

Quest Diagnostics
At
Adventist Hospital Labs

GENERAL LABORATORY STAFF MEETING

MINUTES

JUNE 2017

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

DISTRIBUTION: STAFF MEMBERS

Item	Discussion	RISES / Action	Follow-up
Combined Minutes			
*State Ground Rules!!	<p>Respect each other; talk one at a time, everyone has the right to speak as long as they do so respectfully.</p> <p>We need to listen and communicate with our patients and deliver what is expected, i.e., no errors and timely results. Always utilize AIDET and the 5/10 rule (10 ft. make eye contact, 5 ft. say “Hello” and smile).</p>	Respect	NA
2017 Lab General Staff Meeting	<p>Staff Meetings follow the Hospital Agenda:</p> <p>The values are still R.I.S.E.S., but the individual definitions have been updated and aligned with our mission statement.</p> <ul style="list-style-type: none"> • AHC Mission – We extend God’s care through the ministry of physical, mental and spiritual healing. • RISES Value of the month is “Stewardship” defined as “the careful and responsible management of something entrusted to ones’ care.” • Pillar of Excellence of the Month is “Population Health Management.” • Department review of 6 Dashboard Measures of Success. Our metrics measure our success delivering our objective or “One Main Thing.” <p>Our “Main Thing”, Core Purpose, Processes & Responsibilities – The Laboratories core mission is to provide accurate and timely results to aid clinicians in providing patients with “World Class” diagnostic services and care.</p>	<p>Patient Experience/Excellence</p> <p>In what ways can we demonstrate Stewardship?</p>	<p>Mgmt. Team and all staff</p>
Quest – “Every Day Excellence “ Confidence is Crucial	<p>The confidence and trust our customers have in us is key to enhancing their experience with us and ensuring we are the customers’ lab of choice. We build customer confidence and trust by actively listening and focusing on four communication opportunities.</p> <ul style="list-style-type: none"> • Communication with transparency – this means we provide details to ensure we get it right the first time – no surprises. • Consider how and why we say “no” – explain the reason (a law, regulation, process, or business need) and offer a solution that we can deliver. 	Excellence/Patient Experience/Service	All

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	<ul style="list-style-type: none"> • Respond to the unexpected, or when things do not go according to plan, with compassion and care. • Shield our customers from our complexity – this means tell customers what they need to know <i>by</i> providing an easy-to-understand explanation that does not overwhelm them. They DO NOT need to hear ALL of the details of how our internal processes work. <p>Practice Active Listening – a structured way of listening and responding to focus on what is being said...</p> <ol style="list-style-type: none"> 1. Focus on what the customer says and do not multitask. If it is a phone call, take notes. 2. Respond with a summary of what is said or ask a question. You do not need to agree with them; you are restating to ensure clarity. 3. Notice the customer’s logic and emotion instead of forming your response or fast-forwarding to where you think they are going. <p>Identify habits you need to unfreeze. Think about what you can say or do differently that would be a big payoff for building a patient’s confidence. Listen and focus. When answer is no, give an alternative.</p>		
Staffing Status & Budget	We need to continue to monitor and manage supplies and overtime. We have 4 part time positions that we are working on filling. These are for both WAH and SGMC.	Stewardship	All
Equipment	Sysmex will go live June 20 at SGMC and June 27 at WAH. The LH1 and LH2 will be kept as back up initially. LHs will be live until everyone is trained on the Sysmex and then they will be retired.	Service	All
Code “Lavender”	The hospitals’ have an updated Hand Hygiene procedure. If you notice someone did not wash their hands you need to tell them “lavender.” They should say “thank you”. It was included in the procedure because people were complaining they did not want to say anything to doctors, nurses, etc. In addition to washing your hands, you must pump in and pump out of all patients rooms you enter. Auditors could be watching and think you did not wash your hands.	Quality & Safety	All
2017 PI Projects	<p>These PI projects align with our core purpose or: One Main Thing. Everyone needs to understand what our projects are why they were selected and how we are doing.</p> <ol style="list-style-type: none"> 1. Throughput – Morning Lab Results by 0800 2. Throughput – STAT & Timed Results 3. Timed Sample Collections 4. Samples w/o Orders 5. Mislabeled Samples 6. Patient Experience <p>It is critical that we have staff buy-in for our projects. Please collect the requested data to ensure we can drive the required change to improve quality, patient safety, and work practices which in turn will make everyone’s life better.</p>	Patient Experience	All

