1. Comments Added to Stickers that Violate Confidentiality
   1. Assess whether the information is needed to treat that patient that day
   2. Discard or remove any stickers not required to the Confidential waste (Blue Bins/Confidential Shredding) not the garbage.
2. Check that the Health Care numbers on Blood Bank paperwork match what is in the LIS.
   1. Old NT Health Care numbers will come across from Medipatient into the LIS even if there is a current NU Health Care number. Sometimes admitting misses deleting the old NT numbers from Medipatient so be sure to ensure the HCNs match on everything at the time of collection.
   2. You will need to enter the Dr’s info into the OE screen prior to being able to edit the HCN.
   3. If you are Medipatienting and notice an old expired NT HCN and the patient has a current NU HCN, please delete the expired one so this does not occur.
   4. Both Bente and Marta are on annual leave this week and Carolyn will follow up when they return.
3. Reusing Needles
   1. A Risk Pro stated that lab staff used the same needle to poke a patient three times. This is not an appropriate practice. Every poke is to be performed using a new clean needle.
   2. Lab staff appeared horrified, further investigation to follow.
4. ER Ice
   1. ER Ice Machine is currently out of service. Thanks for bringing this topic forward as no one had reported this to the ER Supervisor or put in a work order for its repair.
   2. Until it is repaired, Shelley Fewer stated she would have bags of ice available in the ER fridge freezer if it required for a collection.
5. New Collection Carts
   1. One of the new collection carts has arrived; we are still waiting on the second one.
   2. Elwood will ensure all of the appropriate safety supplies are available.
   3. Please provide feedback so we can ensure that the one that works best for this location gets put forward for funding.
6. Code Brown
   1. Recent Code Brown feedback is that staff from many other areas of the hospital are not very comfortable with the handling of a chemical spill or the use of spill kits. Do not be surprised if you are asked to assist or supply our spill kit in the event of a real chemical spill.
   2. Elwood also did a mock formalin spill to the eye drill yesterday. Please remember to respond to a mock exercise as you would to a real event. These drills occur to ensure that staff can perform the required safety actions effectively in the event of a real splash to the eye.
7. Monday/Tuesday No Bacti staff will be going on AM Rounds.
   1. Due to a staffing shortage in Bacti, Moses will not be going on rounds Monday and Tuesday. Chade and Holly will both be going up on rounds from the Lab Assistant area.
8. Aboriginal Awareness
   1. If you complete the Aboriginal Awareness mandatory training, please send an email to Renee Theim at staff education and she will log that in the LMS.
9. Round Table
   1. Theresa – PDI and Mandatory Training (which activities are required?)
      1. The activities that have a red star beside them in the LMS are required prior to approval.
   2. April – LIS Upgrade – the DHSS forgot to submit the funding request so the Upgrade will not occur on schedule.
      1. An emergency funding request has been submitted.
   3. Elwood – simulated fire extinguisher training will be added to the LMS in June with scheduled session times. Please complete the rest of your fire training in preparation.
   4. Elwood – The new quantitative FIT testing equipment is on site, but currently only Karen Pardy has been trained. The new method should be available on the LMS next month.
   5. Moses – has returned from LABCON and had a great time. The education and networking opportunities were very good. One topic that was brought forward is that some areas in the USA are moving to requiring a Urinalysis and Microscopic prior to Culture and the Culture would only be ordered if the urine was positive for WBCs Nitrates or Bacteria.