**Laboratory Meeting Minutes**

 **(Newsletter)**

**1-19-2023**

**419-394-3387 x8105**

**Shout outs**

* Congratulations to Kaitlin Eilerman on Employee of the Month. Thanks for your hard work!
* Thanks for everyone that braved the cold weather last month during the holidays and came in, stayed over, covered for others, or picked up and came in so others could stay home. Great display of a healthy work crew!
* Thanks for all completing their Flu shots, Mandatory education, Competencies for 2022. If it felt painful rushing to get these done, please take some time each month to complete the 2023 items as they come up. This will never go away so spread the fun around all year!

**Staffing updates**

* Working on transition to a 6 week schedule to help with staffing further out so people can see where they work. This hopefully will reduce problems as well as help staff making the schedule out and not have to race every 2 weeks.
* We are looking at flexing our outreach staff to make sure we have coverage for all our sites as well as in the lab. Please take time to help with training and kind words when people are getting out of their comfort zone and need some guidance.
* Piloting some help at Minster on Tuesdays with 0700-1100 in Minster and 1200-1600 in main lab. We have some other items being looked at as well to help with tweaking some areas that have potential. Are weekend hours functional?

**General Updates and deadlines**

* **CALL order:** We are going to start a new process using our CALL order used for Lactic acid , CDIFF, COVID in patient testing. Last meeting, I spoke about the need to be mindful of our STAT outpatient call results. We continue to have problems and completed a CAP or RCA process. More information is coming but Phlebotomy will be getting more instructions on ordering the CALL order for situations when the doctor enters a comment Call my cell phone with results. Call Office STAT or anything where a call is expected with STAT testing. This should include a label coming to the techs from support staff as well as showing up on incompletes and needing answered. This is in play 24/7 and techs may need to be the ones deciding what is being asked from order comments or from actual vouchers or looking up items in Allscripts. More to come but I would also like feedback on how this works and what we may need to improve as we go. More info to follow.
* Start of a new pay year. I believe new benefits will be active with the 1-20-23 paycheck so please check your pay stubs to make sure your deductions look correct.
* How about not having to where masks? Things have changed since last meeting. Mask no longer required unless in situations that warrant them in isolation settings or symptomatic patients or staff. Aerosolizing procedures still require them.
* Monthly gift cards for staff. I will run out of monthly staff gift cards (8months) as rewards and will have to convert to Shine points. I can no longer purchase gift cards for staff to have anymore.
* W2 are available in Workday as of 1-16-23 if you need to access them. If you opted for hard copies, check the snail mail in the days to come.
* Check ins will continue and the start of the performance cycle and pay raises will kick off Feb 15- March 1. I will be updating as I know what this looks like. I have no solid idea on percent pay raise or incentive updates. New pay should be reflected on March 3 pay checks. ISS is being given at 1% base rate. Effective on 1-29 pay but will not be paid out till 2-17 paycheck. Merit plus no longer in play. Merit not given if in Final Written warning. Started after 6-30-22 or less than <1000 hours. PRN.

**CORE LAB info**

* I’m still working on the ACHC – HFAP inspection material from 11-6-22. We have some items that will need signing off so please make sure to pay attention to items being asked for review of new policies or procedures as well as education documentation and signatures. Competency addendums, CHP safety plan review when completed, IQCP, and some other items when completed.
* New API surveys for 2023 are starting to come through. Please take time to complete these and report your results so they can be checked and entered in API. One change to this year is Immunology is a 100% pass rate or it fails. 80% doesn’t not pass anymore. We’ve had one failure already. This is part of our quality program so please take the time to prepare your survey material and be timely with testing once prepared. API schedule is posted on the Chemistry board. Dates mailed and dates forms due.
* FERN testing has been stopped as of Jan 1. We are still working with Dr Train on how we can help her with this if she wants to acquire a PPM and look at slides herself. Please work with her and help her if she comes down in the interim wanting to look at a slide on her own. We’ve stated we will not be running them for her…But we may need to help her if she comes down. We are working on building this relationship.

**Workflow**

* Are their suggestions to make your workday go better? Please let your team leads know as well as myself. I don’t like to reinvent the wheel but there is some opportunity to tweak our processes or simply ask what we are doing is correct.
* We peaked for RSV and Flu testing in December. Positive cases of Covid, Flu and RSV continue to go down. Testing volume are starting to stabilize as well. Let’s hope we are through the worst of it for the year.
* Document control: Do you all know how to find Quick references or Policies, forms, or understand lab links? If not, please ask how to find these items as they were created to help people do their jobs more efficiently.

**Laboratory occurrences, Risk events.**

* We have had an uptick in Labeling issues from the floor. We are working on creating some education for the hospital. If you have ideas of how this has been done in the past or ideas going forward, please let me know. We may be developing something in Net Learning to document staff is reviewing our labelling policy.
* For Occurrences, PSA tests are still reoccurring. We’ve had wrong tests ordered as well. Wrong doctors and registration errors are also common lately.

**ACHA-HFAP**

* All 12 deficiencies have been turned in and accepted in concept. They now will be reviewed by the ACHC board on if the appropriate action is adequate to meet their standards. If not, we will have to continue to work on the action plans until they are. Some large items we have until March 1 to submit another Internal Quality Review(IQR). These required more documentation and education for staff to review. IQCP, COMPETENCY, Chemical Hygiene Plan. I just got word that we have been granted our 2 year accreditation. We are good rom 1-15-23 until 1-15-25. We have monitoring for some category 2 citations that will need watched and I still need to produce documentation to submit of the updates and education for 4 other citations that need monitoring.

