**

Shady Grove and White Oak Medical Centers

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| **Blood Bank Team Meeting** **Minutes**  **January 2, 2024** |

**Present:**

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| --- | --- | --- | --- | --- | --- |
|  | Mary-Dale Abellano | √ | Bilen Gebresenbet |  | Larissa Kukapa |
| √ | Kelvin Addo | √ | Isaias Gebreweldi |  | George Li |
| √ | Malak Antar | √ | Hojat Goudarzi | √ | Arlene Mencias |
|  | Lesley Crowder |  | Natasha Hall |  | Tsegaye Negash |
| √ | Bech Ebini | √ | Chizobam Igweh |  | Boris Njeambosay |
|  | Uchama Eni | √ | Jessica Jenkins | √ | Rocio Vergara Torres |

**Distribution:** Blood Bank Team

**Meeting commenced:** 0630 and 1600 via TEAMS

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| **ITEM** | **DISCUSSION** | **ACTION** | **FOLLOW UP** |
| **Name Documentation** | Reminder that you must document the full last name whenever you document notification for any reason. You can have first initial and full last name or full first and plush full last name, but you must have the full last name. | Informational | None |
| **Day of Use QC** | Day of use QC must be documented each time we perform a PeG screen, panel, or crossmatch and when we perform a C3 DAT. You must verify QC prior to testing. If QC has not been performed on the day of use (midnight to midnight) you must perform QC before testing or test in the same batch. QC must be documented. | Informational | None |
| **FWMC Workups** | When performing AbID testing for FWMC, we are required to notify the FWBB staff member if the workup will exceed 2 hours. We must document the date and time of the call as well as the name of the person notified. In the past 6 months, we have missed this documentation 100% of the time that we exceeded the 2-hour timeframe. | Informational | None |
| **IICE** | Reminder that when you issue blood products in a cooler, you must add the “IICE” comment. We must document that the blood products were issued in a cooler. | Informational | None |
| **Cord Bloods** | When writing PI/variances for cord blood issues, please always use L&D as the location. All cord bloods are collected and labeled in L&D. | Informational | None |
| **PTO Health or Diversity Day** | When requesting PTO Health or FMLA, please do not enter this in Humanity. This is different then regular PTO. You must notify me directly with these requests.  Diversity Day should be treated in the same manner. We need to ensure this is properly documented on the schedule to ensure you get paid correctly. Requesting Diversity Day as PTO and adding a comment may or may not accomplish this. | Informational | None |
| **Shift Trades** | All shift trades must be requested and approved in Humanity and reflected on the schedule. Failure to do this leads to confusion a possibly incorrect pay.   * The person that is listed on the schedule will be responsible for the shift even if that person has found someone else to work. * If you trade a shift that contains “on call,” the person picking up the shift will also be responsible for covering the on call. * If you pick up a shift, you cannot assume that we will remove you from another shift for which you are scheduled. You must arrange this with Stephanie in advance if you wish to be off. * If you will not be able to work an entire scheduled shift, you must pre-arrange this with me.   Example: You pick up an extra night shift and want to come late for an evening shift the following day.  This will be counted as a tardy if it is not pre-approved and reflected on the schedule. | Informational | None |
| **Sample Specifications SOP** | We updated the Sample Specifications SOP. An MTS has been assigned.   1. We need to ensure we are not using the AKA name listed in blood order processing. The patient identifiers listed on the specimen, unit tag, and other forms must match the identifiers computer exactly. 2. We will not longer accept slight differences in name such as nickname or 1 letter discrepancies. Nursing will not transfuse units that have discrepancies, so it is better if we reject the T&S instead of testing. | Informational | None |
| **Massive Transfusion Protocol** | When the floor calls a massive transfusion, blood bank takes over and “pushes” products instead of letting the patient care areas “pull” products.   1. As soon as a MTP is called, we issue 4 red cells and as many plasma as we can. We will likely not have time to thaw plasma, but we can pull thawed plasma from other orders. We must release and allocate the plasma to the correct patient. 2. For odd numbered coolers (1, 3, 5, etc) we issue 6 red cells and 6 plasma. 3. For even number coolers (2, 4, 6, etc) we issue 6 red cells, 6 plasma, 2 cryo, and 1 platelet.   We do not let the floors tell us what they want. We determine what we give. We give as much as we can at the time. Again, depending upon how quickly the patient is bleeding, we may or may not be able to keep up with thawing frozen products.  Why do we push products out?  We don’t want to constantly be issuing products. We want to issue as much as we can at one time.   * This allows us more time to prepare products. * It conserves coolers. * It gives the provider immediate access to additional products.   Also, you must notify Stephanie if they call an MTP. We will notify the clinical admin on call to tell other nursing units not to request blood products unless they are urgently needed. This will also give us an idea of whether we need to add staffing to assist. | Informational | None |
| **Self-Evaluations** | Please complete your self-evaluation in Employee Self Service BEFORE the Quest deadline of 1/7/23. Self-evaluations are mandatory for all staff. | Complete self-evaluation | All staff |
| **Ergonomics** | Employees expressed concerns about the discomfort of the chairs. Per policy, please complete an ergonomics assessment and turn it in to Stephanie if you are having issues. I posted the forms in the BB. This will help us assess the needs and order new products. | Complete ergonomics assessment | As needed |
| **Vocera** | Staff are still having difficulty using the vocera in blood bank. It is crossing hospitals. | Follow up with IT | Stephanie |