Mangum Regional Medical Center
Medical Staff Meeting
Thursday
May 21, 2026

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director
Laura Gilmore, MD
Absent:
Guest:

ALLIED HEALTH PROVIDER PRESENT

None

NON-MEMBERS PRESENT:
Kelley Martinez, RN, CEO
Chelsea Church, PharmD
Nick Walker, RN, CCO
Megan Smith, RN – Quality
Lynda James, LPN – Drug Tech
Kaye Hamilton, Medical Staff Coordinator

1. Call to order
    a. The meeting was called to order at 12:00 pm by Dr. John Chiaffitelli, Medical Director.

2. Acceptance of minutes
    a. The minutes of the April 23, 2026, 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

    - Operations Overview -

        - We are continually looking for new service lines to provide our community at the hospital and the clinic.
        - The lab is under construction by JAM currently.
        - The state has received all reports needed for the functional plan awaiting responses.

- We continue to get all staff more involved during patient rounds with providers.
- We continue small improvements at the facility. We have cleaned the main entrance at the hospital and are working towards repainting the interior of the facility.
- We continue to make patient rounds on all patients in the hospital and continue to get great responses.
- We have had two good months we look forward to continued progress.
- We have hired a new case manager for the facility.

Written report remains in the minutes.

5. Committee / Departmental Reports
   a. Medical Records –

      1. February – ER – 1 ER Notes needed out of 144– Completed
         OBS – 0 out of 2
         Acute – 1 H&P – Completed
         ER - 1 ER Note Needs to be H&P – Corrected
         DC – 1 DC Summary – Completed
         SWB - 1 out of 26 H&P - Completed
      2. Old Business: 0

      Written report remains in the minutes.

   b. Nursing

      Patient Care

      - MRMC Education included:
        1. Nursing documentation updates are communicated to nursing staff weekly.
        2. Nurse meeting scheduled for May 6th.

      - MRMC Emergency Department reports 0 patient Left Without Being Seen (LWBS).
      - MRMC Laboratory reports 0 contaminated blood culture set(s).
      - MRMC Infection Prevention reports 2 CAUTI.
      - MRMC Infection Prevention report 0 CLABSI.
      - MRMC Infection Prevention reports 2 HAI, for the month of April, 2026.

      Client Service

      - Total Patient Days for April 2026 were 422. This represents an average daily census of 14.
      - April 2026 COVID-19 statistics at MRMC: Swabs (0 PCR & 24 Antigen) with 0 positive.

      Preserve Rural Jobs and Culture Development

- One-PM House Supervisor RN, and 2 CNA positions are open currently.
- Patients continue to voice their praise and appreciation for the care received at MRMC. We continue to strive for excellence and improving patient/community relations.

Written report remains in minutes.

c. Infection Control –

- Old Business
  a HIBIHUBS bath product in-service completed for March 23 and and 25, 2026 from 5 am to 7 am. Product has been added to supply room and is being utilized. CCO decided to keep ready bath wipes to help with incontinence care. These wipes are thicker than regular body wipes.
- New Business
  a. N/A
- Data:
  a, N/A
- Policy & Procedures Review:
  a. N/A
- Education/In Services
  a. Monthly Nursing Meeting March 4, 2026
  b. Pediatric Sepsis screen updated in Cohesive Pediatric Ed Assessment.
  c. Do not delete the Sepsis screen out of EHR. All patients seen in ER need to have a Sepsis screen due to Conditions of Participation for CMS.
  d. Update on HIBIHUBS in-service scheduled for March 23 and 25 from 5 am to 7 am.
  e. IP Only Training:
  f. 5/05/26 Vaccine Reporting OSIIS w/Courtney Woodard w/ OSDH
  g. 5/26/26 EPIC Monthly Meeting: "Hidden Risk: The Health, Regulatory, and Financial Implications of Bats in a Hospital," presented by Mike Koski w/Get Bats Out and "Rabies Identification and Treatment," presented by Mike Mannell and Ashlyn Wayman w/OSDH.
- Updates: None at this time.
- N95 Fit Texts – 0 completed
  Annual Items:
  a. Construction Risk Assessment - ICRA will be presented to ICC once completed by former IP.
  b. Linen Services – Annual site visit will be scheduled for September, 2026.

Written report remains in minutes.

d. Environment of Care and Safety Report
    i. Evaluation and Approval of Annual Plan
    i.i. Old Business - -
        a. Chrome pipe needs cleaned and escutcheons replaced on hopper in ER – could not replace escutcheons due to corroded piping in wall – capped off leaking pipe under the floor to stop leak – hopper will be covered – remodel postponed.—Talked to contractor 10-4-2025 about cover for hopper – contractor measured and is making quote for cover. – Contractor backed out on making cover - - Will check on repairing hopper.
        b. ER Provider office flooring needing replaced. Tile is onsite.- remodel is postponed.
        c. Stained ceiling tile throughout facility from leaking roof – Replacement Started 9-15-2025. Need more tile. Started replacement on 3-9-2026.
        d. Damaged ceiling in OR2 due to leaking roof.
        e. New Hope Roof – Leak in Physical Therapy office after hail storm – City approved vendor to repair.-Roof replaced 1-15-2026 – Will get contractor to quote ceiling repair. Contractor will be here 3-10-2026.
        f. Need light installed for parking lot at New Hope - - Contractor scheduled for week of 16th.
        g. Front wall of lab building damaged from vehicle – Waiting on start date from contractor for repairs.
    i.i.i. New Business
        a. Chiller not cooling properly. 3-12-2026 Contractor repaired 3-20 2026.

