

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

Meeting Location: OR	Reporting Period: February 2024	
Chairperson: Dr Gilmore	Meeting Date: 03/14/24	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1402	Actual Finish Time:
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: tentatively 04/11/2024 @ 14:00	

Mission: To provide our Mangum community and surrounding counties with convenient, gold-standard “dependable and repeatable” patient care, while assisting and supporting all their medical healthcare needs.

** Items in blue italics denote an item requiring a vote*

I. CALL TO ORDER				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Call to Order	QM	1 min	Called to order at 1402	Approval: First — Jennifer Dryer/ Second – Chaisty Howell
II. COMMITTEE MEETING REPORTS & APPROVAL OF MINUTES				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Quality and Patient Safety Committee 1. <i>Approval of Meeting Minutes</i>	Denise Jackson	2 min	Meeting minutes – Jan 2024	Approval: First – Kelley, Second – Tonya
B. Environment of Care (EOC) Committee	Mark Chapman	2 min	Jan – no compliance visits, waiting on tile for replacement (vender is out)	Approval: First – Meghan, Second – Chasity

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

1. <i>Approval of Meeting Minutes</i>			Feb – no compliance visits, 24 extinguishers check, no drills, still waiting on tile	
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	No process changes, sepsis screening by nursing is going well, 2 c-diff pt for reporting period, both high risk pt d/t ABT usage, still awaiting in 3 rd part vendor interface for AUR information ICRA/ IP appointment approved	Approval: First – Kelley, Second – Melissa
D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	P&T scheduled for March 21, 2024	
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jennifer Dryer/ Kaye Hamilton	2 min	Jan – Coders are sending back progress notes, SOAP is not enough information, providers aware (Credentialing – David Arles, Dr Nagy) Feb – There are some unsigned charts/instructions out, HIM is working on getting caught up from covering AP for the month (Credentialing – Dr Gilmore, Dr Langley)	Approval; First –Chasity, Second - Kelley
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Patient Portal deficits, current method of making sure it is completed in Acute/SWB not working	Approval: First – Kelley, Second – Jennifer
III. DEPARTMENT REPORTS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	No restraints 3 PRBC with no reactions 1 code blue, pt to er with cpr in progress, unsuccessful, pt expired CNO continues to monitor pain reassessment rate, there is a CPSI issue that is not triggering the follow up in the system that CPSI is working on	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

			Nurse meeting done 2/13/24	
B. Radiology	Pam Esparza	2 min	4 films repeated for the month MedRad injector had PM with no issues noted	
C. Laboratory	Tonya Bowan	5 min	2 rejected specimens – 1 due to QND, n1 due to no name, education with lab dept, they will not except specimen without proper labeling Mean and SD coag changed on analyzer according to historical data Education on; QC start times on weekends and hematology flag	
D. Respiratory Care	Heather Larson	2 min	30 neb changes for the month RT continues to work on replacing old flowmeters to new ones in all rooms RT continues with frequent patient room checks for complete suction set ups	
E. Therapy		2 min	Pt with assistive needs – 11 Total sessions for the month; -PT 173 -OT 142 -ST 0 Improved Standard Assessment Scores: PT 10/10 OT 10/10 ST – no ST patients PT director to return soon	
F. Materials Management	Josey Kenmore	2 min	1 Back order No late orders due to vendors No recalls affecting the hospital Requisition process implementation is under way, working out problem areas as needed	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

G. Business Office	Dannille Cooper	2 min	Jan – Copy of driver's license still getting missed, nurses reminded to note if pt does not have it. - 3 instances of nurses missing id after BO hours Feb – Copy of driver's license and Insurance still getting missed after BO hours, 5 licenses/2 insurance cards, CNO/nurses are being made aware of this weekly	
H. Human Resources	Bethany Moore	2 min	4 background checked completed for the 4 new employees during the reporting period 1 LPN who has not turned in updated BLS, HR has reached out with due date multiple times and will reach out again this week	
I. Environmental Services	Mark Chapman	2 min	Jan – no changes/procedures/protocol/regulation visits, 10 terminal room cleans completed Feb - no changes/procedures/protocol/regulation visits, 10 terminal room cleans completed, Manager plans to do spot checks on terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	Jan – no issues to report Feb – no issues to report (generator inspection completed March, will provide data in next month's meeting)	
K. Dietary	Marla Abernathy	2 min	100% on cleaning schedules for the month, corporate filling in until manager is hired	
L. Information Technology	Tim Hopen	2 min	Inspected servers and UPS in server room, all okay. Need replacement monitors and other small IT equipment – will order these when new vendor is set up	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

IV. OLD BUSINESS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Old Business	QM	2 min	Corporate Bad Debt Policy Appoint Denise Jackson for Risk Manager 2024	Approved Feb 2024

V. NEW BUSINESS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. New Business	QM	2 min	See Policy and Appointment below	

VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	2 min	<p>4 ER pts;</p> <p>1.) pt to the ER for c/o weakness x 6 weeks. Pt seen by provider and discussed options, made aware due to patient's triage level and other high acuity pts in the er there would be a longer wait time than normal, pt decided they did not want to wait and signed out ama, R/B discussed with pt.</p> <p>2.) Pt to the er for initial c/o, pt seen by provider, options discussed, and testing performed, made aware due to patient's triage level and other high acuity pts in the er there would be a longer wait time than normal. testing preformed/ awaiting results and provider follow up when pt decided they no longer wanted</p>	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

			<p>to wait. R/B discussed, pt signed out AMA.</p> <p>3.) Pt to the ER for initial c/o, provider eval and testing performed, provider discussed repeat testing and follow up based on those results. Pt did not want to wait to complete repeat testing. Discussed R/B with patient, pt signed out AMA.</p> <p>4.) Pt to er for initial c/o, reports HA since beginning treatment for other illness x 1 month, reports at home tx not effective, requesting pain meds. Provider evaluated and testing preformed, provider wanted to treat based on abnormal lab findings, however pt declined only wanting pain medications. Provider discussed need for treatment, pt declined. R/B discussed, and patient signed out AMA.</p>	
B. Case Management	CM	8 min	<p>21 pt discharged without MyCare Corner per CPSI. The Activity director has been directed to monitor this, however no change has been noted in pt numbers. No trend noted with numbers, there is a large variety of education misses.</p>	<p>On the go forward – CM will be responsible for completion of the MyCare Corner with all Acute/SWB admits as part of the interview that's done for each new admission, BO will continue with all outpatient services and print data for those patients without email addresses.(BOM has educated dept on how this process should be done w/o email address in BO side of CPSI) QM will monitor next month's data for improvement or trend with missing MyCare education. Reminded all of the different sub</p>

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

				types of charts falling into the denominator thus requiring education in each chart type to accurately show numerators.
C. Risk Management	QM	10 min	<p>No complaints/grievances</p> <p>Other – 1 in-pt with noted skin tear by aide while in the shower, unknown cause, skin tear cleaned per provider orders</p> <p>Falls w/o injury - 1 in-pt found sitting on the floor, attempting to transfer without assist, reports hitting shoulder with no injuries found on assessment. Fall precautions in place prior to fall: low bed, non-skid socks, routine rounding, call light in reach, room free of obstructions.</p> <p>1 in-pt found sitting on the floor, pt attempted transfer to restroom independently, no injures notes. Fall precautions in place prior to fall: bed alarm, low bed, non-skid socks, routine rounding, call light in reach, room close to nurse station. Charge reports alarm did not sound.</p> <p>1 in-pt with call light on, upon nurse entering room pt was found on the floor, reports call light pressed then attempted transfer, unable to get up independently and slid off the bed. No injuries</p>	Discussed with CNO adding proper Maintenace notification if there is a fall and bed/chair alarm does not alert. CNO will add this to nursing meeting for March

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

			<p>noted/reported. Fall precautions in place prior to fall: low bed, room free of obstructions, call light in reach. 1 in-pt found on floor by therapy, reports that patient was getting a blanket, no injuries noted. fall precautions in place prior to fall; bed alarm, close to nurses station, routine rounding, non-skid socks on, call light in reach</p> <p>Mortality -</p> <p>1 ER pt - pt found down in the home, family called EMS with CPR started on scene, pt brought to ER with CPR continued. No improvement noted from CPR efforts, provider spoke with family regarding pt state/lack of progress with CPR efforts, CPR efforts stopped, pt expired.</p> <p>1 SWB pt admitted post-surgical services w/hx of terminal dx, during the stay pt showed decline, family aware and in agreeance with comfort care, DNR on file. Pt expired while in patient. 1 SWB admitted w/primary dx and multiple secondary dx; During hospitalization pt resp/kidney status continually declined, family aware and accepting of pt prognosis. Pt w/DNR on file. Pt expired while in patient.</p>	
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Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

			1 SWB, admitted through the ER for terminal dx at home, during the hospital stay PT had slow progressive decline, family aware with DNR on file. Pt expired while in-patient	
D. Nursing	CCO	2 min	Total number of charts with pain medication administration were accounted for, excluding duplicate charts. Post assessment, 2 PO and 1 IV, administration(s) not completed. Issue brought to CPSI's attention in regard to the notification for pain reassessment not working properly. Nurses educated regarding the importance of f/u with pain reassessments and not relying on the system to prompt them	
E. Emergency Department	CCO/QM	5 min	7 ER readmits - No trends or patterns were identified, no further action needed 29 incomplete logs – QM began notifying CNO and Nurse directly through Tiger Connect in the month of March, monitoring numbers for improvement	Readmits were not due to lack of education, care on MRMC part
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – March 21, 2024	
G. Respiratory Care	RT	2 min	No RT issues to report, continue monitor suction set ups and 100% on chart checks	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

