IDAPA 16 - IDAHO DEPARTMENT OF HEALTH AND WELFARE

Division of Public Health - Bureau of Laboratories

16.02.06 - Quality Assurance for Idaho Clinical Laboratories

Who does this rule apply to?

All laboratories that perform tests on material derived from the human body, hospitals, Public Health Districts, medical professionals and practices, and health care stakeholders.

What is the purpose of this rule?

These rules protect the public and individual health by requiring that all Idaho clinical laboratories develop satisfactory quality assurance programs that meet minimal standards approved by the Board.

What is the legal authority for the agency to promulgate this rule?

This rule implements the following statute passed by the Idaho Legislature:

Public Assistance and Welfare -

• Section 56-1003, Idaho Code – Department of Health and Welfare: Powers and Duties of the Director

Where can I find information on Administrative Appeals?

Administrative appeals and contested cases are governed by the provisions of IDAPA 16.05.03, "Contested Case Proceedings and Declaratory Rulings."

How do I request public records?

Unless exempted, all public records are subject to disclosure by the Department that will comply with Title 74, Chapter 1, Idaho Code, upon requests. Confidential information may be restricted by state or federal law, federal regulation, and IDAPA 16.05.01, "Use and Disclosure of Department Records."

Who do I contact for more information on this rule?

Idaho Department of Health and Welfare Bureau of Laboratories 2220 Old Penitentiary Road Boise, ID 83712-8299

P.O. Box 83720 Boise, ID 83720-0036 Phone: (208) 334-2235 Fax: (208) 334-4765

Email: statelab@dhw.idaho.gov Webpage: https://statelab.idaho.gov

Table of Contents

16.02.06 – Quality Assurance for Idaho Clinical Laboratories			
	000. Legal Authority.	3	
	001. Title And Scope.		
	002 009. (Reserved)		
	010. Definitions.		
	011 099. (Reserved)		
	100. Registration Requirements For Clinical Laboratories.		
	101 109. (Reserved)		
	110. Exclusions.		
	111 119. (Reserved)		
	120. Department Inspections Of Clinical Laboratories.	4	
	121 129. (Reserved)		
	130. General Requirements For Clinical Laboratories.		
	131 149. (Reserved)		
	150. Personnel Requirements For Clinical Laboratories		
	151 199. (Reserved)		
	200. Proficiency Testing Of Clinical Laboratories.	5	
	201 209. (Reserved)		
	210. Quality Control Program Requirements For Clinical Laboratories	5	
	211 219. (Reserved)	6	
	220. Department Approval Of Clinical Laboratories	6	
	221 229. (Reserved)	6	
	230. Department Revocation Of Approval.		
	231 239. (Reserved)	6	
	240. Revocation Procedure.	6	
	241 249. (Reserved)		
	250. Renewal Of Approval Of Disapproved Test Or Tests.	6	
	251 269. (Reserved)	7	
	270. List Of Approved Laboratories.	7	
	271 299. (Reserved)		
	300. Penalty For Failure To Register Or Operation Of A Non-Approved		
	Clinical Laboratory.	7	

301. -- 999. (Reserved)

16.02.06 - QUALITY ASSURANCE FOR IDAHO CLINICAL LABORATORIES

000. LEGAL AUTHORITY.

Under Section 56-1003, Idaho Code, the Idaho Legislature has delegated to the Board of Health and Welfare the authority to set standards for laboratories in the state of Idaho. (7-1-21)T

001. TITLE AND SCOPE.

- **01. Title**. These rules are titled IDAPA 16.02.06, "Quality Assurance for Idaho Clinical Laboratories." (7-1-21)T
- **02. Scope**. These rules protect the public and individual health by requiring that all Idaho clinical laboratories develop satisfactory quality assurance programs that meet minimal standards approved by the Board. (7-1-21)T

002. -- 009. (RESERVED)

010. **DEFINITIONS.**

For the purposes of these rules, the following terms apply:

(7-1-21)T

01. Board. The Idaho Board of Health and Welfare.

(7-1-21)T

O2. Department. The Idaho Department of Health and Welfare.

(7-1-21)T

O3. Director. The Director of the Idaho Department of Health and Welfare, or their designee.

