

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
September 22, 2022

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director

Absent: William Morgan, MD

Guest:

ALLIED HEALTH PROVIDER PRESENT:

Mary Barnes, APRN

David Arles, APRN

Tiffany Forster, APRN

NON-MEMBERS PRESENT:

Dale Clayton, CEO

Cindy Tillman,

Daniel Coffman, CCO

Chelsea Church, PhD

Denise Jackson, RN, Quality Director

Chasity Howell, RN Utilization Review

Lynda James, LPN

Kaye Hamilton, Medical Staff Coordinator

1. Call to order
 - a. The meeting was called to order at 12:49 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the August 18, 2022, Medical Staff Meeting were reviewed.
i.Action: Dr. Chiaffitelli, Medical Director, made a motion to approve the minutes.
3. Unfinished Business
 - a. None
4. Report from the Chief Executive Officer
 - a. CEO report – Dale Clayton, CEO

- Leadership continues to update staff and Providers regarding new policies and regulations.
- Covid concerns have increased slightly along with Monkey Pox and vigilance continues to be key.
- Hospital Staff and Operations Overview
 - Patient care continues to be outstanding.
 - Open positions include CNA, LPN, RN and RT.
 - Recently hired staff include 2 CNAs and 1 LPN.
 - Critical Alert nurse call system is close to completion. This is the final major improvement enabled by grant funds.
 - Our average daily census for the month was 11.
 - Emergency Department assisted 169 patients.
 - Employees continued to receive free meals compliments of Cohesive.
 - We continue to put an emphasis on social media presence and other outreach efforts for the Hospital and the Clinic.
 - Planning continues for the increased use of the space in the Davis Caley Memorial Annex.
- Contracts, Agreements and Appointments to be presented to the Governing Board:
 - AT&T Voip and Internet Agreement
 - MRMC Credit Card
 - Millipore Lab Water Source
 - Budget Presentation
 Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records

- i. Written report remains in the minutes.

b. Nursing

Excellent Patient Care

- Monthly Education included LifeShare Organ Procurement Education and Training.
- MRMC Emergency Management and Administration coordinated with region 3 Medical Response System Director, Greer, Jackson and Beckham County Emergency Management Directors, Greer EMS, Air Evac, Mangum and Granite Police and Fire Chiefs, Mangum City Manager, Mangum School's Superintendent as well as a host of other county and regional leadership representatives to develop the Threat and Hazard Identification and Risk Assessment per FEMA guidelines.
- MRMC Wound Care Team reports 100% of the patients admitted with wounds showed clinical evidence of wound healing.

- Our Radiology team reports of the 33 Contrast CTs performed, zero patients developed reactions.

Excellent Client Service

- Patients continue to rely on MRMC as their local hospital. Patient days decreased from 339 days in July to 324 days in August. This represents a stable average daily census of 11. In addition, MRMC Emergency Department provided care to 169 patients in August.
- August COVID-19 Stats at MRMC: Swabs (56-PCR & 105-Antigen) with 3 Positive PCR & 23 Positive Antigen.
- Our Laboratory completed 2446 tests with only 1 rejected specimen. Specimens are now Para Filmed to protect specimen viability for transport.

Preserve Rural Jobs

- Open Positions include Full Time RT, RN, LPN and CNA.
- Recruiting efforts included interviewing regional professionals. Offers are being considered.
- Clinical Core Staff proudly welcomes 1 LPN and 2 CNAs!
Written report remains in minutes.

c. Infection Control

- Old Business
 - a 2022 Respiratory Protection Program approved by MRMC Board.
- New Business:
 - a. None
- Data:
 - a, N/A
- Policy & Procedures:
 - a. Approval of Infection Control & Prevention Policy & Procedure Manual
- Education/In Services
 - a. Review of EMTALA mandate for all staff.
 - b. Hand Hygiene review for nurses.
 - c. Mask Guidance: Policy change by Corporate for all staff.
 - d. Code of Conduct with emphasis on telephone etiquette for all staff.
 - e. Fall documentation for nursing staff.
 - f. Pain assessment for dementia patients for nursing staff.
- Updates: No updates at this time.
- Annual Items:
 - a. Annual Infection Control Risk Assessment and Annual Infection Control Program Evaluation.
 1. N/A

Written report remains in minutes.

