

## NewSTEPS 360: June All State Monthly Meeting

Sarah: Hi everyone. We will get started in a couple minutes. Alright well, I have one o'clock. If you all can make sure that you are muted by clicking the icon at the bottom of your computer screen or if you're on your phones, please click, you can hit star 6 and I believe that mutes and un-mutes you. So thank you everyone for joining. Before we get started, I just had a couple of housekeeping items that I wanted to remind people of. So, please remember to just submit your invoices to Louise if you have completed any activities for year 2. The end of year 2 is rapidly approaching. The last day of year 2 is August 31st, 2017 with final invoices due September 30th. So you'll have 30 days to submit your final invoice. Also, as we are gearing up for year 3, please start thinking about your year 3 budget and your scope of work. Louise will follow up with the team leads about more details with that. And the year 3 in-person meeting is next April, 2018. The dates are April 17th and 18th and that will be here in Colorado. And Marcy, I'm going to turn it over to you for the remaining...

Marcy: Okay, hello everyone, and happy almost summer. Hope you guys are all doing well. We had a couple other important announcements. We have been asked by Hersech to give a presentation at the Secretary's Advisory Committee meeting in April on the success on, or the success and challenges, the progress we have made through this grant activity. And so, as part of that, we really want to present the data from each of your state programs. As we have always done, it will be confidential, we will not reveal any particular states' identity. We really need to have the data in. So I know all of your coaches have been talking to you about getting that data entered into the [inaudible 00:06:17] the monthly data. And now we are going to be making that push, this really needs to happen so we can be presenting that data in August. So, as your coaches are contacting you, I will also be sending out an email in the next week or so to remind you. Joshua and Kareem are going to be making a push for data, but we really need to have the monthly data entered into the [inaudible 00:06:40].

If you are having any problems, you can't get it uploaded, you're having trouble exporting, please contact us and we will do our best to help you get that data in. We're really here to help support you so we can have the data to show the progress that you're all making. So, there's some great things that are happening and we really want to be able to display that in August for the Advisory Committee.

The second piece that I really want to encourage all of you to do is the evaluation. You should've received a personalized email from Sarah to your teams saying, "Please complete this evaluation." This helps us to know what have we done well in [inaudible 00:07:19] 360 as coaches, as the training, as various different aspects. And then what can we do better for this coming year. So please take the time to fill that out. I will be sending out a reminder as well, probably at the beginning of the week, just to put that at the top of your email box on Monday morning. But please fill it out because that will help us to continue to do the work that we're doing and to improve on what we're doing. So that is all, Sarah I will hand it back to you.

Sarah: Thank you Marcy. So today's webinar topic, we are focusing on expanding Newborn's operating hours and this pretty much includes laboratory follow-up and career services. So we're going to hear from two different states today and we're going to start with Tennessee. So Kris, do you mind, kind of talking about Tennessee's process and we're expanding your Saturday lab operations? I'll un-mute you. Okay.

Kris: Hello, can you hear me?

Marcy: Sarah, why don't you mute her again, I think she might be on her phone as well.

Kris: Is that better? I've turned my microphone off.

Sarah: Oh, Kris, I muted your computer, are you also on your telephone? If so, you can talk via your telephone. We cannot hear you. Can you push star 6 on your telephone? Still cannot hear you. Okay, let's try this again, if everybody can please make sure that they're muted and Kris, I'm going to unmute you again on your computer to see if we can get this to work without any feedback.

Okay, Kris you should be un-muted now. And we still cannot hear you. Alright, I'm going to see if Louise can figure this out, and maybe we'll start with Patrick, and Kris and Louise I'm going to kind of let you troubleshoot during Patrick's presentation if that's okay. So, if Patrick, if you're going the line if you could please share your screen. Alright.

Patrick: Can you hear me now?

Sarah: Yes, we can hear you Patrick.

Patrick: Can you see my screen?

Sarah: Yep.

Patrick: Okay, okay. Thank you everybody. So, my presentation starts with a picture of the state capital because it was [inaudible 00:11:19] that got us the money to help us make the enhancement and to add Saturday and holiday testing in Missouri. And this actually was sparked after the Alan Gabler report, "Deadly Delays", the Kansas City Star did a spin-off report that compared the transit times of all the hospitals in the Kansas City area. And by the way, Missouri was fifth from the bottom as far as transit time out of the 25 states that reported data. And so, can you see that black bar on my screen or is that missing?

