

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
January 19, 2023

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director

Absent: William Morgan, MD

Guest:

ALLIED HEALTH PROVIDER PRESENT:

Mary Barnes, APRN-CNP

David Arles, APRN-CNP

NON-MEMBERS PRESENT:

Dale Clayton, CEO

Daniel Coffman, CCO

Chelsea Church, PhD

Denise Jackson, RN, Quality Director

Cindy, Nelms, RN, Utilization Review

Lynda James, LPN, Drug Room Tech

Kaye Hamilton, Medical Staff Coordinator

1. Call to order
 - a. The meeting was called to order at 12:21 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the December 20, 2022, 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
 - a. CEO report – Dale Clayton, CEO
 - Hospital Staff and Operations Overview
 - Patient care continues to be outstanding.
 - Continuing moderate increase in flu and covid infections.

- Our average daily census for the month was 9. Current patient number is 17.
- Emergency Department assisted 210 patients.
- Employees continued to receive free meals compliments of Cohesive.
- We continue to put an emphasis on social media presence.
- MRMC continues to see a strong interest from clinical and administrative job applicants.
- Mangum Family Clinic is in search of a new provider with several interviewed.
- YTD statistics include 1,853 ER visits; 26,995 Labs completed and 2,638 Radiology test completed.
- Contracts, Agreements and Appointments to be presented to the Governing Board:
 - Internet Domain Server Replacement
 - Werner CoAg Analyzer Replacement
 - Granite Drug 340B Agreement
 - JCMH Transfer Agreement Renewal
 Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records

- i. Written report remains in the minutes.

b. Nursing

Excellent Patient Care

- Monthly Education included: New Covid Meds and Treatments, AMA/LWBS Policy and Emergency Evacuation Plans and MOUs.
- MRMC Rehab Team reports 100% improvement of Standardized Assessment Scores of all patients receiving Therapy.
- MRMC Wound Care Team reports Zero Hospital Acquired Pressure Ulcers during the month of December.

Excellent Client Service

- Patients continue to rely on MRMC as their local hospital. Total patient days increased from 259 days in November 281 days in November. This represents a stable average daily census of 9.1. In addition, MRMC Emergency Department provided care to 210 patients in December.
- December COVID-19 Stats at MRMC: Swabs (63-PCR & 154-Antigen) with 12 Positive.
- Of the 281 patient days during December, MRMC Infection Preventionist reports Zero Hospital Acquired MDRO (multidrug resistant organism). A concerning report from the CDC, states

“the prevalence of MDROs in US hospitals and medical centers has increased steadily”. MRMC’s outstanding performance is likely due to excellent compliance in Hand Hygiene, Personal Protective Equipment and Strict Isolation practices. 1. Centers for Disease Control and Prevention. Epidemiology of MDROs. Management of Multidrug-Resistant Organisms in Healthcare Settings <https://www.cdc.gov>. Accessed January 5, 2023.

Preserve Rural Jobs...

- Recruiting efforts included interviewing regional professionals. Offers are being accepted!
- Local interest in positions as MRMC is at the highest level in some time!

Written report remains in minutes.

c. Infection Control

- Old Business
 - a N/A
- New Business:
 - a. N/A
- Data:
 - a, N/A
- Policy & Procedures:
 - a. N/A
- Education/In Services
 - a. APIC Strive Module 1 – Basic Principles of Transmission-Based Precautions Education for EVS staff.
 - b. Principles of Food Temperature Safety for Dietary..
 - c. Documentation guidelines presented by malpractice insurance carrier for all staff who document in CPSI.
- Updates: No updates at this time.
- Annual Items:
 - a. N/A

Written report remains in minutes.

d. Environment of Care and Safety Report

- i. Evaluation and Approval of Annual Plans –
 - i.i. Old Business - -
 - a. Evaluation and approval of Annual Plans-Plans will be presented in December meeting.
 - a. Continuing to work on the building. Flooring in Nurses break area and Med Prep room needing replaced – Rescheduled - additional tile will need to be ordered.

- b. 15 AMP Receptacles – all 15 AMP Receptacles will be replaced with 20 AMP Receptacles throughout Hospital – replacement has started.
- c. Replace all receptacles on generator circuit at Clinic with red receptacles.
- d. ER Provider office flooring needing replaced
- e. Damaged ceiling tile in patient area due to electrical upgrade-replacement started.
- f. Replace ceiling tile that do not fit properly – will need more tile to complete.
- g. North wall in Nurses breakroom in need of repair
- h. Ceiling tile above HVAC Unit in Radiology stained from roof leak.
- i. Uncovered many problems/issues in wiring that wasn't up to code. Approximate completion in 60 days.

i.i.i. New Business

- a. Hand sanitizer dispensers need verified for proper operation – complete 11-9-2022
 - b. Hand sanitizer dispensers in COVID Wing – complete 11/29/2022
 - c. Room 29 in need of wall repair – remodel started 12-13-2022
 - d. Clocks missing from rooms 18 and 31 – Complete 12-13-2022
- Written report remains in minutes.

e. Laboratory

- i. Tissue Report – Approved – December, 2022
- i.i. Transfusion Report – Approved – December, 2022

f. Radiology

- i. There was a total of – 214 X-Rays/CT/US
- i.i. Nothing up for approval
- i.i.i. Updates:
 - o No new updates.

