

**LAB Dept MEETING – Huddles
Read Minutes and Acknowledge**

Date of Meeting: 6/30/2020

Attendees: Myrna Ocab, Lourdes Maniago, Quang Trinh, Dennis Burguillos, Tessa Strickland, Letty Fajardo, Mark Gomez, Juanita Fernandez, Mariela Mora, Sandy Burciaga, Patricia Chea, Marissa Calilung, Marie Rutledge

Topic		Action Item, responsible person, date due, or informational only
SAFETY TIP	<ul style="list-style-type: none"> • Comprehensive Workplace Strategy: Mission to create a workplace free from harm <ul style="list-style-type: none"> ✚ Leadership and Employee engagement ✚ Safety management systems ✚ Risk reduction ✚ Performance Management • Sharps container in MS3 are using the long opening and one room has sharps on the floor- Manager will check and round on the floor 	All Staff
KUDOS	<p>From Letty to Mariela on 6/26/2020:</p> <p>I want to appreciate the work that Mariela did this morning. She came at 0400 and by 0500 she was almost done with 3rd floor and finish OB.</p> <p>From Tessa, thank you to all who helped us last weekend. It was busy. We appreciate everybody's help.</p> <p>From Marissa, thank you Sandy for helping us cover last minute call offs and working long hours to cover the schedule gaps.</p>	All Staff
Pathology Specimens for L&D	<ul style="list-style-type: none"> • L&D needs our help <ul style="list-style-type: none"> ✚ For next wo weeks, ask L& D nurses if they put formalin in their Pathology specimens ✚ This is for nurse to get used to the process that they need to request lab to add formalin if needed. ✚ The originating department is still responsible for making sure that fixative and forms are 	Phlebotomist

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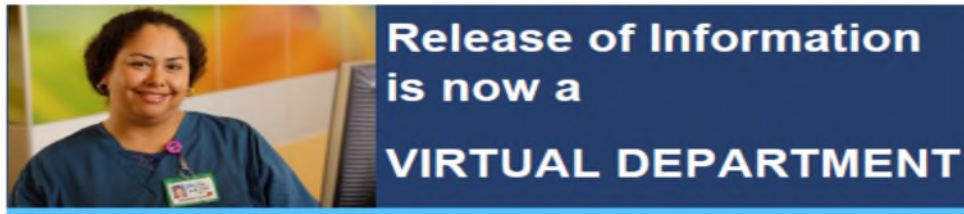
	complete. They are just asking for our support to help train their nurses	
100% N95 reprocessing	<ul style="list-style-type: none"> All staff who use N95 must return at the end of their shift. Goal is 100% reprocessing. Use the new log to indicate when you returned the N95 Bins will be picked up every Tuesday. ETA of return is about 48 hours. 	Phlebotomist
Phleb Policies and Procedures and Acknowledge	<ul style="list-style-type: none"> General Policies- due June 1 Phleb Policies- due July 1 	Phlebotomist
Release of Information	<ul style="list-style-type: none"> ROI has gone virtual See attached flyer. Information also available in Lab & MVMC Policies and Procedures. 	All Staff
Alternative media for Non-COVID Viral Testing	<ul style="list-style-type: none"> Technical bulletin 6/23 for alternative media for Non-COVID Viral Testing. See attached brochure. 	All Staff
Employee Health COVID Phone Line	Call Employee Health at 8-247-4356 or 951 602 4356 Open: M-F 8:00- 1215 and 1315-1630 If no answer: Leave a voice message and they will call back	All Staff
Supplies	<ul style="list-style-type: none"> When putting away supplies, please check all items properly (quantity, etc.) initial next to the supply being put away. Alert Theda or manager in real time as soon as possible for any discrepancy. Check for storage temperature and store appropriately. 	All Staff
COVID-19 + / PUI logs	<ul style="list-style-type: none"> Per Charlene Bruce, infection control nurse, the logs are no longer required. <i>"The updated KP learn about Covid mentioned that the logs is no longer required, and that is guidance we are currently following."</i> 	All Staff
	<ul style="list-style-type: none"> 	
	<ul style="list-style-type: none"> 	

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This concludes the Minutes of the 6/30/2020 Lab Staff Meeting.