Sarah: I see a blue bar but now it's gone.

Patrick: Oh okay. So, the legislator got us the money that we needed and actually worked with us with a plan and a budget and said, "How can we fix this in Missouri?" And so we came up with a plan on enhancing the courier and adding Saturdays and holidays and it really worked out great. So that passed and we got the start-up revenue money in Missouri so we had the principal timing of issues that we had in Missouri were that

there was, so there was no weekend or holiday career pick-up. If they contracted Courier, and the same days off at the state laboratory, and this goes way back when we started the Courier. I think to have the Courier work on Sundays was just too expensive.

And so, but then we ended up having to fight to get that and we never could get to that because it was so expensive. And then the smaller birthing hospitals were not providing Courier, because they didn't have enough births where they had at least one specimen a day, and so there were some smaller hospitals that had used regular mail. The state laboratory did not work weekends. The state laboratory had several of their Monday holidays, resulting in 3-day weekends. So we have 13 paid holidays in Missouri, and most of those landed on Monday to make a 3-day weekend. And so with the Courier not running on Sundays, we didn't get 3 days worth of babies until Tuesday or Wednesday. Some hospitals had displayed logistical issues, provoking delays internally and there was a lack of tractability for hospitals to verify that we actually got their samples. So if we, somehow the samples got lost in the mail or internally in the hospital, they wouldn't know that we didn't get them until the normal lab reports didn't show up back in their facility, 10 days later. And so they'd have to call us and we'd have to an investigation. Well, that's too late for some babies.

And then there's a huge, a lack of funding to end these issues. So, the initial improvement that we had that didn't cost us anything, and we started this before even getting money from the legislators that Saturday, but we worked the hospitals who were not on the Courier system to self-transport their samples to the nearest county's health department. Well it turns out, we were sending the Courier to every county health department in Missouri and that came about, back when all states got the bio terrorism money to beef up the Courier and the infrastructure so that we could transport specimens quickly. So here we were stopping at county health departments every day but not at hospitals in the state. And so we contacted these hospitals and made them aware of the time problem and helped them identify the closest county health department that they could still transport their specimens too and provided them a before and after transit time analysis that they could make available to the administrators and we'd encourage them and show them the difference.

So in the next slide, you see, and we counted transit time equals time from sample collection to when we actually start the testing in the lab. So our Courier drops off the samples around midnight in the evening after they spend the day picking them up all over Missouri, so we don't test them until 7:30 the next morning. So we count that as an additional day, so we use calendar days so that the top graph shows the hospitals that were formally mailing them in. And most samples took 5-9 days. Then after they started self-transporting them to the nearest county health department, we would get them frequently the same day that they dropped them off and be testing them at 8 o'clock the next morning. And so that greatly improved their transit time. And this was all before we started the Saturday adjusting so it's even better than that now.

So the more initial improvements at no cost, we work one on one with hospitals displaying timeliness issues and we began providing customized monthly timeliness report cards, laboratory and OB managers in those institutions. And then we increased timeliness education overall, just ramp it up in any way that we could just in routine conversation with hospitals and we, you wouldn't see any regulations on the website which says that the samples must be send to the state lab within 24 hours and if it's not received, that means they have to send them out. And then we crafted a top 10 reminders notice about all the things that we want to, the most important things that we wanted to communicate to the newborn's screening stakeholders. And it has a timeliness component and I'll show that in a minute.

And then we provided a timeliness improvement presentation to the Missouri Midwives Association and that was huge because the midwives had, it was a big obstacle for them to provide quick transport of their specimens. So this is our top 10 reminders that has all sorts of things on them but if you look at reminder number 8, it says give the sample to state Courier pick up site or mail out site at your facility as soon as it has thoroughly air-dried 2-4 hours because prompt sample transit time can be life saving for the baby. So we sent these, this pretty top 10 reminders sheet out with all the lab reports for one full month and then we sent it out with all the collection card orders on a permanent basis so every time they order cards they see it. We posted it on our website, we posted it on our lab report access portal for a long time, and then we also provided 11 x 14 laminated posters for hospitals so they could post it in their lab or their outpatient draw room.

