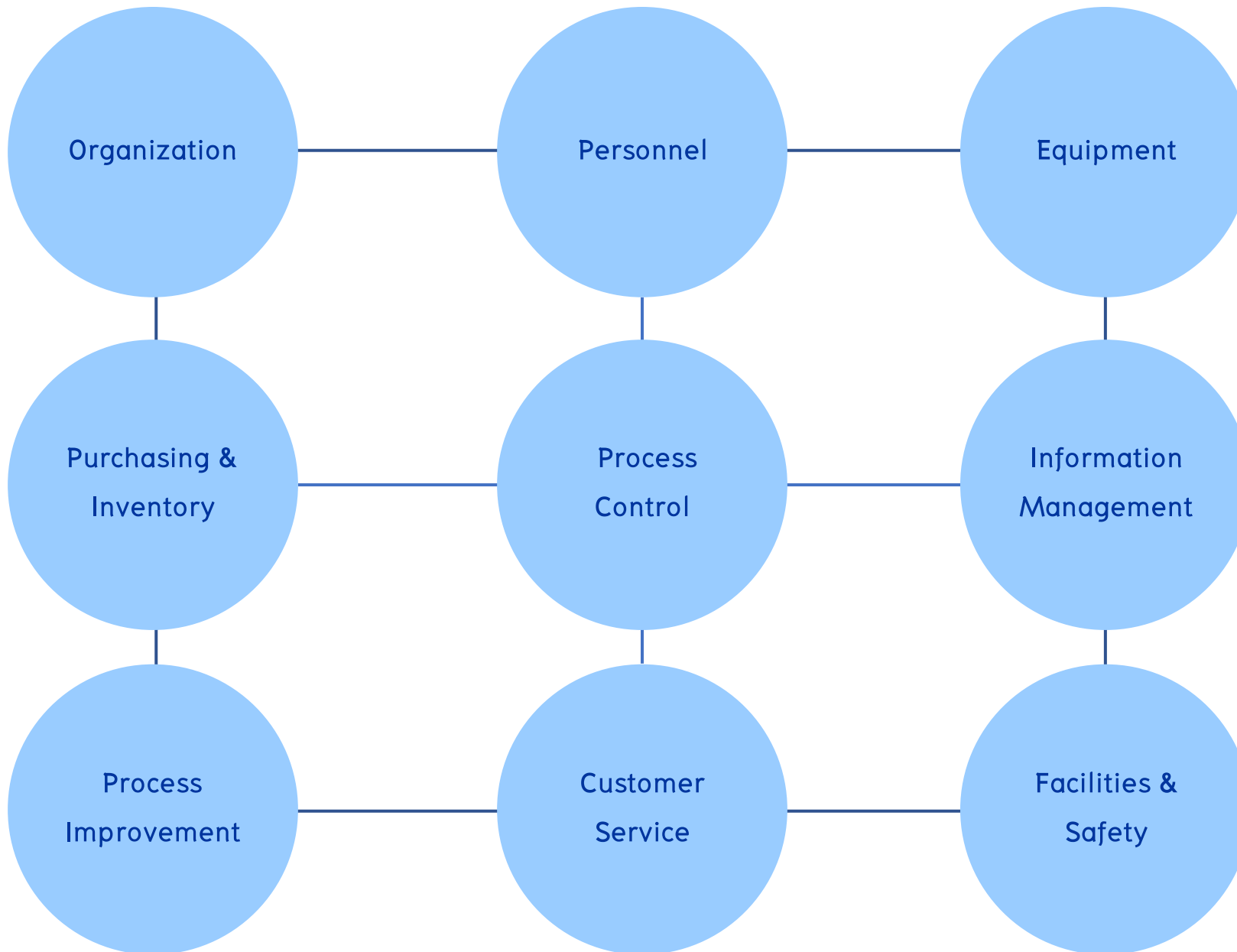
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Types of EQA

