1. March 2016 Biosafety Audit Items
   1. Clutter on the silver bench
      1. Clutter on the silver bench was noted. Jen has spoken with Elwood about proceeding with cleaning up the area.
   2. Liquid permeable footwear
      1. It was noted in the audit that staff are wearing footwear in the laboratory that is permeable to liquids. It is not currently a dress code requirement that laboratory staff wear ‘liquid impermeable’ footwear and Carolyn will be bringing this concern forward for inclusion during the next review of the hospital dress code
      2. Staff is informed that this may result in changes to the dress code policy that will affect them and to be mindful of this potential change in the dress code requirement when purchasing new shoes for work.
   3. The use of gloves for phlebotomy
      1. Staff is not routinely wearing gloves when performing phlebotomy. It is noted that appropriate PPE must be worn when performing work, including phlebotomy.
      2. The current procedure for Venipuncture includes wearing gloves; it is also considered a Best Practice for Occupational Health & Safety and Infection Control.
   4. Cell phone usage in the laboratory
      1. It was noticed once again that employees are using their personal cell phones in the laboratory area.
      2. As this item has been discussed at least three times in the last year Jen will be proceeding with progressive discipline if staff is observed using their personal cell phones in the laboratory.
      3. It is noted that staff members sometimes do need to be contacted urgently. Staff is permitted to carry their cell phones in their pockets, however, if they are required to answer a telephone call or respond to text messages they must remove themselves from the work area.
   5. Unlabelled bleach
      1. Bleach must be labelled appropriately when it is made up. Please use the designated labels when preparing bleach solutions.
   6. Hazardous Materials Storage
      1. It was noted that an acid and a base were stored in the same Pyrex dish in the hazardous storage cupboard underneath the chemical fume hood.
      2. Please ensure that hazardous chemicals are stored safely and appropriately. If you are unsure about the appropriate storage conditions for hazardous chemicals please consult the MSDS sheets available in the middle of the laboratory, next to the green spill kits.
   7. Fire Extinguisher Training
      1. Fire extinguisher training for staff members is currently on-going.
      2. If you have not already completed your fire extinguisher training you can do so by registering through the LMS.
      3. Please note that the Fire Extinguisher training is composed of two parts: a written exam and a practical training component. You must bring your written exam with you to the practical component to be graded.
2. Lab Outpatient Collections
   1. The laboratory has received a patient complaint about being turned away after waiting for 35 minutes for a timed blood test. The patient presented to the laboratory with a requisition for a Gestational Diabetes Screen, after waiting for 35 minutes in the waiting area she was turned away as her timed blood work would not complete until after the Outpatient Collection area was closed.
   2. The question was presented to the Lab Assistant and Core Laboratory groups about how we can do a better job for our patients in these instances in the future.
   3. It was decided that when patients present to the laboratory for outpatient collections prior to closure then patients will be seen regardless of the time needed to complete the timed collections. The responsibility for the collection will be assigned to another laboratory assistant to perform.
   4. It was also recommended that signage be developed informing patients to speak with laboratory staff if they have timed tests so that tests like the GDS can be started right away.
3. Roundtable
   1. Bayo
      1. Thank you to Whitney and Connie for their help over the Easter Long Weekend. It was very busy and the laboratory needed to call in extra staff to assist with the workload.
   2. Elwood
      1. As we seem to have additional Laboratory Assistant staff is it possible to schedule more than one person in the Outpatient Collection area to assist with order entry and improve patient turn-around time
      2. Jen mentioned that this is currently in the plan for Stanton Renewal; the patients for Diagnostic Imaging, Respiratory Therapy and the Laboratory will present to one of two clerks that will great the patients and will perform order entry activities as is currently done at the YPCC collection site.
   3. Theresa
      1. It has been noted that a number of decisions regarding changes to work flow in the core laboratory are made during meetings and due to scheduling not all core team members are present to discuss the changes. Is it possible to develop a better method to allow for all affected team members to participate in discussions about workflow and process changes?
      2. Jen agrees that there needs to be a better data gathering method to establish consensus among laboratory team members. Jen will investigate electronic polling options, such as Survey Monkey, to allow for voting and discussion.
   4. Jen
      1. New staff will be starting soon
         1. The MLA Summer Student, Glenda Woodford, will be joining us on April 18.
         2. Two new Microbiology Technologists, Laura Steven and Joel Droogers will be starting on May 02.
         3. Sarah Nesbitt will be joining the Microbiology team as a Summer Student on May 02.
      2. The staffing request for the vacant core position has been approved by the Administration team and has been sent to Human Resources to begin the competition.