So, then we came to improvements that cost us money. And this is where the funding that we got from the legislators really became useful for us. We immediately implemented a holiday Courier pickup starting January 2014, and that cost 6,000 a year. And then the newborn screening laboratory received the funding to enhance the Courier and implement Saturday and holiday testing spearheaded by the Kansas City legislator. And so then we implemented Sunday Courier pick ups starting July 5th, 2015 and that cost 36,000 per year. But this was huge because now finally the Courier was working one day before us and we were getting those weekend babies here on Monday instead of Tuesday. And then we added eight more birthing hospitals, current routine hospital sites, for pick up. That was in July 5th, 2015 and that was an additional 44,000 per year. And then finally, after we hired the extra person and planned it all out, we implemented Saturday and holiday testing beginning October 3rd, 2015. So we're getting close to 2 years now for that, and that cost 200,000 per year. So the total cost for this came to 268,000 per year which equates to about 3 dollars per screening. We'd only have to raise our fee 3 dollars to cover all this.

So the general revenue was good for the first year and then the next fiscal year they cut it in half and so now the third year it's going to be all coming from our newborn screening fee. So once we implemented Saturday testing, and I'll tell you about how we did that in just a minute, but we really communicated the fact that we were making these improvements about our Courier expansion and so this was a notice that we sent out, again with the lab reports, for one month. A reminder about getting the sample to the pickup site immediately after it's air-dried. Another reminder about the importance of all this, how it can save babies lives. And then the fact that we

were going to be converting to a 6-day work-week very soon. And then a reminder to connect to the lab report access portal which we were providing to all the hospitals. And so, this is the press release here that went out too.

And so, here's our Saturday holiday work model. And so, one thing that I was really adamant about was I wanted it to be a hundred percent voluntary staffing process. And so, it was going to require a skeleton proof of 7-8 scientists and two office support to work Saturdays and holidays. We work every holiday except Thanksgiving but we do work the Friday and Saturday after Thanksgiving. And we don't work Christmas day and New Year's day but we work every other holiday. And all screening tests are performed and second-tier testing for human [inaudible 00:21:55] which is good because that's kind of one of the slower tests. We hired one FTE, and this was a manager level to run and spearhead the Saturday and holiday expansion and supervise the adjunct staff that was going to work. And then we, our two newest newborn screening laboratory employees that we hired, they took the job agreeing that they would work Tuesday through Saturday until attrition allows them to move to Monday through Friday. So basically, the two lowest seniority staff right out of college knew they were gonna work Tuesday through Saturday but they don't work holidays unless they want to.

Then we took seven other adjunct employees that would work each Saturday and holiday, making straight time pay. And we were able to do this by a special classification called a secondary assignment so we wouldn't have to pay them time and a half. So if there were people that insisted on making time and a half, they just didn't sign up for work. And so, we had a whole meeting with the whole lab announcing how we were gonna allow people to do work in the newborn screening lab on Saturdays and holidays. Some of these came from our current newborn screening staff, some are staff from other units in the state lab like microbiology, chemistry, or molecular. We would train them starting with one platform, and get them really good at it, and require them to work at least one Saturday a month so they maintain proficiency at that. And then the Saturday and holiday staff, voluntary sign up, can sign up for the days that they would like to work and then the pay for this is added to their regular paycheck. It's not considered overtime, it's considered like a second job.

So this is how all this improved our sample transit time. And again this is calendar days, which 3 calendar days do not equate to 72 hours in the vast majority of cases here. You can see we went from 61% to 90% that made it here by the third calendar day from when they were collected, so that's a 29% improvement. All the other days dropped, some of them down to almost nothing. We have used this graph over and over again to send out through the department, show the department director, how well all of this has improved everything. So the Saturday testing again, we have a time critical list of disorders that we will phone out and page the geneticist on call at our referral center and so they know about this and if we have a time critical disorder, [inaudible 00:25:01] or whatever, if you all know which ones they are we actually phone them out, even on a preliminary result on a sample that just came in on Saturday or on the holiday and those babies now, get taken care of and they don't have to wait until Tuesday of the following week. So this has been huge.

