

**Mangum Regional Medical Center
Quality and Patient Safety Committee
Meeting
Jan 2026 Meeting Minutes**

Meeting Location: OR	Reporting Period: Dec 2025	
Chairperson: Dr Gilmore	Meeting Date: 01/15/2026	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1404	Actual Finish Time: 1500
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: tentatively 02/12/2026 @ 14:00	

Mission: To provide our Mangum community and surrounding counties with convenient, gold-standard “dependable and repeatable” patient care, while assisting and supporting all their medical healthcare needs.

** Items in blue italics denote an item requiring a vote*

I. CALL TO ORDER

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Call to Order	QM	1 min	Called to order at 1404	Approval: First – Nick, Second– Stephanie

II. COMMITTEE MEETING REPORTS & APPROVAL OF MINUTES

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Quality and Patient Safety Committee <i>1. Approval of Meeting Minutes</i>	Denise Shaw	2 min	Meeting minutes – Dec 2025	Approval: First – Tonya , Second – Stephanie
B. Environment of Care (EOC) Committee <i>1. Approval of Meeting Minutes</i>	Mark Chapman	2 min	Meeting minutes – Dec 2025	Approval: First – Kelley , Second – Stephanie
C. Infection Control Committee <i>1. Approval of Meeting Minutes</i>	Meghan Smith	2 min	Meeting minutes – Dec 2025	Approval: First – Chasity , Second – Tonya
D. Pharmacy & Therapeutics (P&T) Committee <i>1. Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	Meeting minutes – None Next P&T – Jan 2026?	
E. Health Information Management (HIM)/Credentialing Committee <i>1. Approval of Meeting Minutes</i>	Jessica Pineda/ Kaye Hamilton	2 min	Meeting Min – Nov 2025/Dec 2025	1.) Approval: First – Tonya, Second – Meghan

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

				2.) Approval: First – Stephanie, Second – Meghan
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Meeting Minutes – Dec 2025	Approval: First – Tonya, Second – Stephanie
III. DEPARTMENT REPORTS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	Blood utilization – 8 units/3 episodes Code Blue – 2 restraint - 1	Acute chart Chief complaint accuracy being added to the 2026 workbook for monitoring Hoover mat obtained for transfer/repositioning of obese patients Nurse meeting scheduled for 01/21/2026
B. Radiology	Pam Esparza	2 min	3 repeats; 1 marker, 1 clipped anatomy, 1 metal item on clothing	PM completed on injector with no issues
C. Laboratory	Tonya Bowan	8 min	79 – repeated labs, all critical repeats 1 repeat on aerobic/anaerobic culture from CHH due to rejection of expired swab	12/02/25 - changed back to ID Now 12/05/25 - Siemens replaced solenoid on EXL200
D. Respiratory Care	Heather Larson	2 min	0 vent day 14 neb changes	Director out – continued issues with EKG times
E. Therapy		2 min	Total # of Sessions Performed 192 -PT 126-OT 29 -ST	Director out – Corp covering until new director

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

			Improved Standard Assessment Scores: 2- PT 2- OT 1- ST	
F. Materials Management		2 min		Director out – new hire in process
G. Business Office	Desarae Clinesmith	2 min	DL – 66%; pt did not provide ID, staff attempted Cost Share – 91%; afterhours, BO followed up the next day with attempts to collect	
H. Human Resources	Stephanie Hughes	2 min	1 new hire 2 open positions for the reporting period	
I. Environmental Services	Mark Chapman	2 min	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked 1 boiler checks 1 generator/transfer switch inspection 15 – filter checks 6 egress inspections	Roof work on New Hope Building began today
K. Dietary	Treva Derr	2 min	Daily meal count – 100%	Stove in kitchen still having issues, no further updates on parts at this time
L. Information Technology		2 min	Director out – will defer	Local Director out – Corp filling in until new hire begins
M. Strong Minds	Brittany Nelms/Brittany Niles	2 min	1 active patient, missed appointments with staff attempts to reschedule	Working on outreach at nursing home and there have been some discussions about including other insurances as a benefit to increase patient numbers

