**Staff Meeting – Laboratory Department**

**26 April, 2012 13:00**

**Attendants**

* 1. Jennifer Daley Bernier, Laboratory Supervisor
  2. Kathryn Arthur, Medical Laboratory Technologist
  3. Emily Taylor, Medical Laboratory Technologist
  4. Allison Ibbotson, Casual – Medical Laboratory Technologist
  5. Ron Miller, Casual – Medical Laboratory Technologist

1. **ALQEP Survey Results**
   1. We have received back the ALQEP survey results for the March Hematology and Transfusion Medicine challenges. We had an unacceptable result for the Hematology challenge and an acceptable result on the Transfusion Medicine challenge.
   2. Please review the reports for both challenges and initial as there is some valuable information in the reports that we will be incorporating in future revisions of our Transfusion Medicine SOP’s.
2. **Approved Duties For Weekends**
   1. In order to ensure that consistent work practices are applied by all technologists working in the laboratory Jennifer will be issuing a memo outlining those activities approved for overtime and call-back.
   2. Any activities that are not on that list will require pre-approval of the Supervisor or there is a risk that the overtime or call back may not be approved in PeopleSoft. This is mandated in the collective agreement.
   3. While it is understood that extra work is often undertaken on weekends and during call-back to help out for the next day, this does not allow the Supervisor or the Manager to accurately assess the ability of staff to complete the required workload during scheduled operating hours and to plan for staffing level adjustments appropriately.
3. **Changes to May Schedule due to STAT Holiday & PDI**
   1. Please not that there will be some changes to the posted May schedule to allow for the Statutory Holiday on May 21, 2012 and for approved leave.
4. **Collection & Report Times** 
   1. Nichole has received a complaint about the time that laboratory reports for morning Acute Care collections are being generated.
   2. The laboratory does not currently have an agreed upon time for in-patient collections or reports.
   3. Jennifer arbitrarily set the time of 07:45h each weekday for technologists to be out on acute care performing the morning phlebotomy for in-patients.
   4. Post-natal women and babies will not be collected until 10:00h.
   5. Long Term Care residents will not be collected until all outstanding work from the morning Acute Care in-patients has been posted and verified.
   6. All morning collection work from Acute Care must be posted and verified by 09:30h.
   7. Jennifer has discussed these times with the Acute Care Team Leader’s and they have agreed to these times.
   8. Should the laboratory be unable to achieve these targets for whatever reason and occurrence report must be completed in order to track issues and concerns related to our ability to generate quality laboratory results.
5. **Other Last Minute Items for Reanna**
   1. Please be sure to let Jennifer know of any last minute items that we would like Reanna to include in our LIS training next week.
6. **Water Sample Testing**
   1. As of May 01, 2012 the Environmental Health Officers have asked that we resume faxing our completed water sample reports to the Yellowknife office.
   2. When the water samples have been completed simple fax the results to the number pre-programmed into the fax machine. A cover sheet for the Yellowknife office can be found in the standing file folder with our other cover sheets.
7. **CAP Survey**
   1. Jennifer has been approved as the site administrator for our CAP surveys on-line. As such, we can resume submitting our results on-line.
   2. Each technologist must create his or her own account and request to be added to our lab.
   3. After the request has been approved staff can then begin entering the CAP survey results into the website.
8. **Blood Bank “Collector” and “Identified By” Information**
   1. Brenda Caruk from Canadian Blood Services has contacted us with feedback on our patient identification process. Canadian Blood Services requires that patients must be identified by a second person **other** than the collector. The line on the requisition that states “Identified By” is to have the name of the second person identifying the patient, not the means by which the patient was identified. This improvement will also be incorporated in future revisions on the specimen collection SOP’s.
9. **Calling to notify CBS & DynaLIFEDX**
   1. When submitting samples for crossmatch to CBS, both DynaLIFEDX and CBS need to be notified of the shipment in order to ensure that the samples are handles appropriately.