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| HMC Transfusion Service Staff Meeting 2/16/2023 | | |
| [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   * *I will treat people with Respect and Compassion* * *I will embrace Diversity, Equity, and Inclusion* * *I will encourage Collaboration and Teamwork* * *I will promote Innovation* * *I am accountable for Excellence* |
| Service Culture Guideline | * I will encourage Collaboration and Teamwork | |
| Hospital Update | * Clinical trials: * TROOP – SOP being written and will go live in/around April. There will be a research assistant in the ED helping, we will get a page and informed of a MTP. We will then pull out the clipboard and scratch off the label (sort of like a lotto ticket) which will tell us if we are packing a roemer with 8 units of whole blood and taking an empty platelet box or if we are packing a roemer with 6:6 and 1 in the platelet box. When you arrive in the ED the roemers will look the same for both arms (hence the empty platelet box) and when they ask for a unit you will “break the lock” by opening the roemer and handing them the first unit. * TOWAR – 19 enrollments so far. Yakima and Pasco will begin carrying blood components when we are ready with 2 more coolers. They are also working on notifying the public and giving them time to “opt out” of the trial. * CRYONOW – still waiting to hear where it is on the approval process. * PROPOLIS – still awaiting our first enrollment. Plasma is in freezer under the backup platelet rotator. Order will come through in Epic as a plasma exchange with a comment regarding Propolis. If you have a patient, pull out the SOP because it has been a while. * Tube station upgrade March 7-10. The tube station will go down on Tuesday morning and won’t come back up until Friday afternoon/evening. Day shift is on our own running blood components to the floors. From 6p-8a we will have a specially trained engineer that will carry blood components to the floors. We are still responsible for the ER and OR. Samples will be brought down by PCTs or runners. They may accidentally be dropped off at the main lab, if that is the case, please work out with SPS who is running up or down to grab them or if they can wait for the next drop-off (i.e. SPS will send it with the next runner that comes through on their route of floor → main lab → pharmacy → TSL (and then → floor). Once we get the go-ahead of the tube station back up and running, we will complete a quick training and validation. * LMS trainings out, please complete by May deadline. | |
| Lab Update | * 2023 DOs. Please get your downtime competency completed and practice SQ11/checklist with Halie. * AABB assessment completed, 1 non-conformance. SOP update coming on FDA Notifications. Thank you to everyone for keeping us in a state of readiness for assessments/inspectors. * 1 MLS Lead nights still open. Brooks will be joining 3rd shift in March and Cathy will be joining 2nd shift in March. * Sunquest upgrade to 11.0, go-live 3/5/23 ~0100 – 0800. * Title 21 cloud-based system, go-live mid-May. Will also have an LMS module that will go live later in the year. It will be a SSO (single sign on) utilizing your AMC username and password. We will still have one paper copy of SOPs in case of network outage. All QIMs will be entered into the new system with the ability to scan and upload images so less paper will be kept. * Epic “tube station documentation improvement” will go live on 2/22/23 @ 0630ish. Floors will now enter the tube station and contact info AFTER they click release. These are mandatory fields but they aren’t case sensitive so they could just put a period and it would be accepted. Hopefully they don’t, if so please let us know. Naomi has been working on getting education out there. It has also been in multiple emails. | |
| QA/Blood Utilization | * January utilization data, CT ratio 1.0 * RBC – 8 OD, 4 Wasted * PLTs – 12 OD * Plasma – 8 OD, 0 wasted * Cryo – 0 OD, 0 wasted * ALNW - 14 RBC + plasma, 2 LTWB used * Medic One - 8 units Whole Blood used * Trauma Responses - 80 * QA update – * When re-labeling units, don’t cover the volunteer donor information. The only portion that should be covered is the ecode and the expiration date/time (lower 2 barcode quadrants). * No BPDRs for January * See folder in AMC for all QA incidents from Jan. | |
| Staff Round Table | February birthdays   * Kacie | |