

Mangum Regional Medical Center Quality Committee Meeting Minutes							
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Date: 10/14/2021	Time: 13:10	Recorder: Denise Jackson			Reporting Period Discussed: September 2021		
Members Present							
Chairperson:		CEO: Dale Clayton			Medical Representative:		
Name	Title	Name	Title	Name	Title	Name	Title
	Respiratory	Josey Kenmore (not	Materials Management		Clinic Manager	Tonya Bowen (not	Lab Manager
Sarah Dillahunt	Dietary	Daniel Coffin	CCO	Kaye Hamilton	Credentialing	Karli Bowles	Infection
Matt Moran (not	IT	Pamela Esparza (not	Radiology Manager	Jennifer Dreyer	HIM	Kasi Hilley (not	Business/RCM Director
Chasity Howell (teams)	CM	Kim Houston	HR	Chealsea Church	Pharmacy	Lynda James	Pharmacy
TOPIC	FINDINGS/CONCLUSIONS			ACTIONS/RECOMMENDATIONS			FOLLOW-UP
Call to Order	Daniel Coffin/Karli Bowles			first/second			
Review of Minutes	Review/Approve Aug Min for Sept meeting			Dr. Chiaffitelli / Sarah Dillahunt			
Review of Committee Meetings							
A. EOC/Patient Safety Committee	floor in med roomm/nurse area has been rescheduled, 02 headwalls completed, replacement of amp receptacles has started, cafeteria has been						
B. Infection Control Committee	one HO C. Diff event in hospital in month of September. Patient was admited with diagnosis of UTI and was on multipule IV and oral			Infection preventionist will continue to monitor patient throughout the length of his stay.			
C. Pharmacy & Therapeutics Committee	Monthly total: \$30,225.73 High Cost Medications: \$10,317.02 (Procrit, Santyl, Invega, Cathflo, Spiriva, Advair); Antibiotics: \$2,546.03; Vaccines: \$84.06 (Tubersol); Nutrition/IV Fluids: \$2,663.96; Radiology:						
D. HIM/Credentials Committee	Consents still remain to get missed. Fixing this issue is still in the works. Some of the departments are short-handed so this is taking more time. We are still waiting on bins before we get to work on the old charts at the building. 4 providers will be presented at med staff for credentialing/re-						
E. Utilization Review Committee	Acute 2.8 days/SWB 15 days; U071-COVID-19, C3490-Malignant neoplasm of lung, G210-Malignant neuroleptic syndrome, I2699-Other						
F. Compliance Committee	quarterly meetings in aug/dec, tenatively to be held in Sept			working on scheduling meeting for the 1st/2nd quarter			
Old Business	policy revisions -IDT Meeting Note, Updated COVID-19 Protocol			Updated Dr C that IT is working on the IDT note and will present it once			
New Business	REVIEW AND APPROVAL OF POLICIES & PROCEDURES:			approved by Dr C / Sarah Dillihunt (second)			
Quality Assurance/Performance Improvement							
Volume & Utilization							
A. Hospital Activity	178 er pts, 1 ob, 20 actue, 11 swing, 31 tot admits for the month, 29						
B. Blood Utilization	2 units transfused without incident						
Care Management							
A. CAH/ER Re-Admits	1						

<b>B. Acute Transfers</b>	0		
<b>D. Discharge Follow-Up Phone Calls</b>	12		
<b>E. Patient Discharge Safety Checklist</b>	13		
<b>Risk Management</b>			
<b>A. Incidents</b>	LWBS - pt to the ed for c/o weakness and not feeling well, pt was triaged	LWBS/AMA - continue to education patient's on risks and benefits of	
<b>B. Reported Complaints</b>	0		
<b>C. Reported Grievances</b>	0		
<b>D. Patient Falls Without Injury</b>	3 fwoi - pt found on the floor, reports tripping when they got out of bed, assisted up and to the bed, no injuries noted. Pt found on the floor, when	pt education to call with transfers, staff education to make sure all safety precautions are in place with each round, all to always use the appropriate	
<b>E. Patient Falls With Minor Injury</b>	0		
<b>F. Patient Falls With Major Injury</b>	0		
<b>G. Mortality Rate</b>	1 pt to ed unresponsive with no pulse. Administered ACLS care for 60 min		
<b>H. Deaths Within 24 Hours of Admit</b>	0		
<b>I. OPO Notification/Tissue Donation</b>	2		
<b>Nursing</b>			
<b>A. Critical Tests/Labs</b>	51		
<b>B. Restraints</b>	0		
<b>C. RN Assessments</b>	20		
<b>D. Code Blue</b>	2		
<b>Emergency Department</b>			
<b>A. ER Log &amp; Visits</b>	178 pts		
<b>B. MSE</b>	20		
<b>C. Provider ER Response Time</b>	20		
<b>D. ED RN Assessment (Initial)</b>	20		
<b>E. ED Readmissions</b>	0		
<b>F. EMTALA Transfer Form</b>	8		
<b>G. ED Transfers</b>	8 - higher level of care required for pediatric care, cardiac, general		