And so then briefly, I'm just going to talk about our laboratory access portal which allows, it's the secure website where submitters can track their samples along with [inaudible 00:25:37] or seeing their laboratory results in realtime. And we also put announcements on this and so there's three ways they can search for their specimen and so they just go in there on a daily basis to make sure that we got the specimens that they sent the previous day. So, you know, and I think that's a cap requirement now that they have to make sure that we received it. And so they can verify that each day and they are all doing that, and if by chance we don't get them, they contact us and we do an investigation on our end and they do an investigation on their end. That happened a couple times and it turned out that the samples were in their facility somewhere. And so the portal is a secure website so they can verify on a daily business that we got the samples. The hospital can print and save their own lab reports and we actually did go pay for those with the hospitals so we make them retrieve and print their own lab reports. They have to retrieve them and so we're paperless with the submitters. We still send hard copy lab reports to the physician for their record.

This has highly reduced the number of calls in the state lab requesting newborn screen lab reports that are just taking a long time to get to mail and we have become paperless. And so this is the Saturday and holiday work team. I'm very proud of them and they're doing such a wonderful job and so this is again at least, only 7 of these people work each Saturday or holiday but they all work off and on and it's just going really well and it has really improved our timeliness in Missouri. Thank you.

Sarah: Awesome, thank you so much Patrick. It is very refreshing to see your data and how much your state improved in timeliness just with expanding your holiday and Saturday lab as well as the Courier and also just the other components of when you expanded and all that education about the Courier and the announcements and it was very helpful. I also think that the new classification for employees that are adjunct, that's really interesting as well and I think that could definitely help with some other challenges that labs have been experiencing with staff morale in terms of not having to work Saturdays. So, very interesting, and I'm going to turn it over to Kris. I tried again, and see if, Kris can kind of share a little bit about Tennessee's process and then we'll open the floor for questions for both Kris and Patrick at the end.

So, Kris?

Louise: We sent her some directions so she should be able to speak when she logs back in.

Marcy: Looks like maybe she's dialing in now. We still can't hear you though Kris.

Is it star 6, Louise, that she needs to press, maybe she's muted on the phone. She pressed star 6, I can read your lips. Oh I can't read lips that well.

Sarah: And unfortunately I can't unmute the phone.

Kris: Can you hear me now? So now we have this echo thing.

Marcy: Kris, why don't you hang up your phone, let's see if that works.

Kris: Did that work?

Marcy: She's just going to leave, we just lost Kris. Going to miss her.

Sarah: Alright well while we are waiting for Kris, I will go ahead and talk about the operating hour tool kit that we have been working on in one minute while I pull up my slides. Okay, can, sorry one second. Okay, can you all see my slides, or Marcy can you? Okay, great.

So, New Steps 360 in partnership with March of Dimes, Asto, Baby's First Test, and AmChip, we are working to develop some sort of tool kit for states to, to help support states in expanding their program operating hours. Like I mentioned before, this is to help expand your Courier if that's where you need help, to expand your lab or to expand follow-up. So I just wanted to kind of give you all a brief overview of what we're hoping this toolkit will do.

So here is a current map of where states are in terms of their laboratory operating hours. As of right now, 9 states have labs that operate at seven days a week. And, 17 states, with Puerto Rico, operate at five days a week. And here is a map of the follow-up as well. You're not supposed to read this, but if you do go onto the New Steps website, you can see these infographics but as you can see that there's a large variation in some of these weekend and holiday lab activities. Some labs receive specimens, others test for all disorders, some test for just time critical, some just call out results from Friday. So really there's a large variety in terms of the weekend and lab operations as of right now.

So why are we developing this tool kit? And, from the 2015 analysis that we did, we found that there was an association with those states that were open 7 days of week and their likeliness to reach timeliness goals. So, we really want to help states who are at that five-day mark to able to expand to six or to seven and those who are at six to expand to seven and doing that through a variety of ways as we realize that different states have different processes and different challenges. So, we want this toolkit to be comprehensive without being an information overload. As I mentioned before, every state has different issues that they have to work through when they are going to try to expand their operating hours so we want this toolkit to be comprehensive so it can help every state no matter what their unique circumstance is. It's also to help states to develop an advocacy strategy so that they can talk to their state leaders or health officials. The toolkit will have examples from other programs and also include templates that can be customized to meet your needs and for your data.

So, the toolkit components, we will have an introduction and this will include a timeliness policy statement that EPH's Ella is currently working on as well as information about the toolkit, the different contents, and how to use it. Section 2,

again, is really working towards developing that advocacy strategy and this is really where we are working with our partners to develop those tip sheets and resources for states. This will include information about state budget cycles, public workshops for state officials, tips on developing policy materials and working with legislators or other types of state leadership as well as an overview of state agency rule making and process flow charts to really list some steps that you should think about as you're going to expand either your courier or lab.

