

Quest Diagnostics Inc., At Shady Grove Medical Center

SGMC FIELD OPERATIONS STAFF MEETING

MINUTES

March 31, 2015

PRESENT: STAFF MEMBERS- SEE SIGN-UP SHEET ATTACHED (STAFF WILL ALSO BE READING THE MINUTES IN MEDTRAINING. ORG)

DISTRIBUTION: R. SAN LUIS, L. LOFFREDO, DR CACCIABEVE AND LESLIE BARRETT

MEETING COMMENCED: 1100 AND 1600

Item Discussion Action Followup

Safety: Patient and Staff

- Follow FOCUS guidelines at all times.
- Use only Quest Approved equipment when serving patients and follow SOP, Venipuncture and other related SOP's. And do not enter areas where the work does not take you to be.
- Hand hygiene: "Pump in Wash-out" Strictly continue with each patient visit on in or out patients. (Infection Control)
- Use Dispatch wipes to clean surfaces, carts and trays multiple times in a day. Document on daily duties checklist.
- Do Positive Patient Identification: 100% of the time.
 Follow SOP. No arm band/No ID bracelet NO draw! (exception is recurring out patients/standing orders patients)
- Call OPL patients by number/token system.
- Use good clean lab coats every day! Display work ID badges on the lab coats on the pocket/upper portion of your body. Do not throw your lab coats on your carts during breaks. We have hangers in the department.
- Follow AHC dress code policy at all times when at work, and during all shifts. Appear professional at all times.
- Know that the closest eye-wash while in the lab is located in Core Lab on the clean sink located by the copier/ entrance to the lab.
- MTS: slip, trip, fall... <u>Complete online Competency!</u>
- Lanyards/cords/ neck ties worn around the neck/hold ID badges not to be used, especially when serving the ABH patient's.
- No Food & Drinks in the lab at any time.
- This year's annual training/annual certification to be announced soon. Sunday and Shanthi are now certified effective 3/27/15.
- Vocera- immediate courteous responses by all staff and timely service is expected.
- Complete OSHA Health Questionnaire's being handed out today for completion of FIT testing.

Metrics, TAT and Healthstream scores AM collections Metric: Measure Phase in the DMAIC model in regards to hospital QI program. In Feb we stood at 88%. Receipt: 95%-100% in LIS by 0629 Results: 95% - 100% results by 0730 (Technologist's)

Item	Discussion	Action	Follow-
	 New AM collections floor division sheets to be tried out next week before finalizing them. Neal will work with the Phlebotomy group during my absence. Receipt of specimens in LIS is to be done by Processing and Phlebotomy staff. Blood Culture volumes: good. Contamination Rate was high! Please clean according to SOP and do not retouch sites of venipuncture! Healthstream we are at 25% 45 calls in. Lowest score in last 4 quarters! Multiple staff throwing off too much knowledge does not show that we care for the patient. Be nice, caring and understanding towards patients & their families. ER specimen throughput is now 5-10 minutes to receipt in in LIS. OR will be handing their specimens to processors. Review STAT collections metric/ daily crystal reports that are posted in Phlebotomy section. We have 15 minutes for a STAT collection and to be received in LIS within 15 minutes. 	95% calls in LIS within 1-2 hours BLC Vol 8-10/bottle	. up
Staffing and Schedules	Overall flexibility from all staff is required to stay afloat. Review attendance policy. Minimum staffing- work must move on till help arrives. At all times draws with priorities, STAT, Timed, and Routine is to be followed (see print out posted) Staff that are scheduled to work a few shifts away from their normal schedule to consider this meeting as a notice to do those shifts. Neal will work closely with both our GL's and staff to help during this severe shortage till hiring is complete, Training completed and new staff pick up work and speed. We are looking at 3-4 months at least!	All to be flexible in helping	SMK
TOP, Attendance & Tardiness.	Calendar to be updated today! Turn in TOP time requests for 2015. Refer TOP calendar before requesting TOP. Tardiness leads to OT and other patient service delay please curb it. Supervisors are monitoring it very closely.	Plan TOP time.	SMK
Competency & MTS	 IntelliQuest- Safety & Blood-borne pathogen competency, Post Exposure Training, MTS, Paper competencies are out! Proficiency Testing- self learning manual, sign-up sheet and brochure in the manual: Location of Manual is by the PFA Analyzer in the Core Lab. Check the bulletin board for an update. 	Calendar posted. Check online frequently.	ALL
Daily Shift Logs and OL, PL, Un-received Coll lists	Daily Duties Checklists: all sections. Phlebotomy is being redeveloped and will receive a form number in Smart Solve. All staff must complete logs per shift/ communicate via LIS & logs of pending work. - Fluids - Nurse collects - Timed stat during AM Collections and throughout the day.	Fluid: follow up/document. Reschedules with RN name.	ALL
Time cards/ Kronos update	Lunches/Brunches and Punches a Must! Please do not miss punches or take extended periods of times for lunches. Cover your co-workers for lunch breaks. Group Leads/ Sr	D	age 2 of 4