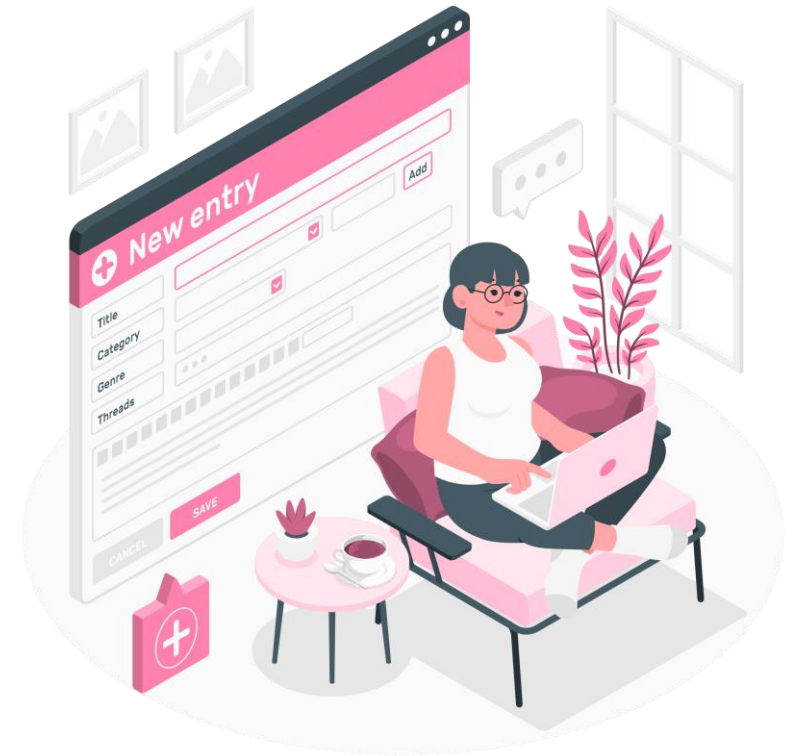


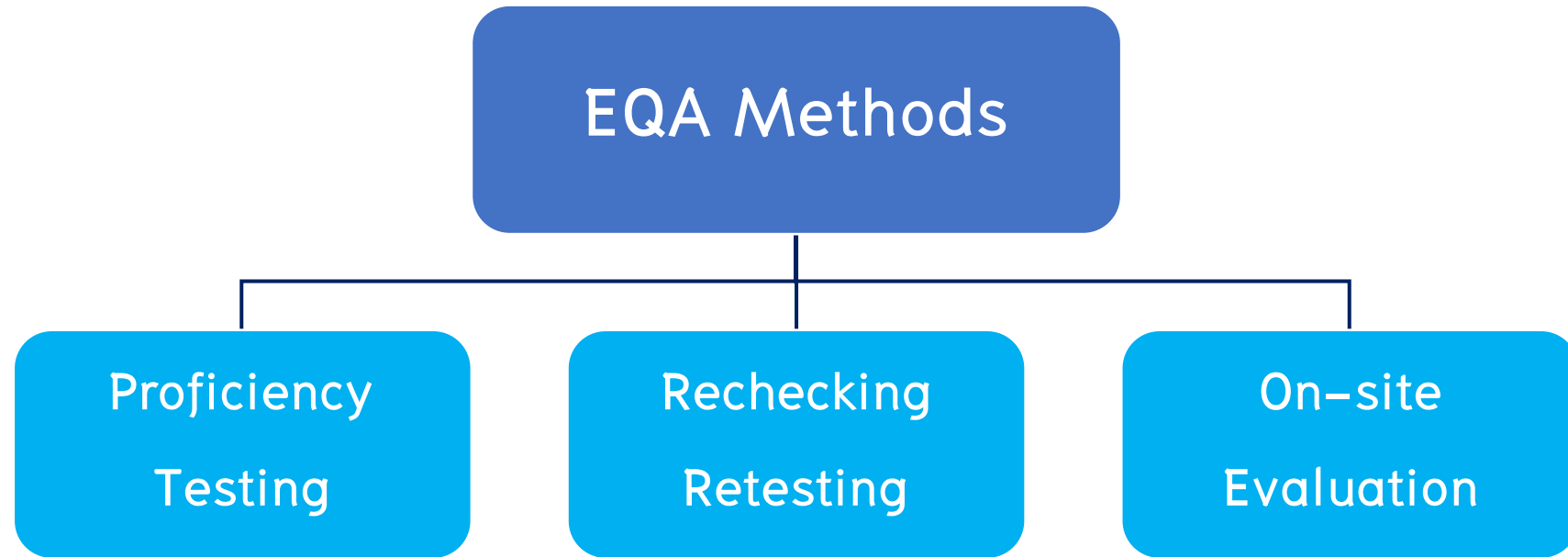
Several EQA methods or processes are commonly used. These include:

1. Proficiency testing—external provider sends unknown samples for testing to a set of laboratories, and the results of all laboratories are analyzed, compared, and reported to the laboratories.



