Mangum Regional Medical Center Governing Board Summary Quality Data 05/12/2022

Hospital Activity

- Hospital Admission
 - Acute Care Admits: 15 up from March (12)
 - Swing-Bed Admits: 11 up from March (9)
 - Total Discharges: 22– up from March (20)
- Total Patient Days, ED Visits, ADC
 - Total Patient: 303 up from March (256)
 - ED Visits: 118 down from March (121)
 - Average Daily Census: 10 up from March (8)

AMA/LWBS

- AMA: 1 down from March (3)
- LWBS: 0 no change from March (0)

| Type of Count (AMA/LWBS) | Count | Brief Description of Event | Actions |
|-----------------------------|-------|--|--|
| AMA | 1 | AMA 1 – 1 inpatient left AMA, pt. became very agitated with staff as they preferred a non-safe method of patient care, when staff attempted to educate patient, patient became more agitated and became threating towards staff. Patient was able to be redirected and calmed for short period of time but returned to agitated and threating, police were called/patient did sign out AMA and was assisted out of facility by police. | staff will continue to provide safe patient care to all MRMC patients and educate patients/family as need. Will continue to monitor for threating behavior from patients and family/police notification by staff as warrants. |
| LWBS | 0 | none | none |

Care Management

• 30 Day Readmissions • 0 for April

| Event | Count | Comments | Actions |
|---------|-------|------------------------------------|---------|
| Readmit | 0 | No readmits for the month of April | none |
| | | | |

Risk Management

- Incidents
 - Falls without Injury
 - AMA/LWBS
 - Other Events

| Incident Type | Count | Brief Description of Event & Outcome | Actions |
|----------------------|-------|--|---|
| Falls without injury | 2 | See below | |
| AMA/LWBS | 1/0 | See above | |
| Other events | 1 | Other; 1 pt. was given a food that they were allergic to, pt. reported to staff and food was removed from pt. room | OTHER: 1) Process for identification of food allergies in place/tray care system being used, education to dietary staff on monitoring for allergies/nursing staff education on eval of tray prior to delivery to patient will continue to monitor process |

- Complaints and Grievances
 - o 0 grievance

| Brief Description of Complaint/Grievance & Outcome | Actions | |
|---|---------|--|
| None for April | None | |
| | | |

- Patient Falls
 - Fall with no injury -2
 - Fall with minor injury -0
 - Fall with major injury -0

| Count | Brief Description of Event & Outcome | Actions |
|-------------------|---|---|
| 2 FWOI | 1 - Pt was seen in the ED and released, pt. was using appropriate DME upon exit and fell in parking lot, employee was entering building and noted patient post fall. Employee offered a nurse or returning to the ED, pt. was adamite that they were okay and did not need any further care x multiple attempts. Pt left in personal vehicle. Employee reported to ER RN and CNO. ER RN called and followed up with patient the next day, patient continues to report that they are okay and do not need any further care. In- patient became weak during transfer and was slid to the ground with nursing assist, no injuries noted/denied | monitor for any potential fall risks, offer care when needed. Use appropriate number of staff for all transfers |
| 0 Fall | any pain with assessment None | None |
| w/minor injury | | |
| | | |

- Mortality Rate
 - Acute/Swing-Bed Deaths

• 2 (9%) (YTD = 12%)

• Emergency Department Deaths

• 1 (1%) (YTD = (0%)

| Count | Brief Description of Event & Outcome | Actions |
|--------------------|--|---------|
| 1 acute 1 swing | 2 inpatients; pt. admitted to swing, declined overall. DNR in place, pt. expired while in- patient. 1 pt. to ed unresponsive extensive health issues/family desires comfort care, admitted for comfort care, expired while inpatient. | none |
| 1 ER | 1 ER patient; pt. brought to ed with CPR in progress, CPR attempts in ED unsuccessful. Pt expired in the ED | none. |
| | | |

• Organ Bank Notifications within 60 minutes of Death (Benchmark 100%)

 \circ 3 notification within 60 minutes of death/3 death for reporting period

| Count Compliance Action | Count | Compliance | Action |
|-------------------------|-------|------------|--------|
| | evant | | |

| 3 | 100% - inpatient x 2 deaths were not | none |
|---|--------------------------------------|------|
| | candidate for donation, er death was | |
| | sent to ME | |

Infection Control

- Catheter Associated Urinary Tract Infections (CAUTIs) 0
- Central Line Associated Primary Bloodstream Infections (CLABSIs) 0

| Type of Event (CLABSI/CAUTI) | Count | Brief Description of Event & Outcome | Actions |
|---------------------------------|-------|---|---------|
| None | | | |
| None | | | |

Health Information Management

- History & Physical Completion (Benchmark 100%)
 26/26=100 %
- Discharge Summary Completion (Benchmark 100%)
 - o 22/22 = 100 %

| Type of Documentation (H&P/Discharge) | Count | Actions |
|--|-------|---------|
| H&P | 26 | none |
| Discharge Summary | 22 | none |

Nursing

- Code Blue
 - o 2
- Transfers
 - \circ Acute Transfers 0
 - ED Transfers 11

| Event | Count | Comments | Actions |
|-----------------|-------|--|---|
| Acute Transfers | 0 | none | Continue operating capacities for this CAH. |
| ED Transfers | 11 | 11 - transferred to higher level of care for; pneumothorax, NSTEMI x 4, Bowel obstruction x 2, EOD, meningioma, acute abdomen (further testing needed), elevated cardiac enzymes/dyspnea | Continue operating capacities for this CAH. |