

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
August 18, 2022

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director
William Gregory Morgan, III, MD

Absent:

Guest:

ALLIED HEALTH PROVIDER PRESENT:

Mary Barnes, APRN
David Arles, APRN

NON-MEMBERS PRESENT:

Dale Clayton, CEO
Cindy Tillman,
Daniel Coffman, CCO
Chelsea Church, PhD
Denise Jackson, RN, Quality Director
Chasity Howell, RN Utilization Review
Lynda James, LPN
Kaye Hamilton, Medical Staff Coordinator

1. Call to order
 - a. The meeting was called to order at 12:37 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the July 21, 2022, Medical Staff Meeting were reviewed.
i.Action: Dr. Chiaffitelli, Medical Director, made a motion to approve the minutes.

21

3. Unfinished Business
 - a. None
4. Report from the Chief Executive Officer
 - a. CEO report – Dale Clayton, CEO

- Leadership continues to update staff and Providers regarding new policies and regulations.
- Covid concerns have increased slightly along with Monkey Pox and vigilance continues to be key.
- Hospital Staff and Operations Overview
 - Patient care continues to be outstanding.
 - Open positions include CNA, LPN, RN and RT.
 - Recently hired staff include CNA, LPN, Monitor Tech, Clinic Receptionist and Dietary staff.
 - Critical Alert nurse call system is close to completion. This is the final major improvement enabled by grant funds.
 - Our average daily census for the month was 11.
 - Emergency Department assisted 141 patients.
 - Employees continued to receive free meals compliments of Cohesive.
 - We continue to put an emphasis on social media presence and other outreach efforts for the Hospital and the Clinic.
 - Consideration and planning is underway for the increased use of the space in the David Caley Memorial Annex.
- Contracts, Agreements and Appointments to be presented to the Governing Board:
 - LifeShare Transplant Donor Services of Oklahoma, Inc. Renewal Agreement
 - Commercial Water Heater Purchase Approval
 - Port 53 Technologies Meraki License and Cloud-based Support Service Renewal
 - Premier-Sysmex Coag & Hematology Analyzer Agreement Renewal
 - Blue Cross and Blue Shield HMO and PPO Payor Agreement
 - ERCM Rev-OPS Compliance Addendum
Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records

- i. Written report remains in the minutes.

a. Nursing

Excellent Patient Care

- Monthly Education included Hand Hygiene, Mask Guidance, Fall Documentation and Plan Assessment.

- MRMC Emergency Management and Management and Administration coordinated with Greer EMS, Air Evac, Mangum Police, Fire and City Manager to begin preparations for an active shooter drill.
- MRMC Infection Prevention proudly reports excellent performance as evidenced by Zero prevalence of Hospital sustained outstanding performance as evidenced by Zero prevalence of Hospital Acquired infections, Catheter Associated Urinary Tract Infections, or Central Line Associated Blood Stream Infections.
- Out of 10,908 doses of medication administration, there were Zero adverse reactions.
- On average, there were zero medication errors per 1000 doses.

Excellent Client Service

- Patients continue to rely on MRMC as their local hospital. Patient days increased from 292 days in June to 339 days in July. This represents an increase in average daily census from 10 to 11. In addition, MRMC Emergency Department provided care to 141 patients in July.
- June COVID-19 Stats at MRMC: Swabs (39-PCR & 67-Antigen) with 4 Positive PCR & 11 Positive Antigen.
- Our Laboratory completed 2108 tests with 0 repeat labs required.

Preserve Rural Jobs

- Open Positions include Full Time RT, RN, LPN and CNA.
- The New and Improved Dietary Team along with Cohesive Healthcare Management provide delicious meals free of charge to on-duty staff. Patients and Visitors continue to rave about the quality meals being provided.
- Recruiting efforts included interviewing regional professionals. Offers are being considered!

