

Quest Diagnostics Inc.,
At
Shady Grove Medical Center

SGMC FIELD OPERATIONS STAFF MEETING

MINUTES

APRIL 30, 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: 1130 AND 1630

Item	Discussion	Action	Follow-up
Welcome/Remarks	<ul style="list-style-type: none"> • Review along with staff: • Our Mission: <i>"We demonstrate God's care by improving the health of people and communities through a ministry of physical, mental and spiritual healing."</i> • A.I.D.E.T: <i>Acknowledge, Introduce, Duration, Explanation and Thank You.</i> • R.I.S.E.S/ Standards of Behavior: <ul style="list-style-type: none"> ◦ <i>Respect, Integrity, Service, Excellence, Stewardship.</i> • Quietness will be maintained from 0300-0400 and 1500-1600 during which noise reduction is to be enforced and necessary services are to be carried on without must noise in the hallways and in the patient rooms. • Quest Diagnostics Incorporated: Phlebotomy Code of Conduct review. • Meeting minutes are posted online for your review! If you do have any questions please send them to me. • Review AHC Intranet frequently for Healthstream scores and other information on AIDET and RISES. All PC's do have AHC Intranet. • Thanks for a doing a good job during my three week vacation: <i>Supervisor Neal</i>, and All AHC Group Leads and staff- I thank you! • Thanks to all staff for being flexible in helping out during various shifts and also with short notices. We are three FTE's down and still operating well with your co-operation. <i>Merlyn, Baker, Sunday, Talwinderjit, Apsara, Rajesh, Shanthy and Sabir</i>, we appreciate you pitching on for the night shifts. And thanks also to the many others who work extended hours or six days to help serve our patients. Please continue to help each other out via shift changes/exchanges, better TOP planning and good communication. OT is also to be kept at minimum. • 9715 OPL will probably move during mid-May, 2015 to the 1st floor... that's the last I had heard. Updates will follow. Thank you staff & GL of the OPL and others for helping to do 12 hour shifts until the FTE comes in house. • 2nd Quarter RecognitionQuest Awards are ongoing. One employee sent me a thank you note. Please continue to appreciate staffs that go the second mile in service to our patients. • NEW PHLEBOTOMY SHIFT TIMINGS effective, 6/1/15 will be as 	Info	

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	<p>follows: One month notice is served today...</p> <ul style="list-style-type: none"> o 0400-1230, 1230-2100 and 2100 to 0530. • More new carts will be ordered gradually 1-2 per month or so. We will balance out old and new carts. • RPT position vacated by <i>Marion</i> was posted & interview completed. Offer is made at this point. • Night Shift Position vacated by <i>Alex</i> was opened on 4/29/15. If interested please let me know. Hours 2100 to 0530. Mon- Fri as needed, as scheduled and every other weekend. • <i>Amandeep</i> and <i>Shanthi</i> fully trained for Processing! Congratulations! 		
<p>Safety: Patient and Staff</p>	<p>Safety Reminders:</p> <ul style="list-style-type: none"> • FOCUS SOP guidelines at all times. • Use only Quest approved/supplied equipment. • Hand hygiene: "Pump in Wash-out" Strictly continue with each patient visit on in or out patients. • When in doubt... refer SOP manual first>consult GL or a supervisor/manager. • Dispatch: to clean surfaces, carts and trays multiple times in a day. Document on daily duties checklist. • Positive Patient Identification: 100% of the time. • OPL patients: 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. • Use lab coat wall hangers. Do not throw your used coats on the carts while going on a break. • Clean carts, arrange them. Keep carts and trays ready for next AM. • Follow AHC dress code policy at all times. Appear professional at all times. • Earrings, lanyards/cords/ neck ties worn around the neck/hold ID badges <i>not</i> to be used, especially when serving the ABH patient's. • No Food & Drinks in the lab at any time. • N-95 masks/respirators read signs > use as directed. • Vocera/ Pagers: immediate courteous responses by all staff required. Carry an extra battery if need be! <p>New:</p> <ul style="list-style-type: none"> • It's Spring Cleaning time! Clean your work areas and remove clutter. • Do not handle dry ice that is being dropped off in Styrofoam boxes (white boxes by the copier machine) if you are not trained on handling it. Cathy and Ash will send updates on it before next meeting. 		
<p>Metrics, TAT and Healthstream scores.</p>	<ul style="list-style-type: none"> • AM collections Metric: We are at 89% as measured in the hospital's PI Measure phase for March (review 3 attachments and notes with staff) • New AM collections floor division sheets are in draft format, coming out this week. • Receipt of specimens in LIS is to be done by Processing and Phlebotomy staff. • Critical Value Callback: Good. • Blood Culture volumes: Good. • STAT collections within 15 minutes: March 42%. Averaging 42% for the first Quarter. • Blood Culture Contamination Rate: Good. (It was high in February! Please clean according to SOP and do not retouch sites of venipuncture) • Healthstream: Averaging 50%. <i>Refer, practice and expand on Hospital Mission Statement</i>, it will help us improve our scores. Practice it will help us show more care towards our 	<p>Goal (Receipt): 95%-100% in LIS by 0629 Results: 95% - 100% results by 0730 (Technologists)</p> <p>95% calls in LIS within 1-2 hours. BLC Vol 8-10/bottle</p>	

