

Quest Diagnostics  
At  
Adventist Hospital Labs

**GENERAL LABORATORY STAFF MEETING**

MINUTES

**APRIL 2017**

**TIMES:** 0700, 1330, 1500      **CALL IN:** 1-877-951-6301    PC 8064564

**DISTRIBUTION: STAFF MEMBERS**

Item	Discussion	RISES / Action	Follow-up
<b>Combined Minutes</b>			
<b>*State Ground Rules!!</b>	<p>Respect each other; talk one at a time, everyone has the right to speak as long as they do so respectfully.</p> <ul style="list-style-type: none"> <li>• Demonstrate RISES in all we do!</li> <li>• Demonstrate AIDET in all we do!</li> <li>• Five/Ten Rule: Acknowledge and make eye contact with everyone who comes within 10 feet of you; Say hello to everyone who comes within 5 feet of you.</li> </ul>	Respect	NA
<b>2017 Lab General Staff Meeting</b>	<p>Staff Meetings follow the Hospital Agenda:</p> <ul style="list-style-type: none"> <li>• <b>AHC Mission – We extend God’s care through the ministry of physical, mental and spiritual healing.</b></li> <li>• Rises Value of the month “<b>SERVICE</b>” – <b>servicing the patients. Giving them what they need with compassion. Listen and communicate by explaining everything to them.</b></li> <li>• Pillar of Excellence of the Month – “<b>FINANCE</b>”</li> <li>• Department review of 6 Dashboard Measures of Success. Our metrics measure our success delivering our objective or “One Main Thing.”</li> </ul> <p>Our “Main Thing”, Core Purpose, Processes &amp; Responsibilities – <b>The Laboratories core mission is to provide accurate and timely results</b> to aid clinicians in providing patients with “World Class” diagnostic services and care.</p>	<p>In what ways can we show patients Integrity?</p> <p>What can we do to improve our patient’s experience?</p> <p>“How was your visit?”</p> <p>“What can I do to help?”</p>	Mgmt. Team and all staff
<b>Staffing Status &amp; Budget</b>	<p>Our Pillar this month is “FINANCE”</p> <p>We need to maintain appropriate staffing levels, reduce high costs, i.e., supplies and overtime.</p> <p>Staff noted that some of the nursing floors are wasting supplies at WAH. They take too much and return when they are ready to expire. Blood culture bottles are expensive.</p>	<p>Look at different ways of distributing supplies to avoid waste.</p>	All  Mgmt
<b>IT – Sysmex</b>	<p>Sysmex will be going live on June 6. First will be SGMC; then WAH and GEC.</p>	Excellence & Service	Dennis & Marie



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	patients are lonely, you can contact the Chaplains and they will visit them. Never underestimate how what you do impacts people.		
<b>Team Work and Communication</b>	Everyone needs to communicate their concerns. Please go to your supervisor first. Many things we can help and some things we cannot change. Everyone needs to work together as a team.	Respect & Integrity	All
<b>Quest “Everyday Excellence”</b>	<p>We reviewed the Everyday Excellence “What Matters to Our Customers” modules.</p> <p>Quest wants to provide an easier, transparent and more personalized experience for its customers. Shield them from complexity. We all need to know what matters to our customers. We need to think about customer needs and policies, i.e. miscellaneous tests, verbal orders (which could easily be misunderstood. There are 3 things that matter to our customers:</p> <ul style="list-style-type: none"> <li>• Timeliness</li> <li>• Accuracy</li> <li>• Physicians Results</li> </ul> <p>We also must be easier to do business with by making things:</p> <ul style="list-style-type: none"> <li>• Easier</li> <li>• Transparent</li> <li>• Personalized</li> </ul> <p>The power of small things. When we think we know, we are not open to new ways. We need to unfreeze old ways of working and provide easy, transparent, personalized service to our customers. We need to meet or exceed goals and remove the barriers that keep us from meeting them. Determine what really matters to them. If the answer is “no” give them options. We need to take customer care to another level rather than doing the same old things. Be proactive and creative. When you discover out of date SOP’s, photo copy them with your comments and give them to your supervisor.</p> <p>Sometimes patients are a hard stick and ICU does not want us to draw full tubes. We need to follow policy and make sure the next person knows. If you need a seasoned phlebotomist, tell your manager. We need to decrease the number of short samples (QNS). Critical value calling nurses - We need to look at electronic solutions.</p> <p>Nurses are not using lab labels. We need to require labels from the nurses as well as labeling patients at the bedside.</p> <p>Phlebotomist should keep documented details of everything done on their run sheets. This includes noting breaks or when you are working on other things, i.e., scrubX, specimen processing, etc.</p> <p>One of our initiatives to improve communication was to change phone handling.</p>	<p>Respect, Integrity, Service, Stewardship Excellence</p> <p>What can we do to increase customer satisfaction?</p> <p>Can we provide results timely and accurately? Avoid delays?</p> <p>How is it working?</p>	<p>All</p> <p>Stephanie</p>

