

## Quest Diagnostics at Shady Grove & Washington Adventist Hospitals

## **LABORATORY MEETING**

## **MINUTES**

JULY 9 AND 23, 2019 AT 0715, 1330, AND 1515

**DISTRIBUTION:** LABORATORY STAFF MEMBERS

MEETING COMMENCED: NOTE: A CALL IN NUMBER WAS NOT AVAILABLE FOR THESE MEETINGS

Item	Discussion	Action	Follow- up
Introductions	New staff introduced themselves to the group	None	None
Mission	The AHC mission is to extend God's care through the ministry of physical, mental, and spiritual healing.	Be able to recite the mission	All Staff
RISES Values	Respect Integrity Service Excellence Stewardship  The value this month is "EXCELLENCE." Excellence means we do our best every day to exceed expectations.  Charles M. Sheldon, a pastor and early advocate of civil rights, said, "Always seek to excel yourself. Put yourself in competition with yourself each day. Each morning look back upon your work of yesterday and then try to beat it."	Staff must know and be able to recite the RISES values	All staff
Pillars	<ol> <li>People</li> <li>Quality and Safety</li> <li>Patient Experience</li> <li>Finance</li> <li>Growth</li> <li>Population Health Management</li> <li>The PEOPLE pillar focuses on being the best place to work and grow.</li> <li>Staff can make an impact by:         <ol> <li>Creating a safe and friendly environment. Say, "Hello!" to new employees and report unsafe conditions.</li> <li>Seek opportunities to grow your career. Take part in opportunities that will help you increase your skills.</li> </ol> </li> </ol>	Staff must know and be able to recite the pillars.	All Staff
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.	All Staff
Metrics	All staff must be able to interpret the metrics graphs.  1. The first thing you should look at is the arrow.  2. What does the direction (up or down) of the arrow mean? The arrow points in the direction in which we want the data to move. For example -	All staff must be able to interpret metrics. Please work on improving metrics and identifying barriers in your own areas.	All Staff

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	<ul> <li>a. We want 100% of morning run specimens received by 7am. 100% is the highest this metric can go, so the arrow points up.</li> <li>b. We want zero mislabeled specimens. Zero is the smallest number we can have, so the arrow points down.</li> <li>3. The color of the arrow is important: <ul> <li>a. Green means we are hitting our target.</li> <li>b. Yellow means we are within 5% of hitting our target.</li> <li>c. Red means we are not hitting the target.</li> <li>d. Purple means we are hitting the world class target.</li> </ul> </li> <li>4. The two horizontal lines on the graphs are our goals. <ul> <li>a. The green line is our target (what we are trying to achieve).</li> <li>b. The purple line is the world class target (where the best of the best are). This is our ultimate goal.</li> </ul> </li> </ul>		u <b>p</b>
	Our current metrics:  1. AM run received by 7am.  a. WAH = 93%  b. SGMC = 84%  Current initiative to improve is to ensure phlebotomists send samples to the lab after every 4 <sup>th</sup> patient.		
	If you draw the samples but don't send them to the lab, processing cannot receive and technical staff cannot test.  If you hold samples until you have a full tube, that backs up processing and causes long periods of no work followed by a rush of specimens and delays.		
	<ul><li>2. STAT and timed troponins collected within 30 minutes of intended time.</li><li>a. WAH 74%</li><li>b. SGMC 61%</li></ul>		
	Current initiatives are to work with nursing to list the timed troponin draws on the communication board in the patient's room and work around them when taking the patient for non-time- sensitive procedures such as bathing.		
	Phlebotomy staff must also use the troponin logs to document when a troponin is late and why, so we can track and trend the data to determine other root causes.		
	<ul><li>3. Troponins resulted within 30 minutes of receipt.</li><li>a. SGMC at 90%</li><li>b. WAH at 82%</li></ul>		
	<ul><li>4. Gram stain on blood culture metric is not up to date.</li><li>a. SGMC 25%</li><li>b. WAH 26%</li></ul>		
	<ul> <li>5. Mislabeled specimens</li> <li>a. SGMC at 4</li> <li>b. WAH at 1</li> <li>This is a HOSPITAL metric and not a LAB metric.</li> <li>Most mislabels are from nursing.</li> </ul>		