Written report remains in minutes.

c. Infection Control

- New Business:
 - a. None
- Data:
 - a. N/A
- Policy & Procedures:
 - a. N/A
- Education/In Services
 - a. Staff Education – Performed 2nd-Quarter Skills Fair and check off in June 2022 with 100 % compliance for Core Staff
 - b. Code Stroke drill with follow up Inservice provided by Air Vac
 - c. Death Packet Read & Sign
 - d. Safe-N-Sound Monitoring Read & Sign
 - e. Spacelabs EKG Read & Sign
 - f. MonkeyPox – handouts presented to ED & Clinic..
- Updates: No updates at this time.

- Annual Items:
 - a. Annual Infection Control Risk Assessment and Annual Infection Control Program Evaluation.
 - 1. Require Two Infection Control Initiatives for this year:
 - a. PPE/Mask Compliance
 - b. To be determined
 - b. Annual Review of TB Risk Assessment/Fit testing of N95 masks
 - Completed for 2022.
 - 99% compliance for Core Staff (2 employees out for medical leave). Obtain fit testing on remaining employees upon return to work.
- Any additional recommendations from committee:
 - a. Evaluation due to be done annually.
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 July meeting.
 - b. 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.
 - c. 15 AMP Receptacles – all 15 AMP Receptacles will be replaced with 20 AMP Receptacles throughout Hospital – replacement has started.
 - d. Replace all receptacles on generator circuit at Clinic with red receptacles.
 - e. Glass on west hallway entry cracked-glass installed 6/17/2022.
 - f. ER Provider office flooring needing replaced
 - g. Covers needed for shelving in Cafeteria – backordered -no longer needed-shelving has been relocated.
 - h. Damaged ceiling tile in patient area due to electrical upgrade-replacement started.
 - i. Ceiling tile above AC in x-ray has water spots-tile replaced 6-16-2022.
 - j. Nurse call in room 23 malfunction due to roof leak and water inside wall.

i.i.i. New Business

- a. None
Written report remains in minutes.

e. Laboratory

- i. Tissue Report – Approved – July, 2022

i.i. Transfusion Report – Approved – July, 2022

f. Radiology

i. There was a total of – 207 X-Rays/CT/US

i.i. Nothing up for approval

i.i.i. Updates:

- PM was completed for the CT on 7/21/2022.

Written report remains in minutes.

g. Pharmacy

i. Verbal Report by Pharmacist.

i.i. COVID-19 Medications-Have 2 doses of Bebtelovimab, 30 doses of Remdesivir and 18 Paxlovid does in-house.

i.i.i. Drug Recall Notifications received from pharmacy wholesaler.

i.v. Drug Shortage/Outages are as follows: Clinimix, Intralipids, IV Fluids, Optiray (all Contrast), lorazepam injection, furosemide injection. Can substitute LR if appropriate for NS. DRS and PIC to monitor on a routine basis.

Written report remains in minutes.

h. Physical Therapy

i. No report.

i. Emergency Department

i. No report

j. Quality Assessment Performance Improvement

Risk

• Risk Management

- Grievance – 0
- 5 - Fall with no injury
- 1 - Fall with minor injury
- 1 – Fall with major injury
- Death – In Patient (0%) - Emergency Department 1 (1%)
- AMA/LWBS – 6/0

• Quality

- Quality Minutes from previous month included as attachment.
- Policy Revisions: None.

- HIM – H&P – Completion 19/19 = 100%. Discharge Summary – Completion 22/22 = 100%
- Med event – No P&T reporting at this time
- Afterhours access was – No P&T reporting at this time

- Compliance
Written report remains in minutes.

k. Utilization Review

- i. Total Patient days for July: 339
- i.i. Total Medicare days for July: 304
- i.i.i. Total Medicaid days for July: 13
- i.v. Total Swing Bed days for July: 304
- v. Total Medicare SB days for July: 262

Written report remains in the minutes.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for July, 2022.

6. New Business

- a. None.

7. Adjourn

- a. Dr. Chiaffitelli made a motion to adjourn the meeting at 12:59 pm.

Medical Director/Chief of Staff

Date