Prepared by: Patricia Chea, Marissa G Calilung, Marie Rutledge Date: 6/30/2020

RELEASE OF INFORMATION DEPARTMENT



Effective **May 1, 2020**, the Release of Information (ROI) Department serving members in Riverside County will be a VIRTUAL Department.

For your convenience, we are providing you with online and email options to better serve you in addition to our telephone office hours. Feel free to contact us any of the following ways:

Online 

Contact us online by visiting kp.org/RequestRecords. This option is for Southern California active members only.

Email

Email us at RivROIU@kp.org. Please include your name and medical record with your request. For matters related to State Disability Insurance (SDI) claims, include the receipt number given to you by the Employment Development Dept. (EDD). Example: R1000000xxxxxx

Phone

Mon-Fri, 9 a.m. to 4:30 p.m.
951-353-4470

Closed 1st Thursday of the month, 1 p.m. to 4:30 p.m.

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For your convenience, we are providing you with email and online options to better serve you in addition to our telephone Call Center

KP.ORG/requestrecords
RIVROIU@kp.org
(951) 353-4470

Phone Hours: M-F 9:00 AM – 4:30 PM
Closed on the 1st Thursday of each month
from 1:00 PM – 4:30 PM
as well as all major holidays.



May 2020



State Disability Insurance (SDI) Claims

Step 1: File an initial claim for disability benefits online through the SDI website at www.edd.ca.gov

Click on SDI ONLINE

Click on FILE A NEW CLAIM, this is the application. Complete the application, click SUBMIT. Once you click "SUBMIT" the system will provide you with a Receipt Number that looks like this R1000000xxxxxx

Step 2: Contact the Release of Information (ROI) Department via kp.org/requestrecords, email (rivroi@kp.org), or by phone (951-353-4470) and provide your Form Receipt Number (R1000000xxxxxx), your Medical Record Number, along with the exact name you used to create your claim. Your claim will be processed electronically.

SDI Extension Claims

Contact the Release of Information (ROI) Department via kp.org/requestrecords, email (rivroi@kp.org), or by phone (951-353-4470) and provide your form Receipt Number (D1 number), Medical Record Number along with the exact name you used to create your claim. Your claim will be processed electronically.

SDI Note: All requests are processed in the order in which received, most requests are submitted to the State the same day. Once the medical certification has been provided to the State please allow 2-3 business days for them to process your request before checking on payment status with the State.

Paid Family Leave (PFL) Claims

Step 1: Please make sure that the patient and doctor have discussed the patient's need for a caregiver and the specifics of the need (time and duration as well as care being provided).

Step 2: File for paid family leave online through the SDI Website at www.edd.ca.gov

Step 3: Contact the Release of Information (ROI) department via kp.org/requestrecords, email (rivroi@kp.org), or by phone (951-353-4470) and provide your form Receipt Number (R1 number provided by SDI), the patient's Medical Record number along with a signed Authorization for Use of Disclosure of Patient Health Information form. This form is available on kp.org or by stopping by our office.

Supplemental/Private Insurance Requests

Attending Physician Statements (for example: Aflac® Insurance, Aetna Health Insurance, etc.) can be submitted directly to the ROI Department by email (rivroi@kp.org)

Family Medical Leave Act (FMLA) Requests

The Release of Information Department will complete the medical certification needed for your employer. Time certified is based on clinical need. You can request a FMLA medical certifications via kp.org/requestrecords, email (rivroi@kp.org), or by phone (951-353-4470). You will be asked to provide your medical record number, the diagnosis that you need the FMLA medical certification for, along with the critical job function you are unable to perform and if for caregiver the care to be provided. Please allow 7-10 business days for processing – certifications will be provided directly to the patient electronically.

