

A	
Accreditation:	Certification by a duly recognized body of the facilities, capability, objectivity, competence and integrity of an agency, service, or operational group or individual to provide the specific service or operation needed.
Accuracy:	The characteristic of a measurement that tells how close an observed value is to a true value.
Affiliate:	Individuals who are not employed by the organization but perform specific tasks at or for the organization, including appointed professionals (e.g., physicians/midwives/dentist), students, volunteers, researchers, contractors, or contractor employees who may be members of a third-party contract or under direct contract to the organization, and individuals working at the organization, but funded through an external source
Archiving:	Retention of records, SOP's or other documents that are complete or no longer in use. Archived documents and records must be stored and readily retrievable as needed.
Assessment:	A systematic process of collecting and analyzing data to determine the current, historical or projected status of an organization
Audit:	The inspection and examination of a process or quality system to ensure compliance to requirements. An audit can apply to an entire organization or may be specific to a function, process or production step.
Author:	Within the LLSG Document Management System , an author is an individual that writes documents.
B	
Benchmarking:	An improvement process in which a company measures its performance against that of best in class companies, determines how those companies achieved their performance levels and uses the information to improve its own performance. The subjects that can be benchmarked include strategies, operations, processes and procedures.
Best practice:	A superior method or innovative practice that contributes to the improved performance of an organization, usually recognized as "best" by other peer organizations.
Brainstorming:	A technique teams use to generate ideas on a particular subject. Each person in the team is asked to think creatively and write down as many ideas as possible. The ideas are not discussed or reviewed until after the brainstorming session.
C	
Cause and effect diagram:	A tool for analyzing process dispersion. It is also referred to as the "Ishikawa diagram," because Kaoru Ishikawa developed it, and the "fishbone diagram," because the complete diagram resembles a fish skeleton. The diagram illustrates the main causes and subcauses leading to an effect (symptom).
Cause:	An identified reason for the presence of a defect or problem.
Certification:	The result of meeting the established criteria set by an accrediting or certificate granting organization.
Change Control:	A formal means to make changes to documents currently in the document management system. This process ensures that only approved current documents are available for use and that all copies of the document reflect any changes.
Chart:	A tool for organizing, summarizing and depicting data in graphic form.
Check Sheet:	A structured form that makes it easy to gather data based on simple observations in order to detect patterns.
Checklist:	A tool used to ensure all important steps or actions in an operation have been taken. Checklists contain items important or relevant to an issue or situation.
Code of conduct:	Expectations of behavior mutually agreed on by a team.
Competence:	Demonstrated ability to apply knowledge and skills
Compliance:	The state of an organization that meets prescribed specifications, contract terms, regulations or standards.
Conflict resolution:	The management of a conflict situation to arrive at a resolution satisfactory to all parties.
Conformance:	An affirmative indication or judgment that a product or service has met the requirements of a relevant specification, contract or regulation.
Consensus:	A state in which all the members of a group support an action or decision, even if some of them don't fully agree with it.
Continuous improvement (CI):	Sometimes called continual improvement. The ongoing improvement of products, services or processes through incremental and breakthrough improvements.

Continuous quality improvement (CQI):	A philosophy and attitude for analyzing capabilities and processes and improving them repeatedly to achieve the objective of customer satisfaction.
Contributor:	Within the LLSG Document Management System, a contributor is an individual that enters documents into the Stellant ICL system for the purposes of archiving the documents.
Control chart:	A chart with upper and lower control limits on which values of some statistical measure for a series of samples or subgroups are plotted. The chart frequently shows a central line to help detect a trend of plotted values toward either control limit.
Corrective action:	The implementation of solutions resulting in the reduction or elimination of an identified problem.
Critical processes:	Processes that present serious potential dangers to human life, health and the environment or that risk the loss of very large sums of money or customers.
Critical laboratory values	A value representing a pathophysiological state at such variance to normal as to be potentially life threatening or which requires immediate medical attention.