2. **Rechecking or retesting**—slides that have been read are rechecked by a reference laboratory; samples that have been analyzed are retested, allowing for inter-laboratory comparison.
3. **On-site evaluation**—usually done when it is difficult to conduct traditional proficiency testing or to use the rechecking/retesting method.





EQA benefits



Participation in an external quality assessment program provides valuable data and information which:

- allows comparison of performance and results among different test sites;
- provides early warning for systematic problems associated with kits or operations;
- provides objective evidence of testing quality;
- indicates areas that need improvement;
- identifies training needs.

EQA helps to assure customers, such as physicians, patients, and health authorities, that the laboratory can produce reliable results. Individual laboratories can use EQA to identify problems in laboratory practices, allowing for appropriate corrective action.



EQA participation will help to evaluate reliability of methods, materials, and equipment, and to evaluate and monitor training impact. For laboratories performing public health-related testing, EQA can help to assure that results from different laboratories during surveillance activities are comparable.





EQA participation is usually required for accreditation. Also, EQA participation creates a network for communication, and can be a good tool for enhancing a national laboratory network. Samples received for EQA testing, as well as the information shared by the EQA provider, are useful for conducting continuing education activities.

Principal characteristics of an EQA scheme



EQA programs vary but principal characteristics include the following:



- EQA programs can either be free-of-charge or require a fee. Free EQA programs include those offered by a manufacturer to ensure equipment is working correctly and those organized by a regional or national program for quality improvement.



- Some EQA programs are obligatory, either required by an accrediting body or by law. Others are voluntary, and the quality manager may choose to voluntarily participate in an EQA program in order to achieve improvement in the quality of the laboratory's performance.

- The EQA program can be organized at different levels: regional, national, or international.
- Individual laboratory results are kept confidential, and generally are only known by the participating laboratory and the EQA provider. A summary is generally provided and allows comparison to the overall group





- Some EQA schemes may address a single disease, for example the EQA program for tuberculosis. Others may address many kinds of laboratory tests, looking at the overall testing performance for microbiology. An example of this multi-disease or test program is the national microbiology EQA in France, which is obligatory.



Successful performance in an EQA program reflects the effectiveness of the laboratory's quality management, and allows for recognition of laboratory quality by external groups. EQA is important for improvement of the laboratory quality management system, as it is a measure of laboratory performance.



The Function of EQA (External Quality Assurance)



- External quality assurance of assessment looks to develop excellence on behalf of an awarding organization, in terms of qualification delivery, assessment, learner achievement and learner satisfaction within an approved Centre.





- The function of external quality assurance of assessment is to ensure that any qualifications offered by an awarding body are planned, delivered and assessed by a Centre in an appropriate manner.

External quality assurance is in place to ensure that:



- the national standards of qualifications are maintained.
- Learner achievement and performance is assessed in accordance with published qualification specifications and regulatory requirements of an AQ.

- Learners are aware of what is expected of them to meet the assessment requirements of their qualification.
- Appropriate resources, including staff, are in place within an approved centre to support a qualification and the learners undertaking it.



- Centres are committed to maintaining and improving their quality assurance activities.
- Centre staff including; assessors, tutors and IQAs are offering a qualification that meets the awarding organizations assessment practice and procedures.