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	<p>patients, and be more understanding of their patients & of their families.</p> <ul style="list-style-type: none"> • ER specimen throughput: Good. Goal is 5-10 minutes receipt in LIS from time of drop off/ arrival via tube system. • Continue to 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. • ASAP Collections: 30 minutes. 		
Staffing and Schedules	<p>Overall flexibility from all staff is required for us to stay afloat. We are looking at least 3-4 months from training to performance when new staff begins. Please review schedules carefully and pitch in as you can and as requested. Many times Group Leads and I do approach you for your help.</p>	All to be flexible in helping	SMK
TOP, Attendance & Tardiness.	<p>Refer TOP calendar before requesting TOP. Please do not request more than what you earn as TOP! Tardiness/call outs lead to overtime and other patient care /service delays. Keep hospital & lab patient care in mind at all times.</p>	Plan TOP time.	SMK
Competency & MTS	<ul style="list-style-type: none"> - IntelliQuest- Post Exposure Training - MTS – resets done. - Paper competencies: Nearly 50% - Proficiency Testing- done! 100% <p>(Check the bulletin board for updates. Read e-mailboxes! Read Lab Alert, a copy was provided to each staff on 3/30/15)</p>	<p>Staff to check online frequently. Deadline is 5.15.2015.</p>	ALL
Daily Shift Logs and OL, PL, Un-received Coll lists	<p>Daily Duties Checklists: Accountability from all in all sections! (Phlebotomy log is in draft, all staffs with GL are requested to work on it to help finalize) Use what we have until then.</p> <p>All staff must complete Daily Duties logs per shift/ and attach latest PL and Un received logs per SOP. Pay very close attention to Fluids, Nurse collects, Multiple orders, Timed, Stat and ASAP orders during AM Collections and throughout the day. <u>New specimen log:</u> 5-1-2015. See attachment.</p>	<p>Fluid: follow up/document. Reschedules with RN name.</p>	ALL
Time cards/ Kronos update	<p>Please continue to pay close attention to your punches. Group Leads/ Sr Reps are coordinating lunch/breaks. Be in your work areas!</p>		
Miscellaneous Items/Reminders	<ul style="list-style-type: none"> • Supplies- no boxes on the floors! Putting away is every ones responsibility. If you notice low counts on supplies or no supplies on shelves, please let GL or me know right away. • Lab Coat Machine- many are trained by our GL Jaraysha. Please follow her direction in stocking up/emptying. • FES pending list: Refer in on screen>keep it clean> let GL or me know> call Chantilly to help clean it up. Ron Master, Director, Microbiology, also refers it as frequently as he can. • Surgical orders- do ASAP & work with Micro techs to save irreplaceable specimens in lab. Read Sharon Barry's mailbox in LIS. • Open every manual requisition double check! Two signatures required to show double checks are happening in real time. • Subpoena from the Courthouse: If you are subpoenaed... turn in a copy of Subpoena; calculate mileage from hospital to Court and back, produce parking ticket/bill and note down time spent in the Court and meet with me for submitting for reimbursement. Arrange your shifts with Zohra, Jaraysha/ me so that you can attend. • 10 ml red plain glass tubes are discontinued by Stephanie, Manager, Blood Bank. If Blood Bank needs a draw for Ref Lab/ ARC draw 6 ml plain/red top plastic 1-2 tubes and label 		ALL

