

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
September 18, 2025

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director

Laura Gilmore, MD

Absent:

Guest:

ALLIED HEALTH PROVIDER PRESENT

Mary Barnes, APRN-CNP

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO

Nick Walker, RN, CCO

Meghan Smith, RN – Infection Control

Denise Jackson, RN – Quality

Chasity Howell, RN – Utilization Review

1. Call to order
 - a. The meeting was called to order at 12:40 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the August 21, 2025, 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 -
Roof completion is still on track for the first of September.
 - Room remodeling is continuing.
 - Looking at clinic collections for August, we collected a total of \$696.66 up from \$349.22 at time of service.
 - Hospital upfront collections was at \$709.43 for the month of August.

- We continue to work on our outreach and marketing for all our programs such as Strong Minds within our community and surrounding areas.
 - Patient rounds continue to provide positive feedback on patient care.
 - We continue to get feedback on how we can improve our facility to promote staff satisfaction.
 - We also continue to get positive feedback from patients regarding the thank you cards we send out to patients, thanking them for choosing to be a patient at Mangum Regional Medical Center.
 - We have recently hired a new HR representative and business office representative. These were positions both needed to be filled due to being vacant.
- Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records –

1. June – ER – All notes completed
 OBS – All notes completed
 Acute – All notes completed
 SWB – All notes completed

All notes were completed according to Hospital By Laws
 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 August 20th.
- MRMC Emergency Department reports 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 2 contaminated blood culture set(s).
- MRMC Infection Prevention reports 0 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 0 HAI, and 0 MDRO for the month of August, 2025.

Client Service

- Total Patient Days for August 2025 were 419. This represents an average daily census of 13.5.
- August, 2025 COVID-19 statistics at MRMC: Swabs (0 PCR & 15 Antigen) with 0 positive.

Preserve Rural Jobs and Culture Development

- One-PM House Supervisor RN position is open.

- 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. N/A
- Education/In Services
 - a. Education pending for preventing non-ventilator associated pneumonia. Scheduled for next Nursing Meeting.
- Updates: Employees are offered flu shots through the influenza vaccine program. Influenza vaccinations and declinations completed for MRMC employees. 2 N95 Fit Test; EHN to begin annual Fit test in June and July 2025.

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 to be replaced, pending official start date.
ICRA for June 2024 completed.
- b. Linen Services – New linen company CLEAN to deliver new linen order June 24th, 2025.

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.
 - b. ER Provider office flooring needing replaced. Tile is onsite.- remodel is postponed.
 - c. Stained ceiling tile throughout facility from leaking roof
 - d. Damaged wall and ceiling in X-Ray due to leaking roof
 - e. Damaged ceiling in OR2 due to leaking roof.

- f. Stained Ceiling tile in x-ray control room and office area due to leaking roof.
 - g. New Hope Roof – Leak in Physical Therapy office after hail storm
 - h. New Hope Window - - Window in south end of lobby broken from hail storm.
 - i. Ceiling tile in Clinic stained due to leaking roof. Replaced some 6-10-2025.
 - j. Ceiling in CT area damaged due to leaking room.
 - 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 – 164 X-Rays/CT/US
 - i.i. Nothing up for approval
 - i.i.i. Updates:
 - o X-Ray Tube License has been renewed.

Written report remains in minutes.
- g. Pharmacy
 - i. Verbal Report by Clinical Pharmacist
 - i.i. P & T Committee Meeting –

The next P&T Committee Meeting will be held on September 18, 2025
 - i.i.i. Lorazepam injectable is on national backorder and is unavailable to order. Will ask the providers to save lorazepam for seizure treatment only. Please use oral lorazepam or diazepam injectable for anxiety/agitation.

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
 - o Grievance – 1
 - o Fall with no injury – 1 – In Pt
 - o Fall with minor injury – 0
 - o Fall with major injury – 0

- Death – 1
 - AMA/LWBS – In Pt – 1 ER AMA - 2
 - Quality – Minutes are in the minutes of Medical Staff Meeting.
 - HIM – ED discharge instructions - Compliance
 - 100% - D/C Note Compliance
 - 95% - Progress Notes
 - 99% - ED DC Instructions
 - 97% - ED Provider Dx
 - Med event – 1
 - After hours access was – 67
- Written report remains in the minutes.

k. Utilization Review

- i. Total Patient days for July: 272
 - i.i. Total Medicare days for July: 230
 - i.i.i. Total Medicaid days for July: 0
 - iv. Total Swing Bed days for July: 218
 - v. Total Medicare SB days for June: 197
- Written reports remain in the Minutes.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for August, 2025.