An External Quality Assurer will:



- ensure that a centre has up to date resources and documents relating to the qualifications they are offering
- review assessment practice and procedures within a centre against the awarding organization requirements
- review the quality and consistency of assessor judgements through sampling assessments

- review the quality and consistency of internal quality assurance (IQA) judgements, through sampling IQA reports
- observe assessment and IQA practice, if appropriate
- ensure standardization activities take place within a centre





- ensure IQA practices are planned and recorded
- ensure centre staff and resources are adequate to support a qualification delivery, assessment and internal quality assurance
- talk to learners and staff members to gain feedback on how well they think a centre performs

- provide feedback to a centre, identifying areas of good practice, agreeing action points and providing development advice
- identify if there are any issues or activities within a centre that do not meet with awarding organizations requirements
- Produce a report of their findings



Principles and Concepts of EQA



- There are a number of key concepts and principles of external quality assurance to ensure all activities are carried out efficiently and effectively.
- One important principle is known as **VACSR** and is applied to assessment, internal and external quality assurance.

All assessed evidence should be:

Valid

Evidence is relevant to the assessment criteria and appropriate assessment methods were used to obtain the evidence.

Authentic

Evidence has been produced by the learner.

Current

Evidence is relevant at the time of assessment and is up to date.

Sufficient

Evidence covers all of the assessment criteria.

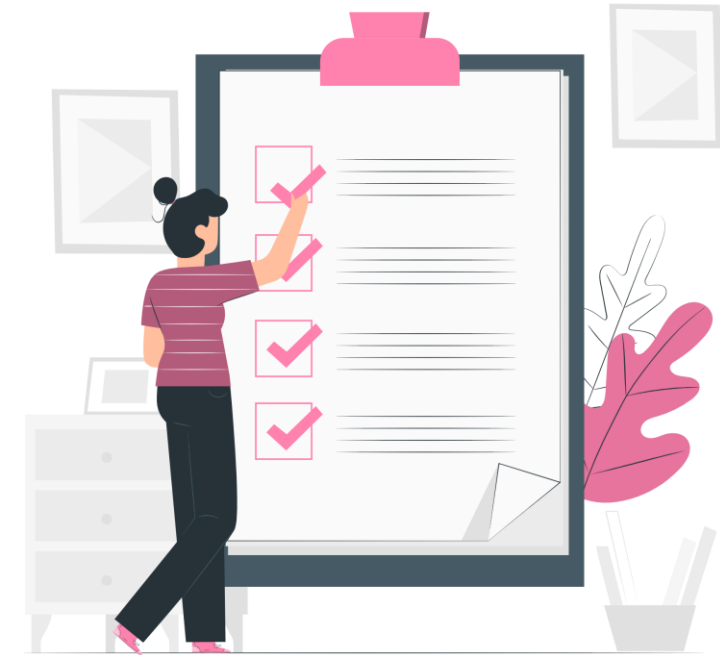
Reliable

Evidence is consistent across all learners and is at the required level for the qualification.

The concept and principles of external quality assurance of assessment are to monitor and evaluate the performance of an approved centre and to promote continuous improvement in the assessment process. An AO must ensure a centre is undertaking internal quality assurance activities correctly and the assessment process is robust.



An EQA's role is to review the processes of assessment and internal quality assurance within an approved centre. An EQA must ensure approved centre staff members are making assessment judgements that are consistent with the qualification learning outcomes and assessment criteria.



Key Concepts and Principles an External Quality Assurance include:–

- ensuring quality procedures and practice are in place and are robust within a centre
- ensuring accuracy and consistency of assessment judgements within a centre
- identifying issues and trends within a centre
- supporting and advising assessors, tutors, and IQAs within a centre.



Proficiency Testing



Definitions Proficiency testing, or PT, has been in use by laboratories for many years. It is the most commonly employed type of EQA, as it is able to address many laboratory methods. Proficiency testing is available for most of the commonly performed laboratory tests, and covers a range of chemistry, hematology, microbiology, and immunology testing. Most laboratorians are familiar with the proficiency testing process, and many laboratories employ some kind of proficiency testing.



- Standards organizations recognize the importance of this tool, and the following are examples of formal definitions that are in use.
- ISO/IEC Guide 43–1:1997: “Proficiency testing schemes (PTS) are interlaboratory comparisons that are organized regularly to assess the performance of analytical laboratories and the competence of the analytical personnel”.

