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- Room
- **Date:** March 13,2025
- () Time: 2:30 PM

### Agenda Items

#### I. Time and Attendance

- a) Any changes to the schedule must first be approved by the Manager.
- b) Switching benches is not permitted without prior approval from the Manager.
- c) Picking up an open shift is not approval to drop a scheduled shift. This also requires Manager approval.
- d) If you are running late, leaving early or will not be able to attend your shift, you are required to notify me directly, irrespective of the time. Please also continue to notify the team on site as well.
- e) Leaving your shift early requires Manager approval.
- f) Each shift must clock in/out as close to their scheduled start and end times as possible.
- g) Do not come in early or stay late without prior Manager approval.
- h) Aim to complete all work for your shift as much as possible. However, specimens that arrive close to shift change should be passed on to the next shift.
- i) <u>Be sure to clock in/out on every shift. HR is getting stricter on this. Frequent manual</u> <u>punch entries may be subject to disciplinary action.</u>
- j) Check your timecards daily and address any missing pay codes and punches promptly.

#### II. CAP Surveys

- a) <u>Please be sure to strictly adhere to all Mixing, Handling (warming) and Storage</u> requirements before and after testing.
- b) If you are experiencing delays or difficulty completing the testing, notify me promptly.
- c) <u>Remember to enter your survey results directly into the CAP website.</u>

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- d) Please complete and return all required documents to me promptly by the due date:
  - i. Instrument printouts (where applicable) with your <u>initials and date on each</u> <u>page</u>.
  - ii. Remisol printouts of all survey results.
  - iii. A printout of the completed online results entry form (CAP website).
  - iv. A printout of the Kit Transaction History from the CAP website.
  - v. Applicable QC and Maintenance printouts corresponding to the date/time the survey tests were performed.
  - vi. <u>Completed</u> survey companion sheet.
  - vii. Signed attestation page.

#### III. TAT Goals

- a) The current requirement is to **report all tests within 45 minutes.**
- b) <u>1<sup>st</sup> Priority is always to release test results within 45 minutes.</u> 2<sup>nd</sup> priority is to address any challenges that may delay TAT.
- c) Novius TAT has been updated.
- d) Lab Tech has the authority with specimen flow.
- e) Respectfully approach Specimen Processor for any delayed specimens. **DO NOT wait until TAT is almost up!**
- f) Document the following for all applicable delays:
  - i) Name of Specimen Processor.
  - ii) Time approached.
  - iii) Time specimen received.

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#### IV. Schedule Changes

- a) **<u>Starting on 4/11/2025</u>**, shift times will be changed as follows:
  - i) **Shift 1 Day Shift** 7:30 am 4:00 pm.
  - ii) Shift 2 Evening Shift 3:30 pm 12:00 am.
  - iii) Shift 3 Night Shift 11:30 pm 8:00 am.

#### V. Inventory Management

- a) The Inventory form provided is required to be completed every week on Fridays and submitted to me by end of day every Friday.
- b) You are required to use the forms provided for documenting the counts every time you complete the inventory process.
- c) The weekly assignments are as follows:
  - a. Junior will complete the Bio-Rad and Cardinal Inventory listing.
  - b. Rigeat will complete the Architect Inventory listing along with the Beckman Reagent listing page 1.
  - c. Yosief will complete the Beckman Reagent listing pages 2 and 3.
  - d. Mesfin will complete the Beckman Reagent listing pages 4 and 5.
  - e. Idris will complete the Beckman Reagent listing pages 6 and 7.
- d) If you will not be in on a particular Friday or will not be able to complete the form on time, please communicate with your counterparts for timely completion. Please also notify me.
- e) You are also required to check for expired and improperly labeled items while doing the counts. <u>Please document expiration dates on the form</u>.

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- f) Do not include opened/in use boxes, bottles or kits in your counts. Such items are counted as "zero".

#### g) Please do notify Junior of lot numbers received for tracking purposes.

- h) Be sure to initial and date each page you complete.
- i) Documentation of lot numbers and expiration need only be documented on the 1<sup>st</sup> and 3<sup>rd</sup> Fridays of every month.

#### VI. Locker Assignments

- a) Personal locks are no longer allowed.
- b) Staff may only use lockers based on assignment by their Manager.
- c) If you would like to have more than 1 locker, you will need to submit a request to your Manager for an additional locker. These may be assigned on a first-come – first-serve basis after all staff members are provided at least 1 locker.

#### VII. Breakroom Rules

- a) <u>ALL staff MUST WASH HANDS upon entering the breakroom, BEFORE handling any</u> <u>appliance or food/beverage item</u>.
- b) Lab coats and gloves are not permitted in the breakroom.
- c) Please remember to be gentle with the Keurig for long lasting performance. Use only as directed.
- d) Everyone is required to clean up after themselves. DO NOT leave open food items, sugar packets etc. in the cupboards. This practice attracts pests.
- e) Starting next week, 1 team member will be assigned to clean up the breakroom (and deep-clean appliances refrigerator, microwave and Keurig) each week. Please be sure

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to remove all your personal items from the refrigerator on Thursday evenings so that the unit can be cleaned every Friday.

#### VIII. Holiday Coverage Arrangements

- a) Staff may select the holidays they will be assigned to throughout the year.
- b) All staff (except PRN staff) are required to cover holiday shifts.
- c) Please sign up using the sheet provided.

#### IX. Skeleton Team Arrangements

- a) During hazardous conditions or inclement weather, staffing will be reduced to a skeleton team in order to minimize risk to the team as much as possible.
- b) Staff on-site may be asked to cover up to 2 consecutive shifts to minimize travel risks.
- c) Essential personnel may not leave their station until their relief arrives.
- d) A sign-up/rotation sheet will be created to ensure fairness. However, the Manager may make changes depending on the risks and conditions.
- e) For weekdays: 3 people on day shift, 2 on evening shift and 2 on night shift.
- f) For weekends: 3 (possibly 2) people on day shift, 2 on evening shift and 2 on night shift.
- g) Staff may use PTO when not requested to come in under Skeleton Team Arrangements.
- h) Staff are encouraged to take advantage of transportation and on-site sleeping arrangements provided by HUH.

#### X. Communication

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# a) All staff are required to check and respond to all HUH emails at the beginning, midway through and at the end of every shift, at minimum.

- b) Each time confirm that you have read and understand the information provided.
- c) Please feel free to also ask questions in the same thread.
- d) Carefully review all Novius messages. Adhere to any instructions provided by Leadership.
- e) Text messages will also serve to communicate urgent messages that requires everyone's notification and attention whether or not they are in the hospital.
- f) <u>Timely response to all such messages is required.</u>
- g) On each shift, all are expected to review and complete any outstanding CAP, MediaLab, HealthStream and MTS assignments etc., in a timely manner.
- h) Review and adhere to all directions provided in the attached Regulatory/Compliance Instructions.
- i) <u>Persistent Failure to adhere to directions and instructions provided may result in</u> <u>disciplinary action.</u>

#### Attachments:

- 1. Beckman Inventory Listing
- 2. Abbott Architect Inventory Listing
- 3. Holiday Shifts Sign-up Sheet
- 4. Skeleton Team Rotation Schedule
- 5. Important Reminders from the CBA
- 6. Regulatory/Compliance Instructions
- 7. Core Lab Memos:
  - a. Daily QC Review on Each Shift
  - b. Daily Reporting of Critical Results
  - c. Daily Temperature and Humidity Review

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- d. Lab Documentation and Correction of Written Records
- e. Procedure for Documenting and Addressing OOR Temperatures
- f. Procedure for Documenting and Addressing OOR Coagulation QC Results



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