

Quest Diagnostics
At
Adventist Hospital Labs

GENERAL LABORATORY STAFF MEETING

MINUTES

(MAR 2016)

TIMES: 0715, 1330, 1500

DISTRIBUTION: STAFF MEMBERS

Item	Discussion	RISES / Action	Follow-up
Combined Minutes			
*State Ground Rules!!	Respect each other, talk one at a time, everyone has the right to speak as long as they do so respectfully. Demonstrate RISES in all we do!	Respect	NA
Blood Bank	Outpatient Orders to Transfuse. If a patient has an order for transfusion call blood bank and they can enter an order for TNS. Blood Bank armbands are transferable between GEC and SG but not WAH. The medical records number changes between WAH and SG. When in doubt call blood bank. Always carefully check patient ID.		Stephanie
Communication	Communication and Team Work.... Realizing everyone is busy we must even more diligently focus on improving team work. Issue: We are receiving a number of complaints regarding slow receipt of lab samples upon arrival. When processing is short staffed the technical staff must lend a hand. The processor covering must communicate needs clearly to the Tech-In-Charge. We need to expedite processing and distribution of STAT and ASAP (ED) samples. Issue: Increase awareness around Stroke, Chest Pain, and Sepsis protocols. Collection, handling, performance, and resulting of these protocols is of the highest priority.	Respect, Integrity, Stewardship	Rob
IT Projects	<ul style="list-style-type: none"> • Iris Auto-verification is in progress assigned to Dennis. • DI Specimen Archiving in progress assigned to Marie (This will replace SpecTrak). • Newborn screen (NMS) interface is being discussed with the State Lab and Marie is working on a project plan. 		IT

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Training	<p>Training discussion.</p> <p>We have been refining our staff training over the past few years. Our goal is to provide the best possible training for our staff members. Selection of the appropriate trainer is key and the role is extremely important to the overall success of the laboratory. One of our key success drivers is to limit the number of trainers resulting in fewer handoffs and therefore greater training focus and efficiency.</p>		MGT Team
QA	<p>Review the monthly metrics posted on the bulletin board.</p> <p>What key metrics do we monitor? Throughput - K, TROP, COAG, HGB, GS, Malaria, AM labs Received by 0630, AM labs Resulted by 0730.</p> <p>CAP window is open. Inspectors can arrive at any time. We always need to be inspection ready 365 days a year.</p> <p>Critical values must be called immediately even prior to repeat. These calls must be documented</p>	Excellence	Supervisor
Core Lab Update	<p>Certain low volume TDM's and Myoglobin are now being sent from WAH to SGMC. We must ensure samples are sent to SG timely as to not significantly delay TAT.</p> <p>Continue to ensure HA1C samples are sent to SGMC as scheduled to ensure TAT. This is especially true on the weekends.</p> <p>Tech-In-Charge (TIC) Role – The TIC is responsible for the lab. Anyone taking a break should let the tech in charge know they are going and check in upon return.</p>	Respect, Integrity, Stewardship	Supervisor, Rob
Safety	<p>Keep the lab clean and organized!</p> <p>Safety First -</p> <ul style="list-style-type: none"> • We have already had a couple injuries this year. When changing probes use extra caution as this is very high risk. • Wear proper PPE. • If you drop sharps on the floor or see them on the floor be proactive. • Do not over fill sharps containers or biohazard boxes. DO NOT LEAVE BIOHAZARD BOXES FOR THE NEXT SHIFT TO TAKE CARE OF. 	Stewardship	Everyone
Culture of Always (Customer Service)	<p>Phlebotomy staff at SGMC recognized at the Performance Improvement Council for being a role model for AIDET and connecting with patients.</p> <p>Let's all continue to practice and utilize AIDET in all our interactions.</p> <p>Ensure when answering the phone you always provide your department and name. How is AIDET applied on the phone?</p> <ol style="list-style-type: none"> 1. Answer the phone in 3 rings or less. 	Integrity	Everyone

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	<ol style="list-style-type: none"> 2. Identify department name. 3. Introduce yourself. 4. Establish the purpose of the call. 5. Communicate any delay. 6. Explain as needed to ensure the caller gains understanding. 7. Always thank the caller. <p>IntelliQuest Assignments – The Post Exposure Course is now available. If your assignment appears to be complete and you have not taken the course in 2016 please notify your supervisor.</p>		
POCT	Only give out POC supplies that are on the approved list.		Stephanie
Phlebotomy and Processing	<p>When we receive a complaint you must complete a QV form.</p> <p>Reminder – We do not return unlabeled or mislabeled samples to nursing to label/re-label. The exception to this rule is if the sample is irretrievable. When in doubt ask the Tech-In-Charge.</p> <p>Please be aware and FOCUS when handling sharps.</p> <p>Processing must ensure mandatory test information is added for XQUAD and XHIVRT. It is not appropriate to enter “None” or “NA” as response.</p> <p>We have received a number of complaints about our staff being rude. This should never happen. Be responsive and do not argue.</p> <p>Protocol and Timed Collections: This is a struggle to manage but we must make every effort to collect samples on time. These are very demanding and difficult to manage.</p> <ul style="list-style-type: none"> • Sepsis Protocol: STAT or Timed Lactates • Cardiac: All cardiac markers are timed and tracked 3 X3 hours • Stroke: STAT (Handle STAT and Run STAT). TIC has pager to let them know samples are coming. • Coagulation: Heparin (PTT) collected 4 hours after IV adjustments. <p>Alarm for tube system at SGMC has now been installed.</p> <p>New Phlebotomy carts are now at SGMC; these have been assembled and are now in use.</p>		Samson and Rob

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Interdepartmental Survey	<p>Customer Service:</p> <p>How are we perceived by others? How do we handle phone conversations? Are we being perceived as helpful? Are we polite? The expectation is we are always polite and respectful no matter how we are treated. If you are treated poorly let me know details using QV form and I will follow up.</p>	Communication to staff	Supervisor/ ROB
Minimizing Blood Collections on Newborn Babies	<p>The lab has been asked to help reduce the amount of blood collected on newborns. This is especially important for low birth weight babies and at SG the NICU is really of key importance. A single mL of blood makes a difference and we all must focus to help with the effort.</p> <p>The LIS does not list the actual required volumes for babies. Please do not quote minimum volumes for adults to nurses and physicians requesting minimum volumes on newborns. These will most likely require calls to the reference labs especially if multiple tests are ordered.</p> <p>Technical staff members should do their best to process small volumes whenever possible for onsite testing.</p>	Communication to staff	Supervisors
Cerner	<p>Tubes are still being received at SG and WAH without orders crossing to SQ or not having been placed.</p> <p>Staff must to continue to follow the process and document all calls to the units every time we get tubes without orders.</p> <p>If we get calls about CERNER not receiving lab results, call the IT Help desk.</p>	Issues continually forwarded to nursing leadership and IT	Supervisor

Facilitator: Rob SanLuis