- CLSI: “A program in which multiple samples are periodically sent to members of a group of laboratories for analysis and/or identification; whereby each laboratory’s results are compared with those of other laboratories in the group and/or with an assigned value, and reported to the participating laboratories and others”. Proficiency testing process In the proficiency testis



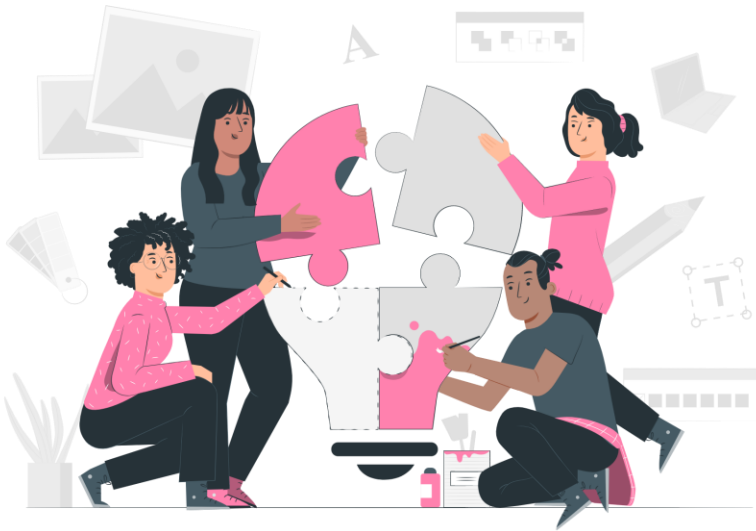
Proficiency testing process



In the proficiency testing process, laboratories receive samples from a proficiency testing provider. This provider may be an organization (non-profit or for-profit) formed specifically to provide PT. Other providers of proficiency testing include central reference laboratories, government health agencies, and manufacturers of kits or instruments

In a typical PT program, challenge samples are provided at regular intervals. An optimal frequency will be 3 – 4 times yearly. If the program cannot provide challenges with this frequency, the laboratory may be able to seek additional sources. The laboratories participating in the program analyze the samples and return their results to the central organization.





Results are evaluated and analyzed, and the laboratories are provided with information about their performance and how they compared with other participants. The participating laboratories use the information regarding their performance to make appropriate changes and improvements.

Roles of laboratory



To be successful, PT instructions must be followed carefully, all paper work completed accurately, and results submission deadlines met. All PT results, as well as corrective actions, should be recorded and the records maintained for an appropriate period of time. PT is a tool to measure laboratory performance. Therefore, there must be no difference in the treatment of PT samples and the patient's sample. Proficiency

Nothing is gained from PT participation unless the information received is directed to improvement in the laboratory.

testing providers make every effort to produce samples that exactly mimic, or closely resemble, usual samples received from patients. PT samples must be processed by normal testing method(s) and involve personnel who routinely perform the testing.





When PT is used for any purpose other than internal quality improvement, the provider or central organization generally prohibits the discussion of results with other laboratories. Some PT organizers send different samples to different groups of laboratories to avoid inter-laboratory discussion.

Limitations



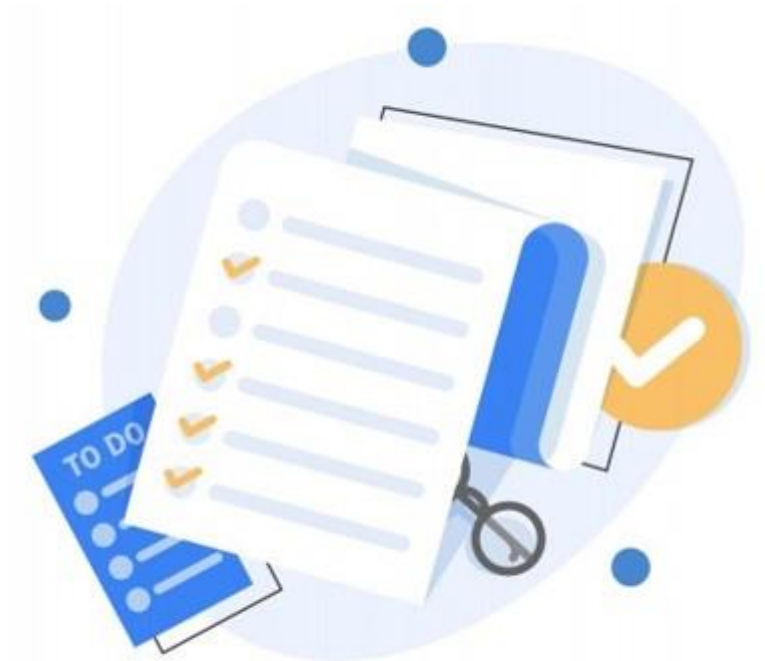
It is important to remember that PT does have some limitations and it is not appropriate to use PT as the only means for evaluating the quality of a laboratory. PT results are affected by variables not related to patient samples, including preparation of the sample, matrix effects, clerical functions, selection of statistical methods of evaluation, and peer group definition. PT will not detect all problems in the laboratory, particularly those that address the pre- and post-examination procedures.

