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| HMC Transfusion Service Staff Meeting 5/19/16 3WH108 | | |
| [http://www.komencolorado.org/kdwp/wp-content/uploads/2014/10/Thank-You.jpg](http://www.google.com/url?sa=i&rct=j&q=&esrc=s&frm=1&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRw&url=http://www.komencolorado.org/thank-you-race-sponsors/&ei=VB63VJbUJMr4yQTd54LQCw&bvm=bv.83640239,d.aWw&psig=AFQjCNGP4nRIWD05M8iVZZERU4GsNU_Feg&ust=1421373380983219) | | *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* |
| Service Culture Guideline | Respect Privacy and Confidentiality  •Discuss patients and their care in a confidential manner  •Knock and/or ask “can I come in?” before entering a patient’s room.  •Use doors, curtains and blankets to create a more private environment when necessary  •Access only confidential patient information that is relevant to my job  •Discuss confidential organizational issues only with those who need to know  **How can you encourage your staff to protect the privacy of patients and their families and treat confidential information appropriately?** | |
| Hospital Update | * Kronos Day Divide- Impact to HMC TSL will be minimal. Affects non exempt staff only. No impact to MLS staff. Night shift staff who work on Sunday will have the cut off at midnight. Schedule change may happen to reduce the operational impact. This is a federal requirement that the University has to comply with. Updates to come after May 24th. Go Live June 20th | |
| Lab Update | * MTP Protocol Review – The Transfusion Practice Committee is reviewing the MTP protocol. Agreement among service group is that the 1:1 protocol is to be followed at HMC. See attachment in meeting minutes. The revisions and suggestions will be discussed in trauma and acute care council and reviewed at TPC meeting in June. No changes in process at HMC TSL lab. If the utilization of plasma increases, then we may need to revise how many thawed plasma to keep available. Patrick Ramos is also documenting the MTP activation event in ORCA. * Cascade Regional Blood Services – new services from blood supplier starting May 23rd. We will be receiving 50RBCs (mix of irradiated and non irradiated) and 6 plts (irradiated) weekly. Delivery during days/evenings by CRBS courier. Reason to receive blood from CRBS is to have pricing and ability to return units for credit. Additional supplier allows more flexibility. | |
| QA/Blood Utilization | * April utilization data- Utilization increased. * RBC-4 oms30 * PLTs- 2 outdate * Plasma- 2 oms30 * Cryo- 2 * QA update * Blood Label Check – SOP updated. Units will be audited to make sure compliance with BLC process. * Credo Cooler-Data Logger – 2 weeks of data logger data not recorded at ALNW. For one of the weeks, units had to be discarded since the cooler was opened and used in flight. All staff need to make sure that the data logger is recording prior to packing the shipment. This is critical and only temperature tracking data that allows us to bring units into inventory. * BPDRs- couple in April. All related to Blood Product Release and Issue process. Wrong unit# issued in SQ versus what is in the ORCA chart when units are given using the portable log. | |
| Staff Round Table |  | |