

Lab / Pathology Managers Meeting

June 2020



Patient and Family Promise



Serious Safety Events

*Days since last SSE:

WFB: 57

BCH: 50

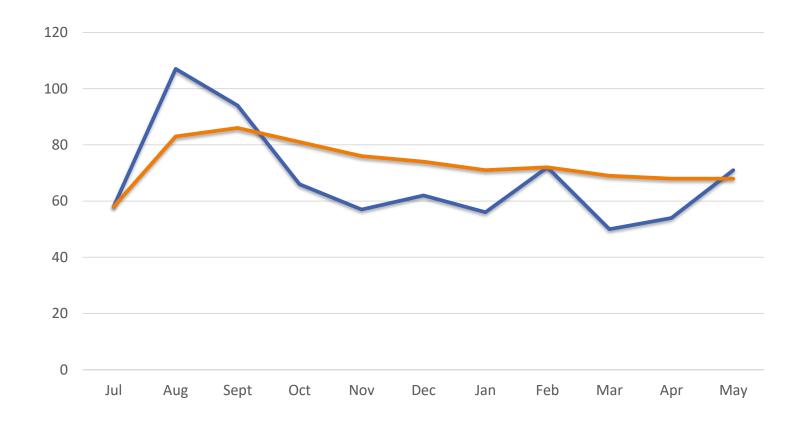
DMC: 383

HPMC: 54

LMC: 146

WMC: 79

Lab Pathology Deviations



May: 71

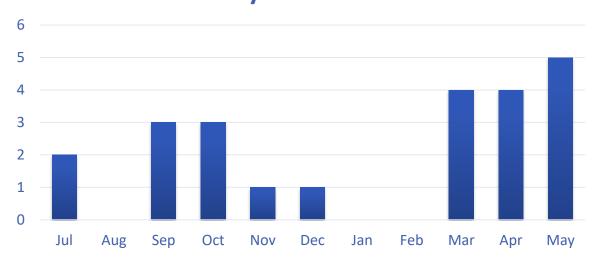
Average: 68

Incorrect Results Reported

45 40 35 30 25 20 15 10 5 Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May

Top 2
Deviations in
May

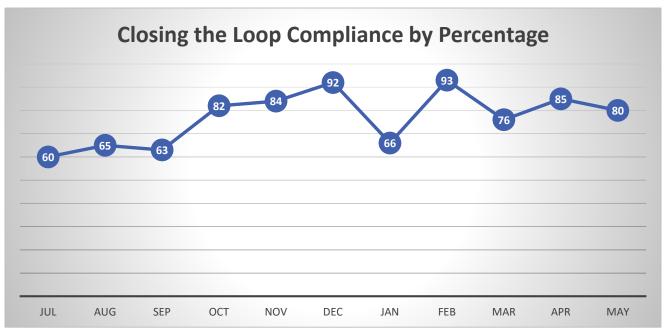
Delayed Collection

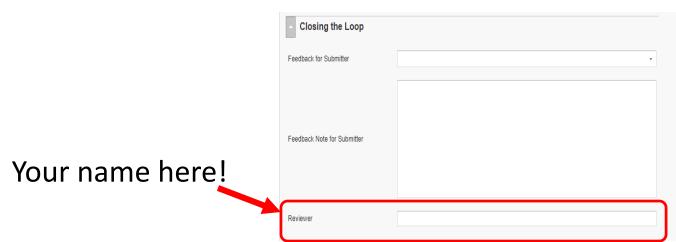


Lab Pathology Deviations by Section May 2020

May-20	Incorrect Results Posted	Lost	Delayed Pt Care	Delayed Collect	BBID	Short	Validity Concern	Wrong Tube	Critical Results Concern		Deviatio n in SOP	Labeling	Collected Wrong Time	Other
Chemistry	33		1				1			2				
OP Phleb		1		3	1			4						
Hematology	5						1		2					
Central Processing		3	1								1	2		
IP Phleb				2		2						1	1	
Micro										1				1
Blood Bank			2											·
Totals:	38	4	4	5	1	2	2	4	2	3	1	3	1	1