    Written report remains in the minutes.

e. Laboratory
    i. Tissue Report – Approved
    i.i. Transfusion Report – Approved

    Written report remains in minutes.

f. Radiology
    i. There was a total of – 223 X-Rays/CT/US
    i.i. Matters for approval
        - Nothing up for approval
    i.i.i. Updates:
        - No Updates

    Written report remains in minutes.

g. Pharmacy
    i. Verbal Report by Clinical Pharmacist
    i.i. P & T Committee Meeting –

    The P&T Committee Meeting will be held in June, 2026.

i.i.i. Azithromycin injectable still on backorder but we were able to get an allocation. IV contrast is on backorder.
Demerol IV is unavailable. Morphine is on back order.

i.v. List of meds recommended for standing order are tums, voltaren gel, nystatin powder, nystatin swish and swallow, and melatonin.

i.v. Reviewing Policies & Procedures to be presented at a later date.

Written report remains in the minutes.

h. Physical Therapy

i. No report.

i. Emergency Department

i. No report

j. Quality Assessment Performance Improvement

- Risk Management
  - Grievance – 0
  - Fall with no injury – 1
  - Fall with minor injury – 2
  - Fall with major injury –
  - Death – 3
  - AMA/LWBS – 0-In Pt – 1- ER - LWBS - 0-OBS – SWB
- Quality – Minutes are in the minutes of Medical Staff Meeting.
- HIM – ED discharge instructions - Compliance
  100% - D/C Note Compliance
  100% - Progress Notes
  100% - ED DC Instructions
  100% - ED Provider Dx
- Med event – 2
- After hours access was –

Written report remains in the minutes.

k. Utilization Review

i. Total Patient days for

i.i. Total Medicare days for

i.i.i. Total Medicaid days for

iv. Total Swing Bed days for

v. Total Medicare Swing Bed days for

No report for this month.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for April, 2026.

6. New Business

a. Review & Consideration of Approval of the Policy & Procedure: MRMC: – FIN-001: Hospital Credit Card Policy
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the Policy & Procedure: MRMC-FIN-001: Hospital Credit Card Policy.

b.Review & Consideration of Approval of the Policy & Procedure: MRMC – FIN-002: Account Reconciliations
   i.Motion: made by John Chiaffitelli, DO Medical Director to approve the Policy & Procedure: MRMC – FIN-002: Account Reconciliations.

c.Review & Consideration of Approval of the Policy & Procedure: MRMC – FMFN-001: Acknowledgement of Credit Card Holder Responsibility
   i.Motion: made by John Chiaffitelli, DO Medical Diirector to approve the Policy & Proceure: MRMC – FMFN-001: Acknowledgement of Credit Card Holder Responsibility.

d.Review & Consideration of Approval of the Policy & Procedure: MRMC – FMFN-002: Purchase Authorization Form
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the Policy & Procedure MRMC – FMFN-002: Purchase Authorization Form.

e.Review & Consideration of Approval of Policy & Procedure: MRMC – FMFN-003: Account Risk Table
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the Policy & Procedure: MRMC – FMFN-003: Account Risk Table.

f. Review & Consideration of Approval of the Policy & Procedure: MRMC - FMFN-004: Balance Sheet Reconciliation.
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy and Procedure: MRMC – FMFN – 004: Balance Sheet Reconciliation.

g.Review & Consideration of Approval of the Policy & Procedure: MRMC – Finance Corporate Policy Review Feedback
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Finance Corporate Policy Review Feedback.

h. Review & Consideration of Approval of the Policy & Procedure: MRMC EHP-001 - Employee Health Program
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC- EHP – 001- Employee Health Program.

i.Review & Consideration of Approval of the Policy & Procedure: MRMC EHP-003 – Employee Occupational Illness and Injury
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC EHP-003 – Employee Occupational Illness and Injury.

j. Review & Consideration of Approval of the Policy & Procedure: MRMC Employee Health Standing Orders
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Employee Health Standing Orders.

k. Review & Consideration of Approval of the Policy & Procedure: MRMC Staff Acknowledgement of Work Restrictions
   i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Staff Acknowledgement of Work Restrictions.

l. Review & Consideration of Approval of the Policy & Procedure: MRMC FMEH-032 – Staff Refusal for Drug Alcohol Testing

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC FMEH-032 – Staff Refusal for Drug Alcohol Testing.

m. Review & Consideration of Approval of the Policy & Procedure: MRMC Corporate Policy Review

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Corporate Policy Review.

n. Review & Consideration of Approval of the Policy & Procedure: MRMC HR-012- Drug, Alcohol, and Substance Abuse Policy and Testing Program

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC HR-012 – Drug, Alcohol, and Substance Abuse Policy and Testing Program.

o. Review & Consideration of Approval of the Policy & Procedure: MRMC Urine Drug Screen (UDS) Process

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Urine Drug Screen (UDS) Process.

p. Review & Consideration of Approval of the MRMC 2025 Annual Infection Control Risk Assessment and Annual Infection Control Program Evaluation

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC 2025 Annual Infection Control Risk Assessment and Annual Infection Control Program Evaluation.

7. Adjourn
   a. Dr Chiaffitelli made a motion to adjourn the meeting at 12:17 pm.

_____

Medical Director/Chief of Staff Date