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	6. Patient experience is not available. AHC switched from HealthStream to Press Ganey. The number of surveys is very low right now and is not statistically significant. On July 1 they will be moving to a paper survey, so they expect numbers to go up.		
AHC Computer Password	The requirements for AHC computer passwords has changed. All staff will need to ensure they reset their password to meet the following requirements:  • Contain at least 10 characters  • Include at least 3 of the following elements:  • English uppercase letters (A-Z)  • English lowercase letters (a-z)  • Base 10 digits (0-9)  • Non-alphanumeric (examples: !@#\$%^&*()	Reset your password if it doesn't meet these requirements	All Staff
Bridging the GAP	We watched the video "Katy's story" and discussed the new AHC patient experience initiative called, "Bridging the Gap."  Greeting everyone by name  Anticipating needs and exceeding expectations  Preparing patients for what's next	Watch the video if you did not see it. From the AHC Home Page,  Click "Adventist Healthcare Bridging the Gap  Click on Katy's Story	All Staff
Sunquest Upgrade	On July 12, we had an unexpected computer downtime. The "A" server for Sunquest crashed. They were able to move us to the "B" server to get us back up. The "A" server has been repaired and we will have a planned computer downtime on July 24 from midnight to 4am to point everything back to the "A" server.	Review downtime procedures and prepare for downtime	All Staff
Self-Evaluations	It is time for the midcycle evaluations. Please log in to Empower to complete your self-evaluation and update your goals. <b>THIS IS MANDATORY FOR ALL EMPLOYEES.</b> Complete by August 15.	Complete self-evaluation on Empower	All Staff
WOMC Orientation	White Oak Medical Center opens on Sunday, August 25. Supervisors will be scheduling all staff to attend WOMC lab orientation. We are a system and we operate as a system, so all staff will be required to attend.	Work with your supervisor to schedule your orientation time	All staff
Brainstorming Exercise	AHC is brainstorming ideas to help them "Bridge the Gap." All departments were asked to watch a video and then brainstorm the four pillars to patient experience: Safety, Presentation, Coordination, Empathy. We looked at the first two questions:  1. What can we do to make our patients feel safe?  a. Be gentle and courteous b. Make the patient feel comfortable c. Explain why you are there and what you are doing (explain the procedure/tell the patient what to expect/timing/when to expect results) d. Verify the patient identification using 2 identifiers e. Wear your ID badge f. Maintain patient privacy g. Communicate with the patient's primary caregiver h. Notify charge nurse is safety or other issues are noted i. Use language the patient understands j. Answer questions; find answers if you don't know k. Use AIDET; introduce yourself and explain your		

qualifications  I. Wash your hands and use appropriate PPE m. Takes time with the patient; don't be rushed i. Look and set professional in Look use memorial in Look use memorial in Look use memorials, abbreviations, acronymns, or jargon g. Use interpreters where indicated in Look and set patient and set professional in Look use memorials, abbreviations, acronymns, or jargon g. Use interpreters where indicated in Look and set patient and set professional in Communicate delays in Look and set professional information clearly in Be confident in your abilities; if you are nervous, the patient will be narvous in Look over the patient can understand in Loommunicate delays in Look and the patient can understand in Loommunicate delays in Look and the patient can understand in Loommunicate delays in Look and the patient can understand in Loommunicate delays in Look and the patient can understand in Loommunicate delays in Look and the patient can understand in Look an
p. Wear your name badge q. Maintain patient privacy

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	<ul> <li>r. Identify when you are with a patient over vocera, so the caller does not reveal patient information</li> <li>s. Maintain a neat and professional appearance</li> <li>t. Display a professional demeanor and appropriate body language</li> <li>u. Explain the procedure to the patient in detail</li> <li>v. Build trust with the patient</li> <li>w. Communicate delays to the patient</li> <li>x. Be knowledgeable about the information you are presenting</li> <li>y. Demonstrate attention to detail</li> <li>z. Focus on the patient and do not allow distractions</li> <li>aa. Do not rush; be intentional</li> </ul>		

