

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

Date of Meeting: 7/16/2020

Attendees: Juliet Garlejo, Raquel Lecaro, Lourdes Maniago, Mey Phiri, Yetunde Kosoko, Bill Craig, Letty Fajardo, Michelle Trammell, Mark Gomez, Juanita Fernandez, Mariela Mora, Sandy Burciaga, Patricia Chea, Marissa Calilung, Theda Bryant

Topic		Action Item, responsible person, date due, or informational only
SAFETY TIP	<ul style="list-style-type: none"> • Your safety is important <ul style="list-style-type: none"> ✚ Try your best to work around IV lines and other equipment that blocks your way ✚ Ask for help if needed ✚ Do not over reach. Its safer to follow ergonomics like adjusting patient bed to a comfortable position • Make sure that tubes are safely secured in the blue rack before sending. We want to prevent breakage and spill. 	All Staff
KUDOS	<p>Thank you for all your resilience and hard work. Please continue to stay home, wash hands, wear mask even when outside KP.</p> <p>Kudos to Erica from Mark for doing all the 0500 draws today, 7/16/2020.</p> <p>Kudos to Mariela from Mark for working fast today, 7/16/2020, makes work easier.</p>	All Staff
Schedule	<ul style="list-style-type: none"> ✓ Need CLS for 4 hours 1100-1500 ✓ Need Phlebs on multiple dates <ul style="list-style-type: none"> ✚ C and H shift ✓ Check the board, schedule, and your email for more information 	
PSP May 2020	See attached	All staff
Special Courier	<p>Pathology pick up</p> <ul style="list-style-type: none"> • Call T-force at 0100 for 0400 pick up • Call A-line if there is a problem with T-force <p>Holidays</p> <ul style="list-style-type: none"> • T-force for RMC • A-line for Chino 	All Staff

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	<p>A-line- extra Chino pick ups</p> <ul style="list-style-type: none"> • Send all COVIDs plus regional tests in one tote • No incubator at this time • 1000 and 1730 • No extra pick-ups on weekends yet per Anna 																										
<p>Communication Log for SPA and Phlebs</p>	<p>Commonly missed</p> <ol style="list-style-type: none"> 1. SPA form <ul style="list-style-type: none"> ✓ Printing of Quest and ARUP pending- you have to check if it was logged and transferred correctly. ✓ We continue to have missed Quest and ARUP 2. Phleb form <ul style="list-style-type: none"> ✓ Print pending and write an explanation for any missed draws ✓ Draws and processing guideline <div data-bbox="560 945 1120 1333" style="border: 1px dashed yellow; padding: 10px; margin: 10px auto; width: fit-content;"> <p align="center">Guideline for inpatient draws and processing of specimens starting December 15, 2018</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Start of draw/ processing of specimens</th> <th>Routine</th> <th>STAT</th> <th>Timing Critical</th> </tr> </thead> <tbody> <tr> <td>C shift</td> <td>0445</td> <td>≥0515-1245</td> <td>0515-1245</td> <td>0515-1245</td> </tr> <tr> <td>D shift</td> <td>1246</td> <td>1246-2045</td> <td>1245-2045</td> <td>1245-2045</td> </tr> <tr> <td>H1 shift</td> <td>2046</td> <td>2046-0445</td> <td>2046-0445</td> <td>2046-0445</td> </tr> <tr> <td>H2 shift</td> <td>2116</td> <td>2116-0514</td> <td>2116-0514</td> <td>2116-0514</td> </tr> </tbody> </table> <p><small>Note: this guideline is to help phlebs prioritize if you have too many things going on but it should not stop staff to continue working until the end of their shift.</small></p> </div> <p>Reminder, this is a guideline if you are busy and cannot finish your work. All of us are expected to be work ready and in your work area while on the clock.</p> <p>Taking breaks or staying in the break room at the start of your shift is not acceptable.</p>		Start of draw/ processing of specimens	Routine	STAT	Timing Critical	C shift	0445	≥0515-1245	0515-1245	0515-1245	D shift	1246	1246-2045	1245-2045	1245-2045	H1 shift	2046	2046-0445	2046-0445	2046-0445	H2 shift	2116	2116-0514	2116-0514	2116-0514	<p>Phlebotomist</p>
	Start of draw/ processing of specimens	Routine	STAT	Timing Critical																							
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<p>Phleb Policies and Procedures and Acknowledge</p>	<ul style="list-style-type: none"> • Due July 10 • Policies located in SPA area 	<p>Phlebotomist</p>																									
<p>New COVID-KP platform</p>	<ul style="list-style-type: none"> • See attached technical bulletin 	<p>All Staff</p>																									