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PI Projects Status	<p>We have defined projects (DMAIC) and they are currently in the “Improve” process. We are currently focusing on mislabeled specimens and specimens without orders. Some of the things that will be coming out to address these problems are:</p> <ul style="list-style-type: none"> • Developing Hospital Policy • Updated Phlebotomy Procedure • Training for nurses <p>We are going to require orders on all specimens including cultures. This will be discussed with Dr. Nick.</p> <p>Protocol orders and power plan specimens, i.e., sepsis protocol, are put in without orders. This will also be in the procedure.</p> <p>We would like to move to electronic bar code readers.</p> <p>Everyone must log ALL samples received without orders. When you receive them for Blood Bank, give them to Blood Bank after they are logged.</p> <p>We have discovered that some of the problems with samples received without orders and mislabeled samples are Cerner related due to the way the system is programmed. We are working with IT to fix them.</p> <p>There are also problems with timed orders and printed orders that were done by two different people printing at the same time. This causes labels to be mixed and gapping. All problems have been identified and will be fixed.</p>	Excellence, Service	All
Training / Competencies	<p>Need to complete Empower - Evacuation. You do not have to print the certificates unless you need them. MTS needs to be completed before June 30, 2017.</p> <p>Career Ladders are being finalized for training positions.</p>	Excellence	All
This Month’s R.I.S.E.S is “Stewardship”	<p>The hospital defines Stewardship as the “careful and responsible management of something entrusted to ones’ care”. It means to own the process that happens or “Own it”</p> <ul style="list-style-type: none"> • Own who you are – your talents, skills and abilities • Own your workspace, your department, your entity • Own the patients and families you come in contact with • Own the resources you are given to do the work you are called to • Own the results of your productivity, efficiency and effectiveness. 	Patient Experience / Excellence	All
This Month’s PILLAR is “Population Health Management”	<p>Leading the coordination of care across the network to improve the health of the population we serve. Promote better health and reduce readmissions.</p>	What are we doing to make us easier to do business with?	
Progress to date	<p>The revised procedure on verbal results will be implemented July 1, 2017. Training will cover NPI numbers.</p> <p>The “Critical Step” procedure will also be implemented July 1. It covers the process for performing step-by-step, without any interruption. There will be banners you will wear to show you are working on a critical step. This will be a visual indicator to</p>	Excellence, Service	All

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	<p>other people to not interrupt you.</p> <p>Phlebotomy training will be done for the new SOP “Patient Identification and Specimen Labeling”. It will be implemented on July 5, 2017</p>		
Team Work and Communication	<p>Everyone needs to communicate their concerns. Please go to your supervisor. Many things we can help and some things we cannot change. Everyone needs to work together as a team.</p>	Respect & Integrity	All
Our Dashboard	<p>Our dashboard is a series of standardized graphs showing our metrics that are posted throughout the Lab, i.e., Samples Resulted by 8:00 am, Healthstream – Overall Facility Rating (i.e., parking, registration, assisting people as much as we can).</p> <ul style="list-style-type: none"> • The blue line on the graphs represents what we did. • The purple line is “World Class”. • The green line is our “Target” • The arrow indicates which direction we want to move the blue line 	Excellence	All
Open Forum	<p>WAH – We are not getting complaints since we fixed the phone system. Sometimes when a tech is on a call with a customer, the other line rings and is not answered timely. Everyone needs to answer when it rings.</p> <p>WAH – The phlebotomy area will be painted blue. New chairs and tables are coming. The hospital is getting new signage that will be in English and Spanish. The lab will be the first to get these signs.</p> <p>SGMC – Patients are asking phlebotomists for details regarding the blood work they are having done. It is up to their Doctor or nurses to give them that information. Samson will discuss at the huddles.</p> <p>SGMC Behavioral Health – phlebotomist must be accompanied by the nurse and the nurse must remain in the room until they are thru. Signs will be posted reminding them. The date and time the patient will be drawn should be noted on the patient’s board. Chairs are not located in all the designated areas. Chairs will be provided for all designated areas.</p> <p>SGMC – Patient registration has been short staffed and patients have to wait which is affecting patient care.</p> <p>We DO NOT do legal blood draws.</p>	Review at huddles	Samson
Next Month’s Rises “Respect”	<p>Please review and be familiar with the Pillar and R.I.S.E.S. attached to these minutes.</p>		
Pillar ‘People’			