(7-1-21)T

- **04. Laboratory or Clinical Laboratory**. A facility for the biological, microbiological, serological, chemical, immunohematological, hematological, biophysical, cytological, pathological, or other examinations of material derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of any disease, or the impairment or assessment of human health. (7-1-21)T
 - **05. Laboratory Director.** The person under whose supervision the laboratory is operating. (7-1-21)T
 - **06. Pathologist**. A physician who is:

(7-1-21)T

- a. Licensed by the Idaho State Board of Medicine in accordance with IDAPA 24.33.01, "Rules of the Board of Medicine for the Licensure to Practice Medicine and Surgery and Osteopathic Medicine and Surgery in Idaho"; and (7-1-21)T
 - **b.** Board certified by the American Board of Anatomic and Clinical Pathology. (7-1-21)T
- **07. Proficiency Testing.** Evaluation of a laboratory's ability to perform laboratory procedures within acceptable limits of accuracy through analysis of unknown specimens distributed at periodic intervals. (7-1-21)T
- **08. Quality Control.** A day-to-day analysis of reference materials to ensure reproducibility and accuracy of laboratory results, and also includes an acceptable system to assure proper functioning of instruments, equipment and reagents. (7-1-21)T
- **09. Reviewer**. An employee or other designated representative of the Department's Idaho Bureau of Laboratories, who is knowledgeable and experienced in clinical laboratory methods and procedures. (7-1-21)T

011. -- 099. (RESERVED)

100. REGISTRATION REQUIREMENTS FOR CLINICAL LABORATORIES.

01. Registration Timeframes.

(7-1-21)T

- **a.** Every person responsible for the operation of a laboratory that performs tests on material derived from the human body must register such facility with the Department within thirty (30) days after first accepting specimens for testing. (7-1-21)T
 - **b.** Existing laboratories must submit a completed laboratory registration form every two (2) years and

IDAHO ADMINISTRATIVE CODE Department of Health and Welfare

IDAPA 16.02.06 Quality Assurance for Idaho Clinical Laboratories

indicate any changes in laboratory operations.

(7-1-21)T

- **Registration Form.** Each laboratory must submit its registration information on the Department-approved form. These forms are available upon request from the Department. Each completed registration form must include the following information: (7-1-21)T
 - **a.** Name and location of the laboratory;

(7-1-21)T

b. Name of the laboratory director;

(7-1-21)T

c. Types of laboratory tests performed in the laboratory; and

(7-1-21)T

d. Other information requested by the Department that it deems necessary to evaluate the performance of the laboratory. (7-1-21)T

101. -- 109. (RESERVED)

110. EXCLUSIONS.

- **01.** Other Certifying Agencies. Laboratories will be excluded from compliance with these rules (except Sections 100 and 200) upon submission of evidence of certification from one (1) of the following agencies: (7-1-21)T
- a. Centers for Medicare and Medicaid Services (CMS), Clinical Laboratory Improvement Amendment (CLIA) certification program (http://www.cms.gov/CLIA/01 Overview.asp); (7-1-21)T
 - **b.** College of American Pathologists;

(7-1-21)T

- **c.** Agencies approved by CMS as accreditation organizations. To review the current list of CMS-approved accreditation organizations go to, https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Downloads/AOList.pdf; (7-1-21)T
- **d.** Laboratories located in hospitals approved by the Joint Commission (http://www.jointcommission.org/); and (7-1-21)T
 - **e.** Other certification programs approved by the Department.

(7-1-21)T

- **02. Facilities and Laboratories**. The following laboratories and facilities are also excluded from compliance with this chapter: (7-1-21)T
- **a.** Laboratories operated for teaching or research purposes only, provided tests results are not used for diagnosis or treatment; (7-1-21)T
 - **b.** Prosthetic dental laboratories; and

(7-1-21)T

c. Facilities performing skin testing solely for detection of allergies and sensitivities.

(7-1-21)T

111. -- 119. (RESERVED)

120. DEPARTMENT INSPECTIONS OF CLINICAL LABORATORIES.

A qualified representative of the Department is authorized to inspect the premises and operations of all approved laboratories for the purpose of determining the adequacy of the quality control program and supervision of each laboratory.