Section 3 will include case studies or narratives and the point of these case studies is really to, focuses on states that have already expanded to six or seven days operating hours and kind of identifying those challenges that they went through as well as their solutions. The hope of this is for other states to learn from each other. Case studies will be topic specific including staff morale and buy-in, technical support during non-traditional working hours, working with your union and civil service, how to leverage funding, work flow, press training and courier. We also plan to have a summary table of program operations including what tests are being run, who gets paid overtime, things like that that aren't necessarily collected in our repository but more detailed information about those operating activities. And then, the final section will include templates and information that should be shared for your state leadership. This is where we'll have templates as well as examples of information to share and that will be data as well as some personal stories and things like that. So that is kind of a brief summary of what we are kind of working on at New Steps as well as with our partners to help states expand to get those improvements that we saw happened with Missouri.

So I'm going to stop sharing my screen and we're going to try Kris one more time. And I don't even see Kris anymore, so, we'll open it up for questions for Patrick as well as about the operating hour toolkit. Does anybody have any questions for either Patrick or I?

Marcy: Just to build on what you just said about this toolkit. You did a very nice job of presenting what we're doing for operating hours and our goal is to take these advocating strategies and say, okay, what else do we need to do. There's a lot of things that have been built in with this partnership for operating hours and improving operating hours with this toolkit. But it will also be generalized for other activities that happen. So looking at how do you admin disorders, what if you have to, anything that you might need to advocate for within your state, we're going to test this out here and then building those templates so that it can be used more broadly for advocacy strategies and building budgets and doing all of those activities that Sarah described. So, we're hoping that this will work and be a good tool, a good template for a tool for all of you as we move forward.

Speaker 7: So one of the things you mentioned there, was Marcy, was building the budgets and Patrick can obviously put numbers to things. I don't know Patrick if there was something you could share about the budgeting process or if you have a tool or something, I don't know, I just, I found that interesting to actually see the dollars. [inaudible 00:38:53]



Marcy: We've also, many of you may know Andy Warsaltzer from the city of Utah, he's very interested in thinking about the costs of New Born screening and what we do and how we actually pay for what we do. So we have talked with him about other aspects, specifically the cystic fibrosis new born screening, and we talked about engaging him in this aspect so if others of you would also be interested in providing information for a toolkit for costs and charges and how we really build those budgets, we would love to hear from you. And I know Melanie is on, Melanie if you have anything from March of Dimes, putting you on the spot, but if you have anything you'd like to add from March of Dimes' perspective too, we really value your partnership in this toolkit activity.

Melanie: Thanks Marcy, I would like to ask the group if you could identify since part of what we're able to do is advocacy, I'm curious to know from a policy standpoint, what might be some of your biggest challenges in expanding the operating hours. I think, obviously, money is always number one, funding is certainly number one. But if there are other things beyond that and also just making the arguments about funding, I mean, Patrick talked about his legislative champion, which is always one of the things that if you've got somebody fighting for you within legislature, that is ultimately what you want to have. But as you begin to put together your funding needs and then if you need authorization needs, those kinds of things I'm just curious about what you see as some of the biggest challenges in making people hear those needs. Or really what needs to be changed in your state to begin to move forward on opening, on expanding operating hours from a policy standpoint?

Speaker 9: Can you guys hear me? Yes. So I think, I'm from the follow-up side, I don't know if our lab staff is on the call or not but I know that they've repeatedly talked about just the staffing in general. I mean, money you're right, is the first thing, and then the second is staffing and having to require people to work those holidays and those weekend hours. And just having the capacity to man that operation.

Melanie: Is that, thanks a lot, is that for states that are not union states, [inaudible 00:41:44], for those of you that are not, is it more of just trying to create incentives for people to work those holidays and weekends or [inaudible 00:41:59] in terms of state government.

Speaker 9: I think it goes back again to funding because we're not allowed to pay for overtime, like they make you, state policy here in Texas, we're not a union state but we have to flex the time off in the work week coming up. You don't get to accrue it and use it as vacation time later, so there are just different policies, you know, that affect peoples' incentives and morale for wanting to work.

Marcy: So, [inaudible 00:42:30] remember when you guys were looking to changing, one of the things was the way that you were doing with the [inaudible 00:42:35] when you shifted your hours, the drive times became worse. So even weird things like that, people didn't like that.