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	appropriately.		
Up Coming, New and in the works	<ul style="list-style-type: none"> • New Cross-training form –see posted in dept. • New BD Vacutainer holders. Not arrived yet! Stay tuned. 		
Questions/ Open Forum	10 minutes		
Next Monthly Meeting	TBA		

Sign Up Sheet

Program Title: *Staff Meeting - April*


Date: *4-30-2015*

Dept: SGMC Field Operations

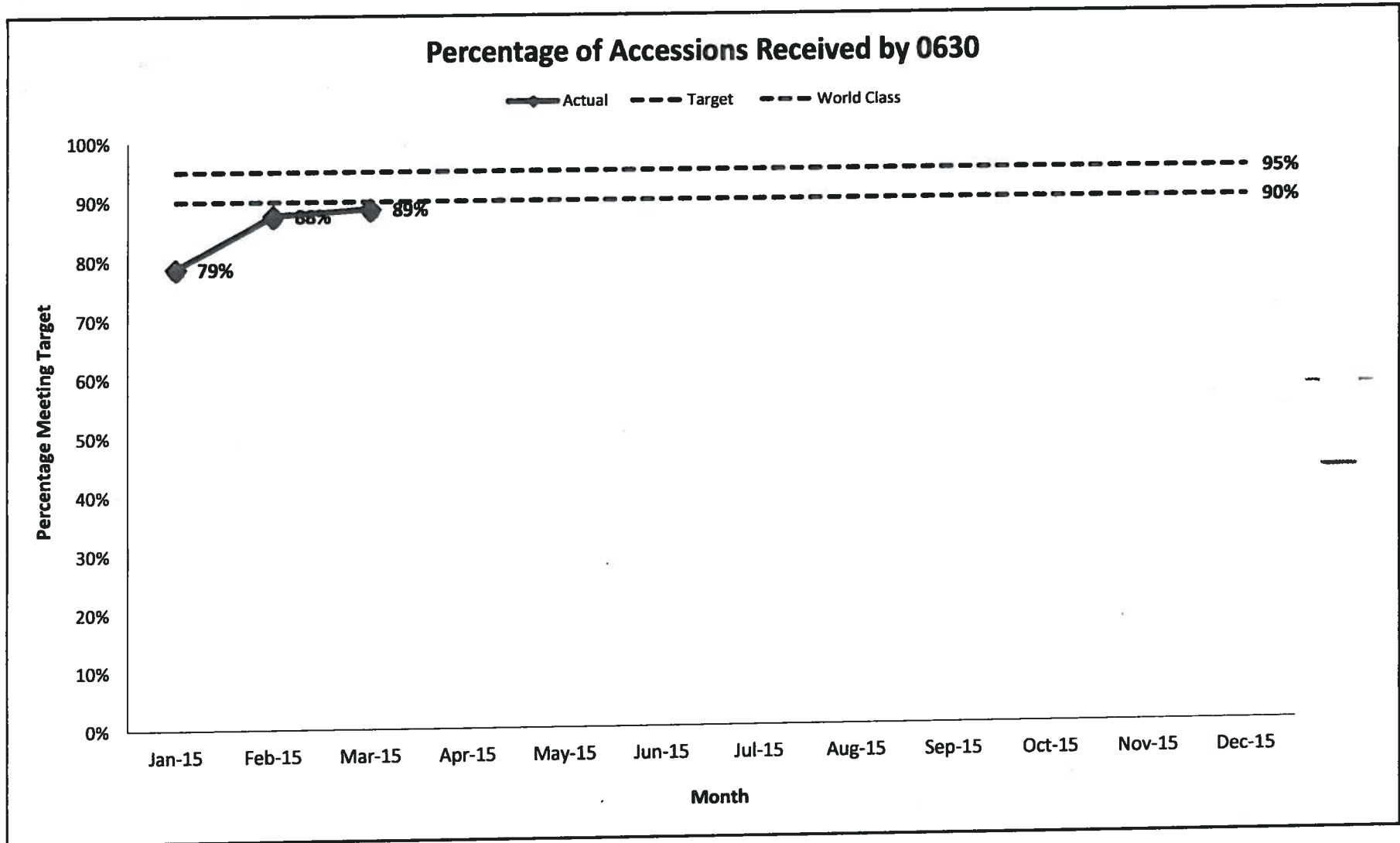
	Employee ID <i>REQUIRED</i>	LAST NAME	FIRST NAME	SIGNATURE
1.	104967	Allah Rakha	Sabir	
2.	104972	Babra	Talwinderjit	<i>Babra</i>
3.	163008	Barber	Jacqueline	
4.	158763	Batay	Maria	
5.	153695	Cox	Alex	
6.	128553	Dadzie	Dorcas	
7.	154997	Dam	Katherine	<i>Katherine</i>
8.	116143	Davis	Jennifer	
9.	155286	Dwanyen	Marion	
10.	117014	Feng	Li Ping	<i>Li Ping</i>
11.	110490	Gajjar	Rajesh	
12.	137022	Grant	Frederica	
13.	131466	Guerrier	Pierre-Carmel	
14.	185522	Hayes	Shanthi	
15.	134128	Jagrup	Agnes	
16.	104937	Kabangu	Kapinga	
17.	104938	Kanagarathinam	Anandaraj	
18.	146527	Kattel	Apsara	<i>Kattel</i>
19.	136445	Kalsi	Sonia	
20.	136631	Kaur	Amandeep	
21.	128590	Mabiki	Philomene	<i>Philomene Masika</i>
22.	150835	Mable	Atsu	
23.	150738	Middleton	Dericka	
24.	(WAH)	Musoke	Baker	
25.	185376	Onasanya	Sunday	<i>Sunday</i>
26.	104919	Patel	Parul	
27.	153674	Scott	Laurie	

