1. Sterile fluid cultures worked up in BSC
	1. Dr Solomon (DynaLife) has recommended we work these up in a BSC
	2. Sherri/Carolyn are looking at STH workflow/risk. Please send feedback.
	3. April suggests correlating BSC work with results of gram stain (ex: Gram Neg cocco-bacilli)
	4. Sally suggests sealing plate (parafilm) to mark it as a high potential hazard
	5. Sherri will consider working up specific fluid types (all synovial, blood, etc)
2. Punctuality
	1. Staff frequently arriving 10-15 minutes late is a problem because your colleagues are waiting for you.
	2. Carolyn may need to move to disciplinary action if the problem continues.
	3. Staff discussed the use of spot checks by Carolyn and a punch clock
3. Access to LIS Administration
	1. April’s office is now located in the laboratory but she should not be approached directly about tasks. Please continue to use your MLT II’s for workflow and training issues or task requests.
	2. April’s door will be frequently closed and is available only for LIS emergencies
4. Irregularly scheduled or missed maintenance
	1. Staff are performing well on routine daily/weekly maintenance with a few exceptions including:
		1. Patient collection trays
		2. Fridge / Freezer weekly seal checks
	2. Always remember to record when performed to ensure we track for accreditation
	3. Staff have suggested that the duties be assigned to specific shifts and perhaps use a centralized bulletin board or LIS to log work
5. STH Change Management
	1. Major and minor changes will occur over the next 3-5 years with a new hospital, equipment and work to meet standards
	2. One example is that the Core 9-5 and 10-6 shifts will swap duties (except call shift) beginning in November
	3. Please remember to offer feedback about the changes
6. Patient Falls
	1. A patient fall occurred at YPCC Lab recently
	2. Carolyn has requested that any patient at risk of fainting should have a Patient Comment added to their LIS account to notify staff upon their next visit.
7. Sharps Containers
	1. Connie pointed out that Independent Grocers offer sharps containers
	2. Elwood will be asked to look into this upon his return from annual leave
8. Hematology Reflex Rules:
	1. Staff discussed the problem with hematology reference ranges and reflex rules not matching the recommendations by Dr Brown (DynaLife)
	2. Staff have decided that the best course of action is status quo. Staff will work with the rules not matching the LIS until the territorial reference ranges are sorted out and a decision is made on the acquisition of a new hematology instrument
9. Blood Bank
	1. After a productive discussion with CBS:
		1. We have implemented new min/max levels to follow when ordering blood. Overages can be expected in high use scenerios
		2. All routine orders need to be submitted by 15:00; earlier when possible
		3. Additional flights have been identified by CBS (WestJet and from Calgary Centre). CBS Edmonton will determine the best flight after we identify the timeline required.
10. Urine microalbumin pour offs
	1. Labels will change to include:
		1. 1 label for the collection container
		2. Individual labels for each workstation
11. Roundtable:
	1. Sarah
		1. Thank-you to everyone regarding the redevelopment feedback; more feedback can be sent to Sarah
		2. Redevelopment will begin asap with fences, surveying, and land clearing starting immediately
		3. A bulletin board beside the cafeteria will be repurposed to post redevelopment materials
	2. Bayo
		1. Recently some clots have been found in ESR’s. Staff are reminded to check them all prior to analyzing and to mix the samples sufficiently at time of collection
		2. This mixing problem may also be noticed in the 1.8mL coag tubes. Staff are also reminded to only use these tubes for pediatric or difficult collections.

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