

Mangum Regional Medical Center  
Medical Staff Meeting  
May 20, 2021

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director  
William Gregory Morgan, III, MD  
Absent:  
Guest:

ALLIED HEALTH PROVIDER PRESENT:

David Arles, APRN  
Mary Barnes, APRN  
Randy Benish, PA

NON-MEMBERS PRESENT:

Chelsea Church, PhD  
Dale Clayton, CEO  
Daniel Coffin, CCO  
Melissa Tunstall, Quality Director  
Candy Denney, 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 11:52 am by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
  - a. The minutes of the April 22, 2021, 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 – Cindy Tillman, Interim CEO  
We continue to participate in daily Region 3 Merc Briefings.
    - The Cohesive Task Force provided updated visitation policy for all patients who are not COVID-19 positive. This policy allows two visitors at a time who have been properly screened through the COVID screening protocol, agrees to properly observe hand

hygiene and always appropriately wearing their mask while in the facility.

- Cohesive and hospital leadership continue to ensure the staff and providers are kept up to date regarding any changes or new policies pertaining to COVID-19.

#### Hospital Staff and Operations Overview:

- Dale Clayton, started on May 4, 2021. He has been meeting with each director in their department to go over their process and build a rapport with the staff.
  - We have hired a new IT Tech, Quality Director, and clinical staff. Positions not filled: Case Manager, LPN, RN, CNA, PT/OT. Currently, we are in the process of interviewing providers for weekend ER shifts to replace the residents who will be leaving the end of June.
- Our census has remained good throughout April.  
Written report remains in the minutes.

## 5. Committee / Departmental Reports

### a. Medical Records

- i. No report was given.

### b. Nursing

#### Excellent Patient Care

- Monthly Education topics included: Care for the Immunocompromised Patient.
- Educated non-clinical staff on Rapid Response activation.
- Educated non-radiological staff in CT warm-up to process to decrease Stroke protocol door to transfer time.
- Educated Staff regarding Policy/Process: Patient Home Medication Inventory Log.

#### Excellent Client Service

- Patient days increased from 181 in March to 281 in April. This represents an average daily census of 9.37. ER volumes are trending upward.
- April COVID-19 State at MRMC: 104 Swabs (43-PCR & 61-Antigen) 104 Negative, 0 Pending and 0 deaths!
- Greer County April COVID-19 Statistics: 582 Positive Cases and 21 Deaths (3.60% death rate).

#### Preserve Rural Jobs

- Open Positions include Full Time RT, MLT, RN, LPN and CNA.
- Open Director positions include Rehabilitation.
- For the clinical team MRM has hired the following core positions: Monitor Tech/Registration Clerk and LPN.

- Interviewing Core Candidates for Director of Quality/Risk Management
- Recruiting efforts included posting of positions on mangumregional.net and Facebook.

Written report remains in minutes.

c. Infection Control

- Infection Control
    - a. TB Risk Assessment – Introduced and need to go to Board Meeting.
    - b. No CAUTIs or CLABSI, and no MDRO
    - c. NHSN reporting complete for 2020-2021 HCP flu season.
  - Employee Education
    - a. 4/20/21 – Neutropenic Education to nursing staff.
    - b. 4/26/2021 – Infection Prevention Reminders to nursing staff
    - c. 4/28/2021 – Education provided on proper care for Dry suction chest tube.
  - J&J vaccines approved to begin giving again. Clinic will have a COVID-19 vaccine clinic at some point in the near future.
  - N95 Fit testing to resume. New small N95 masks are available.
  - 43 PCR COVID-19 swabs, 43 negative, 61 rapid test performed, 1 STI reported.
  - Lab reporting to Spring ML, and RHC.
- Written report remains in minutes.

d. Environment of Care and Safety Report

- i. Evaluation and Approval of Annual Plans –
- i.i. Old Business - -
  - a. Continuing to work on repairs to the building, installation of additional outlets, repair to equipment, and replacing 15 AMP receptacles with 20 AMP receptacles throughout the Hospital. The individual work orders are listed in the EOC minutes that are kept with the Medical Staff Minutes.
  - b. Active Shooter Drill completed on 3/11/2021.
  - c. Pharmacy refrigerator lock installed and moved to the Nurses Station.
  - d. After action report on water outage completed 3/23/2021
- i.i.i. New Business
  - a. Stretcher in ER1 needs supports under head replaced.

Written report remains in minutes.