IV. OLD BUSINESS

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

V. NEW BUSINESS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. New Business	QM	2 min	See policy/procedures below 2025 Workbook Review	Discussed areas that did not meet goal for the 2025 year and anticipated areas that will be reflected in the 2026 workbook as well as added area for monitoring of correct dx on acute charts at time of dc
VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	5 min	AMA – Pt to the ED for c/o. Seen and evaluated by provider with dx and provider recommendations for admission to inpatient for continued treatment. Patient is agreeable to treatment in the ED but declines inpatient admission for further treatment. Pt continues to decline inpatient admission. AMA signed and patient d/c from the ER home.	
B. Case Management	CM	8 min	CAH readmits – 4	
C. Risk Management	QM	10 min	Deaths - 3 1.) In-patient – Patient direct admit for SWB services. During hospitalization course patient received iv therapy/ABT, iv nutrition, etc. Patient continued to have decline and complications. Family met with provider and discussed patient current state and end of life care. Family was agreeable to comfort care, patient currently DNR.	Complaints - 1.) Nurse educated on therapeutic communication 2.) Tech apologized, patient proceeded with US as ordered with no other concerns or complaints other than being "triggered" by tech's name. Unable to offer another staff to preform US due to only one certified staff in US.

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

		<p>Patient expired while inpatient as an expected death.</p> <p>2.) ER – Patient brought in the ER via EMS. EMS reports CPR efforts began when they arrived on scene. CPR efforts were not successful despite all exhausted efforts, pt expired in the ED.</p> <p>3.) ER – Patient brought to the ER via EMS. Patient asystole on arrival to ED, CRP attempts made while in the ED. CPR attempts were not successful, patient expired in the ED.</p> <p>Complaints – 2</p> <p>1.) Pt reports unprofessionalism by ER nurse during ER visit on 12/05/2025. CEO spoke with patient and is agreeable to education to nurse on therapeutic communication with ER patients. Denies any further concerns to CEO and satisfied with results</p> <p>2.) Inpatient with orders for US ordered by provider, upon tech arriving to get patient for US. US tech introduced herself " Hi my name is XX and I will be performing your ultrasound today", patient immediately became upset and told tech that they were "triggered". Tech</p>	<p>Falls -</p> <p>Falls with no injury -</p> <p>1.) Immediate actions taken – assisted up and back to the bed , assessment preformed, post fall assessment completed by nursing staff Post fall precautions added – bed rails x 3, increased rounding QM reviewed incident/post fall assessment</p> <p>2.) Immediate actions taken – assisted up and back to the bed, assessment preformed, post fall assessment completed by nursing staff, Nursing staff ensured functionality of bed alarm Post fall precautions added – bed rails x 3, increased rounding, fall precaution education QM reviewed incident/post fall assessment</p> <p>Fall with minor injury -</p> <p>1.) Immediate actions taken – assisted up and back to the bed, assessment preformed, post fall assessment completed by nursing staff, provider notified for xray orders of wrist/hip (xray results with no fx noted, soft tissue swelling on wrist xray) Post fall precautions added – recliner with pull out bar for feet, bed alarm, increased rounding</p>
--	--	---	--