A single unacceptable result does not necessarily indicate that a problem exists in the laboratory.

Other EQA Methods



- Using other EQA methods In situations where it is difficult to provide appropriate external samples, or sometimes, when normal laboratory quality control methods cannot be applied, other procedures have been developed and used for EQA. The primary examples, and their uses, are as follows.



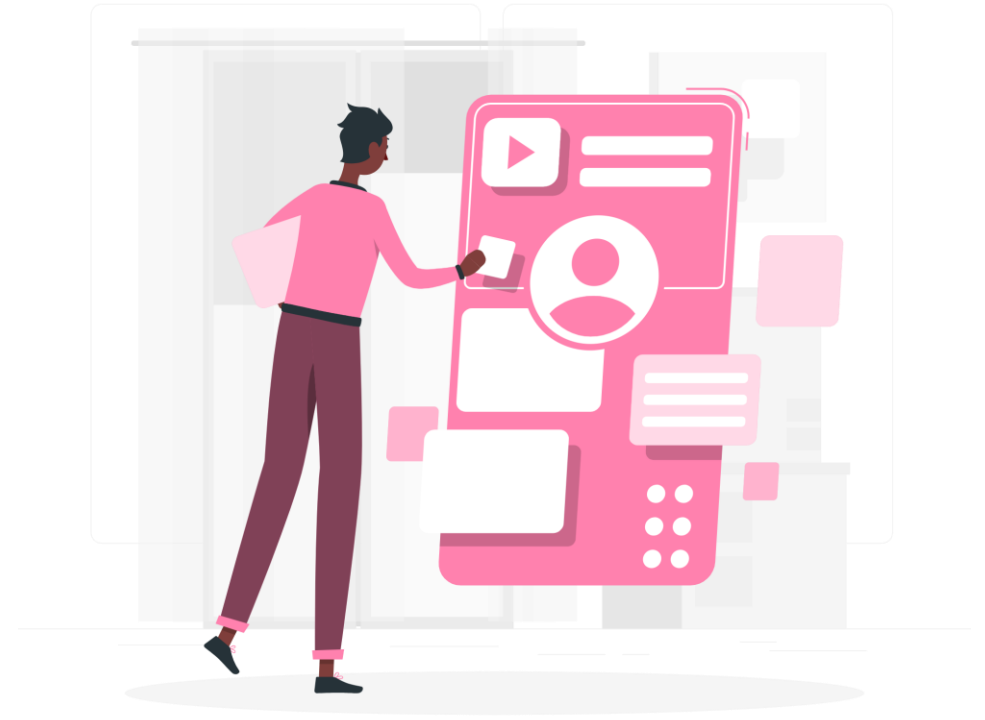


- Rechecking/retesting has been used traditionally for EQA for microscopic slides for acid-fast bacilli (AFB), and for human immunodeficiency virus (HIV) rapid testing. It can also be used in other situations, but is not usually employed if traditional PT is feasible.



- On-site evaluation has proven a useful technique for the same situations—AFB examination and HIV rapid testing. It allows for an external evaluation of quality on-site, and can be conducted in conjunction with proficiency testing or rechecking/retesting.

These procedures can be time-consuming and costly, and so are used only when there are not good alternatives. It is essential to have a reference laboratory with the capacity to do the repeat testing; the use of a reference laboratory gives assurance that the re-examination process will give a dependable result.





