

Mangum Regional Medical Center
Medical Staff Meeting
February 18, 2021

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director
William Gregory Morgan, III, MD
Absent:
Guest:

ALLIED HEALTH PROVIDER PRESENT:

Mary Barnes, APRN
Randy Benish, PA

NON-MEMBERS PRESENT:

Chelsea Church, PhD
Marie Harrington, CEO
Daniel Coffin, CCO
Melissa Tunstall, Quality Director
Candy Denney, RN, Utilization Review
Lynda James, LPN, Drug Room
Kaye Hamilton, Medical Staff Coordinator

1. Call to order
 - a. The meeting was called to order at 12:05 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the January 21, 2021, 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 – Marie Harrington, CEO

- We continue to swab any admits due to increased number of positive COVID-19 patients in Mangum. Treating all patients in our ER as if they have COVID-19 until proven otherwise.
- January COVID-19 Stats at MRMC: 157 Swabs, 7 Positive (4.45%), 139 Negative (88.53%), 0 Pending and 0 deaths.

- COVID – 19 Prevalence Overview by Month at MRMC: March: 32% Prevalence, April: 25% Prevalence, May: 6%, Prevalence, June 0% Prevalence, July: 10% Prevalence, August: 2.4% Prevalence, September: 2.73% Prevalence, October: 6.47% Prevalence, November: 21.63% Prevalence, December Prevalence: 9.93%, and January Prevalence: 4.45%, Median Age: 49.4.
- Greer County January COVID-19 Statistics: 461 Positive Cases and 13 Deaths (2.81% death rate).
- PPE and Swab supplies have been adequate for us to manage during this current crisis.
- Updated COVID-19 Binder at Nurse's station, City Annex and Provider room to ensure communication and COVID-19 updates and education are read. Signature is required for all read and sign documents in binder. Providers are kept up to date with the COVID-19 Provider Update/Education Binder in the provider sleep room. CEO has also communicated with providers via email, cell phone and text messages during this continued COVID-19 Pandemic. Last update was 12.03.2020.
- Due to COVID-19 surge in January we have prohibited vendor visitation to hospital and limited patient visitation to only palliative care patient visitation.
- Cohesive Healthcare provided staff lunches for January, 2021 during this pandemic. All staff members are very thankful for this support.
- Completed Savance COVID-19 Screening Kiosk implementation and training in January.
- Enrolled RHC as a Pandemic Provider and received status approval on January 13, 2021. Hospital and Clinic are Pandemic Providers.
- Desiree Sutherland was awarded the Employee of The Month of January during the MRMC All-Staff meeting on February 09, 2021.
- MRMC-KPIs for January were reviewed. The quality improvements continued to be significant: 0 Falls, 1 Employee Work Related Injuries, 3 Med Variances, 2 AMAs, 0 LWBS, 5 Referrals, 3 Denials, 0 Inpatient Mortalities, 0 ER Patient Mortality, 1 Readmission to Acute, 1 Grievance and 0 Complaints. Zero CAUTIs, CLABSIs, or CAEs, and OHA Pressure Ulcers. A total of 104 ER patients were admitted which was a decrease of 16.8% over previous month. A total of 252 Outpatient visits. Average Daily Census: 5.9
- The hospital generator update:
 - Reyes Electric began the project and will perform a new assessment when approved. Project is still pending.

- Contracts and items, we prepared for February Board meeting:
 - Lippincott (Wolters Kluwer Health, Inc.)
 - OFMQ
 - Spacelabs

Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records

- i. No report was given.

b. Nursing

Excellent Patient Care

- Monthly Education topics included: Administration of Bamlanivimab for COVID-19 positive patients.
- Staff are updated regularly regarding Cohesive COVID Task Force directives.
- Implemented and initiated Oklahoma State Dept. of Health COVID-19 Pandemic Provider status.