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

		<p>apologized, patient states that they had a child who has passed with the same name.</p> <p>Grievances – 0</p> <p>Workplace Violence Events - 0</p> <p>Falls - 3</p> <p>Falls w/o injury -</p> <p>1.) Patient found on floor, reports that they were attempting to get out of bed to shut the door. No injuries noted. Fall precautions in place prior to fall – low bed, bed alarm, non-skid socks, routine rounding, room free of obstructions, call light in reach, pt/family education on fall precautions Risk factors - >60 years, impaired cognition, sensory impairment, physical impairment (unsteady gait), hx of falls</p> <p>2.) Pt found on the floor by the edge of the bed, pt reports scooting to the edge of the bed; "I didn't fall" No injuries noted. Fall precautions in place prior to fall – low bed, bed alarm, non-skid socks, routine rounding, room free of obstructions, call light in reach, close to nurse station</p>	<p>QM reviewed incident/post fall assessment</p> <p>Other -</p> <p>Skin tear –</p> <p>1.) Skin tears cleaned with steri strips applied, pics sent to wound care. HS/CCO/QM notified</p> <p>2.) Edges were approximated, steri-strips/telfa/kerlex applied. Provider/family/HS/CCO/QM notified.</p> <p>Delay in Care –</p> <p>1.) Med Director notified on 12/01/2025 @ 0956 with new orders received for Rocephin 1gm IV x 14 days. CCO and Lab director notified of delay in care. CNO reports that lab will now call the culture results to the HS.</p>
--	--	--	--

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

			<p>Risk factors - >60 years, impaired cognition, physical impairment (unsteady gait)</p> <p>Fall with minor injury - 1.) Staff reports chair alarm going off, upon entering room patient was found on the floor on left side. Noted to have bruise and abrasion to left side of nose from glasses with c/o left wrist pain. Fall precautions in place prior to fall – chair alarm, non-skid socks, routine rounding, room free of obstructions, call light in reach, close to nurse station Risk factors - >60 years, sensory impairment, impaired cognition, physical impairment, hx of falls</p> <p>Other – 3 Skin tears - 1.) During AM round LPN noted patient to have skin tears to 1.) (L) ring finger knuckle 2.) (L) middle finger knuckle. Patient was not able to recall events that lead to skin tears</p> <p>2.) Nurse was placing IV on patient while second nurse was assisting in holding patient arm still. Patient jerked arm and skin on left forearm tore.</p> <p>Delay in Care – 1</p>	
--	--	--	---	--

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

			1.) Patient had UA collected on 11/26/2025 due to provider order status post CT results. Urine resulted on 11/29/2025. Provider was not notified of results on 11/29/2025, resulting in no new orders obtained. Results were sent to IC nurse and no CH or floor nurse.	
D. Nursing	CCO	2 min	Med reconciliation – 100% Preferred Pharmacy – 100% Hospital Formulary – 100%	
E. Emergency Department	CCO/QM	5 min	1.) ER log compliance – 99% 2.) EDTC Data – 100% 3.) LWBS – 0	
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – Jan 2026 After hours access - 48 ADR - 0 Med errors – 2 1) The patient was scheduled to receive ABT IV BID, with this specific instance the am dose. The nurse did not pull the medication and stated that she overlooked it on the EMAR. (KP LPN, staffing) 2) The patient was scheduled to receive supplement. The nurse reported that she believe she mixed it in with the other medications, but it was found in the original packaging in the room. (KP LPN, staffing)	Med errors - 1) The nurses were educated on visually verifying that they have the correct medication. The nurse was also advised to take their time during med pass. 2) The nurse did not add the med to the medication slurry as she thought. The medication and patient were scanned appropriately, the nurse was educated on the need to take their time to ensure all medications are administered. Lorazepam injectable has been on back order but is now available.

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

			Dose omissions – 9; inhalers not carried in house and had to be ordered from wholesaler	
G. Respiratory Care	RT	2 min	0 unplanned decannulation 100% resp assessments 100% on Chart checks	
H. Wound Care	WC	2 min	1 wound development for the month - 1 - deep tissue injury in the month of December. The patient was admitted to SWB. Wound care was notified 8 days post admit via Tiger connect of a wound. Patient was declining and discharged to a higher level of care. Nursing staff documented the patient was on an air mattress. Patient discharged to higher level of care 4 days before wound care could evaluate the patient.	
I. Radiology	RAD	2 min	Pt site verification - 100% - critical report for the period, reported within the 1 hour time period	
J. Laboratory	LAB	5 min	1 – Blood culture contaminates	2 sets drawn with 1 contamination, education with staff member. Annual data review with Director, verified staff involved with contaminations
K. Infection Control/Employee Health	IC/EH	5 min	1 – Inpt HAIs 0 – MRDO 0 – VAE 1 – Cdiff 0 – CAUTI 0 - CLASBI	Patient presented to the ED with c/o initial complaint. Patient had been admitted to SNF for IV antibiotics. Patient admitted to with dx to include CAUTI. Treatment plan to include IV hydration and IV antibiotics. During the hospitalization course the patient was incontinent of dark loose stools. Hemocult stools ordered and C. diff