RL6 Closing the Loop Compliance





RL6 Closing the Loop Compliance by Section

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Autopsy	13/16	9/9	0/2	0/6	0/5	1/3	2/3	1/3	2/4	0/1	
, iacops,	81%	100%	0%	0%	0%	33%	67%	33%	50%	0%	
OP Phleb	0/17	3/25	19/26	20/21	15/15	7/7	4/13	24/24	5/8	4/4	6/9
	0%	12%	73%	95%	100%	100%	31%	100%	62%	100%	67%
IP Phleb	12/12	10/15	6/10	7/9	9/9	5/6	8/8	2/4	3/5	9/12	2/6
	100%	67%	60%	78%	100%	83%	100%	50%	60%	75%	33%
Central Process	1/4	2/4	7/8	4/5	8/8	8/8	6/7	5/6	6/6	8/10	7/7
	25%	50%	88%	80%	100%	100%	86%	83%	100%	80%	100%
OR Path Lab	2/2	3/4	4/5	4/5	5/8	1/3	1/4	3/3			
	100%	75%	80%	80%	62%	33%	25%	100%			
Micro	5/5	1/1	3/4	1/2	1/1	3/3	4/5	7/7	2/4	2/3	2/2
	100%	100%	75%	50%	100%	100%	80%	100%	50%	67%	100%
Histology	1/1					2/2	0/2	1/14	0/1	1/1	
	100%					100%	0%	100%	0%	100%	
Hematology	1/1	12/14	18/18	4/4	4/4	15/15	6/6	11/11	13/13	6/6	5/8
Tiematology	100%	86%	100%	100%	100%	100%	100%	100%	100%	100%	62%
Chemistry		29/31	1/5	12/12	4/4	7/7	5/6	10/10	5/5	14/14	35/37
Chemistry		94%	20%	100%	100%	100%	83%	100%	100%	100%	95%
Send Out		0/1						1/1			
Sena Out		0%						100%			
Blood Bank		0/2		1/1	2/3	2/2			1/1	2/3	0/2
blood ballk		0%		100%	67%	100%			100%	67%	0%
Blood Gas		1/1									
Diood Gas		100%									
Cytogenetics			1/1						1/2		
Med Genetics			100%						50%		
Molecular Diag			1/1				1/2	2/2			
Triolecular Diag			100%				50%	100%			
Mass Spec			0/14			6/6					
IVIA33 SPEC			0%			100%					
Cytology				1/1							
Cytology				100%							

Communicate Clearly

Situation

- What is going on now?
- Concise statement of the problem

Background

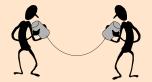
- How did we get here?
- Pertinent and brief information related to situation

Assessment

- What do you think is going on?
- Information to support your assessment

Request/ Recommendation

- What do you want done?
- Your suggested method to resolve the problem
- SBAR is a vertical communication tool used for a specific, short-term situation or event.
- SBAR is a helpful tool for anyone when a decision is needed
- **SBAR** saves time
- SBAR reduces frustration





Safety Starts Here

Safety Starts Here Section Compliance 2020

Department	Manager	Jan	Feb	Mar	Apr	May	
Autopsy	Paula Carson	18/20	18/20	18/20			
Billing & Coding	Anita Lashmit	13/13					
Blood Bank	Julie Simmons	25/27	24/27	27/28	27/28		
Blood Gas Lab	Ann Shoffner	9/9	9/9	9/9	9/9	9/9	
Central Processing	Julie Simmons	23/28	19/27	22/28	20/30		
Core Lab: Chemistry	Erica Van Dyke	25/25	25/25	23/24	23/24	24/24	
Core Lab: Hematology	Cathy Gilky						
Cytology	Don Shumate	10/10	9/9	9/9	9/9		
Electron Microscopy	Ken Grant	3/3	3/3	3/3	3/3	3/3	
Histology	Lora Josey						
Inpatient Phlebotomy	Laurie Watson	34/35	33/33	32/32	31/31		
Medical Genetics	Joe Procita	28/30	28/29	26/29			
Microbiology	Chris Powers	26/32	29/32				
Molecular Diagnostics	Martha Ward	7/7	7/7	7/7			
OR Path Lab	Angela Caviness						
Outpatient Phlebotomy	Rinard Howard						
Outreach	Melissa Singleton	32/34	35/35	31/31	31/31	31/31	
Pathology Research	Trish Warren	7/7	8/8	8/8	8/8	3/8	
Compliance/POT	Melanie Haire	14/14	14/14	14/14	14/14	12/14	
Referral Testing	Beverly Smith		6/6	6/6			

Mask Requirements per Task Force for EMPLOYEES

All employees, including those in non-patient facing roles, and students are expected to wear a mask at all times in common areas inside Wake Forest Baptist Health facilities:

- Employees should put on a mask before entering any campus building to arrive for their shift.
- Mask-free times should only occur when employees are on break and socially distanced from others, or when working alone in individual offices.
- For sanitary purposes, cloth masks should be washed daily by the individual.

Mask Requirements per Task Force for VISITORS

All patients (asymptomatic and symptomatic) and visitors should be masked as indicated below:

- All patients, visitors and vendors should be masked upon their arrival to Wake Forest Baptist Health facilities or when they are outside of patient/exam rooms (when walking, going for tests, receiving therapy, etc.)
- Personal, homemade, cloth and dust masks are permitted. Otherwise, provide the individual with a cloth or surgical mask.
- Masks should be worn in common areas inside Wake Forest Baptist Health facilities.
- Children should wear a mask if developmentally appropriate. Patients who
 cannot tolerate or refuse to wear a mask upon entry should be transferred
 to an exam room immediately.

Next Lab Huddle: July 14th, 2020