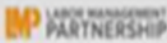

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DXC 600	<ul style="list-style-type: none"> Beckman recommendation- Always use Reserved Racks (R) when using sample cups or nests. It's better for the sample probes and can eliminate sample probe issues. 	CLS
COVID-19 + / PUI logs		All Staff
Data Accuracy Unit- for wrong patient resulting	<p>E.g Patient mislabeling, please make sure that DAU and UOR has been completed and the DAU department has been called information will be emailed shortly.</p>	CLS
Convalescent plasma	<p>Regarding Convalescent plasma there are some people confused so here is the information you need to go by:</p> <ul style="list-style-type: none"> Convalescent plasma expires 5 days from the time of thaw the policy has not been modified Life Stream will be sending us Convalescent plasma from donors that donated to save in case we get a patient with Convalescent orders (Notify me when you receive any Convalescent plasma with the blood type and number of units) Notify me whenever you receive an order for Convalescent plasma with the patients name, MRN, Blood type, and Patient 6 digit code (when I am on vacation please notify Patricia and Marissa with this information) 	CLS
BB temp charts	<p>Thank you Quang for notifying me.</p> <p>The BB fridge IR 61037 chart appears to be malfunctioning. It's been reading approximately -2C since last Friday, but the log book has been saying +2 to +3.5C.</p> <ul style="list-style-type: none"> 	CLS

This concludes the Minutes of the 7/16/2020 Lab Staff Meeting.

Prepared by: Patricia Chea, Marissa G Calilung, Marie Rutledge Date: 7/16/2020

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Performance Sharing Program and Variable Pay Program Goals			<input checked="" type="radio"/> Maximum target achieved <input type="radio"/> Minimum target achieved <input type="radio"/> Target not achieved
Riverside		Ambulatory - SCPMG	
		May 2020	
			
