Meeting Minutes

January 2015

Day shift-Glenda Martiszus, Melissa Huschle, Joyce Kneipmann, Kay Schanuel, Bruce Reese, Chris Zalocusky, Linda Althardt

Evening shift-Linda Althardt, Jan Henry, Dianne Iberg, Lindsay Powell, Lindsey Schmidt, Alyssa Weygandt

Night shift-Thelma Thurnau, John Matthews, Jim Beverly, Nicole Settle

* Old Business
  + Blood Bank
    - (Tabled for now) Shiloh lab-We need to start looking at our processes and thinking about how we can make the BB processes work with less printed paper. There will only be one printer in the new lab. I am only really concerned with GTS and ABO/Rh orders printing. Transfusion orders, orders for delivery and transfusion forms shouldn't be a problem. Right now we are just thinking….
    - (Closed) Make sure that you are carrying the phone when it is BB day to cover C&D.
      * Followup-seems BB is doing well according to Jan G
    - (Still investigating) It was suggested that there be a comment added to a GTS so that the floor would know that blood is ready, not ready, or that we will call when it is ready. I am talking about this with Melissa and I will get back to the group next month.

* Hematology
  + (Closed) Autoverification for the Centaur and STA will go into effect in January with the Sysmex to follow soon afterward. This will effect all areas as it should lessen some burden as we downsize some staffing and gear up for the Shiloh opening.

* Chemistry
  + (Still investigating) Carmella has done some of the training and is available for questions on the maintenance.
    - Some on nights feel very strongly that they don't have the teamwork nor the support on their shift to complete all of the maintenance for the instruments.
    - Progress and problems should be reported to Evan, Kathy and myself in order to follow up on and re-assess the work flow and decisions about maintenance on the instruments.
    - Teamwork is part of the core standards of Belleville Memorial employees and is part of everyone's job and responsibilities. Problems following this standard should be brought to Kathy, Evan or myself.

* Micro
  + None

* General-All
  + (Still investigating) Medical Necessity-This has not impacted BB, but Kathy is looking into how it
  + (Closed) Nicole will finish Micro training in the weeks following Christmas and then Jim will be trained in Micro in January.

* General Evenings
  + (Still investigating) Can phlebotomy come help with processing when not busy?
    - Followup-Please let Kathy know if phlebs are not coming back to work in processing on nights. For evening, let Kathy know if they are still not answering the phones
  + (Closed) Not done It was asked if the benches could be divided out more on the schedule to ensure that there is someone responsible for all benches and better define roles. I agreed that this was a good idea, so beginning in January, I will divide up the evening shift benches into:
    - Sys-in charge of Sysmex and Coag
    - UA-in charge of UA and sendouts
    - Ch-in charge of all chemistry instrumentation
    - P-in charge of processing
    - M-in charge of "big M" micro
    - m2-in charge of "m2" stuff in micro
    - BB-In charge of blood bank
    - B-blood bank back up

If you have any questions or further suggestions, please let me know.

* General Nights
  + (Closed) Nights was supposed to be given the schedule to review before being finalized. Thelma reported that they never received it to look it over. Will follow up with Jan G. for next meeting.
  + (Closed) Phlebotomists will be trained to help cover processing when they are not drawing. The training checklists are put together and they are ready for training. See Evan for next steps.

* New Business
  + Blood Bank
    - Please be sure to check all necessary racks for the instruments or manual racks when you are changing out any reagent. Also, check that if it is a new lot number, you are doing the QC on it if you put it into use.
    - MTP protocol-this was discussed with the day and evening shift, but it is on indefinite hiatus as I wait for doctors to make decisions before moving forward any more.
    - Outpatient pheresis or plasma exchanges are handled through CTA. There is a yellow card above where the processing station it with the company's information. Please give this number to any Dr./RN that calls requesting these services.
    - Saline bottle changes would like to be moved to just monthly. All agreed.
    - FYI-in the event of a fire in part of the hospital, the tube system does shut down during the alarm. Blood would need to be picked up during that time from the floor in question.
    - OPS/ATC are faxing orders and having problems with the accuracy of orders entered. I am having a meeting with them. More to follow.
      * Kay brought up that the faxing of the orders was helpful if the patient needed special products so that we knew they were coming and could order them when needed.
    - We are getting new temperature indicators. With this, the QC of incoming reagents will be stopped. More information to follow.
    - MTS will be used to house the BB competency forms for this cycle.
      * DRT will be removed from evening shift competency and they will no longer perform this test, only day shift will be testing these.
      * For antibody ID proficiency/unknown-please copy a workup that you complete from start to finish, and turn it into me. This workup must be an unknown antibody, not a patient with a previous history. I want to see everything put into the computer from start to finish, any antigen typing of patient and unit and any crossmatching needed.
      * For most of the other unknowns, I will be getting these together and assigning them throughout the year. More information to follow.

* Hematology
  + None

* Chemistry
  + Evenings-Please make sure that you are checking the form on the Cobas' for when QC needs to be done because the maintenance is done at different times and effects the QC run on evening shift.

* Micro
  + Kathy B came to the evening and night shift meetings and talked about the new gene probe procedure
    - Male urethal swab goes to ARUP
    - Female vag/endocervial swab-pink top tube
    - M/F urines-aliquot 7mL (to dashed line) into yellow top tube.
    - All tubes go into little refrigerator in Micro.
    - BD probe tec will still be run for a while in Heme/Chem if we receive any.
  + Reminder: For positive blood culture-take sachet out of bag (ask Kathy if you have questions)
  + Quizzes for 2015 competency are complete.
  + Nights requested that unknowns be put out much sooner this year so that there is plenty of time to complete.

* General All
  + Reminder! The town hall meeting with Ruth is on Feb. 5th at 2pm
  + Competencies this year are going to be due Oct. 15.
  + POC asks that if someone brings down a piece of equipment that isn't working, to please put a note on it so tell them what it wrong with it.
  + CE requirements-Glenda asked about the CE requirements for the lab/BB. For the lab, there is a requirement to complete 4 hrs of CE during the evaluation cycle. The core lab requires it on their competencies, but there is nothing on the BB form. I have added it to the blood bank competency form housed on MTS. This is NOT required to be in addition to what is in Core Lab, but rather a place to keep track of it if you are not in Core Lab or if you want to use it. I am not checking if this is done or not for blood bank, but only if I am doing your evaluation, I will check that you have documented 4 hours between all departments. If you need further clarification, please let me know.
  + I need a safety committee representative for the blood bank. This can be a person on any shift. The committee meets quarterly around 1330 in the afternoon. Please let me know if you can do this.
  + I need everyone's personal goal by 2/2/15.
  + Is it possible to put the requests for blood on the tracking list? (Evenings asked) Follow up next month if possible.

* General Evenings
  + Evenings has fielded the question about changing the holiday rotation so that it is rotated more like the night shift. Survey will be sent out to get a consensus on what the majority of the shift would like to do regarding this.

* General Nights
  + None

* People
  + Histo Lead tech
    - Still interviewing
  + Phlebotomy position
    - 1 position still open.

* Financial
  + None

Respectfully submitted,

Jennifer L. Harris, MT(ASCP)SBBCM

Blood Bank Supervisor