The turnaround for the retesting must be accomplished in a timely manner allowing for immediate corrective actions. In some settings, transport of samples or slides to the reference laboratory will present problems.

Retesting process



This EQA method is used for HIV rapid testing. HIV rapid testing presents some special challenges, because it is often performed outside a traditional laboratory, and by persons who are not trained in laboratory medicine. Additionally, the kits are single-use, and cannot be subjected to the usual quality control methods that laboratories employ. Therefore, retesting of some of the samples using a different process such as enzyme immunoassay (EIA) or ELISA (enzyme-linked immunosorbent assay) helps to assess the quality of the original testing.

Characteristically, the retesting is:



- done by a reference laboratory, to ensure quality;
- performed on dried blood spots or serum collected at the time of the rapid test performance;
- not performed as a blinded process, as this is unnecessary.

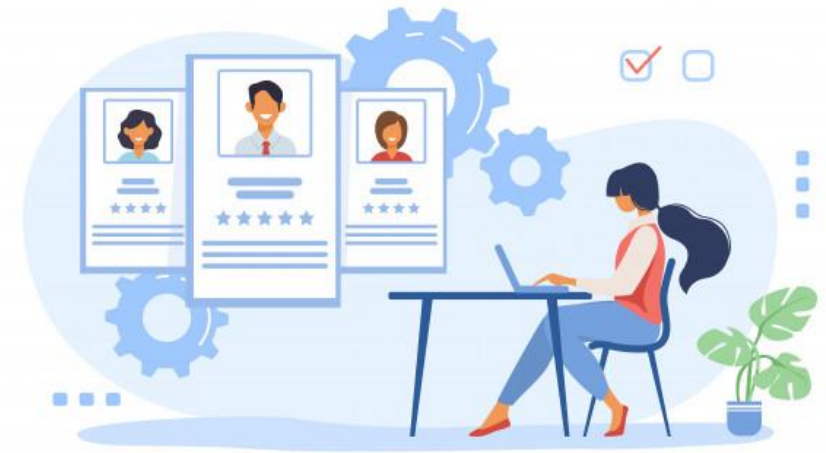
The number of samples retested must provide statistically significant data in order to detect error. This becomes difficult in settings where small numbers of rapid tests are performed. A full discussion of the statistical issues in retesting is found in the CDC/WHO reference Guidelines for Assuring the Accuracy and Reliability of HIV Rapid Testing: Applying a Quality System Approach.



Rechecking process



This method is most commonly used for acid-fast smears; the slides that were read in the original laboratory are “rechecked” in a central or reference laboratory. This allows for the accuracy of the original report to be evaluated, and also allows for the assessment of the quality of the slide preparation and staining.



The following principles are important when performing recheck procedures

- The slides for re-examination must be collected randomly. Every effort should be made to avoid systematic sampling bias.
- Rechecking must be based upon statistical considerations. A common method is for the central laboratory to recheck 10% of negative and 100% of positive slides.
- When discrepancies occur, there should be procedures in place to resolve them.
- The outcome of rechecking must be analyzed for effective and timely feedback.

Advantage of performing blind recheck



It is usually recommended that rechecking be done in a blinded fashion, so that the laboratorian performing the retest does not know the original results. In the study described in Annex 10–A (and shown in Presentation 10, Slide 20), random blinded rechecking provided more accurate estimates of AFB microscopy results than on the non-randomly selected, non-blinded smears. This resulted in improved diagnosis and monitoring of treatment response.

On-site evaluation



A periodic visit by evaluators for on-site laboratory assessment is a type of EQA that has been used when other methods of EQA are not feasible or effective. Again, this method has most frequently been employed for assessment of sites performing AFB smears, and those performing HIV rapid testing.

On-site evaluation can be a valuable tool to:

- obtain a realistic picture of laboratory practices by observing the laboratory under routine conditions in order to check that it is meeting quality requirements;
- provide information for internal process improvement;
- measure gaps or deficiencies—learn “where we are”;
- assist the laboratory in collecting information for planning and implementation of training, monitoring, and corrective actions.



On-site evaluation for the purpose of EQA may be conducted by a central reference laboratory or other health authorities. On-site evaluation can be used together with retesting and rechecking schemes to provide more information about performance.



