**Morning Meeting Attendees: Kristin, Mark, Callie, Kate, Christy, Ryan, Maushika, Marnie, Blake, Anel, Renee, Roxann, Christine, Deanne, Rachel, Geme**

**Afternoon Meeting Attendees (2/2/17)**: **Courtney, Ina, Peter, Teddy, Yuga, Hy, Anne**

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| **Agenda Item** | **Discussion** |
| **Timecard exceptions/attendance** | -Reminder to record in timekeeping book any exceptions to your normal schedule so management can review the reasons-Anyone calling out must speak to a lead/manager/supervisor (MLS2’s can’t take these messages due to FMLA privacy concerns) |
| **Issuing blood components one patient at a time** | -Due to patient safety concerns, TSL will not issue blood on *more than one patient* at a time to a courier/nursing staff. This also applies to TSL staff, even if the tube station is down. This is not in our current APOP, but has been submitted to Marnie for revision. |
| **Staffing update** | -Renee’s last day is Thursday 2/2 ☹ day shift is looking for help covering Sunday’s, please see Deanne’s e-mail-Deanne is pushing to open a “technical specialist” position to help with reference testing, but it is not yet approved-We currently have openings posted for day shift lead, evening shift lead, and MLS1 on night shirt-training day shift lead and evening shift MLS1 and a new courier will start orientation 2/13-2 new students start Monday, but as a reminder they are not to be prioritized over patient needs. If we are busy they can always do type and screens on extra samples or work on their case studies, ask Deanne or Christine for assistance when needed to meet patient care needs. |
| **New SOP: ABO/Rh discrepancy resolution** | -Remember to read the new SOP and take the quiz in MTS. Questions number 3 on the quiz may be incorrect, Jenny/Deanne to follow up with revision |
| **Sunquest feature –causing failure of product release upon sample expiration** | -Due to a glitch in the SQ system, please remember to save crossmatching results in BOP separately from AO testing. If you enter all the results and save at once, SQ with lock the unit and not automatically release upon sample expiration. First: save AO testing first, and then save XM results. |
| **Shift hand-offs/****Shift checklists** | Submitted to Deanne and Christine today and will be reviewed at the next staff meeting. |
| **Products returned to the supplier** | -Do not accepted products back into inventory after return except with TSL MD approval and QI completion to document the reason for return and subsequent acceptance back into inventory, acceptable visual inspection, repeat type confirmation if appropriate-Send the unit back to the supplier unless it is a special unit and you get MD approval |
| **Blood component usage** | Action OI data review-to be discussed at next meeting. Early steps taken to avoid potential misuse/over-ordering of blood products from the floor |
| **Schedule issues/on-call option**  | -Deanne is looking into the possibility of having “on-call” staff members to help with increased workload/callouts -We will discuss scheduling issues at a later time once Ryan is caught up on the staff concerns following the Union meeting-Reminder to be on time as scheduled and note all absences in the log  |
| **Time clock training**  | -See the e-mail from Kristin about the payroll meeting with Devon for instructions on how to indicate a “call-back” shift-in summary, hit the button on the time clock *before* you swipe your badge to indicate call back, missed meal, etc-if you forget you can always add it to the timekeeping book |
| **SOP updates/MIPLATE study** | -MIPLATE: pathogen reduced platelets that will require protection from UV light. If a patient is in the control arm they are to receive apheresis platelets in plasma. If they are in the study arm they are to receive MIPLATE product. These products will all be irradiated but will not have any other component processing done to them (there are no SQ codes for RV, washing).-if the study pt needs VR or washing, the patient will require an off study product.-Next SOPs to be released should be Antibody ID and Cold Panel |
| **Safety Tours** | -Jenny/Mark are coordinating safety tours of BB2-after the tour be sure to sign on to MTS and indicate that you have completed the tour |
| **Annual Competency** | -Should have received an email from Rebecca Caulfield about annual training. Sign in to MTS to complete it |
| **Mock MTP activations** | -First one on is on Monday 2/6, we have mock units ready-more details will come after the internal teams meet on Friday  |
| **Temp documentation and alarm response**  | -Issues with illegible handwriting, inadequate investigation of temperature alarms, not enough detail in investigation-temptrak is still not validated, but use the internal thermometers, chart recordings, and digital temperature readings and take appropriate action when in alarm and document on QI-If temperature goes out of range and there are concerns about blood product storage, notify MD on call or manager/supervisor if on site and take appropriate steps to quarantine units for review. Refrigerated reagent storage are of same importance.  |
| **Phone etiquette and professionalism**  | Remember to state your name and department when calling or answering phone calls. When the person on the other line is talking in an unprofessional manner, report it to Deanne. |
| **Cord blood process** | In the process of making some changes to cord blood process. We will start seeing manual forms with “BBHOLD” checked off instead of cord blood. L&D will send us the cord Hold samples. Hold these manual forms until you get the CPOE cord blood printout (NICU or provider will order the Test/s), and take these CPOE printouts with the sample back to the MLSs for testing.  |
| **Specimen labeling update** | Some pending changes to specimen labeling SOP: aiming to remove requirement two write date/time on the requisition, but will keep the 2 signatures on the tube |