Culture, organizational:	A common set of values, beliefs, attitudes, perceptions and accepted behaviors shared by individuals within an organization.
Current State Analysis:	Also known as S.W.O.T. (see S.W.O.T.)
Customer satisfaction (CS):	The result of delivering a product or service that meets customer requirements.
Customer:	Anyone who is impacted by an organization's processes, products, and/or services. Customers are typically identified as internal or external.
D	
Data:	A set of collected facts.
Discipline:	A defined subject specific designation within the program of Pathology & Laboratory Medicine e.g. Hematology
Discordant:	Disagreeing; not harmonious
Document Control:	A system to regulate the handling and management of documents such as policies, processes, procedures, forms and records associated with a Quality Management System
Document:	A document is an output of manual or electronic documentation of data or information used for documenting events, processes, procedures or activities and utilized as a testimony to verify performance.
E	
Education:	The knowledge and skills employees need to learn to perform a future job or accept increased job responsibilities.
Editor:	Within the LLSG Document Management System , an editor is an individual that formats and submits documents for publication.
Effect:	What results after an action has been taken; the expected or predicted impact when an action is to be taken or is proposed.
Effectiveness:	The state of having produced a decided upon or desired effect.
Efficiency:	The ratio of the output to the total input in a process.
Efficient:	A term describing a process that operates effectively while consuming the minimum amount of resources (such as labor and time).
Employee Empowerment:	The process of shifting knowledge, responsibility, and authority to persons who actually operate business processes for the benefit of the organization.
End Users:	Customers who purchase products/services for their own use or receive products/services as gifts.
Ethics:	The practice of applying a code of conduct based on moral principles to day-to-day actions to balance what is fair to individuals or organizations and what is right for society.
External customer:	A person or organization that receives a product, service or information but is not part of the organization supplying it. (See also "internal customer.")
External Quality Assessment (EQA):	Testing and assessment by an external body to ensure production of timely, accurate and clinically relevant results.
F	
Facilitator:	A specifically trained person who functions as a teacher, coach and moderator for a group, team or organization.

Feedback:	Communication from customers about how delivered products or services compare with customer expectations.
Fishbone diagram:	See "cause and effect diagram."
Five whys:	A technique for discovering the root causes of a problem and showing the relationship of causes by repeatedly asking the question, "Why?"
Flowchart:	A graphical representation of the steps in a process. Flowcharts are drawn to better understand processes. The flowchart is one of the "seven tools of quality." (also known as process map)
Focus group:	A group, usually of 8 to 10 persons, that is invited to discuss an existing or planned product, service or process.
Form:	A paper or electronic document on which information or results are captured
G	
Gap analysis:	The comparison of a current condition to the desired state.
Goal:	A broad statement describing a desired future condition or achievement without being specific about how much and when.
H	
Histogram:	A graphic summary of variation in a set of data. The pictorial nature of the histogram lets people see patterns that are difficult to detect in a simple table of numbers. The histogram is one of the "seven tools of quality."
I	
Improvement:	The positive effect of a process change effort.
Indicators:	Established measures used to determine how well an organization is meeting its customers' needs as well as other operational and financial performance expectations.
Inputs:	The products, services, material and so forth obtained from suppliers and used to produce the outputs delivered to customers.
Internal Audit:	(also known as first party audit) are performed within an organization and conducted by auditors who are employees of the organization being audited.
Internal customer:	The recipient (person or department) within an organization of another person's or department's output (product, service or information) (see also "external customer").
International	Organization for Standardization, known as ISO: A network of national standards institutes from 140 countries working in partnership with international organizations, governments, industry, business and consumer representatives to develop and publish international standards. Acts as a bridge between public and private sectors
Ishikawa Diagram:	See "cause and effect" diagram
J	
Job Description:	A narrative explanation of the work, the work process, the work setting, and the organizational culture.