Patient Access

Members may request copies of their own medical records at no cost via kp.org/requestrecords, email (rivroi@kp.org), or by phone (951-353-4470). Please allow 5 business days for processing – records will be provided electronically.

Continuity of Care

Kaiser Permanente will, at no cost, provide your medical records to another provider who is treating you. You may contact the ROI department via kp.org/requestrecords, email (rivroi@kp.org), or by phone (951-353-4470) to initiate your request. Please note in order to protect your privacy requests will ONLY be fulfilled electronically – we must have an email address where we can send your electronic medical records. Please allow 5 business days for processing.

Outside Medical Records

Kaiser Permanente Release of Information Department does not accept medical records and/or images from other facilities. If your Permanente Medicine provider determines that medical records are needed, you will need to request them directly from your previous provider. You should then bring them with you to your next scheduled appointment with your Permanente Medicine provider who will determine what, if any, outside medical records and/or images need to be scanned or uploaded into your Kaiser Permanente electronic medical record for continuity of care.

May 2020



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SCPMG Laboratory Care Delivery System – 06/23/20 – REVISED

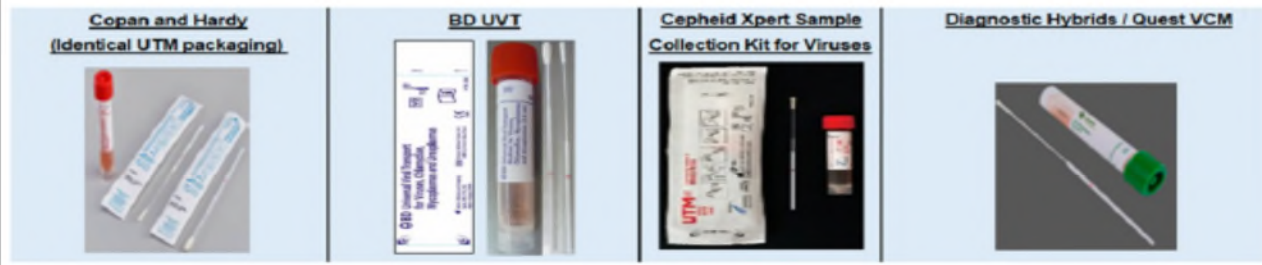
Technical Bulletin

Laboratory Care Delivery System

ALTERNATIVE VIRAL TRANSPORT MEDIA FOR NON-COVID VIRAL TESTING

The Laboratory Care Delivery System would like to clarify that several alternative viral transport media are acceptable for non-COVID viral testing (i.e., PCR and culture). Currently, providers are sending respiratory specimens in BD Universal Viral Transport (UVT) medium for IMMUNOCOMPROMISED RESPIRATORY PANEL [15 VIRUSES, 2 BACTERIA], MULTIPLEX PCR [252430] testing almost exclusively. However, Copan and Hardy UTM, Cepheid Xpert Sample Collection Kit for Viruses, and Diagnostic Hybrids / Quest VCM are equivalent products (see below) and may be substituted for BD UVT if the latter is unavailable. For appropriate viral culture specimens which require transport in UTM/UVT, the same alternative media may be used.

Note: For the IMMUNOCOMPROMISED RESPIRATORY PANEL [15 VIRUSES, 2 BACTERIA], MULTIPLEX PCR [252430] orderable, only mini-tip flocced nasopharyngeal swabs may be submitted for testing. Thicker (oropharyngeal) swabs submitted for this test will be rejected.



QUESTIONS?

