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| --- | --- | --- |
| **Date:23/03/22** | **Time:1400** | **Location:Lab** |
| **Attendance:** | **HB NX Minutes communicated via MTS to all.** |

1. **Agenda Items Outstanding:**
2. Nil
3. **Standing Items:**

| **Agenda Item #** | **Discussion**  | **Action Required** | **Person Responsible**  | **Due Date** |
| --- | --- | --- | --- | --- |
| 1. **General Housekeeping**
 | Normal surgical masks can now be worn instead of N95 masks.I have asked Hans for 0.5 FTE due to increased workload due to many different reasons. An extra scientist every Thursday, Friday and every second Wednesday. |  |  |  |
| 1. **Internal QC**
 |  |  |  |  |
| 1. **QAP**
 | Lost 50 points for a wrong blood group on a donor unit in Nov 2021. Two people should do every survey so we achieve the necessary participation rate of two surveys each per year. | Ensure 2 people do every survey. | All |  |
| 1. **Equipment**
 | IH500 has been validated by Andrew and Penny. IT transmission of results is being tested within the week.The new manual system has yet to be done. |  |  |  |
| 1. **Tests/Methods**
 |  |  |  |  |
| 1. **Quality Management Review**
 | * Internal Audit for Biochemistry

NCI0506 Int QCNCI0507 Long Term Review of QCNCI0508 Back Up DataNCI0509 QAP ReviewNCI0510 QAP ParticipationNCI0511 Training RecordsNCI0512 Competency assessmentsNCI0513 MUNCI0514 CommunicationsNCI0515 Doc Control: NCI0516 Internal Continuing education* Fast Track Incidents
* Risk Man Incidents
 | Need to give a reason for changing ref ranges. Eg change of lot of reagent or calibrator.Should be done monthlyMust back up QC data as well as patient data and analyser set up.Must state acceptable, not just ‘reviewed’Record who puts the QAP material onto the analyser.Must sign every line and not use vertical arrows,Need completing.To be done.Meetings must be monthly.Compare Action Limit docs at both sitesAlfred need to provide internal on-line education. |  |  |
| 1. **Document/ SOP Updates**
 | XN SOPs are available on fast track. If you cannot open it then it is still in production. | Ongoing | All |  |
| 1. **Haematology**
 |  |  |  |  |
| 1. **Blood Bank**
 | Please continue to perform daily QC on the IH500. |  |  |  |
| 1. **Biochemistry**
 | New lot of liquichecks will begin this Monday after the morning QC is done.GTT2 reagent will be running very soon. The method validation data has been submitted to Hans for sign off. | Use new lot liquicheks. | JPC | 28/0/322 |
| 1. **Work Health & Safety Issues/ Incidents**
 | Tea room still closed | Other tea room in out patients building. |  |  |
| 1. **Staff Training**
 | Ella and Helen B received Key Operator Training on the IH500. |  |  |  |
| 1. **Staff Competency Assessments**
 | BB Competency assessments done for HB, NX. | completed |  |  |
| 1. **Continuing Education Program**
 | * Session held – Topic/ date
* Participation rate
* Staff feedback
* Quizz/ Q&A performance
* Next Session – Topic/ date.
 | Participation and Performance data on MTS. Satisfactory. |  |  |
| 1. **Hospital activities/ meetings.**
 | There is a massage chair in the ‘quiet room’ for general use. Cathy Howard has more info. |  |  |  |
| 1. **Other**
 |  |  |  |  |
| 1. **New Business**
 |  |  |  |  |

# Date of Next Meeting: