



SELF-ASSESSMENT GUIDE

FUNDAMENTAL STANDARDS FOR BLOOD COLLECTIONS AND TRANSFUSION

PURPOSE

To determine if your organization's practices are substantially in conformance with the current edition of AABB Fundamental Standards for Blood Collection and Transfusion

REQUIRED RESOURCES

To complete the self-assessment process, you will need the following:

- AABB Fundamental Standards for Blood Collection and Transfusion
- Fundamental Standards Assessment Tool

TIPS FOR SUCCESS

The AABB Quality Certificate Program recognizes that there are many ways to meet the requirements of a standard. Thus, it is expected that what constitutes acceptable practice will vary from facility to facility, particularly among facilities that differ in size.

Be honest in your answers, indicating what your laboratory is currently doing, not what you have recently learned. Involve your staff in the Self-Assessment process. You can create challenges and team-based activities to identify and address any gaps in your processes. Try using this Self-Assessment module as a part of new employee orientation. This can be a great introduction to your lab's quality management program.

Relax

Results will be reviewed and evaluated by AABB staff who will engage in the process with you as your partner in performance improvement and to help you to understand the standards



SELF-ASSESSMENT GUIDE

FUNDAMENTAL STANDARDS FOR BLOOD COLLECTIONS AND TRANSFUSION

PERFORMING THE SELF-ASSESSMENT

Review and understand the Sample Assessment Questions on the assessment tool(s). These questions should be used as a guide to help the reader understand the intent of the Standard.

Based on the current practices of your facility, evaluate your facility's conformance with each Standard and determine if changes need to be made in order to come into compliance.

DOCUMENTING YOUR RESPONSES

Fill in the area labeled 'Evidence of Compliance' for each standard on as follows:

- **SOP** – list the applicable policies, processes, and/or procedures
- **Current Practice** – If your facility is currently in conformance with the standard, give evidence of conformance by providing a brief narrative of how the facility meets the standard.
- **Corrective Action Plan** – If your facility is not currently in conformance with the standard, describe the changes your facility plans to put in place in order to meet the standard for which the nonconformance was identified.

WHAT TO SUBMIT

The completed self-assessment is to be submitted within 12 weeks of the date of application acceptance and payment following the attached schedule A. The **completed** self-assessment documents which should include the following:

DOCUMENT	HOW TO SUBMIT
Completed Assessment Tool	Email
Organizational Chart	same
Master List of Policies, Processes, Procedures, Labels and Forms (i.e. list of each document name, version number, effective date, locations if >1)	same
Quality Plan Overview	same
Medical Director information: <ul style="list-style-type: none"> • Current CV (as related to the area(s) for which the facility is seeking accreditation) 	same