- Client Service Center: 1-888-4LAB NFO, or tie line 8-397-7077
- Jonathan C. Gullett, MD; Physician Director of Microbiology, jonathan.c.gullett@kp.org
- Ken Van Horn, PhD, D(ABMM); Technical Director of Microbiology, ken.van-horn@kp.org

Technical Bulletins are archived on LABNET for your convenience.
<http://kpnet.kp.org:81/california/scpmg/labnet/index.htm>



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Comprehensive Workplace Safety Strategy

This new strategy builds on learnings to advance our mission to create a workplace free from harm. This strategy became effective October 1, 2016 .



Leadership and employee engagement: Foster a culture in which safety is fully integrated and becomes a shared responsibility. This section focuses on creating a safety culture, management leadership and commitment, and workforce involvement.

1. **Executive Leader Role:** The executive (medical center/regional) leadership team has a vision and implements a strategy and process for safety performance improvement and sustainability. (For example, accountabilities are established and funding is provided).
2. **Manager, Supervisor, Team Leader Role:** Managers know the high risk areas and tasks in their departments. They create and maintain a safe environment by having the right policies and procedures, systems, tools, equipment, action plans and training in place. They address unsafe conditions/behaviors in a timely manner.
3. **Safety Professional Role:** Workplace safety support staff, environmental health and safety professionals, etc. are resources to the owners of safety performance.
4. **Labor Leader Role:** Labor actively participates in the leadership of the comprehensive integrated approach to safety.
5. **Employee Engagement:** Everyone demonstrates responsibility to work safely, and to report unsafe conditions immediately. Effective engagement includes participation in activities (e.g. hazard identification and reporting, safety conversations, incident investigation/analysis, safety huddles, etc.)
6. **Safety Communication:** There are multidirectional communication processes that engage employees in talking about safety (e.g. huddles, unit based team work, rounding, safety conversations).

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Comprehensive Workplace Safety Strategy continued

Safety management systems: Set a framework of effective processes and procedures to ensure work tasks are completed safely. Safety processes are integrated (e.g. hazard reports and incident analysis connect to preventive actions). Action plans are utilized and are driven by meaningful data and information about hazards and risks. This section focuses on system management and communication, training, and workforce development.

1. **Job Hazard Analysis:** A process is used to systematically analyze job tasks for safety exposures and risk.
2. **Speak Up Culture:** Systems are in place so that anyone can stop the work when they perceive an immediate safety hazard/risk is present.
3. **Joint Labor and Management Safety Structure:** There is a labor and management safety structure to support injury prevention and risk reduction being done at the department or unit based team level.
4. **Incident Reporting and Analysis:** There is a documented process for reporting and analyzing incidents.
5. **Safety Training and Development:** Programs are in place to build safety skills among staff (training beyond compliance) to focus on hazard identification and mitigation.

Risk Reduction: Identify potential hazards and decrease the likelihood of an incident or severe injury or illness. This section focuses on hazard identification and focused risk reduction programs, with targeted programs to address ergonomics, safe patient handling and mobilization, slip, trip and fall management and prevention.

1. **Hazard Identification, Assessment and Risk Reduction:** A hazard identification and mitigation system is in place to reduce risk.
2. **Ergonomics:** Targeted ergonomic programs are in place across all areas with significant risk factors (e.g., computer work stations, material handling, diagnostic imaging, laboratory, etc.).
3. **Safe Patient Handling/Mobilization:** Safe patient handling/mobilization programs are in place to reposition, transfer, lift, and mobilize patients, including use of equipment.
4. **Slip, Trip, and Fall Prevention:** Effective practices for slip, trip and fall reduction are implemented and maintained (e.g. wet floor signs, mobile floor cleaning barriers, footwear, wet umbrella bags, mat or carpet replacement processes, clutter and cord management, etc.).

Performance measurement: Set achievable goals and use a mix of leading and lagging indicators to monitor safety performance. This section focuses on measurement of performance improvement.

1. **Performance Indicators:** High standards of performance, including timely leading indicators, are established, tracked, and reported on in accordance with the operating/strategy/business plan.