EINSTEIN MEDICAL CENTER-Blood Bank

subject: BLOOD BANK

date: DECEMBER-JANUARY 2019

**AGENDA \*standing items**

| **CATEGORY** | **TOPIC** | ANNOUNCEMENT / UPDATE | **MINUTES** |
| --- | --- | --- | --- |
| **Blood bank issues/discussion.**  DECEMBER 2018-JANUARY 2019  **ADMINISTRATIVE- HUMAN RESOURCES** | 1. Blood bank Team   **Vacancies** | * **Questions?** * **Concerns?** * **Opening story -Einstein’s Mission (going above and beyond): *With humanity, humility and honor, to heal by providing exceptionally intelligent and responsive healthcare and education for as many as we can reach.*** * **Elkins Park Emergency- Call Security “Priority” pick up** * **PSN reports- None to Report** * **Hospital Policy to review with Staff: emailed sop regarding weapons- Please Review**   + **Maintenance & Engineering News/ Online maintenance request procedures for EMCP- *see attached.***   + **Manager’s Minutes – *See keeping you in the loop binder.*** * **Listening assessment- *share*?** * **\*15 min breaks and 45 min lunch- *Hospital policy*\*** * **BB STAFF NOTES- Due to the amount of changes that are made, I will update this list so that you will have a list of the most recent changes- NOTE you MUST ALWAYS thoroughly READ sop changes. This does not replace revised/new sop review! *SEE DOOR POST!*** * **Per-diem Technologists- lunch deduction will be changed to 45 min, effective 11/25/18.** * **Is your patient a sickle cell patient? What do you do?** * **Something out of the ordinary what MUST you do?** * **Essential Personnel means what?** **Essential Personnel are generally defined as the faculty and staff who are required to report to their designated work location, to ensure the operation of essential functions or departments during an emergency or when the University has suspended operations.** * **MIR 3- ALL STAFF MUST ENTER CELL NUMBERS FOR EMERGENCY NOTIFICATION.** * **Downtime thumb drive: Location?** * **Mislabeled specimens (WBITS) are now being escalated to the daily safety huddles.** * **NO FOOD OR DRINKS IN THE BLOOD BANK WORK AREA!**   **SEE CONTINUING ED BOARD AT THE QUALITY CORNER**  Image result for how you say it quotes  Image result for how you say it quotes | 1. **Shift Report is a VERBAL communication log. The items on the bottom and comments MUST be verbally communicated to the next shift!**  * **The shift receiving the information MUST be actively listening and OPEN to receiving the information.** * **When the previous shift appears to have had a rough shift, PLEASE HELP THEM! & BE KIND! You would want the same!**      1. **Blood Inventory:**  * **It is EVERYONE’S responsibility to maintain and regulate blood inventory levels.** * **Before ordering blood make sure there is no blood to be processed and then process it if so.** * **All blood MUST be in date order and stored neatly!** * **If we have too many of a certain blood type, take initiative and cancel the standing, you can do that!:)**  1. **Always stay ahead with Liver transplants. Once the blood goes out set up the next 5 and 5. Don’t wait.** 2. **If “Yes” to the question: Is your patient a sickle cell patient? What do you do?**  * **Antigen type the patient for C, E, K.** * **Add the HBS neg comment in the Transfusion Requirements in PPI.** * **If the patient has been transfused in the past 3 months, the basic antigen typing requirements still apply, DO NOT antigen type the patient and give C, E, K neg blood.** * **Give blood neg for the antigen that the patient does not have and add those antigens in Transfusion Requirements in PPI.** * **For Red Blood Cell orders that state “ Unknown” for Hbg S negative products, go to the current TS result in ORV and see if the answer to the question is yes to: “Is your patient a sickle cell patient?” If answer is yes, treat the patient as a sickle patient. Add the Transfusion Requirements and antigen type before crossmatching blood. \*Document an occurrence if the answer to the question is yes and the transfusion requirements and antigens have not been entered in PPI.\*- I need to address this if this happens.** * **The Type and Screen policy has been revised to include what to do if the answer to the question is "yes”, the procedure will be added to the blood bank training checklist for on boarding new employees, a competency will be developed on how to address this question which will include going back to review the answer to the question, "Is your patient a sickle cell patient?" if a blood order states "unknown" to Hbg S negative products. This corrective action will highlight the importance of the question and ensure competence for all blood bank staff.** |
|  |  |  |  |
| **QUALITY** | 1. CAP/AABB Inspection & Accreditation | * **CAP Inspection 2019** * **CAP & AABB Inspection 2020** |  |
| **EMPLOYEE ISSUES/ Competency** | 1. EMCP-employees due for competency | Competencies DUE   * January 2019 – Minh – pending downtime competency DO |  |
| **HUMAN RESOURCES** | 1. Disciplinary Action/FMLA | * Cup of coffee conversations-after 2-3 infractions (i.e. not performing QC) * First infraction-improvement conversation * 1st step * 2nd step * Decision making day |  |
| **HOSPITAL NEWS** | 1. **Overtime** 2. **Pharmacy hours** | * **Employees must complete a Voluntary Overtime Acknowledgment Form for each voluntarily worked shift that they accept that is outside of the agreed to, predetermined and regularly scheduled work shift. (Appendix A). Managers must retain the completed Voluntary Overtime Acknowledgment Form for three (3) years**. **Sheets will be located by the schedules in a separate bin.** * **Pharmacy hours for employees are extended from 7am-7:30pm (M-F).** |  |
| **SAFETY** |  | **NO FOOD OR DRINKS IN THE LAB** |  |
| **STUDER** | 1. AIDET 2. COMMUNICATION Boards | Each week, you will receive an email highlighting one of the Standards of Behavior that you can put into action.  The Einstein Code of Conduct focuses on five areas: Respect, Empathy, Responsibility, Affinity, and Integrity. Our Standards of Behavior outline how employees can put our Code of Conduct into practice. |  |
| **EMPLOYEE RECOGNITION** |  | **DON’T FORGET TO VOTE VOTE!!** |  |
| **ATTENDANCE** | GUIDELINES | * **Attendance guidelines**   Each supervisor/QA manager/Lead technologist will be closely and consistently monitoring all employees adherence to time and attendance policies.  1. Four (4) or more unscheduled episodes of absence in any six (6) month period.  2. Three (3) or more unscheduled episodes of absence in a six (6) month period occurring before or after scheduled days off, or on weekends.  Two (2) further unscheduled episodes of absence within the three (3)  Months immediately following the issuance of a performance accountability document related to attendance.  4. Lateness or early departure four (4) or more times in one month, or seven (7) or more times during any six (6) month period.  5. Two (2) or more unscheduled episodes of absence before, after and/or on a legal holiday in any twelve (12) month period |  |