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	<p>WAH - Too many calls are being transferred and it causes frustration, so they continue to call the front desk. Lines are blinking, but do not know what to pick up.</p> <p>We have a new (Quest) VP – Bill Williams and Rob has a new supervisor Sal Malangone (replaces Sherry Icardy).</p>	<p>We will check on phone tree and paging system. Brainstorm with Ingrid.</p>	<p>Stephanie</p>
<p><b>Open Forum</b></p>	<p>WAH - It is difficult to call critical values on discharged patients, because no one wants to take the results. Hospital policy states we call these results to the hospitalist.</p> <p>WAH - We are seeing a rise in specimens received without orders. This is partly due to the Cerner requirement that nursing staff must acknowledge/collect specimens in Cerner in order to transmit the orders to the lab system.</p> <p>WAH - Staff requested a way to verify a providers NPI number (Dr.'s license #) when giving results over the telephone.</p> <p>WAH - It has come to our attention that some claims are being denied because the date of service does not match. Need to review and check into changing the date.</p> <p>SGMC – Some PKU's do not have the doctor's name on them Also we are not receiving timely results and have to follow up all the time with the State.</p> <p>SGMC - In some isolated instances, the pediatric tubes are not being sealed correctly by the nurses.</p> <p>SGMC – A phlebotomist went in a patient's room that was deceased. Needs to be documented and RL Solution form filled out.</p> <p>SGMC – Phlebotomy staff had a pre-assembled/used needle and holder left in one of the carts.</p> <p>SGMC – Tidiness – someone left a needle attached to a holder in cart. These must be assembled in front of the patient</p> <p>SGMC – Patients get frustrated when they have to come in for results.</p> <p>SGMC - Phlebotomists need to help in processing.</p>	<p>Document these on a PI/variance forms</p> <p>We will analyze as part of our DMAIC projects.</p> <p>See if the NPI checker can be added to lab computers</p> <p>Update procedure</p> <p>Work with Cerner to have them automatically cross over and that will resolve the issues.</p> <p>Inform NICU &amp; nursing.</p> <p>Discuss with Medical Staff</p> <p>Submit an RL when he gets the QV form with description of incident&amp; discuss in huddle.</p> <p>Address in huddle</p> <p>We will check to see if the hospital has patient portals.</p> <p>Look at staffing levels.</p>	<p>All</p> <p>Stephanie</p> <p>Marie</p> <p>Stephanie</p> <p>Stephanie</p> <p>Stephanie</p> <p>Stephanie</p> <p>Samson</p> <p>Samson</p> <p>Stephanie &amp; Rob</p> <p>Stephanie &amp; Samson</p>

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	<p>SGMC – Patients are complaining that they are being drawn too many times. It depends on what a patient is being drawn for, i.e., cardiac markers are to be drawn every 3 hours.</p> <p>SGMC – There are a lot of multiple orders.</p> <p>SGMC – There was an incident where a phlebotomist dropped a tube on the floor of collected baby’s blood and the patient complained and viewed it as we were being careless and do not care.</p> <p>SGMC – There was an isolated incident where the title Jr. was on the lab label and not on the armband. Phlebotomist requested the nurse to correct the issue then proceeded to draw the blood. Need to verify DOB with nurse before drawing.</p>	<p>Stephanie is monitoring</p> <p>Locate more places throughout the hospital to provide labels that can be printed so phlebotomists do not have to return to lab.</p> <p>Discuss in huddle.</p> <p>Need to verify DOB with nurse before drawing.</p>	<p>Stephanie</p> <p>Stephanie &amp; Samson</p> <p>Samson</p> <p>All</p>
<b>Next Month’s Rises ”Excellence”</b>	Please review and be familiar with the Pillar and R.I.S.E.S. attached to these minutes.		
<b>Pillar ”Growth”</b>			

Facilitator: Rob SanLuis \_\_\_\_\_

# Focus of the Month

## **R.I.S.E.S. Value of the Month**

*Service*

## **Pillar of the Month**

*Finance*

## **DMAIC Project Phase**

*Begin Analyze Phase: Due May 31<sup>st</sup>, 2017*

# R.I.S.E.S. Value: Service

## **SERVICE** We care for our patients, their families and each other with compassion.

God's love and compassion is the essence of His identity (Exodus 34:6) and manifests in us as the irrepressible urge to come to the aid of those in need (Psalm 40:1-2). God has called us to extend His care and therefore, we are to be "clothed with compassion, kindness, humility, gentleness and patience" (Colossians 3:12) toward all those we serve.

