Mangum Regional Medical Center Medical Staff Meeting Thursday November 21, 2023

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director Greg Morgan, MD Absent: Guest:

ALLIED HEALTH PROVIDER PRESENT:

David Arles, APRN-CNP Mary Barnes, APRN-CNP

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO Chelsea Church, PharmD Nick Walker, RN, CCO Chasity Howell, RN, Utilization Review Director Megan Smith, RN, Infection Control Lynda James, LPN, Pharmacy Tech Kaye Hamilton, Medical Staff Coordinator

- 1. Call to order
 - a. The meeting was called to order at 11:30 am by Dr. John Chiaffitelli, Medical Director.
- 2. Acceptance of minutes
 - a. The minutes of the October 19, 2023, 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. We are looking to get our Strong Mind Program up and running. There is where we will provide mental health for those in need.
 - b. We have been having a monthly potluck for the staff and to observe birthdays.

- Operations Overview
 - We have completed the cafeteria floor and new equipment is in place.
 - We are continuing to work with EMS to enhance patient care.
 - We continue to have some coding issues, but we are catching those before claims go to insurance companies to ensure we are timely filling and that we have clean claims.
 - We continue to look for a Dr. and a Nurse Practitioner for the clinic with Amy Sims turning in her resignation.
 - We are also looking at a Part-Time Practitioner for the clinic so we do not have any drop in service after Amy departs us.
 - We are starting to do a thorough look at all our contracts to ensure we utilize them.
 - As of January 1, 2024, our cafeteria will no longer be serving lunch to the staff for free. There will be a price list coming soon.

Written report remains in the minutes.

- 5. Committee / Departmental Reports
 - a. Medical Records
 - i. Written report remains in the minutes.
 - b. Nursing
 - Patient Care
 - MRMC Education included:
 - 1. Flu vaccines administered through the month.
 - 2. Education regarding EMTALA requirements/documentation.
 - 3. Hand hygiene education and monitoring by Infection Control..
 - MRMC Emergency Department reports no patient Left Without Being Seen (LWBS).
 - MRMC Laboratory reports zero contaminated blood culture set(s).
 - MRMC Infection Prevention reports 0 CAUTI's.
 - MRMC Infection Prevention report 0 CLABSI.

Client Service

- Total Patient Days increased with 263 patient days in October as compared to 256 patient days in September. This represents an average daily census of 9. In addition, MRMC Emergency Department provided care to 138 patients in October.
- MRMC Case Management reports 22 Total Admissions for the month of October 2023.

• October 2023 COVID-19 Stats at MRMC: Swabs (6 PCR & 58 Antigen) with 9 Positive.

Preserve Rural Jobs

- MRMC placed one part time CNA to full-time and have placed a need for a part-time CNA.
- All allowable/available positions regarding nursing staff filled at this time!

Written report remains in minutes.

- c. Infection Control
 - Old Business
 - a Employee Influenza Vaccine Program
 - MRMC Starts flu shot vaccinations
 - New Business:
 - a. N/A
 - Data:
 - a, N/A
 - Policy & Procedures Review:
 - a. Pending Corporate Review of Manual.
 - Education/In Services
 - a. Monthly EPIC meeting for IP education
 - b. Weekly Call with Corp. IP
 - c. Weekly Lunch and Learn
 - d. Staff education on influenza vaccines and hand hygiene
 - Updates: No updates at this time.
 - Annual Items:
 - a. Completed March 2023

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 the building. Flooring in Nurses break area and Med Prep room needing replaced Tile is on site.
 - b. 15 AMP Receptacles all 15 AMP Receptacles will be replaced with 20 AMP Receptacles throughout Hospital – replacement has started. Complete in needed areas 9-22-2023.
 - c. Replace all receptacles on generator circuit at Clinic with red receptacles. Complete 9-29-2023.
 - d. ER Provider office flooring needing replaced. Tile is onsite.
 - e. Damaged ceiling tile in patient area due to electrical upgrade-will need more tile to complete.

- 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. Chrome pipe needs cleaned and escutcheons replaced on hopper in ER - - Could not replace escutcheons due to corroded pipping in wall. Capped off leaking pipe under the floor to stop leaking. Will remove or cover hopper.
- i. Ceramic tile around toilet paper dispenser is missing in restroom in Room 17.
- j. ISO Caddys installed in patient rooms ISO Caddys on site. All Caddys installed except rooms 16 and 28. Those rooms were occupied.
- k. Sanitizer brackets Brackets onsite Need installed in rooms 17 and 31
- 1. EOC, EM and Life Safety Plans will be evaluated and approved in the November EOC meeting.
- i.i.i. New Business
 - a. Approve Annual HVA Assessment 1^{st} Kelley Martines and 2^{nd} Josey Kenmore

Written report remains in minutes.

