

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
April 23, 2026

MEMBERS PRESENT:

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

ALLIED HEALTH PROVIDER PRESENT

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

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO
Chelsea Church, PharmD
Nick Walker, RN, CCO
Megan Smith, RN – Quality
Lynda James, LPN – Drug Tech

1. Call to order
 - a. The meeting was called to order at 1:00 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the March 19, 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
 - o Operations Overview -
 - o Looking at clinic collections for March, we Collected a total of \$535.18 down from \$717.06 at time of service
 - o Hospital upfront collections were at \$734.63 for the month of March, up from \$273.40.

- We are continually looking for new service lines to provide our community at the hospital and the clinic.
 - We have received the check from the insurance company to begin work on the Lab building. We have reached out to JAM construction from Altus to complete the repairs. They were one of the contractors that provided a quote and who the insurance company suggested.
 - The electrical engineer has been to the facility and working on his report to be submitted to the State Department of Health for our lab move project.
 - We continue to get all staff more involved during patient rounds with providers.
 - We continue small improvements within the facility such as sign rejuvenation and yard maintenance.
 - We continue to make patient rounds on all patients in the hospital and continue to get great responses.
- Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records –

1. February – ER – 1 ER Notes needed out of 126– Completed
 OBS – 0 out of 3
 Acute – H&P 2 notes out of 13 acute charts – Completed
 SWB – H&P 1 note out of 23 SWB charts – 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 held March 4th with the next 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 0 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 5 HAI, for the month of February, 2026.

Client Service

- Total Patient Days for March 2026 were 345. This represents an average daily census of 11.
- March 2026 COVID-19 statistics at MRMC: Swabs (0 PCR & 32 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. None
- New Business
 - a. N/A
- Data:
 - a. N/A
- Policy & Procedures Review:
 - a. Completed August, 2024
- Education/In Services
 - a. Monthly Nursing Meeting in 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. 2/29/26 IP Only: “Hygiene with Hospital Water:: Is it Safe?” Presented by Jen Kelly, RNw/Molnlycke.
- Updates: None at this time.
- N95 Fit Tests – 2: N95 Fit Test
 - Annual Items:
 - a. Construction Risk Assessment - ICRA completed for OR to Lab conversion. Submitted to state by K. Martinez, CEO. No start date on this project at this time. Roof has been completed. ICRA for June 2024 completed.
 - 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 Plans
- 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.
 - 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. Main entry has slight rise between ramp and sidewalk creating a possible trip hazard – Contractor preparing quote to repair – Contractor – is revising quote – Contractor will contact us with start date this week. Complete 3-06-2026.
 - g. Need light installed for parking lot at New Hope - - Contractor preparing quote. Contractor scheduled for week of 16th.
- i.i.i. New Business
 - a. None
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 – 237 X-Rays/CT/US
 - i.i. Matters for approval
 - o Nothing up for approval
 - i.i.i. Updates:
 - o No UpdatesWritten 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 – 1
 - Fall with no injury – 2
 - Fall with minor injury – 0
 - Fall with major injury – 1
 - Death – 1
 - 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 – 3
- After hours access was –

Written report remains in the minutes.

k. Utilization Review

- i. Total Patient days for February: 264
- i.i. Total Medicare days for February 240
- i.i.i. Total Medicaid days for February: 4
- iv. Total Swing Bed days for February: 227
- v. Total Medicare Swing Bed days for February: 216

Written report remains in the minutes.

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

6. New Business

- a. Review & Consideration of Approval of the 340 B Plan: MRMC: – 340 B Plan

- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the 340 B Plan.
- b. Review & Consideration of Approval of the FMHP-018 Patient Privacy Notice
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the FMHP-018 Patient Privacy Notice.
- c. Review & Consideration of Approval of Annual TB Risk Assessment
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the Annual TB Risk Assessment.
- d. Review & Consideration of Appointment of April Summerlin to the Antimicrobial Stewardship Program Leader
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve April Summerlin as the Antimicrobial Stewardship Program Leader.
- e. Review & Consideration of Approval of 2025 Respiratory Protection Evaluation Summary
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the 2025 Respiratory Protection Evaluation Summary.
- f. Review & Consideration of Approval of the MRMC: Respiratory Protection Program Evaluation Checklist
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC: Respiratory Protection Program Evaluation Checklist.
- g. Discussion was held over Progress Notes to Address New Orders.
- h. Review & Consideration of Approval of the MRMC: Standing Orders
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Standing Orders.

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 1:20 pm

Medical Director/Chief of Staff

Date