Excellent Client Service

- Patients continue to rely on MRMC as their local hospital. Patient days decreased from 265 in December to 183 in January. This represents an average daily census of 5.90.
- MRMC Outpatient services are proud to begin offering Bamlanivimab. Bamlanivimab is a neutralizing antibody infusion available for Outpatients that are positive for COVID-19. The drug may help to limit the amount of virus in the body. This may help their symptoms to improve sooner – and may be less likely to need to be admitted to the hospital.
- MRMC continues to collaborate with Oklahoma State Dept of Health in providing COVID-19 vaccination clinics.

Preserve Rural Jobs

- Open Positions include Full Time RT, MLT, RN, LPN and CNA
- Recruiting efforts included direct mailing of postcards to qualified recipients.
- Hired 3 LPN's for core staff.

Written report remains in minutes.

c. Infection Control

Date of Meeting: February 10, 2021

- Infection Control
 - a. Rapid Testing – reported to PHIDDO by lab
 - b. Phases of Covid Vaccinations
 - 1. Pfizer
 - 2. Moderna
 - c. New email: vaccinate@mangumregional.org
 - d. Wednesday meetings Mangum Covid Vaccination
 - Employee Education
 - a. HealthStream
 - Employee Health
 - a. Employee Files – Annual TB
 - b. COVID Vaccinations
 - Policy & Procedure
 - a. Changes to EMR now mandated 41- 47
 - Committee Updates:
 - a. Performance Improvement Projects
 - N/A
 - b. Regulatory Compliance/Site Visits
 - TB Risk Assessment
 - TB Risk Assessment Completed for 2020
 - 3 Key Areas for Improvement Identified: RPP, Annual TB RA, TB RA Policy Updates
 - Action Plan Developed for areas of improvement
 - c. Changes in process, procedure, or protocol
 - N/A
 - Recommendations from Committee
 - a. Rapid Covid Testing – need to evaluate new policy for patients and employees
Written report remains in minutes.
- d. Environment of Care and Safety Report
- i. Evaluation and Approval of Annual Plans –
 - i.i. Old Business - -
 - a. Flooring in nurses break area and med prep room - rescheduled - could not close off area due to patient care additional tile will need to be ordered.
 - b. New oxygen/suction headwall needed in ER1 – scheduled visit has been postponed – contacted Apex – not allowing vendors inside at this time – COVID-19
 - c. New covered pegboard needed for supplies in ER1 - pegboards will have to be custom made
 - d. Wall repair around window in room 19 has been postponed due to COVID-19
 - e. Roof over OR2 area damaged and in need of repair –

insurance not covering repairs – item on Board Agenda for discussion.

- f. Code drill schedule – drills can be tracked in QAPI.
- g. Complete Active Shooter Exercise – Schedule was postponed by Sheriff due to family emergency – drill scheduled for January 19, 2021.
- h. 15 AMP Receptacles – All 15 AMP Receptacles will be replaced with 20 AMP Receptacles throughout Hospital – replacement has started.
 - i. Room 9 needs electrical coming through floor addressed
 - j. Exit signs in COVID Wing – signs have been ordered.
- k. Additional Electrical Circuits for COVID Wing – on Board Agenda for discussion.
- l. Ceiling in OR2 needs repaired – repairs made January 11, 2021.

i.i.i. New Business

- a. Gurney in ER2 leaking oil.
- b. Ceiling in OR2 needs repaired.
Written report remains in minutes.

e. Laboratory

- i. Tissue Report – Approved – January 2021
- i.i. Transfusion Report – Approved – January 2021

f. Radiology

- i. There was a total of – 180 X-Rays/CT/US
 - i.i. Nothing up for approval
 - i.i.i. No Updates
Written report remains in minutes.

g. Pharmacy

- i. Verbal Report by Pharmacist.
 - i.i. Formulary approved.
 - i.i.i. P & T Meeting held January 28, 2021.

h. Physical Therapy

- i. No report.