<b>H. Stroke Care</b>	0		
<b>I. Suicide Management</b>			
<b>J. Triage</b>	17	education provided to agency regarding expectations of care	
<b>K. Stemi Care</b>	0		
<b>L. ED Nursing Assessment (Discharge/Transfer)</b>	18	education provided to agency regarding expectations of care	
<b>Pharmacy &amp; Medication Safety</b>			
<b>A. Pharmacy Utilization</b>	\$30,226		
<b>B. After Hours Access</b>	106		
<b>C. Adverse Drug Reactions</b>	0		
<b>D. Medication Errors</b>	0		
<b>Respiratory Care Services</b>			
<b>A. Ventilator Days</b>	3		
<b>B. Ventilator Wean Rate</b>	0		
<b>C. Patient Self-Decannulation Rate</b>	0		
<b>D. Respiratory Care Equipment</b>	3 HME, 1 suction set up 10 nebs, 3 trach collars, 1 vent circuit		
<b>Wound Care Services</b>			
<b>A. Development of Pressure Ulcer</b>	0		
<b>B. Wound Healing Improvement</b>	0		
<b>C. Wound Care Documentation</b>	2		
<b>D. Debridement/Wound Care Procedures</b>	2		
<b>E. Wound Vac Application</b>	0		
<b>Radiology</b>			
<b>A. Radiology Films</b>	147, 2 repeated; no xray room at this time d/t new equipment install.	staff contiunes to learn the best techniques for using the portable xray and	

<b>B. Imaging</b>	29		
<b>C. Radiation Dosimeter Report</b>	6		
<b>D. Physicist's Report</b>	physist here 9/16/21, all equipment passed		
<b>Lab</b>			
<b>A. Lab Reports</b>	2760 labs completed, 2 repeated	staff eduation provided	
<b>B. Blood Culture Contaminants</b>	2	staff education provided	
<b>Infection Control &amp; Employee Health</b>			
<b>A. CAUTI's</b>	0		
<b>B. CLABSI'S</b>	0		
<b>C. HA MDROs</b>	0		
<b>D. HA C. diff</b>	one HO C. Diff event in hospital in month of September. Patient was	Infection preventionist will continue to monitor patient throughout the	
<b>E. Hospital Acquired Infections By Source</b>	0		
<b>F. Hand Hygiene/PPE &amp; Isolation Surveillance</b>	100%		
<b>G. Public Health Reporting</b>	1 - reported STI to health dept		
<b>H. Patient Vaccinations</b>	0		
<b>I. Ventilator Associated Events</b>	0		
<b>J. Employee Health Summary</b>	3 tb screenings on new employees, 27 lost days, employee illness; 1 gi, 25 work days for +covid employees, 3 other, 1 uti		
<b>HIM</b>			
<b>A. H&amp;P's</b>	32		
<b>B. Discharge Summaries</b>	30		
<b>C. Progress Notes (Swing bed &amp; Acute)</b>	60 swing/40 actue		
<b>D. Consent to Treat</b>	201 out of 23 completed (missed 3 er/4acute/5 swing)	contiune to work on process to not miss concents	
<b>E. Swing bed Indicators</b>	11		
<b>F. E-prescribing System</b>	829		

<b>G. Legibility of Records</b>	100%		
<b>Dietary</b>			
<b>A. Food Test Tray Eval</b>	100%		
<b>B. Dietary Checklist Audit</b>	100%		
<b>Therapy</b>			
<b>A. Therapy Indicators</b>	100%		
<b>B. Therapy Visits</b>	184		
<b>C. Standardized Assessment Outcomes</b>	11		
<b>Human Resources</b>			
<b>A. Compliance</b>	100%		
<b>Registration Services</b>			
<b>Registration Services</b>	100%		
<b>Environmental Services</b>			
<b>A. Terminal Room Cleans</b>	100%		
<b>Materials Management</b>			
<b>A. Materials Management Indicators</b>	7 back orders, 44 orders for the month, no recalls		
<b>Plant Operations</b>			
<b>A. Fire Safety Management</b>	100%		
<b>Information Technology</b>			
<b>A. IT Indicators</b>	1 unavoidable power outage on 9/16/2021 caused network outage for		
<b>Outpatient Services</b>			
<b>A. Outpatient Orders and Assessments</b>	3		
<b>B. Outpatient Therapy Services</b>	3		
<b>C. Outpatient Wound Services</b>	4		
<b>Contract Services</b>			
<b>Contract Services</b>			
<b>Regulatory &amp; Compliance</b>			

<b>A. OSDH &amp; CMS Updates</b>	Quarterly meetings in Aug/Dec	working on scheduling meeting for the 1st/2nd quarter	
<b>Policy &amp; Procedure Review</b>			
<b>Policy &amp; Procedure</b>	REVIEW AND APPROVAL OF POLICIES & PROCEDURES:		
<b>Credentialing/New Appointments</b>			
<b>A. Credentialing/New Appointment Updates</b>	Barry Davenport MD – Temporary Courtesy Privileges Trent Elliot DO - Temporary Courtesy Privileges		
<b>Other</b>			
<b>A. Other</b>	concerns/comments/questions?	none	
<b>Adjournment</b>			
<b>A. Adjournment</b>	10/14/2021 at 13:20	Karli Bowles/Sarah Dillahunt	