

TRAINING UPDATE

Lab Location:	GEC, SGAH & WAH	Date Distributed:	3/21/2014
Department:	Group Leads and TIC staff	Due Date:	4/15/2014
		Implementation:	4/16/2014

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Group Lead and Tech in Charge Duties GEC.L01 / SGAH.L02 / WAH.L02 v5
Description of change(s):
<p>Section 5: Add LIS / HIS issues (item 9) Section 9: Add scripts SOP will now include a guide (or script) of what action to take for different LIS or HIS problem scenarios. Refer to addenda A (see last page of attached SOP)</p> <p>This revised SOP will be implemented on April 16, 2014</p>

Document your compliance with this training update by taking the quiz in the MTS system.

Approved draft for training all sites (version 5)

Non-Technical SOP

Title	Group Lead and Tech in Charge Duties	
Prepared by	Leslie Barrett	3/23/2010
Owner	Robert SanLuis	3/23/2010

Laboratory Approval		
Print Name and Title	Signature	Date
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

Review:		
Print Name	Signature	Date

TABLE OF CONTENTS

1. PURPOSE.....	3
2. SCOPE.....	3
3. RESPONSIBILITY.....	3
4. DEFINITIONS.....	5
5. PROCEDURE.....	5
6. RELATED DOCUMENTS.....	7
7. REFERENCES.....	7
8. REVISION HISTORY.....	8
9. ADDENDA AND APPENDICES.....	8

1. PURPOSE

The Group Leads are responsible for various day-to-day activities as outlined in this procedure. If there is no Group Lead on duty (off shifts, weekends, holidays), an MTII or senior staff member will be assigned to assure that there is responsible staff person on duty in the laboratory to answer questions, direct inquires, assure adequate staffing, document sick calls report, and monitor laboratory information systems (LIS) operation.

2. SCOPE

The Group Leads are scheduled as required by the department. The additional duties of the Group Lead are to be completed during the normal course of their day. Administrative time will be indicated on the schedule to allow for completion of duties without resorting to overtime.

The "Tech in Charge" (TIC) is assigned when a Group Lead is not physically on site. This duty is typically rotated among the MT II or Senior MT staff, but may include other experienced technologists that are classified as CLIA General Supervisors.

3. RESPONSIBILITY

The Group Leads are responsible for general operations including QC Review, Inventory Control, Shift Log Review, monitor OL for turn around time (TAT), review pending logs, move staff to workload, coordinate training, and resolving customer concerns, and other duties as assigned.

GROUP LEAD DUTIES

A. DAILY

1. Review Logs
 - Bench logs, including pending logs and delta failures
 - QA logs
 - Calibration reports (Chemistry)

- Free Text Log
2. Inventory Control
 - Ensure incoming supplies are properly logged, received, and stowed appropriately.
 - Check incoming QC and reagents to ensure that lot-to-lot and shipment-to-shipment checks are performed prior to being placed in use
 3. Monitor Work Assignments
 - Check status of pending calibrations, delegate to staff on the bench.
 - Check OL Monitor status and insure
 4. CAP review
 - Check status of proficiency samples (via pending log and/or dry-erase board).
 - Review results by comparing hard-copy results with CAP website entry and document review with initials / date.
 - Submit all appropriately completed documentation to supervisor for final approval.
- B. WEEKLY
1. Review QC and submit QC summary reports – all sections due by middle of the following week with complete Quality Variance (QV) forms as applicable.
 2. Review Maintenance and Temperature Logs – all sections due by middle of the following week with complete Quality Variance (QV) forms as applicable.
 3. Identify QC and maintenance issues and implement corrective action.
- C. MONTHLY
1. IQAP for participating instruments – submit data monthly, as assigned.
 2. Print monthly QC reports for all areas, place in binders and submit for review to supervisor with the Monthly QC Summary Report.
- D. EVERY 6 MONTHS (Coordinated with the Technical Specialist and recurring calendar)
1. Initiate Instrument Comparisons – (Recurring Calendar)
 2. Carryover - (Recurring Calendar)
 3. Auto versus Manual Comparisons. Enter data in correlation tables and submit to supervisor for approval. (Recurring Calendar)
 4. Platelet Poor Plasma verification - (Recurring Calendar)
 5. Linearity and Calibration Verification - (Recurring Calendar)

TECH IN CHARGE DUTIES

The supervisor will identify the “Tech in Charge” (TIC) for each shift on the work schedule when a Group Lead is not in site. The TIC is responsible for carrying out the duties each shift as outlined in this procedure. Refer to Tech-in-Charge (TIC) Pass Down Log.