i. Emergency Department

- i. No report

j. Quality Assessment Performance Improvement

- Quality
 - Quality Minutes from previous month included as attachment

- Previous policies approved by Quality/Med Staff/No approval from Governing Board.
 1. Respiratory policies and procedures.
 2. Drug Room policies and procedures.
 3. Clinical Policies and Procedures
 4. Emergency Department Policies and Procedures
 5. Wound Care Procedure Form
 6. Rehab Policies and Procedures
 7. General Hospital Policies and Procedures
 8. EMD-016 Blood Alcohol Collection for Law Enforcement
 9. EMD-016 Blood Alcohol Concentration Form
 10. EMD-016B Testing for Blood Alcohol Concentration Log
- Policies and forms approved by Quality Committee on February 10th, 2021.
 1. Form – Blood Transfusion Outcome Review
 2. Form – Patient Discharge Safety Plan
- HIM – Keeps showing improvement on completing documentation. Physician access to EMR outside of the facility is set up and going. Also, the Kiosk is being set up and were put into place the end of January. This will help with the completion of consents. They will be able to sign in and complete any paperwork.
- Compliance
 - One Grievance for January. Thorough investigation was done with no findings. Matter was resolved and letter was sent.
 - Contracts that were approved in Quality for January:
 1. Wolter Kluwer Health
 2. Lippincott Procedures
 - Contracts up for review from November: not approved by GB as of 1/15/21
 1. OGA auto insurance (Business auto liability insurance renewal Policy)
 2. Life Share Contract and Log
 3. Space Labs for Telemetry
 4. Press Ganey Contract
- Risk Management
 - 3 Medication Variance
 - 2 – 2 AMS’s ER. One didn’t like COVID-19 restrictions and she felt better. She was informed of benefits of staying and risks of leaving. Patient signed AMA. AMA #2 was CP

patient and was being treated and was put on NPO. Patient wanted to eat and kept becoming more verbally irritated. Provider verbalized the benefits of staying and the risks of leaving. Patient still left without signing AMA paperwork.

- 3 incidents in nursing.
 - Working with Infection Control Nurse, CEO and CNO to stay informed with updates and information about COVID-19 Immunizations have been given to clinical and direct patient contact employees. We have had more immunizations in January.
 - During the outbreak we have in place:
 1. No visitor for the patient (unless near end of life)
 2. Screening for all entering the Hospital and Annex
 3. Drive through swab for COVID-19
 4. Possible positive COVID-19 patients are seen in the OR2 room with direct ventilation
 5. Positive COVID-19 patients are to stay in COVID wing. We have 5 rooms on the wing. Rooms 12 and 13 have direct ventilation. The other 3 rooms are available for use as well.
- Workman's Comp
 - There are currently no Workman's Comp cases currently open
Written report remains in minutes.

k. Utilization Review

- i. Total Patient days for January: 183
 - i.i. Total Medicare days for January: 156
 - i.i.i. Total Medicaid days for January: 19
 - i.v. Total Swing bed days for January: 133
 - v. Total Medicare SB days for January: 133
- Written reports remain in minutes.

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

6. New Business

- a. Approval of Wolters Kluwer Health, Inc – MRMC Quote
 - i.Motion:** made by Dr. Chiaffitelli to approve Wolters Kluwer Health, Inc. - MRMC Quote.
- b. Approval of Wolters Kluwer Health Agreement – MRMC Agreement
 - i.Motion:** made by Dr. Chiaffitelli to approve Wolters Kluwer Health Agreement.
- c. Approval of Blood Transfusion Outcome Review.
 - i.Motion:** made by Dr. Chiaffitelli to approve Blood Transfusion Outcome Review.
- d. Approval of Patient Discharge Safety Plan
 - i.Motion:** made by Dr. Chiaffitelli to approve Patient Discharge Safety Plan

- e. Approval of Nutrition Memo – Review/Discussion
 - i.Motion:** made by Dr. Chiaffitelli to approve Nutrition Memo – Review/Discussion.
- f. Approval of OFMQ – Consulting Services Agreement
 - i.Motion:** made by Dr. Chiaffitelli to approve OFMQ – Consulting Services Agreement.
- g. Approval of OFMQ – Work Order
 - i.Motion:** made by Dr. Chiaffitelli to approve OFMQ – Work Order.

7. Adjourn

- a. Dr. Chiaffitelli made a motion to adjourn the meeting at 12:30 pm.

Medical Director/Chief of Staff

Date