

Ochsner St Mary's- Morgan City Department Plan of Care

Purpose

A. Authority and Responsibility

The laboratory manager/technical director is accountable for the administration of operations, staff development activities, finance, and performance improvement (PI) activities. The manager provides leadership to medical technologists (MT's), medical laboratory technicians (MLT's), and phlebotomists by utilizing avenues of open communication. The manager will support efforts to continually improve the quality of the laboratory system. Medical technologists are expected to demonstrate leadership, responsibility, and accountability for their individual sections as well as utilizing educational opportunities for professional growth.

B. Mission

The laboratory will provide clinical services under the direction of the pathologist, the Medical Director, to serve the community by aiding the medical staff in the diagnosis and treatment of patients.

Structure

A. Description

The laboratory is located within the hospital on the first floor adjacent to the Emergency Room and across from the Radiology Department.

B. Optimal Staffing

Pathologist - 1
Laboratory Director/Manager (MT) - 1
Lead Technologist - 3
Technologists and MLT's - 4
PRN Techs - 1-2
Phlebotomist (full-time) - 6
PRN phlebotomist - 1-2

Scope of Service

A. Description

The laboratory shall provide patient-related clinical services ordered by a physician or physician extender approved by the medical staff on in-patients, out-patients, and nursing home patients of all ages, including but not limited to: hematology, urinalysis, chemistry, bacteriology, serology, blood bank, pathology, coagulation, and send outs. Pathology and cytology services are provided off-site by Reliapath Pathology group (aka The Pathology Laboratory).

B. Work Flow Delivery

The laboratory is arranged into four sections, each delivering a specialized service or services. Each section is headed by a medical technologist lead tech. Coagulation is part of the hematology section and urinalysis is part of the chemistry section, while serology is part of the blood bank.

C. Service Time and Schedule

The laboratory is staffed 24 hours per day, seven days a week. The evening and night shifts are dedicated to in-patient and emergency room services only. For these purposes, the evening shift begins at 5PM and ends at 7AM.

D. Patient /Customer Service

The major focus is on customer diagnosis and treatment with test requests from physicians. All employees are expected to be customer service oriented.

E. Staff Guidelines for Qualifications and Competency

1. Staff must be adequately qualified to perform their jobs. Those employees requiring licensure and certification, must keep these up to date at all times. No employee will be allowed to work with an expired license or certification. All new employees will receive both hospital and laboratory-specific orientation and training.

2. Staff development will include maintenance and clinical competency by attending mandatory continuing education programs and through annual competency assessment, which can be assessed in a variety of ways. In addition, all employees will have competency assessed at or before six months of employment. Only those employees demonstrating satisfactory competence will be retained past this period.

3. Staff will be evaluated at six months of employment and annually thereafter unless circumstances dictate additional evaluation.

F. Standards

It is mandatory that the laboratory adhere to the College of American Pathologist (CAP), Joint Commission, state, and federal standards and regulation.

Communication (Intra/Interdepartmental)

A. Staff - The laboratory will employ monthly meetings, posted communications, bulletin boards, written including email, and verbal announcements in order to support effective communication inside and outside of the department. Each staff member is responsible to use all these tools to keep informed about pertinent information.

B. Medical staff - The pathologist (Medical Director) is an active member of the medical staff. In addition, internal and external communication will be ongoing through the laboratory technical director.

C. Key interdepartmental relationships - the laboratory technical director is responsible for the development of ancillary department relationships to assure the effective and efficient

accomplishment of mutual goals or in the resolution of identified problems. Emphasis on multidisciplinary relationships is demonstrated by staff involvement on intradepartmental teams.

Annual Performance Plan Evaluation

The effectiveness of any action taken shall be assessed and documented. If further actions are necessary to solve a problem, they should be taken and their effectiveness assessed. The laboratory has taken a fundamental approach to identify and implement improvements. Procedures have been analyzed and revised with the objective of reducing process variations and improving efficiency and outcomes. All outputs are closely measured and are used to identify opportunities for improvement.

Responsibility

The laboratory technical director shall be responsible for the implementation of plan of care functions in the department. The overall responsibility is vested in the physicians who serves as the Medical Director of the department, by the hospital Board of Commissioners.

A. Aspect of care - activities having a direct effect on patient care may include but or not limited to: utilization review, safety and health, special care committees, blood utilization, surgical case review, medical staff clinical service review, pharmacy and therapeutic/drug antibiotic review, infection control, nursing, medical records, and physician credentialing.

B. Quality measurement - will involve the following functions:

1. High volume/high risk
2. Low volume/high risk
3. Safety
4. Valid and measurable standards of care
5. Major clinical activities of the department
6. Quality Control

C. Staff development will include:

1. Physician/patient/family/hospital staff education, as necessary
2. Use of Medical Director in continuum of care
3. Online educational tools
4. Workshops and seminars

D. Financial data and information will include:

1. Salary levels
2. Government regulations
3. General budget management

E. Operations

1. Maximizing turn-around time
2. Control of personnel schedule
3. Control of inventory for cost reduction
4. Physician education to help reduce unnecessary orders for service
5. Ensuring compliance with governmental and accreditation standards and regulations