# Mangum Regional Medical Center Medical Staff Meeting July 21, 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 12:12 pm by Dr. John Chiaffitelli, Medical Director.
- 2. Acceptance of minutes
  - a. The minutes of the June 21, 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

- Leadership continues to update staff and Providers regarding new policies and regulations.
- Covid is less of a concern however vigilance is still the focus.
- Hospital Staff and Operations Overview
  - Patient care continues to be outstanding thanks to an outstanding staff.
  - o Open positions include Dietary, CNA, LPN, RN and RT.
  - Recently hired core staff include a CNA, LPN, Monitor Techs 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 10.
  - o Emergency Department assisted 144 patients.
  - o 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.
- Contracts, Agreements and Appointments to be presented to the Governing Board:
  - o PharmaForce Mangum Drug Configuration agreement
  - o Cardinal Health 340B agreement
  - Eli Lilly, Novo Nordisk and AstraZeneca 340B manufacturing agreements.
  - o Critical Alert nurse call system change order.
  - Greer County Health Department X-Ray services agreement.
  - Oklahoma Blood Institute blood bank contract.
  - OKCH Medicare/Medicaid reimbursement contract
  - Stericycle addendum for pharmaceutical Hazardous Waste disposal
    - 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 topics included a skills fair with topics covered included: TPN, Transmission Based Precautions, PPE and G-tube feeding. Air Evac provided Stroke education.
- MRMC Emergency Services coordinated with Greer EMS and Air Evac to conduct a mock code STROKE. Through coordinated efforts,

- the mock patient received prompt assessment in the field, rapid imaging and was transferred to flight team in 36 minutes.
- MRMC Infection Prevention proudly reports continued excellent performance as evidenced by Zero prevalence of Hospital Acquired Infections, Catheter Associated Urinary Tract Infections or Central Line Associated Blood Stream Infections.
- There have been zero hospital acquired wounds. The wound care team continues to ensure overall wound progression.

## **Excellent Client Service**

- Patients continue to rely on MRMC as their local hospital. Patient days decreased from 320 days in May to 292 days in June. This still represents an average daily census of 10. In addition, MRMC Emergency Department provided care to 144 patients in June.
- June COVID-19 Stats at MRMC: Swabs (28-PCR & 49-Antigen) with 1 Positive PCR & 1 Positive Antigen.
- 100% of the discharged patients from MRMC Outpatient Therapy Services exhibited improvement in standardized assessment scores. This scoring relates to the patient's functional ability.
- Case Management received a report from a patient and family member.
  They claim that they have been to many other facilities but have never
  received the personal, compassionate care that they have been given
  while at MRMC.

#### Preserve Rural Jobs

- Open Positions include Full Time RT, RN, LPN and CNA.
- For the clinical team MRMC continues to pursue core staff members from the area.
- New Core staff members have been added to the dietary team. MRMC compliments daily regarding the enhanced service and quality of the meals served.
- Recruiting efforts included posting of positions on mangumregional.net and Facebook as well as indeed.

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  $-2^{nd}$ -Quarter Skills Fair to start week of June  $20^{th}$ .
- Updates: No updates at this time.
- Annual Items:

- a. Annual Infection Control Riske 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
  - o Annual Fit testing scheduled 6/28/2022 and 6/30/2022.
- 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 June meeting.
    - b. Continuing to work on the building. Flooring in Nurses break area and Med Prep room 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 cut ready to install-will be installed 6/14/2022.
    - f. ER Provider office flooring needing replaced
    - g. Covers needed for shelving in Cafeteria backordered

#### i.i.i. New Business

- a. Damaged ceiling tile in patient area due to electrical upgradereplacement started
- b. Ceiling tile above ac in Xray has water spots
- c. Nurse call in room 23 malfunction due to roof leak and water inside the wall.
- d. Hot water issues 6-12-2022 due to broken pipe in boiler room—repairs made 6-12-2022. Hot water was back on. Written report remains in minutes.
- e. Laboratory
  - i. Tissue Report Approved June, 2022
  - i.i. Transfusion Report Approved June, 2022
- f. Radiology
  - i. There was a total of -216 X-Rays/CT/US

- i.i. Nothing up for approval
- i.i.i. Updates:
  - There aren't any updates Written report remains in minutes.

## g. Pharmacy

- i. Verbal Report by Pharmacist.
- i.i. Bebtelovimab is in house
- i.i.i. Clinimix received and in the Pharmacy
- 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
    - $\circ$  Grievance -0
    - o 1 Fall with no injury
    - o 1 Fall with minor injury
    - Death In Patient (0%) Emergency Department 0 (0%)
    - $\circ$  AMA/LWBS 3/0
  - Quality
    - Quality Minutes from previous month included as attachment.
    - o Policy Revisions:
      - MRMC Case Management Policy Manual Policies listed as follows: Case Management Policy Manual Table of Contents, Case Management Program, Case Management Admission & Discharge, Notification and Hospital Discharge Appeal Rights, Detailed Notice of Discharge
    - MRMC Swing Bed Policy Manual Policies listed as follows: Swing Bed Policy Manual Table of Contents, Swing Bed Admission Policy, Swing Bed Admission Criteria, Swing Bed Comprehensive Assessment, Swing Bed Coordinator, Admission Discharge Transfer Rights, Dental Services Policy, Discharge Plan, Quality of Life, Social Services, Interdisciplinary Team Meeting Note, Important

- Message from Medicare, Patient Discharge Safety Checklist, Swing Bed Program Patient Orientation Packed,
- o MRMC Incomplete Records Policy
- MRMC Patient Request for Restrictions on Use/Disclosure of PHI and Request for Confidential Communications
- o MRMC 340B Program Policy
- o Mangum Quality Review Evaluation Plan 2022
- HIM H&P Completion 27/28 = 96%. Discharge Summary Completion 23/26 = 88%
- Med event 2
- Afterhours access was 62.
- Compliance Written report remains in minutes.

## k. Utilization Review

- i. Total Patient days for June: 292
- i.i. Total Medicare days for June: 211
- i.i.i. Total Medicaid days for June: 9
- i.v. Total Swing Bed days for June: 244
  - v. Total Medicare SB days for May: 179

Written report remains in the minutes.

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

#### 6. New Business

- a. Review & Consideration of Approval of Policy & Procedures: MRMC Case Management Policy Manual Table of Contents for Manual is attached.
   i.Motion: made by John Chiaffitelli. DO, Medical Director, to approve MRMC Case Management Policy Manual and Table of Contents for MRMC Case
   Management Policy Manual.
- Review & Consideration of Approval of Policies & Procedures: MRMC –
   Swing Bed Policy Manual Table of Contents is attached
  - **i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC Swing Bed Policy Manual and Table of Contents for the Swing Bed Policy Manual.
- Review & Consideration of Approval of Policy & Procedure: MRMC Incomplete Records Policy
  - **i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC Incomplete Records Policy.
- d. Review & Consideration of Approval of Policies & Procedures: MRMC Patient Request for Restrictions on Use/Disclosure of PHI and Request for Confidential Communications
  - **i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC Patient Request for Restrictions on Use/Disclosure of PHI and Request For Confidential Communications.
- e. Review & Consideration of Policy & Procedure MRMC: 340B Program Policy **i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the

MRMC – 340B Program Policy. f. Review & Consideration of Evaluation Plan: Mangum Quality Review Evaluation Policy Plan 2022

**i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the Mangum Quality Review Evaluation Policy Plan 2022.

7. Adjourn	
a. Dr. Chiaffitelli made a motion to	adjourn the meeting at 12:34 pm.
Medical Director/Chief of Staff	 Date