Sign Up Sheet

28.	139874	Smith	Jaraysha	
29.	134613	Smith	Pauldo	
30.	104890	Shana	Zohra	
31.	112360	Thomas	Merlyn	
32.	169799	Tessema	Tewodros	
33.	163065	Villa- Agustin	Tirso	


Samson Khendagale

SERVICE

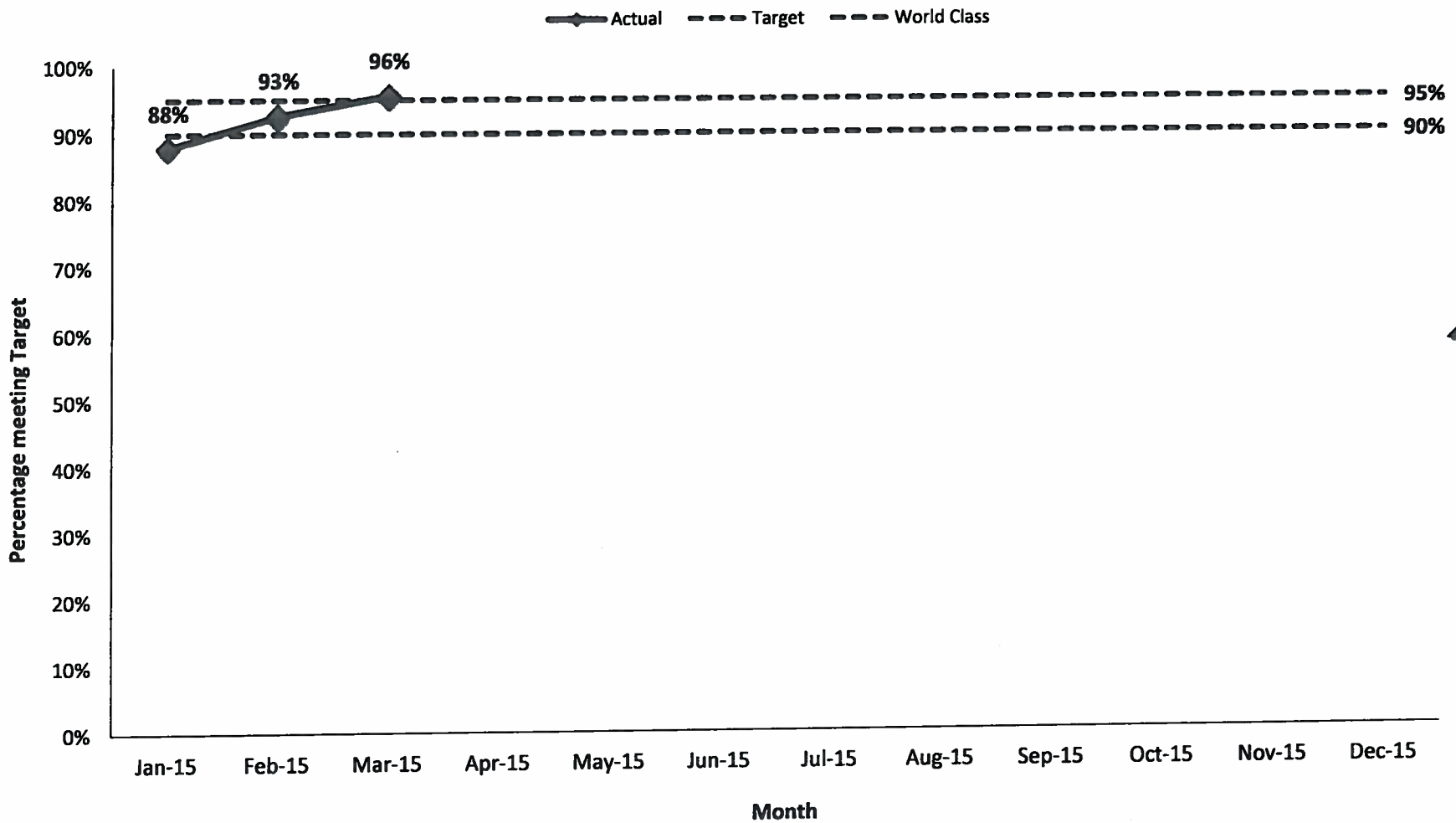


Initiatives:

- 1) Daily Huddle to review progress, assess distribution of assignments, and identify roadblocks.
- 2) Utilize phlebotomy teams to optimize productivity. Transport specimens via pneumatic tube every 5 samples.
- 3) "Nurse to collect" samples: Tubes/labels provided to nurse and orders rescheduled to next hour as RNWD.
- 4) Tube System Downtime Plan: Lab Vocera 1 and Lab Processor 1 will transport samples to lab.
- 5) Team approach to specimen receipt. Group lead pulls pending log at 0630 to identify outliers.

