

Quest Diagnostics at

Shady Grove Medical Center and Washington Adventist Hospital

MEETING

MINUTES

5.12.2016

PRESENT: SGMC: 5.12.2016 @ 0640-0725 STEPHANIE CODINA, MARY-DALE ABELLANO, JACK AMNUAYSIRIKUL, MILKA GEBREGZIABEHAIR, HOLLIE GENSER, YVONNE NGWA, ANNE RIENKS
 SGMC: 5.12.2016 @ 1530-1615 STEPHANIE CODINA, SARAH DELINGER, HOJAT GOUDARZI
 WAH: 5.13.2016 @ 0640-0725 STEPHANIE CODINA, MARY-DALE ABELLANO, YESHIWAS BELEW, VANESSA ROBINSON
 WAH: 5.13.2016 @ 1455-1525 STEPHANIE CODINA, HABIBA LAKO

DISTRIBUTION: BLOOD BANK STAFF MEMBERS

MEETING COMMENCED:

Item	Discussion	Action	Follow-up
Minutes			
Everyday Excellence	We reviewed the 4 modules for Customer Service. 1. Who is your customer? 2. What can I do now? 3. What you say and how you say it on the phone. 4. I serve internal customers.	Review the modules on MTS and sign off understanding.	None
New Cost Centers	We discussed the new cost centers, how to submit mileage reports, and how to change the cost center in Kronos. Cost centers: - 1380102 = managed labs, core lab - 1380104 = managed labs, blood bank Site codes: - EPE = WAH - EFP = SGMC - JAY = GEC	See Stephanie if you need help filling out mileage expense reports or if you need help changing your cost center when clocking in.	Stephanie to put instructions on the time clocks.
Career Ladder	The career ladder will be changing; we are adding a rung for MTII Trainer. - MTII - MTII Trainer - Senior Tech Reminder that you cannot apply for Senior Tech; you must be recommended.	Let Stephanie know if you want to become a trainer/competency assessor for blood bank. You need to meet general supervisor requirements under CLIA. That means you must have at least 2 years of BB experience.	NA
Competency Assessment	The competency assessment program will change this year. The new form will be out soon, we reviewed a	None	NA

Item	Discussion	Action	Follow-up
	<p>POC example at the staff meeting.</p> <ol style="list-style-type: none"> 1. Only designated staff members will be allowed to train and assess competency. Staff members must attend a train-the-trainer session and be delegated in writing by Dr. Cacciabeve. 2. Staff will be required to meet requirements. All staff have already met the requirements for unknown samples. Please work on doing QC for all test systems (Echo, manual capture, reagent receipt, daily rack 1 & 2, fetal screen, sickle screen, etc.) <p>More information to follow when form is ready and assessors have been designated.</p>		
Pooling Platelets	<p>When ARC leave an apheresis platelet in 2 bags and we combine the bags prior to issue, this is not "pooling" in the true sense.</p> <ul style="list-style-type: none"> - There is no requirement to document this on the product modification log. - You must change the expiration date (24 hours from the time of pool OR original expiration, whichever is SOONER). 	None	NA
Open Forum	<p>Sarah mentioned that we are getting short T&S samples from the ED and L&D. When we call, nursing staff tells us we only need 3mL of sample, so that's all they're sending.</p>	<p>Stephanie sent e-mail to nurse manager and educator for L&D and ED asking them to collect a full tube.</p>	<p>Continue to reject samples that have <5mL in them.</p>
Meeting adjourned			
Next meeting the week of June 6, 2016			

Stephanie Codina
Recording Secretary