- e. Laboratory
  - i. Tissue Report – Approved – April, 2021
  - i.i. Transfusion Report – Approved – April, 2021
- f. Radiology
  - i. There was a total of – 222 X-Rays/CT/US
  - i.i. Nothing up for approval
  - i.i.i. Updates: The Ultrasound went down on April 29<sup>th</sup> and we got it back up on May 3<sup>rd</sup>.  
Written report remains in minutes.
- g. Pharmacy
  - i. Verbal Report by Pharmacist.
  - i.i. TNKase is still on the Formulary.
  - i.i.i. P & T Meeting was held April 22, 2021. The Committee Meeting Agenda remains in minutes.
- h. Physical Therapy
  - i. No report.
- i. Emergency Department
  - i. No report
- j. Quality Assessment Performance Improvement Risk
  - Risk Management
    1. Complaints – 1 Resolved by Charge Nurse at bedside
    2. Patient falls without injury.
    3. Needle Stick – Nurse and patient both were tested and both negative.
    4. 2 ER Deaths
    5. AMA – 5 Patients were explained the benefits of staying and the risks of leaving. AMA was signed.
    6. Wrong med bottle sent home with wrong patient. Patient did not take medication. CCO has re-educated the nursing staff. Put in place the new patient home medications policy and log to prevent further issues.
  - Quality
    - Quality Minutes from previous month included as attachment.
    - Previous policies approved by Quality/Med Staff/GB (4/27/21)
      1. Employee Health Program Manual
      2. Health Information Management

3. HIPAA - Policies and Procedure Manual, Infection Control Policies and Procedure. – 001 Approval letter
  - Policies approved in Quality on 5/13/2021
    1. Casirivimab.Etesevimab Standing EUA Orders
    2. Bamlanivimab.Etesevimab Standing EUA Orders
    3. Emergency Preparedness Plan and Appendixes (Annual)
    4. Life Safety Code Inspection Report
    5. TB Risk Assessment and TB Risk Assessment Plan of Action (Annual)
- Standing Agenda
  1. Annual Appointment of Infection Preventionist – Karli Bowles
- HIM – Discharge summaries are at 95% due to Provider not having access. Consent to treat at 99%
- Med event – 2
- After hours access decreased this month.
- 2 Readmissions to ED
- Other: Roof was repaired over OR2
- Compliance
  - Contracts that were approved in GB on 4/27/2021
    1. Renewal of DIA Contract
    2. Inpriva Patient even notification COP Interoperability
    3. Cardinal Health Premier Ordering
    4. Mountaineer Medical
    5. Press Ganey Addendum for start date change to 7/01/21
    6. Healthcare General Liability Insurance (MedPro Group)
    7. Space Labs LOC added through Ad Hock meeting that was held on 4/20/21.
  - Contracts that were approved in Quality on 5/13/2021
    1. Sizewise mattress
    2. MiMedx Group, Inc. First amendment to consignment agreement
  - Contract Approved in Ad Hoc meeting 5/18/21
    1. BluePrint Menu Management System (BPMMS)  
International Dysphagia Diet Standardization Initiative (IDDSI)
  - Working with Infection Control Nurse, CEO and CCO to stay informed with updates and information about Covid-19.
- Workman's Comp
  - There are currently not any Workman's Comp cases currently open.

Written report remains in minutes.

- k. Utilization Review
    - i. Total Patient days for April: 281
    - i.i. Total Medicare days for April: 248
    - i.i.i. Total Medicaid days for April: 1
    - i.v. Total Swing bed days for April: 237
    - v. Total Medicare SB days for April: 217
- Written reports remain in minutes.

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

#### 6.New Business

- a. Approval of Emergency Preparedness and Appendixes (Annual)
  - i.Motion:** made by Dr. Chiaffitelli to approve Emergency Preparedness and Appendixes (Annual).
- b. Approval of Bamlanivimab.Extesevimab Standing EUA Orders
  - i.Motion:** made by Dr. Chiaffitelli to approve Bamlanivimab.Estesevimab Standing EUA Orders.
- c. Approval of Casirivimab.Imdevimab Standing EUA Orders
  - i.Motion:** made by Dr. Chiaffitelli to approve Casirivimab.Imdevimab Standing EUA Orders.
- d. Approval of TB Risk Assessment and TB Risk Assessment Plan of Action (Annual)
  - i.Motion:** made by Dr. Chiaffitelli to approve TB Risk Assessment and TB Risk Assessment Plan of Action (Annual)
- e. Approval of Life Safety Code Inspection Report
  - i.Motion:** made by Dr. Chiaffitelli to approve Life Safety Code Inspection Report.
- f. Approval of Contract: MidMedx Group, Inc. First Amendment to Consignment Agreement
  - i.Motion:** made by Dr. Chiaffitelli to approve Contract: MidMedx Group, Inc. First Amendment to Consignment Agreement.
- g. Approval of Contract: Sizewise Mattress
  - i.Motion:** made by Dr. Chiaffitelli to approve Contract: Sizewise Mattress.
- h. Approval of Contract: BluePrint Menu Management System (BPMMS) International Dysphagia Diet Standardization Initiative (IDDSI)
  - i.Motion:** made by Dr. Chiaffitelli to approve Contract: BluePrint Menu Management System (BPMMS) International Dysphagia Diet Standardization Initiative (IDDSI).
- i. Annual Appointment of Infection Preventionist – Karli Bowles

#### 7. Adjourn

- a. Dr. Chiaffitelli made a motion to adjourn the meeting at 12:35 pm.

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Medical Director/Chief of Staff

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Date