6. New Business

- a. Review & Consideration of Approval of Policy & Procedure: MRMC: – ADM-MRMC – Hospital Workplace Violence Prevention Program
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: ADM-MRMC – Hospital Workplace Violence Prevention Program.
- b. Review & Consideration of Approval of Policy & Procedure: MRMC – Hospital Workplace Violence Event Tracking Log
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Hospital Workplace Violence Event Tracking Log.
- c. Review & Consideration of Approval of Policy & Procedure: MRMC – Intimate Partner/Domestic Violence Assessment Tool
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Intimate Partner/Domestic Violence Assessment Tool.
- d. Review & Consideration of Approval of Policy & Procedure: MRMC – Post -Threat or Event Report
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Post – Threat or Event Report.
- e. Review & Consideration of Approval of Policy & Procedure: MRMC – Violence/Aggression Assessment Checklist (VAAC)
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Violence/Aggression Assessment Checklist (VAAC)
- f. Review & Consideration of Approval of Policy & Procedure: MRMC:

Workplace Violence Incident Report Form

- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Workplace Violence Incident Report Form.
- g. Review & Consideration of Approval of Policy & Procedure: MRMC – Hospital Violence Hazard Vulnerability Assessment Tool
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Hospital Violence Hazard Vulnerability Assessment Tool.
- h. Review & Consideration of Approval of Policy & Procedure: MRMC – Workplace Violence Incident Immediate Debrief Form
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Workplace Violence Incident Immediate Debrief Form.
- i. Review & Consideration of Approval of Policy & Procedure: MRMC – Hospital Workplace Violence Risk Assessment Analysis/Checklist
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Hospital Workplace Violence Risk Assessment Analysis/Checklist.
- j. Review & Consideration of Approval of Policy & Procedure: MRMC – Workplace in the Healthcare Setting Educational Course
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC Workplace in the Healthcare Setting Education Course.
- k. Review & Consideration of Approval of Policy & Procedure: MRMC – Workplace Violence Prevention-New Hire Orientation Staff Education Power Point
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Workplace Violence Prevention-New Hire Orientation Staff Education Power Point.
- l. Review & Consideration of Approval of Policy & Procedure: MRMC – EDPR -010 Postpartum Hemorrhage Orders
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – EDPR-010 Postpartum Hemorrhage Orders.
- m. Review & Consideration of Approval of Policy & Procedure: MRMC: - EDPR-011 Severe Intrapartum/Postpartum Hypertension Order Set
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – EDPR-011 Severe Intrapartum/Postpartum Hypertension Order Set.
- n. Review & Consideration of Approval of Policy & Procedure: MRMC – EDPR-012 Magnesium Sulfate Infusion Protocol
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – EDPR-012 Magnesium Sulfate Infusion Protocol.
- o. Review & Consideration of Approval of Policy & Procedure: MRMC: - EDM-022 Obstetrical Triage, Screening, Stabilization and Disposition
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – EDM-022 Obstetrical Triage, Screening, Stabilization and Disposition.
- p. Review & Consideration of Approval of Policy & Procedure: MRMC – EDM-023 Obstetrical Emergencies – Precipitous Delivery (Code Labor).
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the EDM-023 Obstetrical Emergencies – Precipitous Delivery (Code Labor).
- q. Review & Consideration of Approval of Policy & Procedure: MRMC: - Emergency

Department Policy and Procedure Manual Table of Contents (has been updated to include OB policy and procedures)

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Emergency Department Policy and Procedure Manual Table of Contents (has been updated to include OB Policy and Procedures).

- r. Review & Consideration of Approval of Policy & Procedure: MRMC – Administrative Policy Manual Table of Contents (has been updated to include Workplace Violence)

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Administrative Policy Manual Table of Contents (has been updated to include Workplace Violence).

- s. Review & Consideration of Approval of Policy & Procedure: MRMC – NUR-015 Intravenous Line Management Policy

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC – NUR-015 Intravenous Line Management Policy.

- t. Review & Consideration of Approval of Policy & Procedure: MRMC – Conditions of Admission

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Conditions of Admission.

- u. Discussion to be held on indication for PRN medication. Kelley Martinez, CEO, led the discussion and there was a lot of involvement.

- v. Discussion to be held on chemical restrain orders. – The discussion was led by Kelley Martinez and there was a lot of participation.

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 1:06 pm.

Medical Director/Chief of Staff

Date