STH Renewal / Operational Readiness Team:

* Team consists of: Jen (Chair), Elwood, Laura S, Joanne, Mike, Erin, April & Carolyn
  + Team members were chosen because they were MLT II’s, specific knowledge as part of their job, and/or by interest noted during their recent performance appraisal.
* Purpose is to plan the transition to the new hospital with minimum interruption to our services
* Our team will work with other teams around the hospital
* First Patient day is set for 26 MAY 2019
* Blackout dates:
  + 26 NOV 2018 to 26 NOV 2019
  + Blackout period exists where no changes can occur unless an emergency
  + Includes equipment replacement and procedure changes
  + This means the team must have in place all procedures / processes that will be in place for the first 6 months of our work in the new hospital; done by 26 NOV 2018
* Redundancy:
  + Validations of XN-1000 & ISTAT will provide better redundancy for the move
* Microbiology:
  + Move / testing will be more significantly impacted due to the nature of the tests
  + Also, micro will migrate to a Level 3 laboratory so testing changes will occur
* A map of the new lab layout will be updated soon
* New lab will have a pneumatic tube system to validate
* Medipatient will still be in use; new CIS will not be available until well after we move
* Operational Readiness Team will post a schedule of the meetings so staff can plan for absences
* Despite the added workload overtime will only permitted based on operational requirements; by a case by case determination on the behalf of the supervisor or PCC
* Jen will be looking into additional casual positions to assist with the added workload
* Expressions of Interest will soon be out for the position of Manager, NTHSSA
* Supervision:
  + Jen will be out of the office more frequently so to ensure Supervisor coverage a MLT II will act as Supervisor more frequently

Roundtable:

* April - LIS servers will be moving to the new building and will be meeting with SCC / GNWT to work on transition
* Amy – is concerned (others too) that the process to send homecare patients blood products is not correct and asks for a process review; specifically the Medipatient part
* Laura – Moses will act as MLT II while she is away
* Mike – Sysmex procedures are being worked on and should be ready soon for staff to review
* Serene – wanted clarification of who will manager her work when Jen if off site (clarification is she will still report to Jen)

MWA 06 OCT 2017