Written report remains in minutes.

g. Pharmacy

- i. Verbal Report by Pharmacist.
- i.i. COVID-19 Medications-Have 1 dose of Bebtelovimab, 30 doses of Remdesivir and 18 Paxlovid doses in-house.
- i.i.i. P & T Committee Meeting - March, 2023
- i.v. Drug Shortage/Outages are as follows: Clinimix, Optiray (all Contrast), furosemide injection. Children's suspension antibiotics, Tylenol and Ibuprofen DRS and PIC to monitor on a routine basis.

Written report remains in the minutes.

- h. Physical Therapy
 - i. No report.

 - i. Emergency Department
 - i. No report

 - j. Quality Assessment Performance Improvement Risk
 - Risk Management
 - Grievance – 0
 - 2 - Fall with no injury
 - 0 - Fall with minor injury
 - 0 – Fall with major injury
 - Death – In Patient 0 (0%) - Emergency Department 1 (0%)
 - AMA/LWBS – 2/0
 - Quality
 - Quality Minutes from previous month included as attachment.
 - Policy Revisions: Life Safety Policy Manual; Materials Management Policy Manual

 - HIM – H&P – Completion 24/24 = 100% - Discharge Summary 19/19 = 100%
 - Med event – 5
 - Afterhours access was – None reported
 - Compliance
Written report remains in minutes.

 - k. Utilization Review
 - i. Total Patient days for December: 281
 - i.i. Total Medicare days for December: 262
 - i.i.i. Total Medicaid days for December: 8
 - i.v. Total Swing Bed days for December: 232
 - v. Total Medicare SB days for: 232
Written report remains in the minutes.
- Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for December, 2022.

6. New Business

- a. Review & Consideration of Approval of Policies & Procedures – MRMC Life Safety Policy Manual – Policies and Procedures are as Follows: 1. MRMC – Utility Management Plan, 2. MRMC – Security Management Plan, 3. MRMC – Fire Management Plan, 4. MRMC – Equipment Management Plan, 4. MRMC – Management Plan, 5. MRMC – Hazardous Materials Management Plan

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC

Utility Management Plan, MRMC Security Management Plan, MRMC Fire Management Plan, MRMC Equipment Management Plan, and MRMC Hazardous Materials Management Plan.

- b. Review & Consideration of Approval of Policies & Procedure Manual – MRMC Materials Management Policy Manual – Polices and Procedures as follows: 1. MRMC – Equipment Work Order (Equipment Problem/Malfunction/Failure), 2. New Product Evaluation Request Form, 3. MRMC – Stores Requisition Form, 4. MRMC – Product Recall Log, 5. MRMC – Purchasing Policy, 6. MRMC – Returns & Outgoing Shipments, 7. MRMC – Repairs 8. MRMC – Lending – Borrowing Supplies & Equipment, 9. MRMC – Disposition of Assets Equipment, 10. MRMC – Receiving Stock & Non-Stock Items including Discrepancies, 11. MRMC – Supply/Stock Rotation, 12. MRMC – Computerized Inventory Control System, 13. MRMC – Disbursements, 14. MRMC – Inventory Adjustments & Corrections, 15. MRMC – Year End Physical Inventory, 16. MRMC – Recalls & Safe Medical Devices Including Disposal, 17. MRMC – Safety Data Sheet (SDS) Forms

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve MRMC Material Management Policy Manual – Polices and Procedures – as follows: 1. Equipment Work Order (Equipment Problem/Malfunction/Failure, 2. New Product Evaluation Request Form, 3. Stores Requisition Form, 4. Product Recall Log, 5. Purchasing Policy, 6. Returns & Outgoing Shipments, 7. Repairs, 8. Lending – Borrowing Supplies & Equipment, 9. Disposition of Assets Equipment, 10. Receiving Stock & Non – Stock Items including Discrepancies, 11. Supply/Stock Rotation, 12. Computerized Inventory Control System, 13. Disbursements, 14. Inventory Adjustments & Corrections, 15. Year End Physical Inventory, 16. Recalls & Safe Medical Devices Including Disposal, 17. Safety Data Sheet (SDS) Forms

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 12:41 pm.

Medical Director/Chief of Staff

Date