K	
L	
Laboratory Management:	Those persons who manage the activities of the laboratory, headed by the Program Leader, and are accountable to the owner/operator of the facility
Leader:	An individual who is recognized by others as a person they will follow
Leadership:	An essential part of a quality improvement effort. Organization leaders must establish a vision, communicate that vision to those in the organization and provide the tools and knowledge necessary to accomplish the vision.
M	
Management review:	A periodic meeting of management at which it reviews the status and effectiveness of the organization's quality management system.
Manager:	An individual charged with the responsibility for managing resources and processes.(see Quality Manager)
Master File:	Listing of all current and previous versions of a document. The master file serves as a historical record of a particular document from inception to the present.
Master Index:	Listing of all current document versions in use. The index is updated each time a document is added or changed.

Medical Leader:	Leader assigned to oversee the tactical direction for one of the specialized areas (disciplines) which make up the program (for Pathology & Laboratory Medicine, the Disciplines are: Autopsy Services, Cytology, Hematology, Biochemistry & Immunology, Microbiology, Molecular Pathology, Surgical Pathology, Pulmonary Function and Transplant Immunology).
Mission:	An organization's purpose.
N	
Native Document/File:	Within the LLSG Document Management System, a Native Document/File refers to the original document file type e.g. MS Word, MS Excel prior to converting to a Portable Document File (PDF)
NCCLS:	A global, voluntary organization that develops and disseminates consensus standards, guidelines and best practices.
Nonconformity:	The nonfulfillment of a specified requirement (see also "blemish," "defect" and "imperfection").
O	
Objective:	A specific statement of a desired short term condition or achievement; includes measurable end results to be accomplished by specific teams or individuals within time limits.
Occurrence:	Something that happens; an event, incident, error, accident. An occurrence can lead to adverse consequences in the delivery of test results or services.
Outputs:	Products, materials, services or information provided to customers (internal or external), from a process.
P	
Pareto chart:	A graphical tool for ranking causes from most significant to least significant.
PDCA cycle:	See "plan-do-check-act cycle."
Performance measure:	The metric against which a complete action is compared. (see Indicators)
Plan-Do-Check-Act:	A four step process for quality improvement.
Policy:	An overarching plan (direction) for achieving an organization's goals. Statement describing what is done and why.
Post Analytical Process:	Chronological steps or activities beginning when the analytical process and procedures end, including the release of results and issuing of reports
Pre Analytical Process:	Chronological steps or activities beginning with a test request and ending when the analytical processes and procedures start.
Precision:	The aspect of measurement that addresses repeatability or consistency when an identical item is measured several times.
Preventative action:	Action taken to remove or improve a process to prevent potential future occurrences of a nonconformance.
Problem solving:	The act of defining a problem; determining the cause of the problem; identifying, prioritizing and selecting alternatives for a solution; and implementing a solution.
Procedure:	Written work instructions that specified a way to carry out an activity or process.
Process improvement team:	A structured environment often made up of cross functional members who work together to improve a process or processes.
Process improvement:	The application of the plan-do-check-act (PDCA) philosophy to processes to produce positive improvement and better meet the needs and expectations of customers (see "plan-do-check-act cycle").
Process map:	A type of flowchart depicting the steps in a process, with identification of responsibility for each step and the key measures
Process:	A set of interrelated work activities characterized by a set of specific inputs and value added tasks that make up a procedure for a set of specific outputs.
Program Director:	An individual who serves as an administrative resource, providing tactical, strategic, business and financial planning to ensure that Laboratory Services run efficiently and effectively.
Program Leader:	Medical Leader assigned to oversee the strategic direction for a medical program (such as Pathology & Laboratory Medicine).
Publisher:	Within the LLSG Document Management System, a publisher is an individual that posts new or revised documents onto the LLSG web site or deletes obsolete documents from the LLSG web site.
Q	

Quality Assurance	All the planned and systematic activities implemented within the quality system that can be demonstrated to provide confidence a product or service will fulfill requirements for quality.
Quality audit:	A systematic, independent examination and review to determine whether quality activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve the objectives.