1. Overdue Log Monitor (OL) - (SGAH and WAH only)

- Check OL Monitor for tests that are coming up to or have passed required turn-around time
 - Follow up with staff to determine cause of delays
 - Reset monitor if necessary
2. Review Logs
 - ADT error log (SGAH and WAH only)
 - Failed Verify Log (Resolve by end-of-shift)
 - QC outlier report will be reviewed 4 hours into each shift to detect missed look-backs
 3. Assess Staffing
 - Ensure benches are covered at all times
 - Move staff as needed to cover
 - Review call-in log and reassign benches or ask staff to stay/come in early or contact additional staffing to come in and cover (per minimum staffing requirements)
 4. Check Critical Call Queue
 - All critical values are called and documented at the end of each shift
 5. Staff Communication
 - Check with Staff for any problems during the shift (FES, QC, etc.)

4. DEFINITIONS

ADT Log – printed report of the Admissions, Discharges, and Transfers for the hospital. An entry is made in the log when Admitting makes more than 3 changes in the patient’s demographics.

5. PROCEDURE

1. At the start of the shift the Group Leads or designated TIC will meet with the Group Lead or TIC from the previous shift to get an update on the status of the laboratory. This update will include instrument issues and staffing concerns, as well as any other problems that will affect laboratory operations in the coming shift. The Vocera and Stroke Pager (SGAH Only) will be handed off at this point and will be checked by the incoming TIC.
2. The Group Lead or TIC will evaluate staffing to ensure that the minimum numbers of people are available to work. The minimum number required for each shift is indicated on the tables below.
3. The Group Lead or TIC should attempt to obtain coverage by using the following methods. Assess the work and determine whether shift/workload can be managed by those present. Care should be taken to minimize overtime and double shifts whenever possible. No person may work more than 16 hours in a 24 hour period.

- a. First: Notify the person designated on the schedule (highlighted or bold per scheduling supervisor) to be ready to stay as needed.
- b. Second: Assess whether replacement staff is necessary to maintain appropriate coverage.
- c. Third: Ask for a volunteer to stay and provide coverage. It is appropriate to utilize split shift coverage if available (Someone stays over and someone comes early).
- d. Forth: If unable to find volunteer cover the person designated on the schedule stays and provides coverage. This process is rotated among all staff.

MINIMUM STAFFING AT WAH

Shift	Monday to Friday					Saturday/Sunday/Holidays				
	Phleb	Front Desk	Spec Proc	Blood Bank	Core Lab	Phleb	Front Desk	Spec Proc	Blood Bank	Core Lab
Early AM	4					4				
Days	3	1	2	2	4	2	1	1	1	4
Evenings	2	1	1	1	3	2	1	1	1	3
Nights	1	NA	1	1	1	1	NA	1	1	1

MINIMUM STAFFING AT SGAH

Shift	Monday to Friday					Saturday/Sunday/Holidays				
	Phleb	Front Desk	Spec Proc	Blood Bank	Core Lab	Phleb	Front Desk	Spec Proc	Blood Bank	Core Lab
Early AM	7					7				
Days	7	2	2	2	5	7	1	1	2	4
Evenings	2	1	1	2	4	2	1	1	1	3
Nights	1	N/A	1	1	2	1	N/A	1	1	2

MINIMUM STAFFING AT GERMANTOWN

	Monday to Friday	Saturday/Sunday/Holidays
Shift	Core Lab	Core Lab
Days	1	1
Evenings	1	1
Nights	1	1

Form revised 3/31/00

4. The Group Lead or TIC will ensure that all critical values generated during the shift are called to the appropriate person. The Failed Verify Log should be checked near the end of the shift for both inpatients and outpatients. All critical values that have not been called will be called to the appropriate caregiver and documented per procedure.
5. The Group Lead or TIC must review the ADT error log during the shift. When a patient appears on the ADT log the Group Lead or TIC should review the information to determine if there is impact on the specimens in the laboratory. Refer to Procedure ADT/OE Error Log.
6. The Group Lead or TIC must be aware of what is happening in the laboratory during his/her shift. This should be accomplished by walking around and asking questions to determine if there are issues that are impacting TAT and patient care.
7. At the end of the shift the Group Lead or TIC will meet with the TIC or supervisor for the next shift and communicate any problems encountered on the shift and any issues that will impact operations on the next shift. SGAH ONLY: The Vocera will be handed off at this point to the incoming Group Lead or TIC.
8. The Group Lead or TIC is responsible for contacting the Pathologist on call and/or the Administrator on call as needed.
9. LIS issues
 - a. All Techs should discuss with Group Lead or TIC prior to paging LIS on call.
 - b. When LIS / HIS (Cerner) issues arise, refer to addenda A for actions
10. Group Lead or TIC will coordinate Instrument and LIS downtime activities. All instrument and LIS downtime is communicated to the ED, Nursing Supervisor, and supervisor/director as appropriate. Updates will be provided hourly to the ED and Nursing Supervisor.