SERVICE

Percentage of Tests Resulted by 0730

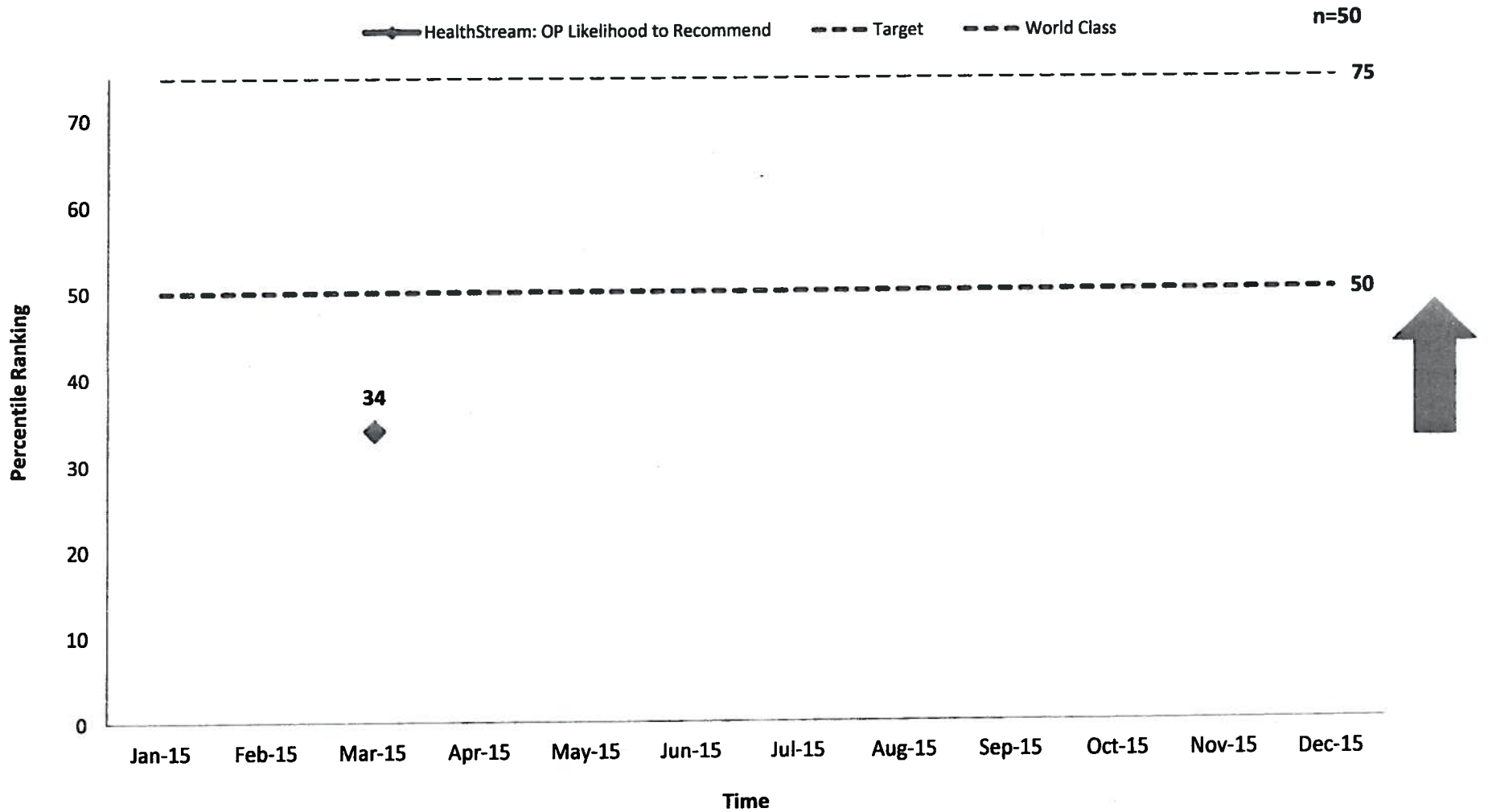


Initiatives:

- 1) Utilize TAT report to identify outliers.
- 2) Work with staff to discover roadblocks.

SERVICE

HealthStream: OP Likelihood to Recommend



Initiatives:

- 1) Direct observation of staff for validation of AIDET.
- 2) Review HealthStream data weekly: Voice of the customer and patient level report detail.
- 3) Work closely with partners: provide and ask for regular feedback.
- 4) Track feedback by encounter from patient level detail.

Laboratories at Washington Adventist Hospital, Shady Grove Medical Center and Shady Grove Adventist Emergency Center at Germantown

LABORATORY ALERT

Field Ops Staff

March 30, 2015

Subject	Competency Packets
Explanation	Competency documents for the March – May time period are distributed as a packet within a folder to improve the flow of papers
Instructions	<ul style="list-style-type: none"> • Complete the competencies for the duties that you are trained and authorized to perform. • Only certain staff will be performing direct observation. If you do not know who is authorized, see your supervisor BEFORE beginning any competency • Review each page of each competency to verify all areas have been completed by the employee, observer & reviewer, as appropriate. • If any competency does NOT pertain to you, see your Supervisor to verify. He will mark the first page 'N/A' or may discard it. • Return ALL competencies and attachments within the folder to your Supervisor. • Additional blank competency forms will be available in a binder.
Expectation	All staff will complete the appropriate competency documents AND the MTS quiz before the due date.
Due Date	All completed competencies are due May 15, 2015
Contacts	Samson Khandagale and Neal Maskare
I.Barrett / 3.27.15	