**Safety notes**

* Check for your received and open dates on your chemicals. If opening reagent changes expiration dates, please make sure to include this on the container.
* If you are pouring over chemicals into a secondary container, please make sure it is labelled correctly with contents. If you are using some type of vessel that has another chemical listed, please make sure it is not visible or removed. I have examples, ask me.

**Phlebotomy**

* CHP patient satisfaction Surveys. Celina is a place that we capture Patient satisfaction data monthly. This is a critical piece of information on quizzing our patients on how we do. Our ACHC certification states that we have a system in place to show how we are perceived by patients and medical staff with the work we do. It matters. Celina typically has 100% positive feedback on us receiving a 4 or 5 on a scale rating of 1-5. Comments also are given on good patient care and the expertise of our staff drawing them. Their goal is to have 30 surveys returned each month out of 500 patients coming through the doors. This is only about 5% of patients. It is a good indicator of giving patients great care. Thanks to those who take the time to ask patients for feedback at our Celina location.
* How are we doing with COVID phone and workflow? Please make sure you try to anticipate and help prioritize your work with STATS, Time sensitive, and OP during your day. If you have ideas how to improve, please catch your team leaders to have some discussion.
* Goal for 2023 I have is to understand if tasks have been assigned for daily duties and communication is clear on what is expected from me when I come to work? Do tasks need changed or updated? Are things assigned to benches or by start times? QC times, Instrument maintenance, these will be written into job duties expected on the bench on task check offs. With new staff not everything may be defined well. Hopefully this makes us communicate even better.
* Aggressive behavior from your patients. There is a course that is about 2-4 hours the hospital offers that staff could participate in to help staff with skills with talking to angry patients or how to deescalate aggressive behavior. Scripting and how to walk a patient down is always helpful. It is a skill and most people don’t have a good idea of how to start this dialogue. There is a zero tolerance for patients’ behavior but there are some things we need to do before we actually get to that point and turn someone away. Personal safety is always front and foremost though.

**STROKE**

* Please make the effort to identify Stroke patients through the entire draw and testing process from start to finish. We had 4 out of 18 patients fall outside the 45 min window for running INR coag testing. 2 appeared to be delays in the lab. Is everyone aware of Stroke patient’s lab coming into the lab? Do you label it on the bag? Do you tell the techs your stat is a Code Stroke? Do you watch your monitor to make sure results are reported as timely as possible? Just food for though on how we track samples that are more time sensitive then others? To be certified as a stroke center, metrics are monitored to make sure all departments are helping do their part.
* **Health Fairs** Happy 2023! We are already getting Healthfair notifications for this winter and spring. Please sign up as you can.

**Patient information**

* We are working on some OP issues in BBANK and with communication to patients wearing the green bracelet for surgeries. PAT is supposed to inform patients as well as lab staff when drawing patients and having them wear the green typenex band. Take the time to inform your patient what you are doing and the consequences of cutting that band off prior to their surgery date. Ask them to repeat back what you said so they acknowledge they understand what is being asked.
* We also need to be careful when asking about OIO – IOS surgeries and how to band them. Deny is working on some ideas to make improvements for bbank specimens and making sure we have what we need and orders for IOS are being processed correctly.

**GRAND EXPERIENCE**

* Lisa Masonbrink keeps us up to date each month on the Patient Experience board. **PERSONALIZE -HEART** is the current topic. Personalize care 1st and patient 2nd. Make people feel good whenever you can. Please look over this information.
* **H**- hear the patient.
* **E**- Empathize
* **A**-Apologize
* **R**-Respond to the problem
* **T**-Thank the patient for bring this to our attention.

**ENGAGEMENT SURVEY**

TOPIC TO DISCUSS

**January:** I always have the staff, equipment, facilities, IT and change support I need to do my job. We answered 38 favorable 43% neutral, 19%, unfavorable,

 What needs to change to rate this question higher? What can we control or out of control? Nothing given on call. Request was to submit ideas or concerns.

My manager recognizes and acknowledges when I do good work on a day-to-day basis. 52% neutral, 48% favorable. How does this look for a favorable response? What can I do to be a better leader and how do you want me to interact with staff? Talk, emails, stay late, come in early? Visit offsites more?

**Roundtable and questions. Feedback welcome.**

**Kay-** Reminder to date your reagents when opening them. Please remember to rotate stock when putting it away or using it on the bench. Supplies still be used out of sequence. OLD DATES FIRST.

**Lisa-** Wanted to say thanks for those signing up for Health fairs. May only have been one spot needed to be filled for next one coming up.

**Tom-** Watch when placing order from par sheets that quantity selected in ORMOD is correct. Each, Box, Draw tubes. Etc.

Working on adding a website called MTS ( Medtraining.org) to our arsenal to use for sending out documentation and a way to capture completion electronically with date and time stamp along with a report of who is completed the task.

**Jen**- She has a card to thank the pathologist for their party the other weekend. Please sign when you can.

**Deny-** Wanted to remind staff to be mindful of BBANK items. We had a near sentinel event with issue an expired unit of blood that was caught with the nursing check on a remote issue. Deny is addressing issue of tagging short dates as well as addressing the issues of verifying expiration date on the forms prior to issue. Please sign updated BBANK policies for review and changes in bbank. Remind to slow down and be alert when doing your task in this area. Avoid distractions when ever possible.

**Luann-** Topic of the month for Phlebotomy is Covid Collection. See info on white board.