

Quest Diagnostics at Shady Grove & Washington Adventist Hospitals

LABORATORY MEETING

MINUTES

JUNE 26 AND 27, 2018 AT 0715, 1330, AND 1515

DISTRIBUTION: LABORATORY STAFF MEMBERS

MEETING COMMENCED: CALL IN: 1-877-951-6301 PC 8064564

Item	Discussion	Action	Follow up
Introductions	New staff introduced themselves to the group	None	None
Quiz	Staff were given a written quiz to test their knowledge on the AHC mission, vision, values, etc. All staff are expected to commit this information to memory.	Learn and understand the materials.	All Staff
RISES Values	Respect Integrity Service Excellence Stewardship The RISES value of the month is SERVICE. This means we care for our patients, their families, and each other with compassion. What are some things the laboratory does well to serve our customers? • Provide accurate and timely lab results • Communicate critical values, specimen issues, patient issues, etc. • Interact in a friendly and positive manner	Staff must know and be able to recite the RISES values	None
Pillars	 People Quality and Safety Patient Experience Finance Growth Population Health Management The pillar of the month is POPULATION HEALTH MANAGEMENT which is to improve the health of a defined community and reduce the cost of care through policies, programs, services, and contracts that impact quality, access, and outcomes. 	Staff must know and be able to recite the pillars.	None
AHC Mission	We extend God's care through the ministry of physical, mental, and spiritual healing.	Staff must know and be able to recite the mission.	None
AHC Vision	To be the regional leader in each of the six Pillars of Excellence by 2022.	Staff must know and be able to recite the vision.	None

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Staffing	 SGMC Field Ops 3 positions are currently open. We have requested additional positions. Blood Bank has 2 open positions One FT position One 20-hour per week positions We have hired one PT employee Core Lab has one every other weekend position open 	None	None
Corrugated Boxes	Joint Commission prohibits storing corrugated boxes on any patient care unit. This does not affect the lab itself, but we need to be aware that the outpatient lab is considered a patient care area. We cannot have any corrugated boxes in the OPL. This includes Iron Mountain boxes.	Ensure we do not have any corrugated boxes in the OPL.	All staff
MTS/Training	Reminder that June 30 marks the end of the competency assessment period. All staff must successfully complete MTS training and competency before June 30. Do not wait until the last minute, because you may miss the deadline if you do not obtain a passing score.	Complete all assignments	All staff
Call Outs	Please remember to document all call outs on the workforce central adjustment log. This is imperative to ensuring staff get paid correctly.	Follow procedure for documentation of call outs.	All staff
Mislabeled Specimens	Reminder that we are still tracking mislabeled specimens. When you determine a specimen has been mislabeled, you must contact the administrator on call to report the mislabeled specimen. This ensures the management team will follow up immediately the next day AND allows us to walk you through the process to ensure we get all information we need to investigate and report the incident. At a minimum, we need the following: Copies of the tubes and labeling Description of how the mislabel was discovered Who mislabeled the specimen (lab vs nursing) How the issue was corrected (corrected reports, notification, etc.)	Document all mislabeled specimens. Notify the admin on call immediately when a mislabeled specimen is identified.	All staff
PI/Variance forms	Please don't forget to sign or place your tech code on any PI/variance form you write. We sometimes need additional information to properly investigate and report issues. We generally would like to go back to the person who wrote the PI/variance to begin the investigation, but we can't do that if we don't know who that person is.	Write tech code or sign each PI/variance you write.	All staff
Unit 3300 (WAH)	 At WAH, there are 2 unit 3300 locations in the computer: Unit 3300 refers to babies that are staying with their moms. Calls for babies assigned to 3300 should be made to unit 3100. Unit 3300 SCN refers to babies in the special care nursery. Calls for babies assigned to 33SCN or 3300SCN should be made to 3300 or the special care nursery. 	Please update phone lists manually until they can be fixed.	All staff at WAH
Open Forum	Staff brought up the following concerns: 1. We are still seeing a high number of hemolyzed specimens from the ED.	Management will look at this again to see if numbers are high/going up.	
	Staff requested that an org chart with picture be placed on QTV, so we can identify SGMC and WAH	We will work to add pictures to QTV.	

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	senior leaders.		
	We are receiving a high number of urines being sent via pneumatic tube in the cups. They are leaking all over.	Stephanie will address this in the nursing huddles and with nursing education.	
	Question about phlebotomy collection of respiratory specimens.	Reminder that we draw all specimens. If we do not test them, we bill the lab collection venous or lab collection capillary charge. This applies to the following tests: • Venous blood gases • Lactates that will be tested on the iStat • Newborn screens • Zikas and other tests that go to the State • BB will bill retypes that are collected by phlebotomists without other specimens	
	5. Do phlebotomists respond to rapid responses?	Phlebotomists respond to rapid responses when called. We still need to ensure we have an order for any blood draws. We recommend requesting a downtime form with orders if you cannot see them in the computer to save time.	
	6. Staff requested a separate OL monitor for troponins	We will consider	
	 Lab staff asked if we can stop responding to code BATs, because they are now doing the CT scan first. Phlebotomist have to wait until the scan is complete before drawing which is wasting time. 	Stephanie to contact the stroke coordinator to clarify expectation	

Our Mission: We extend God's care through the ministry of physical, mental and spiritual healing. Establish System Direction via Strategic Planning Process – Our Main Thing Determine Pillar of Excellence Measures of Success -Dashboard Graphs **Our Vision:** To be the regional leader of our six Pillars of Excellence by 2022 Monitor Progress - PDP Goals Quality **Patient** Pop. Health People **Finance** & Safety Experience Management Best Place Best Integrated Best Experience Best Long-Term **Best Coordination** Best Place to Receive Care in Receiving Care Financial Viability Delivery Network to Work Core Process Mapping Standardizing Capability & Reduction of Improve Incentive Growth in processes capacity planning Service within Earning: QBR, Clinical readmission supporting Recruit, Retain, 5 Workgroups Readmission, Service Lines rate to QBR **High Reliability** & Develop Staff MHAC target principles Improve Performance by using DMAIC Methodology - Dept PI Projects Align & Cascade Entity Initiatives to Drive Performance

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