(7-1-21)T

121. -- 129. (RESERVED)

130. GENERAL REQUIREMENTS FOR CLINICAL LABORATORIES.

Section 110 Page 4 IAC Archive 2020 C2

01. Laboratory Facilities. Each laboratory must have adequate space, equipment, and supplies to perform the services offered, with accuracy, precision, and safety. (7-1-21)T

02. Records. (7-1-21)T

- a. Laboratory records must identify the person responsible for performing the procedure. (7-1-21)T
- **b.** Each laboratory must maintain a suitable record of each test result for a period of at least two (2) years. Reports of tests must be filed in a manner that permits ready identification and accessibility. (7-1-21)T
- **c.** Laboratory records and reports must identify specimens referred to other laboratories and must identify the reference laboratory testing such referred specimens. (7-1-21)T

131. -- 149. (RESERVED)

150. PERSONNEL REQUIREMENTS FOR CLINICAL LABORATORIES.

The laboratory director must ensure that the staff of the laboratory:

(7-1-21)T

- **01. Appropriate Education, Experience, and Training.** Have appropriate education, experience, and training to perform and report laboratory tests promptly and proficiently; (7-1-21)T
- **02.** Sufficient in Number for the Scope and Complexity. Are sufficient in number for the scope and complexity of the services provided; (7-1-21)T
- **03. In-service Training**. Receive in-service training appropriate to the type and complexity of the laboratory services offered; and (7-1-21)T
- **04. Procedures and Tests that are Outside the Scope of Training**. Do not perform procedures and tests that are outside the scope of training of the laboratory personnel. (7-1-21)T

151. -- 199. (RESERVED)

200. PROFICIENCY TESTING OF CLINICAL LABORATORIES.

- **O1. Scope**. All laboratories must subscribe to, and satisfactorily participate in, a proficiency testing program that has been approved by the Department. (7-1-21)T
- **Results to the Bureau of Laboratories.** The laboratory director must furnish the Laboratory Improvement Section with copies of all proficiency testing results within thirty (30) days of receipt or make provisions for a duplicate of the results to be sent by the testing service directly to the Department. (7-1-21)T

201. -- 209. (RESERVED)

210. QUALITY CONTROL PROGRAM REQUIREMENTS FOR CLINICAL LABORATORIES.

- **01. Establishment of Quality Control Program**. To ensure reliability of day-to-day results, each laboratory must establish a quality control program compatible with regional and statewide practices. (7-1-21)T
 - **O2. Program Scope.** An acceptable quality control program must include the following: (7-1-21)T
- **a.** An effective preventive maintenance program that ensures proper functioning of all instruments and equipment; (7-1-21)T
 - **b.** Routine testing of quality control materials along with patient specimens; (7-1-21)T
 - c. Quality control checks on reagents and media utilized in the performance of tests; (7-1-21)T

Section 150 Page 5 IAC Archive 2020 C2

d. Maintenance of quality control records that will enable determination of reliability of all procedures performed. (7-1-21)T

211. -- 219. (RESERVED)

220. DEPARTMENT APPROVAL OF CLINICAL LABORATORIES.

The Department will approve clinical laboratories for performance of tests on material from the human body if the laboratory meets the minimum standards specified in these regulations. (7-1-21)T

221. -- 229. (RESERVED)

230. DEPARTMENT REVOCATION OF APPROVAL.

The Department may revoke approval, either in total or in part, for the following reasons:

(7-1-21)T

- **01. Failure to Participate in Proficiency Testing**. The approved laboratory fails to participate in a proficiency testing program as outlined in Section 200 of these rules. (7-1-21)T
- **O2. Failure to Participate in Quality Control**. The approved laboratory fails to implement a quality control program as outlined in Section 210 of these rules. (7-1-21)T
- **03.** Failure to Obtain Satisfactory Results. The Department, through the quality review process, determines that the approved laboratory has failed to obtain satisfactory results on two (2) consecutive or on two (2) out of three (3) consecutive sets of proficiency test program specimens in one (1) or more testing categories.

(7-1-21)T

04. Failure to Submit Documentation. Failure to submit documentation of corrective action as indicated in Subsection 240.02 of these rules. (7-1-21)T

231. -- 239. (RESERVED)

240. REVOCATION PROCEDURE.

- **01.** Unacceptable Results. Laboratories that fail to obtain passing results on two (2) consecutive proficiency testing events, or two (2) out of three (3) events, will be required to submit documentation of corrective action within fifteen (15) working days after receipt of the notification of the failures. Evaluation of proficiency testing results may overlap from one year to the next. (7-1-21)T
- **02. Corrective Action.** Upon receipt of documentation of corrective action, a reviewer will determine the adequacy of the action taken. If, in the opinion of the reviewer, the corrective action is not adequate, the laboratory will be required to submit to an on-site inspection that may include on-site testing of unknown samples.