Quality Control	The Operational techniques and activities used to fulfill requirements for quality
Quality Manager:	An individual with delegated responsibility and authority to ensure compliance with the quality management system
Quality management (QM):	The application of a quality management system in managing a process to achieve maximum customer satisfaction at the lowest overall cost to the organization while continuing to improve the process.
Quality management system (QMS):	A formalized system that documents the structure, responsibilities and procedures required to achieve effective quality management.
Quality Manual:	Documentation describing the quality management system
Quality plan:	A document or set of documents that describe the standards, quality practices, resources and processes pertinent to a specific product, service or project.
Quality policy:	An organization's general statement of its beliefs about quality, how quality will come about and what is expected to result.
Quality System Essential (QSE):	Elements that form the basis for the Quality Management System; organization, personnel, equipment, purchasing and inventory, process control, documents and records, information management, occurrence management, assessment, process improvement, service and satisfaction, facilities and safety.
Quality:	In technical usage, quality can have two meanings: 1. the characteristics of a product or service that bear on its ability to satisfy stated or implied needs. 2. a product or service free of deficiencies.
R	
Record:	Document stating results achieved or providing evidence of activities performed
Referral laboratory:	External laboratory to which a sample is submitted for supplemental or confirmatory examination
Requirements:	The ability of an item to perform a required function under stated conditions for a stated period of time.
Root cause analysis:	A quality tool used to distinguish the source of defects or problems. It is a structured approach that focuses on the decisive or original cause of a problem or condition.
Root cause:	A factor that caused a nonconformance and should be permanently eliminated through process improvement.
S	
Section Head:	MD or PhD assigned to provide scientific or medical direction for the operational need of a laboratory specialty. A Section Head works in conjunction with the Technical Specialist or Technical Coordinator to provide leadership to their assigned area of specialty.
Specification:	A document that states the requirements to which a given product or service must conform.
Stakeholder:	Any individual, group or organization that will have a significant impact on or will be significantly impacted by the quality of the product or service an organization provides.
Standard Operating Procedure (SOP):	See procedure
Standard:	Principle of judgement. Authoritative document setting forth criteria for conformance.
Standards of Practice Guidelines:	Guidelines for doing something according to a prescribed standard
Strategic planning:	The process by which an organization envisions its future and develops strategies, goals, objectives and action plans to achieve that future.
Supplier:	A source of materials, service or information input provided to a process.
SWOT analysis:	Is a study used to identify a variety of elements that will help or hinder an organization in the environment in which it operates.
SWOT:	The acronym for strengths, weaknesses, opportunities and threats

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System:	A group of interdependent processes and people that together perform a common mission.
T	
Task:	A specific, definable activity to perform an assigned piece of work, often finished within a certain time.
Team:	A group of individuals organized to work together to accomplish a specific objective.
Technical Coordinator:	A technical based operational leader assigned to oversee the administrative responsibilities for the Core Laboratory. A Technical Coordinator works in conjunction with one or more Section Heads to provide leadership for their assigned areas of specialty.
Technical Specialist:	A technical and operational leader assigned to oversee the technical and administrative responsibilities of one or more specialized laboratories. In addition, to day-to-day supervision of these laboratory areas, a Technical Specialist serves as a technical support expert for these laboratory areas. A Technical Specialist works in conjunction with a Section Head to provide leadership to their assigned areas of specialty.
Training:	The knowledge and skills that employees need to learn in order to perform or improve their performance in their current jobs or tasks.
U	
V	
Validation:	The act of confirming a product or service meets the requirements for which it was intended.
Verification:	The act of determining whether products and services conform to specific requirements.
Vision:	An overarching statement of the way an organization wants to be; an ideal state of being at a future point.
W	
Workflow:	A way to describe the path of activities from input to output. Also known as the "path of workflow". Terms used in laboratory workflow include "pre analytical", "analytical" and "post analytical".
X	
Y	
Z	