Comparison of EQA Methods Comparison of some characteristics Some of the characteristics of proficiency testing and rechecking are compared in the table below.

Comparison of proficiency testing (PT) and rechecking/retesting (RC)

Method/characteristics	PT	RC
Interlaboratory comparison	Yes	Yes
Simulated samples	Yes	No
Real samples	Yes/No	Yes
Time and resources needed	Less	More
Analytes evaluated	Many	Few

Summary of comparison



Proficiency testing:



- gives a good, objective measure of the laboratory performance;
- can be organized to address most kinds of laboratory testing;
- is cost-effective and can therefore be used frequently.

Retesting / rechecking:

- is useful when it is difficult or impossible to prepare samples to test all of the testing process;
- is expensive and uses considerable staff time



On-site evaluation:



- can give a true picture of a laboratory's overall performance, and offer realtime guidance for improvements that are needed;
- is probably the most costly, requiring staff time and travel time and expenses of those performing the evaluation.

Managing EQA in the Laboratory



Participation in EQA

All laboratories should participate in EQA challenges, and this should include EQA for all testing procedures performed in the laboratory, if possible. The benefits of this participation are considerable, and EQA provides the only means available to a laboratory to ensure that its performance is comparable to that of other laboratories.



For laboratories that are accredited, or that plan to seek accreditation, EQA participation is essential. ISO 15189 addresses EQA requirements for laboratories as follows.

- There is a requirement that the laboratory participate in interlaboratory comparisons.
- Where an established EQA scheme is not available, an alternate EQA mechanism will have to be considered for interlaboratory comparison such as exchange of samples with other laboratories.
- The laboratory management shall monitor the results of EQA and participate in the implementation of corrective actions.

Management process



When participating in EQA programs, the laboratory needs to develop a process for the management of the process. A primary objective is to assure that all EQA samples are treated in the same manner as other samples tested.

Procedures should be developed.



- Handling of samples—These will need to be logged, processed properly, and stored as needed for future use.
- Analyses of samples—Consider whether EQA samples can be tested so that staff do not recognize them as different from patient samples—blinded testing.
- Appropriate record keeping—Records of all EQA testing reporting should be maintained over a period of time, so that performance improvement can be measured.



- Investigation of any deficiencies—For any challenges where performance is not acceptable.
- Taking corrective action when performance is not acceptable—The purpose of EQA is to allow for detection of problems in the laboratory, and to, therefore, provide an opportunity for improvement.
- Communication of outcomes to all laboratory staff and to management.

EQA performance problems



If the laboratory performs poorly on EQA, the problems may lie anywhere along the path of workflow. All aspects of the process will need to be checked. Some examples of problems that may be identified include the following.



Pre-examination



- The sample may have been compromised during preparation, shipping, or after receipt in the laboratory by improper storage or handling.
- The sample may have been processed or labeled improperly in the laboratory.

Examination



- The EQA challenge materials may exhibit a matrix effect in the examination system used by the participating laboratory.
- Possible sources of analytical problems include reagents, instruments, test methods, calibrations, and calculations. Analytical problems should be investigated to determine whether error is random or systemic.
- Competency of staff will need to be considered and evaluated.

Post-examination



- The report format can be confusing.
- Interpretation of results can be incorrect.
- Clerical or transcription errors can be sources of error. Incorrect data captured by the EQA provider is another possible source of error.



Summary



EQA is a system for objectively checking the laboratory's performance using an external agency or facility. All laboratories should participate in an EQA process for all tests performed, whenever possible. Accredited laboratories are required to participate in EQA.





There are several methods for conducting EQA; traditional proficiency testing is available for many tests, is cost-effective, and provides useful information. When proficiency testing is not practical or does not provide enough information, other methods should be employed.



There must be no difference in the treatment of a proficiency testing sample and a patient sample. The normal testing methods must be followed and the procedure must involve personnel who routinely perform the testing.

Key messages



- As EQA uses valuable resources, the laboratory should make the best use possible of its participation in EQA.
- EQA should not be punitive. It should be viewed as educational and used as a tool to help direct improvement efforts in the laboratory.
- EQA is one of the critical elements of a laboratory quality management system.



