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| HMC Transfusion Service Staff Meeting 10/15/15 |
| http://www.komencolorado.org/kdwp/wp-content/uploads/2014/10/Thank-You.jpg | *Patients are First* Pillar Goals* *Focus on Serving the Patient/Family*
* *Provide the Highest Quality of Care*
* *Become the Employer of Choice*
* *Practice Fiscal Responsibility*

Service Culture Guidelines* *Respect privacy and confidentiality*
* *Communicate effectively*
* *Conduct myself professionally*
* *Be accountable*
* *Be committed to my colleagues and to the UW Medicine Health System*
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| Service Culture Guideline | * *Be accountable*
* Offer assistance to people who are lost or trying to find their way by escorting them to their destination or taking them to someone who can help them.
* Help those in need until their issues are resolved or another coworker has assumed responsibility.
* Be dependable and timely.
* Take personal responsibility for keeping the work environment clean and safe by cleaning up litter and spills, or promptly contacting the appropriate resource.
* Practice consistent hand hygiene to prevent the spread of infection.
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| Lab Update  | * IH clinical trial is in the works.
* MLS Students will start November 9th; 2 rotations with 3 students, one of those will be FT eves. We will also have med students rotating through
* UW TSL opens in ~~January~~ in March
* SQ will have new thaw codes and a new code for Liquid Plasma has been added.
* Thaw codes will be T plus the E code (i.e. TE0713)
* Liquid plasma will be XE2469
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| Project updates | * LabMed construction postponed indefinitely
* Sterile docker validation is in process, we still need a few items before we can begin. Tentative go live for use is January.
* LabMed CAP certification is contingent upon quarterly check-ins with progress on the new document control system.
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| Job Postings/Announcements | None |
| QA/Blood Utilization | * September utilization data
* RBC-1 OMS30 in OR
* PLTs-3 (3E)
* Plasma-3 (OR, 9EA)
* Cryo-3 (OR, 2EA)
* 96 incidents, 2 are BPDRs
* Gie has a folder with 44 pages of FDA reasons for BPDR if you would ever like to peruse
* Please use a single cross out line on blank spaces in the trauma log, don’t make large X’s or squiggles.
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| Other | * Power will be shut off in the Central tower on 10/17
* Water will be shut off in the West buildings for 3 different weekends in December for 12 hours at a time, LabMed personnel might come down to use our break room.
* Disaster Debrief
* 1st time the Incident Command center has been activated since a bus went off the Aurora bridge in 1998
* Because the Chinese president had just left town the city had its incident command center up and running
* The city learned they needed to set up information phone numbers, unfortunately the one given was the HMC main line so the operators were swamped. The poison control line was then set up as a main # but there were long wait times so people called HMC anyway
* Multiple consulate personnel overwhelmed HMC staff wanting answers about students. Incident command will work on a waiting area for future disasters. This is also a good reminder of HIPAA and not to divulge information you are not allowed to.
* HMC oversaw where every patient from the disaster went and the bridge was cleared of all patients in 1 hour and 44 minutes.
* HMC and Swedish are working on a patient tracking website called WATrac that will maintain locations of all patients during disasters.
* The naming system was built on downtime folders in the ER a long time ago. They did not realize the names would be too long for the Whiteboard and pagers. Drs were getting pages with “Disaster, hypotensive” and they would have to go from room to room figuring out which patient was having problems. New folders with new names will be made.
* ED complained about the amount of people and equipment in their department. Reminder to only go there if needed
* TSL lessons:
1. As soon as the disaster is paged all staff need to don scrubs, start making trauma packs,, send disaster form to the main lab, and take inventory
2. Inventory is then called to BW, there should not be multiple people from BW calling our staff
3. A staff member will be designated to call everyone not on site and determine availability for work. Please do not call in to TSL.
4. ED fridge can be used as the main staging area with one of our staff members manning the door but make sure everyone knows where you are. This is especially helpful when there isn’t much room
* Flu shots or declination due 11/6/15
* ALNW usage, SOP has a section on how to issue to a patient that is not admitted to HMC. Please add the ALNW MRN as a BBCS and give Gie a copy so she can work with BW.
* Vacation requests and holiday sign-ups due 10/19
* “shakedown” 10/15 at 10:15, this is a good time to make sure your home, family, and pets are taken care of in time of disasters.
* CDC Zombie attack is a good website
* Items that are emailed as headed to surplus are for department use only; these are not for personal use.
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