Mangum Regional Medical Center Medical Staff Meeting Thursday February 23, 2023

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director

Absent: William Morgan, MD

Guest:

ALLIED HEALTH PROVIDER PRESENT:

Mary Barnes, APRN-CNP David Arles, APRN-CNP

NON-MEMBERS PRESENT:

Dale Clayton, CEO
Daniel Coffman, CCO
Chelsea Church, PhD
Denise Jackson, RN, Quality Director
Chasity Howell, RN, Utilization Review Director
Lynda James, LPN, Drug Room Tech
Kaye Hamilton, Medical Staff Coordinator

- 1. Call to order
 - a. The meeting was called to order at 12:36 pm by Dr. John Chiaffitelli, Medical Director.
- 2. Acceptance of minutes
 - a. The minutes of the January 19, 2023, 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
 - Hospital Staff and Operations Overview
 - o Patient care continues to be excellent.

- Our average daily census for the month was 14, up from 9 last month. Current patient census is 14.
- o Emergency Department assisted 159 patients.
- Employees continued to receive free meals compliments of Cohesive and our great Dietary Department.
- We continue to put an emphasis on social media presence. Cohesive has added a staffer to assist with this exclusively.
- Mangum Family Clinic's new provider, Amy Sims,
 APRN will be on site part time starting in early March,
 full time in June.
- o YTD statistics include 159 ER visits; 2,542 Labs completed and 156 Radiology tests completed.
- Contracts, Agreements and Appointments to be presented to the Governing Board:
 - o ICU Medical service agreement
 - o Covidien Group Purchasing agreement
 - o Forvis-BKD 2022 cost report agreement
 - Oklahoma Hospital Association membership agreement
 - o Werfen Hemochron Signature Elite Analyzer agreement
 - Amy Sims, APRN supervisory agreement
 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: Certified Nurse Aids re-educated regarding Transmission-Based Precautions and Lab specimen collection. Nurse and Providers educated regarding New Telemetry Policy and Procedure NUR-027.
- MRMC Pharmacy Team reports 100% compliance of controlled drug discrepancies which are to be resolved within 24 hours.
- MRMC Radiology Team reports Zero reactions to CT contrast during the month of December.

Excellent Client Service

- Patients continue to rely on MRMC as their local hospital. Total patient days increased from 281 days in December 427 days in January. This represents a stable average daily census of 14. In addition, MRMC Emergency Department provided care to 159 patients in January.
- January COVID-19 Stats at MRMC: Swabs (42-PCR & 91-Antigen) with 7 Positive.

 MRMC obliterated our 5% or less goal regarding 30-day CAH Readmissions with only 0.04% readmissions during the month of January.

Preserve Rural Jobs...

- Recruiting efforts included interviewing regional professionals.
- Local interest in positions as MRMC is at the highest level in some time!

Written report remains in minutes.

- c. Infection Control
 - Old Business
 - a N/A
 - New Business:
 - a. N/A
 - Data:
 - a, N/A
 - Policy & Procedures:
 - a. N/A
 - Education/In Services
 - a. New Covid Meds & Training nursing, pharmacy, and Providers
 - b. AMA/LWBS Policy Nursing
 - c. Two Week mask mandate All Staff
 - d. Covid-19 Visitation Guideline changes Patient care staff
 - e. ICP Reminders for Covid Wing
 - f. New Covid Meds & Tx Nursing, pharmacy, providers
 - g. Emergency preparedness per Appendix 11 Evacuation Plan And MOU Contact Information
 - Updates: No updates at this time.
 - Annual Items:
 - a. 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 January 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-Tile has been ordered.
- e. Damaged ceiling tile in patient area due to electrical upgradereplacement started.
- f. Replace ceiling tile that do not fit properly will need more tile to complete.
- g. North wall in Nurses breakroom in need of repair
- h. Ceiling tile above HVAC Unit in Radiology stained from roof leak.
- i. Room 29 in need of wall repair-remodel started 12-13-2022.
- j. Uncovered many problems/issues in wiring that wasn't up to code. Approximate completion in 60 days.

i.i.i. New Business

- a. Appoint Safety Officer for 2023-Mark Chapman was appointed Safety Officer for 2023—Motion by Daniel Coffin, Second by Kaye Hamilton.
- b. Chrome pipe needs cleaned and escutcheons replaced on hopper in ER.

Written report remains in minutes.

e. Laboratory

- i. Tissue Report Approved January, 2023
- i.i. Transfusion Report Approved January, 2023

f. Radiology

- i. There was a total of -211 X-Rays/CT/US
- i.i. Nothing up for approval
- i.i.i. Updates:
 - No new updates.

Written report remains in minutes.

g. Pharmacy

- i. Verbal Report by Pharmacist.
- i.i. COVID-19 Medications-Have 1 dose of Bebtelovimab, 30 doses of Remdesivir and 18 Paxlovid doses in-house.
- i.i.i. P & T Committee Meeting March, 2023
- i.v. Drug Shortage/Outages are as follows: Clinimix,
 Optiray (all Contrast), furosemide injection.
 Children's suspension antibiotics, Tylenol and Ibuprofen
 DRS and PIC to monitor on a routine

basis.

Written report remains in the minutes.

- h. Physical Therapy
 - i. No report.
- i. Emergency Department
 - i. No report
- j. Quality Assessment Performance Improvement

Risk

- Risk Management
 - \circ Grievance -0
 - o 1 Fall with no injury
 - o 0 Fall with minor injury
 - \circ 0 Fall with major injury
 - o Death In Patient 1 (0%) Emergency Department (0%)
 - \circ AMA/LWBS -7/0
- Quality
 - Quality Minutes from previous month included as attachment.
 - Policy Revisions: Respiratory Policy Manual; Annual Infection Control Risk Assessment
- HIM H&P Completion 27/27 = 100% Discharge Summary 27/27 = 100%
- Med event -2
- Afterhours access was 76
- Compliance

Written report remains in minutes.

- k. Utilization Review
 - i. Total Patient days for January: 427
 - i.i. Total Medicare days for January: 394
 - i.i.i. Total Medicaid days for January: 7
 - i.v. Total Swing Bed days for January: 371
 - v. Total Medicare SB days for: 371

Written report remains in the minutes.

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

6. New Business

a. Review & Consideration of Approval of Policies & Procedures – MRMC – Respiratory Policy
 & Procedure Manual – Table of Contents for the MRMC Respiratory Policies & Procedures
 Is attached.

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

Policy & Procedure Manual is attached.

b. Review & Consideration of Approval of Risk Assessment – MRMC – Annual Infection Control Risk Assessment

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Annual Infection Control Risk Assessment.

c. Review & Consideration of Approval of Appointment – MRMC – Infection Preventionist Appointment – Claudia Collard.

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Infection Preventionist Appointment – Claudia Collard.

d. Review & Consideration of Approval of Appointment – MRMC – Risk Manager Appointment – Denise Jackson

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Risk Manager Appointment – Denise Jackson.

e. Review & Consideration of Approval of Appointment – MRMC – Compliance Officer Appointment – Denise Jackson.

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Compliance Officer – Denise Jackson.

7. Adjourn a. Dr Chiaffitelli made a motion to adjourn the meeting at 12:50 pm.	
Medical Director/Chief of Staff	 Date