GOAL	YEAR TO DATE	GOAL STATUS	
GBT Adopt/Spread Projects			
Adopt/Spread Projects (10%)	Performance Year-to-Date	0.0%	<input type="radio"/>
	Minimum Target: 20% Maximum Target: 90%		
	2019 Year-End (Baseline): 97.7%		
Adopt Five Projects (varies%)	Performance Year-to-Date	0	<input type="radio"/>
(30% Alliance / 5% Coalition)	Target: Adopt Five (5) Projects and Show Improvement		
	2019 Year-End (Baseline): 5		
Attendance			
ALLIANCE ONLY	ALLIANCE ONLY		ALLIANCE ONLY
Last Minute Sick (20%)	Performance Year-to-Date	3.26	<input type="radio"/>
	Minimum Target: 3.01 - 4 days Maximum Target: 2.01 - 3 days Stretch Target: <2 days		
	2019 Year-End (Baseline): 3.58		
COALITION ONLY	COALITION ONLY		COALITION ONLY
Attendance Action Plan (10%)	Performance Year-to-Date	complete	<input checked="" type="radio"/>
	Target: Complete		
	2019 Year-End (Baseline): n/a		
2% Regional Reduction in All Absences (15%)	Performance Year-to-Date	0	<input type="radio"/>
	Target: 2% Reduction		
	2019 Year-End (Baseline): 1bd		
Ambulatory Quality			
Influenza Immunization (10%)	Performance Year-to-Date	52.7%	<input type="radio"/>
	Minimum Target: 50.0% Maximum Target: 55.0%		
	2019 Year-End (Baseline): 50.7%		
POE SOR Composite (10%)	Performance Year-to-Date	0.0%	<input type="radio"/>
<small>Prostate (10%) Esophageal (5%) and/or (5%)</small>	Minimum Target: 36.0% Maximum Target: 40.0%		
	2019 Year-End (Baseline): 40.5%		
CSG Composite Goal	Performance Year-to-Date	85.0	<input type="radio"/>
<small>Global Strategic Goal Ambulatory Quality</small>	Minimum Target: 90.0 Maximum Target: 100.0		
	2019 Year-End (Baseline): 96.9		
Outpatient Care Experience			
Helpful (10%)	Performance Year-to-Date	89.8%	<input type="radio"/>
	Minimum Target: 89.5% Maximum Target: 90.0%		
	2019 Year-End (Baseline): 89.7%		
Showed Care and Concern (10%)	Performance Year-to-Date	86.2%	<input type="radio"/>
	Minimum Target: 85.5% Maximum Target: 87.0%		
	2019 Year-End (Baseline): 86.9%		
Workplace Safety			
Upload a Digital Dept Safety Action Plan (DSAP) and complete Actions for 2 of 3 DSAP Categories (20%)	Performance Year-to-Date	0	<input type="radio"/>
	Minimum Target: 85.0% Upload DSAP Maximum Target: Min + Complete 2 DSAP Categories		
	2019 Year-End (Baseline): 89		
	Performance Year-to-Date DSAP Categories completed	0	

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Laboratory Care Delivery System – 07/02/20

Technical Bulletin

Laboratory Care Delivery System

ADDITIONAL TESTING PLATFORM FOR SARS-COV-2, NAA (COVID-19), KP LAB [87635M]

The Laboratory Care Delivery System announces the addition of new instrumentation (Hologic Panther), effective Thursday, July 02, 2020, to increase testing capacity for the SARS-CoV-2 molecular assay. There is no change in the test order or result component (LRR). To meet the FDA requirements for the Emergency Use Authorization, samples tested on the Hologic Panther will need to be reported as Positive, Negative or Invalid. (See comparison below). The current reporting scheme for the Roche cobas will continue as below.

The Always Message attached to the report is also updated to include the additional reporting format.

Current Reporting	Additional Reporting
<ul style="list-style-type: none">• Detected• Not Detected• Presumptive Positive• Invalid	<ul style="list-style-type: none">• Positive• Negative• Invalid

Revised Always Message:

This test is only for use under the Food and Drug Administration's Emergency Use Authorization.

Test results are for the identification of SARS-CoV-2 RNA, which may be detectable in samples submitted during the acute phase of infection.

Negative / Not Detected results for SARS-CoV-2 do not rule out COVID-19 infection and should not be used as the sole basis for patient management. Negative / Not Detected results must be combined with other information such as patient history, clinical observations and epidemiology. Resubmit if clinically indicated.

Presumptive Positive. Not all COVID-19 targets detected. Consider the test POSITIVE if there was a high pre-test probability of COVID-19 infection. Consider repeat testing if indicated.

For "Invalid" results a new specimen needs to be obtained for retesting.

This test is only authorized for the duration of the declaration that circumstances exist justifying the authorization of the emergency use of in vitro diagnostic tests for detection of SARS-CoV-2 and/or diagnosis of COVID-19 infection.

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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**Guideline for inpatient draws and processing of
specimens starting**

December 15, 2018

	Start of draw/ processing of specimens	Routine	STAT	Timing Critical
C shift	0445	≥0515-1245	0515-1245	0515-1245
D shift	1246	1246-2045	1245-2045	1245-2045
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