

Function	Testing Personnel	Test Site Management	POCT Laboratory (Director and/or POCT Personnel as applicable)	Lab Advisory Committee
New test/ procedure	N/A	Initiate phone call or email to POCT Director. Submit application for new test/method to the POCT Director for evaluation and approval.	Review application for new test/method. Discuss options with test site management. Make decision based on objective criterion in conjunction with the TSM. Submit completed application to LAC.	As necessary resolve disputes, reviews application and supporting scientific evidence, approves /disapproves implementation of tests.
Standard Operating Procedures (SOP)	Provide comments and input to written SOPs through Laboratory and Test Site Management.	Work together with Laboratory to write working documents in approved format. Ensure testing personnel are aware of content.	Work together with Test Site Management to write working documents in approved format. The POCT Director is responsible for approving POCT policies and procedures.	Provide input as necessary.
Instrument Maintenance	Perform routine daily maintenance, troubleshoot basic problems and document according to SOP.	Hold Testing personnel accountable to perform and document maintenance. When appropriate submit periodic reports to the Laboratory.	Troubleshoot problems, manage repairs and document as necessary. Review maintenance logs for compliance, report noncompliance to Test Site Management.	When appropriate resolve issues of noncompliance.
Quality Control (QC)	Perform routine daily QC and document results and appropriate actions.	Hold testing personnel accountable to perform and document QC. Review QC.	Review documentation, report deviations to Test Site Management and Nurse Managers.	As necessary review summary reports and recommend policy changes. Has authority to withdraw testing from areas that continue to be non-compliant.
Proficiency Testing (PT)	Where applicable, perform PT in the same manner as patient sample.	Where applicable, submit PT results to the laboratory. Review the summary and work with the Laboratory to take corrective actions when necessary.	Maintain documentation for regulatory compliance. Provide feedback as necessary to TSM and recommend corrective actions. Provide summary report to LAC.	As necessary review summary reports and recommend policy changes. Has authority to withdraw testing from areas that continue to fail PT.
Training, Competency Assessment	Successfully complete training and competency assessments.	Work with Laboratory to develop training and competency assessment tools. Provide documentation to lab of individuals authorized to perform specific tests. Maintain a current list of approved operators.	Work with TSM to develop training and competency assessment tools. Maintain documentation using the data management system of individuals authorized to perform glucose monitoring and moderate complexity tests. Provide summary report to TSM and LAC as appropriate.	When appropriate review summary reports and make recommendations when necessary to maintain compliance.
Reporting & Test Record	Report test results as per SOP. For results not interfaced to electronic medical record, manually enter test results into patient's medical record.		Review result reporting for compliance with SOP. Provide summary report of problems to TSM and LAC.	When appropriate review summary reports and make recommendations when necessary to maintain compliance.
Quality Improvement	Identify indicators, collect data and monitor for changes.	Review summary reports and take corrective action as indicated.	Link information across multiple test sites. POCT Director reviews the information for trends and problems. The Director will interact with other departments as indicated.	As appropriate discuss summary from POCT Director and make recommendations to Administration.