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

				<p>test. Positive C diff results were received. Contributing factors: Prolonged antibiotic therapy, over age 65, recent hospital/skilled nursing stay, weakened immune system.</p> <p>Outcome: Patient discharged with a prescription to complete PO ABT.</p> <p>Conclusion: Suspect antibiotic associated C. diff</p>
L. Health Information Management (HIM)	HIM	2 min	<p>100% - D/C Note Compliance</p> <p>100% - Progress Notes</p> <p>96% - ED DC Instructions</p> <p>100% - ED provider Dx</p>	
M. Dietary	Dietary	2 min	100% - daily meal count	
N. Therapy	Therapy	2 min	Gait belt usage – 100%	
O. Human Resources (HR)	HR	2 min	<p>90 day evals – 100%</p> <p>Annual evals – 100%</p>	
P. Business Office	BOM	2 min	<p>Cost Share Collections –</p> <p>Med Necessity Verification –</p> <p>Drivers Licenses –</p>	
Q. Environmental Services	EVS	2 min	10/10 on room cleans	
R. Materials Management	MM	2 min	Electronic Requisitions – 100%	
S. Life Safety	PO	2 min	<p>Fire extinguisher Inspections -100%</p> <p>Egress checks – 100%</p>	

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

T. Emergency Preparedness	EP	2 min	None for the reporting period	
U. Information Technology	IT	2 min	Director out – will defer	
V. Outpatient Services	Therapy	2 min	Temp logs – 100%	
W. Strong Minds	SM	2 min	Continuing outreach to boost patient numbers	
VII. POLICIES & PROCEDURES				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	<ol style="list-style-type: none"> 1) Blood Product Administration Policy 2) 2026 MRMC Safety Officer – Mark Chapman 3) 2026 Infection Preventionist – Meghan Smith 4) IV Line Management Policy* 	<ol style="list-style-type: none"> 1. Approval: First – Tonya , Second–Stephanie 2. Approval: First –Kelley , Second–Chasity 3. Approval: First – Chasity, Second–Pam 4. Approval: First –Meghan , Second–Nick

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

--	--	--	--	--

VIII. PERFORMANCE IMPROVEMENT PROJECTS

IX. OTHER

X. ADJOURNMENT

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Adjournment	QM	1 min	There being no further business, meeting adjourned at 300 by Chasity seconded by D. Clinesmith	

MEMBERS & INVITED GUESTS

Voting MEMBERS				
Nick Walker		Lynda James	Chrissy Smith	
Chasity Howell	D. Clinesmith	Meghan Smith	Pam Esparza	Mark Chapman
Tonya Bowen	Stephanie Hughes	Brittany Niles	Dr. G (teams)	Kelley Martinez
Jessica Pineda				
Non-Voting MEMBERS				
Denise Shaw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

Sign-In Sheet
Date of Meeting: 01/15/2026

Title	Print Name	Signature
Chairman		
Administrator		
CCO		
Quality Manager		
Respiratory Care		
Drug Room Supervisor		
Physical Therapy		
Dietary		
Case Management		
HIM		
Business Office		
Infection Control		
Radiology		
Plant Operations		
Materials Management		
Environmental Services		
Laboratory		
Human Resources		
Strong Minds		
Other		