 (7-1-21)T
- **03. On-Site Inspection**. If the results of the on-site inspection indicate that the laboratory's performance is unacceptable in one (1) or more testing categories, the approval to perform the test(s) in question will be revoked. (7-1-21)T
- **04. Satisfactory Performance**. The laboratory will continue to be approved for performance of all test procedures for which it has demonstrated satisfactory performance. (7-1-21)T
- **Other Deficiencies**. Failure to comply with other provisions of these rules may invoke revocation procedures. (7-1-21)T

241. -- 249. (RESERVED)

250. RENEWAL OF APPROVAL OF DISAPPROVED TEST OR TESTS.

Section 220 Page 6 IAC Archive 2020 C2

01. Renewal Granted.

(7-1-21)T

- **a.** A laboratory that has lost approval to perform certain tests for reasons outlined in Section 240 of these rules may gain reapproval by documenting corrective action taken, and by requesting the Department review the unacceptable performance and the corrective action taken. (7-1-21)T
- **b.** Within ten (10) days after completion of this review, the reviewer will submit their report to the Chief of the Bureau of Laboratories. (7-1-21)T
- **c.** Upon determination that corrections leading to satisfactory and acceptable performance have been made, the Chief of the Bureau of Laboratories may reinstate approval. (7-1-21)T
- **Renewal Denied.** If the Chief of the Bureau of Laboratories does not grant reapproval of the laboratory, they will provide the laboratory supervisor with written notice of actions to be taken to correct deficiencies. The laboratory supervisor may request a new review at any time after thirty (30) days from the date of last review. The laboratory supervisor may also file a written appeal in accordance with IDAPA 16.05.03, "Contested Case Proceedings and Declaratory Rulings," Section 400.

 (7-1-21)T

251. -- 269. (RESERVED)

270. LIST OF APPROVED LABORATORIES.

The Department will maintain a list of laboratories approved in accordance with this chapter. This list must include the name and address of each approved laboratory, and the name of the person directing the laboratory. (7-1-21)T

271. -- 299. (RESERVED)

300. PENALTY FOR FAILURE TO REGISTER OR OPERATION OF A NON-APPROVED CLINICAL LABORATORY.

Failure to register a clinical laboratory, operation of a non-approved clinical laboratory, or performance of unapproved testing constitutes a violation of these rules. Any violation of these rules constitutes a misdemeanor under Section 56-1008, Idaho Code. (7-1-21)T

301. -- 999. (RESERVED)

Subject Index

Definitions 3 Board 3 Department 3 Director 3 Laboratory Director 3 Laboratory or Clinical Laboratory 3 Pathologist 3 Proficiency Testing 3 Quality Control 3 Reviewer 3 Department Approval Of Clinical Laboratories 6 Department Inspections Of Clinical Laboratories 4 Department Revocation Of Approval 6 Failure to Obtain Satisfactory Results 6 Failure to Participate in Proficiency Testing 6 Failure to Participate in Quality Control 6	Results to the Bureau of Laboratories 5 Scope 5 Q Quality Control Program Requirements For Clinical Laboratories 5 Establishment of Quality Control Program 5 Program Scope 5 R Registration Requirements For Clinical Laboratories 3 Registration Form 4 Registration Timeframes 3 Renewal Of Approval Of Disapproved Test Or Tests 6 Renewal Denied 7 Renewal Granted 7 Revocation Procedure 6 Corrective Action 6 On-Site Inspection 6 Other Deficiencies 6 Satisfactory Performance 6
Failure to Submit Documentation 6	Unacceptable Results 6
Exclusions 4 Facilities & Laboratories 4	Title & Scope 3
Other Certifying Agencies 4	
General Requirements For Clinical Laboratories 4 Laboratory Facilities 5 Records 5	
L Legal Authority 3 List Of Approved Laboratories 7	
P Penalty For Failure To Register Or Operation Of A Non-Approved Clinical Laboratory 7 Personnel Requirements For Clinical Laboratories 5 Appropriate Education.	

Experience, & Training 5
In-service Training 5
Procedures & Tests that are
Outside the Scope of

Training 5
Sufficient in Number for the Scope

and Complexity 5
Proficiency Testing Of Clinical

Laboratories 5