### **Conversation starters:**

- Compassion is understanding another person's pain and the desire to do something to mitigate that pain. If you notice, compassion is both a feeling and an action. Do you think it is possible to be compassionate without action (or vice versa)?
- The RISES definition of service also includes "and each other." Why is service to one another important?
- In what ways can we serve one another?

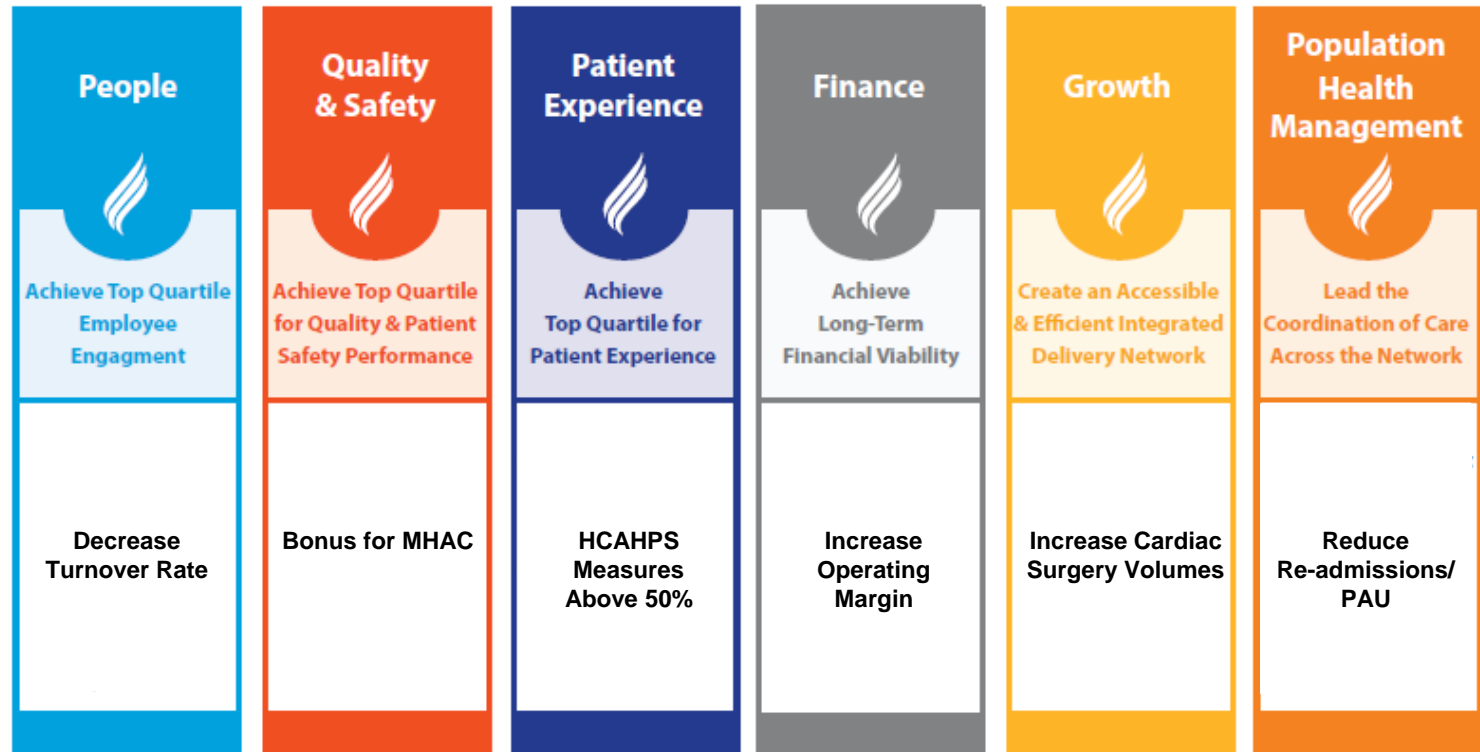
### **Take away thought:**

*"Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around."*

**- Leo Buscaglia.**

## Our Mission:

We extend God's care through the ministry of physical, mental and spiritual healing



## Our Values:

Respect • Integrity • Service • Excellence • Stewardship