Speaker 9: Right, a lot of people, cause often traffic is horrible so people like to work early hours to get here way before traffic starts and trying to shift times during the work time.

People have kiddos to pick up from school after work and there's just staffing issues and rightly so I mean they have a life outside of here so. But they are challenges.

Sarah: Have any other states, so in Missouri, Patrick talked about creating that special classification so people who do work on holidays are not paid overtime but it's kind of a second job as Patrick said. Have other states done that, would that work?

Speaker 9: It's definitely interesting, definitely something that I think I should bring up to my leadership or my counterpart that are in the lab doing the testing because I don't know if they thought of it in that aspect of not.

Sarah: In terms of the toolkit, are there other resources that we can provide you in terms of how to talk to your state leadership to expand. Is it a data need, is it a budgetary need, do you just need templates or examples?

Marcy: I think we all need caffeine.

Sarah: Well, you can think about that question.

Kris: Hey, this is Kris.

Sarah: Kris is on so we're going to let Kris talk about her.

Kris: I am so sorry I have been trying to get connected. I finally disconnected the webcam, cut everything off and come back in and now lo and behold it's working so I apologize. So to get started, just like Missouri, Tennessee was motivated to move towards a 6-day work week based on the <Milwaukee journal article, our commissioner had actually read the article and had communicated to our laboratory director to kind of check into or see how feasible it was to migrate to a 6-day work week so that began our work in the laboratory to find out what our needs were as far as staffing. What we would need as far as extra reagents because that would mean that we were running samples 6 days a week so using more 2C and using a little more reagents than ordinarily. And then what exactly would we need to report on the weekends because we had to look into the infrastructure. Was there gonna be support with follow-up, was there going to be the physician available to take the phone calls for some of the critical results.

So, we recruited our staff to give us ideas on how to implement a work schedule that would be equitable for all persons to be able to accommodate the six day work week because we were bounded by not being able to pay overtime and we had to work within our budget and work within the 37 hour work week to be able to give people a day off during the week who would then subsequently work on that following Saturday. So those were our limitations so to speak and the feedback from the employees, most people wanted a three-day weekend so the way that it would work if you were working on Saturday, you would take either Friday off or the following Monday. And that was for when we first started the six day work week, that was kind of what everybody did. But then it became a little bit better to have a day off during the week for doctor's appointments or for other things. So the supervisors were really

good at working with individual persons to be able to accommodate them and to facilitate the Saturday work.

One thing that we told our commissioner that we needed was the courier service to really be able to make Saturday effective for timeliness was to be able to have delivery of our samples. So part of that migration we did contract with a courier company to be able to deliver our specimens by 6 or 7 the following morning, seven days a week, even though we were only working six days. And so that has worked out pretty good and because we saw that as an opportunity, we were already raising our fee to be able to contract for courier service, to implement skid at the same time and also to work on our electronic ordering and electronic reporting which is still in the developing phases.

We did meet some resistance towards the six day work week and that was one of the barriers that we saw immediately was a staff retention. Before, when we would interview staff, we would always tell them that one of the advantages of leaving the hospital or private environment was that that you did not have to work on a Saturday so now that was something was no longer a carrot so to speak. So we had to work to change the mindset of the staff to basically reeducate them and re-inform them of the reason why we are here in the first place and that is to save the lives of our Tennessee babies. And, we ended up losing probably half of our staff, some transferred to other departments, some transferred outside of the state laboratory and then others left for private service. But the remaining staff that are here now, we were able to hire a few more people, sometimes change is really hard but after you've done it for a while it just becomes routine. So it's not that much of a problem anymore, people grumbling about working Saturdays, we've all just adopted that mentality, we're here, we get the job done.

We have seen some advantages for migrating to Saturday work. It has improved our timeliness. Looking at data before we started Saturday work for an instance, in 2014 this would be before the courier service was started and before we started Saturday reporting, we had about 60% of our results reported within four days of receiving the sample. And now, looking at 2015 data, about 80% is reported within four days of receipt. And while that's great, we really need to basically match the national recommendation which would be the five days of birth for your critical results and seven days of birth for everything else. So I don't have data on that just yet but we'll soon be able to show if we are actually meeting that national recommendation.