Item Discussion Action Follow-

Reps to coordinate lunch breaks.

Miscellaneous Items/Reminders

 Tube expirations: GL & Designee/s does the Audit every month. Check each tube your hand touches!

- Supplies: stocking up/putting away is everyone's job.
- Lab Coat Machine: Many on various shifts are trained!
 Please complete duties as assigned.
- FES pending list. Do it as per SOP. Do not send Petri dishes to Ref Lab unless Micro Tech authorizes it.
- Surgical- do ASAP. Specimens dry up/ TAT delays for set up and testing. Double check every Req that comes into the lab and put on two signatures at the back of the requisition in order to follow instructions in SOP and to have a guick check on ordering correct tests at all times!
- Open every manual requisition dropped off with or without specimens, a must. Double check with Lead/ Core Lead/ Supervisor/ Techs and ask for help when hard to read/process. Do not send anything to Ref lab without double checking it/processing it.
- Problem logs; Attach QV forms give to Supervisor.
- MIQ & QD Website searches for the correct tests/pricing must be done.
- New! OR specimens will be hand delivered and will be sent along with a form (see example posted on the tube system) Orders will be entered by OR Nurses and our staff must reconcile and compare orders on the OR surgical Requisition and in LIS. Call OR if orders are not clear.
- Misc. tests call Lab Director/s only from 9:00 AM to 5: 00pm. Hold off unless specimen integrity is in question and if specimen life expires shortly.
- Do not leave your work stations without notice and take time away from other employees.
- Field Ops Call out Process: Call Core Lab group lead and department> Call immediate supervisor. Call must be made 2 or more hours before shift time. Supervisor calls/ sends messages to department> calls various staff regardless of timings to find coverage. Group Lead documents on WFC Adjustment log, Staff in dept document on shift log and access staffing> supervisor documents.
- Use of Phlebotomy workload forms on a daily basis.
- QV & RL Solutions responses by supervisor & staff in real time.
- AS/ GL is in charge in absence of Supervisor's...
- Do not get on the internet when on shift and on company clock! It's prohibited!
- Phone etiquette: 3 rings... Smile! AIDET!! Set your phone
 to the ringer volume of your hearing preference and do
 answer it. Do not transfer calls without letting the person
 know who the caller & what the issue is.
 - 1. Greeting
 - 2. State your name
 - 3. State your Department
 - 4. Ask: How may I help you?

Up Coming, New and in the works

- New Cross-training form (draft) see attached. Neal will roll out after finalized.
- Cross- Training- Jennifer, Teddy and Dericka are going strong.
- New BD Vacutainer holders. See notice board for new version of the holders. Neal to QC before final approval for staff to use. Send email to Lab Directors and me when

ALL

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			up

they arrive and when they were put in use with emailbox to staff for notification.

- New! WAH to use same format and similar topics for their monthly huddle effective 4/1/15. Send minutes to me and Lori for approval before and after the huddle and before sending to Leslie to load MTS.
- Neal to Conduct April huddle and send minutes to Lori for review before sending to Leslie to load in MTS for SGMC. Huddle to be completed by 4/15/15.

Questions/ Open Forum

10 minutes

Next Monthly Meeting TBA