Facilitators: Rob SanLuis, Stephanie Codina

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

People	Quality & Safety	Patient Experience	Finance	Growth	Population Health Management
<p>Achieve Top Quartile Employee Engagement</p>	<p>Achieve Top Quartile for Quality & Patient Safety Performance</p>	<p>Achieve Top Quartile for Patient Experience</p>	<p>Achieve Long-Term Financial Viability</p>	<p>Create an Accessible & Efficient Integrated Delivery Network</p>	<p>Lead the Coordination of Care Across the Network</p>
<p>Decrease Turnover Rate</p> <p>Redesign Orientation</p>	<p>Standardize clinical & operational processes</p> <ul style="list-style-type: none">• Four things to standardize in 2017	<p>Hardwire Four Must Haves</p> <ul style="list-style-type: none">• AIDET• Purposeful Hourly Rounding• Leader Rounding• Bedside Shift Report	<p>Reduce per unit total cost of TJR, Spine, & Bariatric</p> <p>Develop a bundle payment model</p>	<p>Development of standardized referral processes of major service lines: Cancer, Cardiac, & Ortho</p>	<p>Improve Care Coordination in:</p> <ul style="list-style-type: none">• Behavioral health• Transitions of care

Our Values:
Respect • Integrity • Service • Excellence • Stewardship

OUR “MAIN THING” – CORE PURPOSE, PROCESSES, & RESPONSIBILITIES

Laboratory

CORE IDEOLOGY

<p>Core Purpose <i>(Why do we exist?)</i></p>	<p>The Laboratories core mission is to provide accurate and timely results to aid clinicians in providing patients with “World Class” diagnostic services and care.</p>
<p>Core Processes <i>(What are the core processes to fulfill the purpose that you exist for?)</i></p>	<p><u>Pre-Analytic</u>: Specimen collection, handling, and processing <u>Analytic</u>: Specimen testing <u>Post-Analytic</u>: Result communication (Verbal, Electronic, Paper)</p>
<p>Core Roles & Responsibilities <i>(What roles are critical to carry out your core processes? What are their responsibilities?)</i></p>	<p><u>Pre-Analytic</u>: Phlebotomists and Processors <u>Analytic</u>: Technical Staff Members <u>Post-Analytic</u>: Phlebotomists, Processors, and Technical Staff Members</p>

ENVISIONED FUTURE

<p>Dashboard Measures of Success <i>(Current or Future Dashboard Goals)</i></p>	<p>Pre-Analytic: Mislabeled Samples Pre-Analytic: STAT & Timed Samples Collected On-Time Pre-Analytic: Sample Received w/o Orders Pre-Analytic & Analytic: Morning Labs Resulted by 0730 Analytic: STAT & ASAP Result Availability Patient Experience – 50th Percentile (Overall Facility)</p>
<p>5 Year Strategic/ Visionary Goal <i>(What do you hope to accomplish and be known for?)</i></p>	<p>The laboratory will provide “World Class” diagnostic testing and services to our clinicians to achieve unparalleled in timeliness, accuracy, and efficiency.</p>