d. Environment of Care and Safety Report

- i. Evaluation and Approval of Annual Plans –
- i.i. Old Business - -
 - a. Evaluation and approval of Annual Plans-Plans will be presented in August meeting.
 - a. Continuing to work on the building. Flooring in Nurses break area and Med Prep room needing replaced – Rescheduled - additional tile will need to be ordered.
 - b. 15 AMP Receptacles – all 15 AMP Receptacles will be replaced with 20 AMP Receptacles throughout Hospital – replacement has started.
 - c. Replace all receptacles on generator circuit at Clinic with red receptacles.
 - d. ER Provider office flooring needing replaced
 - e. Damaged ceiling tile in patient area due to electrical upgrade- replacement started.
 - f. Nurse call in room 23 malfunction due to roof leak and water inside wall – Nurse call has dried out and working properly.
 - g. Replace ceiling tile that do not fit properly – will need more tile to complete.

- i.i.i. New Business

- a. None

- Written report remains in minutes.

- e. Laboratory

- i. Tissue Report – Approved – August, 2022

- i.i. Transfusion Report – Approved – August, 2022

- f. Radiology

- i. There was a total of – 266 X-Rays/CT/US

- i.i. Nothing up for approval

- i.i.i. Updates:

- o PM was completed for the CT on 8/22/2022.

- Written report remains in minutes.

- g. Pharmacy

- i. Verbal Report by Pharmacist.

- i.i. COVID-19 Medications-Have 2 doses of Bebtelovimab, 30 doses of Remdesivir and 18 Paxlovid doses in-house.

- i.i.i. PIC and DRS to propose new therapeutic interchanges at P&T Committee Meetings going forward.

- i.v. Drug Shortage/Outages are as follows: Clinimix, Intralipids, IV Fluids, Optiray (all Contrast), lorazepam injection, furosemide injection. Can substitute LR if appropriate for NS. DRS and PIC to monitor on a routine basis.

Written report remains in minutes.

- h. Physical Therapy
 - i. No report.
 - i. Emergency Department
 - i. No report
 - j. Quality Assessment Performance Improvement Risk
 - Risk Management
 - Grievance – 0
 - 1 - Fall with no injury
 - 0 - Fall with minor injury
 - 0 – Fall with major injury
 - Death – In Patient 0 (0%) - Emergency Department 3 (2%)
 - AMA/LWBS – 4/0
 - Quality
 - Quality Minutes from previous month included as attachment.
 - Policy Revisions: Nursing Policy Manual, Nursing Policy Manual Table of Contents, Clinical Procedure Policy Manual, Clinical Procedures Policy Manual TOC, Corporate Card – Cardholder Policy, Corporate Care – Cardholder Policy Attachment A Cardholder Limits, Corporate Credit Care Use Agreement and Adult Sepsis Standing Orders
 - HIM – H&P – Completion 27/27= 100%.
 - Med event – 1
 - Afterhours access was – 85 times
 - Compliance
- Written report remains in minutes.

- k. Utilization Review
 - i. Total Patient days for August: 324
 - i.i. Total Medicare days for August: 289
 - i.i.i. Total Medicaid days for August: 13
 - i.v. Total Swing Bed days for August: 277
 - v. Total Medicare SB days for August: 256

Written report remains in the minutes.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for August, 2022.

6. New Business

- a. Review & Consideration of Approval of Policies & Procedures: MRMC – Nursing Policy Manual – Table of Contents for the Nursing Policies & Procedures Manual is

Attached.

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Nursing Policy Manual and the Table of Contents for the Nursing Policies & Procedures Manual is attached.

- b. Review & Consideration of Approval of Policies & Procedures – MRMC – Clinical Procedure Manual – Table of Contents for the Clinical Procedure Policy Manual is Attached.

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Clinical Procedure Manual – Table of Contents for the Clinical Procedure Policy Manual is attached.

- c. Review & Consideration of Approval of Policy: MRMC Corporate Card – Cardholder Policy

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC Corporate Card – Cardholder Policy.

- d. Review & Consideration of Approval of Policy: MRMC Corporate Card – Cardholder Policy Attachment A – Cardholder Limits

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC Corporate Card – Cardholder Policy Attachment A – Cardholder Limits.

- e. Review & Consideration of Approval of Agreement: MRMC Corporate Credit Card Use Agreement

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC Corporate Credit Card Use Agreement.

- f. Review & consideration of Approval of Standing Order: MRMC – Adult Sepsis Standing Orders

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Adult Sepsis Standing Orders.

7. Adjourn

- a. Dr. Chiaffitelli made a motion to adjourn the meeting at 1:00 pm.

Medical Director/Chief of Staff

Date