6. RELATED DOCUMENTS

Cerner ADT/OE Error Log, LIS procedure
Critical Values – Accepting Results in LIS, LIS procedure
Callback, LIS procedure
Inter-Shift Communication, Laboratory policy
Tech-in-Charge (TIC) Pass Down Log (AG.F128)
Recurring Calendar

7. REFERENCES

None

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
000	3/23/2010	Updated owner Section 2: General Supervisor CLIA Section 3: General Revision and added assignments Section 5: Group Lead added to all items; Added assess if replacement staff needed; Vocera handoff; Updated Minimum staffing; GL or TIC to coordinate downtime	L.Loffredo R.SanLuis C.Reidenauer	L.Loffredo R.SanLuis C.Reidenauer
001	8/3/2011	Section 3: Add detail to Group Lead duties Section 5: Add instrument downtime and detail to item 10 Section 6: Add Inter-Shift Communication, TIC Pass Down Log, Recurring Calendar	R.SanLuis	L.Loffredo
002	11/15/12	Section 3: Replace PI form with Quality Variance, remove online for IQAP Section 5: Minimum Staffing revised	L.Loffredo R.SanLuis	L.Loffredo R.SanLuis
003	6/3/2013	Section 5: Revise process to obtain staffing coverage (item 3)	R.SanLuis	R.SanLuis
004	3/7/2014	Section 5: Add LIS / HIS issues (item 9) Section 9: Add scripts Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13.	L.Barrett R.SanLuis	R.SanLuis

9. ADDENDA AND APPENDICES

A. Script for Group Leads / TIC and Help (Service) Desk

Script for Group Leads / TIC and Help (Service) Desk

Issue	Action
Lab not getting Orders from Cerner	<ol style="list-style-type: none">1. Lab Tech in charge will check the interfaces in Sunquest2. If the interfaces are down, then the Lab tech in charge will start up the interfaces3. If the interfaces do not stay up in Sunquest, then Lab tech in charge will contact LIS On-call and notify the Resource Nurse of the issue. LIS On-call contact Sunquest vendor.4. If the interface is up on Sunquest, the Lab tech in charge will open a ticket with the Help Desk stating that the Lab is not getting Orders from Cerner. They will specifically state that this is an interface issue. Write down ticket number from Help Desk for reference.5. Once the ticket is open, Lab tech in charge will notify LIS On-call and Resource Nurse about the issue.
Calls to Lab that Units/ER are not getting their lab results.	<ol style="list-style-type: none">1. Lab Tech in charge will check the interfaces in Sunquest2. If the interfaces are down, then the Lab tech in charge will start up the interfaces3. If the interfaces do not stay up in Sunquest, then Lab tech in charge will contact LIS On-call and notify the Resource Nurse of the issue. LIS On-call contact Sunquest vendor.4. If the interface is up on Sunquest, the Lab tech in charge will open a ticket with the Help Desk stating that the Unit/ER is not getting Lab Results into Cerner. They will specifically state that this is an interface issue. Write down ticket number from Help Desk for reference.5. Once the ticket is open, Lab tech in charge will notify LIS On-call and Resource Nurse about the issue.
Calls to Lab that the Units/ER are not getting their Lab Labels (non-downtime)	<ol style="list-style-type: none">1. Lab tech in charge will contact LIS On-call2. LIS on call will check interfaces on Sunquest and locks.3. If necessary, LIS On-call will contact Sunquest with the following information "Lab Label printers are not printing".4. If Help Desk is contacted, they will follow Help Desk wiki for Printer support
Lab Staff cannot access Sunquest from any device	<ol style="list-style-type: none">1. Tech in charge calls Help Desk with information that "All Lab staff cannot log onto Sunquest, SmartTerm or GUI. Please open ticket as a priority".2. AHC-APP-CLIN person will contact Marie Sabonis and work with her on the next steps towards resolution.3. If Sunquest is down and un-accessible, then Lab Staff will go to downtime procedures.4. If only one person is having a problem accessing SmartTerm or Sunquest, then they will contact the Help Desk.

Form rev 01 3/31/00