- e. Laboratory
 - i. Tissue Report None October, 2023
 - i.i. Transfusion Report Approved October, 2023
- f. Radiology
 - i. There was a total of 178 X-Rays/CT/US
 - i.i. Nothing up for approval
 - i.i.i. Updates:
 - The PM was completed on the CT and the Xray Room. Written report remains in minutes.
- g. Pharmacy
 - i. Verbal Report by Pharmacy Tech.
 - 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 Will be held on December 14, 2023
 - iv. Solu-Medrol has been added to the shortage list. We have plenty in house at this time.

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
 - \circ Grievance 0
 - 0 1 Fall with no injury
 - 0 Fall with minor injury
 - \circ 0 Fall with major injury
 - \circ Death -2
 - \circ AMA/LWBS 6/0
- Quality
 - Quality Minutes from previous month included as attachment.
- HIM H&P Completion 20/20 = 100% Discharge Summary 20/20 = 100%
- Med event -3
- Afterhours access was 97
- Compliance

Written report remains in minutes.

- k. Utilization Review
 - i. Total Patient days for October: 263
 - i.i. Total Medicare days for October: 222
 - i.i.i. Total Medicaid days for October: 1
 - iv. Total Swing Bed days for October: 225
 - v. Total Medicare SB days for October: 202 Written report remains in the minutes.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for October, 2023.

6. New Business

a. Review & Consideration of Approval of HIPAA Officer Appointment: MRMC – HIPAA Officer Appointment – Tim Hopen

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve HIPAA Officer Appointment – Time Hopen.

b.Review & Consideration of Approval of Policy & Procedure: MRMC – 340B Drug Policy - Revision

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – 340B Drug Policy – Revision

c.Review & Discussion of Approval of Policy & Procedure: MRMC – On-Call and Call Back Responsibilities Policy for Radiology

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

Policy & Procedure: MRMC – On Call and Call Back Responsibilities Policy for Radiology.

d.Review & Discussion of Approval of Policy & Procedure: MRMC – Nursing Education for Patient Belongings and Valuables.

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure:

MRMC – Nursing Education for Patient Belongings and Valuables.

- e.Review & Consideration of Approval of Policy & Procedure: MRMC Drug Diversion Policy **i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Drug Diversion Policy.
- f.Review & Consideration of Approval of Policy & Procedure: MRMC Temporary Absence Release for Patients Policy

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Temporary Absence Release for Patients Policy.

g. Review & Consideration of Approval of Policy & Procedure: MRMC – Patient Belongings and Valuables Policy

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Patient Belongings and Valuables Policy.

h. Review & Consideration of Approval of Policy & Procedure: MRMC – Temporary Absence Release Form

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Temporary Absence Release Form.

i.Review & Consideration of Approval of Policy & Procedure: MRMC – Patient Belongings List

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Patient Belongings List.

j. Review & Consideration of Approval of Policy & Procedure: MRMC – Patient Valuables Record Form

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Patient Valuables Record Form.

k. Review & Consideration of Approval of Policy & Procedure: MRMC – Lost and Found Property Report

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Lost and Found Property Report.

l.Review & Consideration of Approval of Policy & Procedure: MRMC – Lost and Found Log

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Lost and Found Log

m.Review & Consideration of Approval of Policy & Procedure: MRMC – Behavioral Observation Checklist

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Behavioral Observation Checklist.

n.Review & Consideration of Approval of Policy & Procedure: MRMC – Medication Error and Near Miss Report

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Medication Error and Near Miss Report.

o. Review & Consideration of Approval of Policy & Procedure: MRMC – Extravasation Management Strategies – Appendix

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Extravasation Management Strategies – Appendix.

p. Review & Consideration of Approval of Policy & Procedure: MRMC – Intravenous (IV) Extravasation Management Treatment Policy

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

Procedure: MRMC – Intravenous (IV) Extravasation Management and Treatment Policy.

7. Adjourn

a. Dr Chiaffitelli made a motion to adjourn the meeting at 11:50 am.

Medical Director/Chief of Staff

Date