The test that we decided to report on Saturday, we have made some changes since then. In the beginning, we were only reporting our criticals on Saturday and that included everything except for hemoglobin, skid, and IRT. But to match the reporting of critical results within five days of birth, we realized that we really needed to report everything that we could possibly on Saturday. That meant not just communicating to the nurses what an abnormal result was, but to also report within our limb system everything that was within normal limits. In addition, the commissioner gave us approval that we did not have to test for hemoglobin on Saturday. We didn't have to test for IRTs on Saturdays. And we didn't have to test for skids on Saturdays because our geneticists and our immunologists did not want skid results on Saturdays because

they felt like they couldn't arrange for a flow testing on the weekends anyways so they would just prefer Monday through Friday reporting.

So, what we decided to do as of last month was to begin reporting all results, regardless of what they were on Saturday and I'm pleased to say that because we have done that, we are now down to about 1.96 days in our reporting from the time of receipt into the lab until we report a result on a specimen. And I hope that that would translate to us meeting moreso the goal of reporting criticals within five days of life and all results within seven days of life and I'll have that data probably we'll be sharing it at the new born training symposium in September. So that's it in a nutshell. Any questions?

Oh, one other thing that I forgot about working on weekends, we ran into a problem not too long ago with IT. We couldn't get any of our punchers to work and we could not get vendor support even though they reached us several hours later. But it ended up being our own IT problem that resided here in-house and no one was there at our IT center to be able to assist us until Monday morning and to bring us back online. And so that's one thing for states that are migrating towards Saturday to think about, you know, if you're computers are down on the weekends what are you going to do? And we don't have written in our contracts just set for vendor support on the weekend. That'll be an additional cost from what I've been told when we go for contract renewal to be able to have somebody to help us between the hours of 8 and 4:30 on Saturday so that's something else to keep in mind.

Sarah: Great, thank you so much Kris. Does anybody have any questions for Kris at this time?

What have other states done, working with IT or their vendors during nontraditional work hours? Is it written into your contracts or are there other solutions, are they on-call? And again, to un-mute yourself you can click the icon at the bottom of your screen or if you're on the phone you can push star 6.

All right, quiet bunch today. Heather, I don't mean to put you on the spot, but I saw that you might have a question based off of your chat or comment? Okay.

Yvonne: So I might be pushing us into a different part of the agenda. Do you mind if I?

Sarah: No go ahead.

Yvonne: So I may not be here in July, but I know that we've talked about, kudos, and there's three people that I want to make sure I give a shout out to because I won't be here in July so, Joelle from North Dakota and Kimberly, Kim from Iowa talked to my Texas team on midwives and I appreciate them taking time and having yet another meeting with a state that they don't work with. And then Eva in California has really helped that team, she put together an excel spreadsheet so that they could track their data so those are my stars and I just wanted to publicly thank them for their work.

Sarah: Yes, thank you Yvonne. I also have some kudos, so we'll just spend the next couple of minutes doing that. So I wanted to give kudos to Indiana who just starting at the

beginning of June, they expanded to Saturday lab operations and seven-day courier for all their birthing facilities. So excited to kind of see where that goes. I don't know if they're on the line today but congratulations to Indiana. Also, to the Oklahoma and Tennessee teams, Seri isn't here but I'm going to thank Oklahoma and Tennessee because you both completed a lot of site visits as well as disseminated a very comprehensive resource guide for your birthing facilities.

And then, again since Ruth Anne and Sarah you're not on the line, I have kudos to read from them. Kudos to North Carolina for implementing phase 2 of their pilot studies that now offers Monday through Saturday pick up and delivery to midwives as well as to over 40 additional facilities, birthing facilities in their state. Kudos to Montana for a successful implementation of their chain of custody process and this holds their courier more reliable as well as lets them identify where their issues that occur during that transit process. And then a kudos to the Alaska team from Seri for starting their courier trial to expand to all hospitals, sending out new report cards specific to hospital's midwives, and entering all their QI data from 2016 and doing this despite a possible government shut down. So good job to Alaska. Marcy or Joshua, I don't know if any of the other coaches have any other kudos for their states. No? Alright.

Well if there are no other questions about operating hours or for our presenters, that is the rest of our meeting.

Marcy: Thank you so much to Kris and Patrick for presenting for us, really appreciate it, and we will talk to you all in July.

Sarah: Alright, have a great afternoon.

Kris: Thank you.

Patrick: Thank you.