H. Wound Care	WC	2 min	No in-pt wound development for the month	
I. Radiology	RAD	2 min	1 CT not read w/i hour reporting time, radiologist busy during that time	
J. Laboratory	LAB	5 min	1 CBC/UA not completed w/i 1 hour, CBC required diff/UA required microscopic read. Staff limited in lab during this time.	
K. Infection Control/Employee Health	IC/EH	5 min	2 hospital acquired C-diff; 1.) Pt on multiple ABT began w/loose stools, testing preformed/placed on iso and treatment began 2.) Pt on extended abt for UTI, loose stools on admit, testing preformed/placed on iso and treatment began. MR suggest pt with loose stools prior to admit	Ongoing education on transmission-based precautions. Both patient's high risk, one patient symptomatic prior to hospital admit as noted in pt med record that was sent to facility
L. Health Information Management (HIM)	HIM	2 min	1 H&P not complete, in providers box for completion 1 progress notes not complete (1 Acute/1 SWB) in providers box for completion	
M. Dietary	Dietary	2 min	100 % on cleaning scheduled	
N. Therapy	Therapy	2 min	100%	
O. Human Resources (HR)	HR	2 min	1 BLS due, employee contacted, and aware certification is due 3/19/24 Annual education – 3 employees have not completed education requirements, all aware of deadline 4/1/24	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

P. Business Office	BOM	2 min	1 OP service with no copay collected or payment agreement signed – BO with staffing issues in Feb	
Q. Environmental Services	EVS	2 min	10/10 on room cleans; Manager to do random spot checks on terminal cleans	
R. Materials Management	MM	2 min	Requisition system still in process; Implemented Requisitions in the Following departments: Lab, Clinic, Business Office, Radiology, Pharmacy, and currently RT implementation is waiting on clinical errors to be corrected.	
S. Life Safety	PO	2 min	NO issues, vent hood clean completed in January	
T. Emergency Preparedness	EP	2 min	4 employees oriented, no drills for the month	Planning a tornado drill
U. Information Technology	IT	2 min	6 events, 1 server still needs replaced	
V. Outpatient Services	Therapy	2 min	Data tool being added to workbook	
W. Strong Minds	N/A	N/A	N/A	N/A
VII. POLICIES & PROCEDURES				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	Extravasation Management Strategies	Held
			Moderate Sedation Policy	Held
			Conditions of Admission	Held
			Moderate Sedation Self Study Guide and Test	Held
			Consent for Moderate Sedation	Held
				Held

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

		Moderate Sedation/Procedure Provider Form	Held
		Moderate Sedation/Procedure Nursing Form	Held
		After Sedation Patient Education for the Adult Pamphlet	Held
		After Sedation Patient Education for the Child Pamphlet	Held
		Moderate Sedation Audit Tool	Approved; first Nick, Second Melissa
		Seasonal Influenza Patient Vaccine Consent/Declination Form	Approved; first Nick, Second Melissa
		Patient Pneumococcal Vaccine Consent/Declination Form	Approved; first Nick, Second Melissa
		Contact and Respiratory Precaution Signage	Held
		Transmission-Based Precautions: Preventing Transmission of Infectious Agents Policy	Approved; first Nick, Second Melissa
		Patient Influenza and Pneumococcal Vaccination Policy	Approved; first Nick, Second Melissa
		Seasonal Influenza Patient Vaccine Standing Order	Approved; first Nick, Second Melissa
		Patient Pneumococcal Vaccine Standing Order	Held
			Held

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

			<p>Enteral Tube Management Policy</p> <p>Intravenous (IV) Extravasation Management and Treatment Policy</p> <p>Refusal of Transfer to VA Medical Facility Form</p> <p>Personal Dress and Appearance Policy</p> <p>ICRA</p> <p>2024 Mangum Annual Quality and Safety Plan</p> <p>2024 Mangum Annual Quality Plan Evaluation</p> <p>MRMC Lab Policy Manual (see TOC) and including the following lab policies:</p> <ol style="list-style-type: none"> 1. Reporting COVID to State 2. Specimen Labeling Policy 3. Lab Plan of Care 4. Quality Management Plan 5. Competency and Orientation Plan 6. Employee Signatures 7. Lab Ergonomic Plan 8. Performance Improvement Plan 9. Blood and Urine Centrifuges 10. Delegation of Duties 	<p>Held</p> <p>Approved; first Nick, Second Melissa</p> <p>Approved; first Nick, Second Melissa</p> <p>Held</p> <p>Held</p> <p>Held, including #1-26</p> <p> *ALL policies/procedures marked as HELD – were requested HELD for a local review to be done at MRMC before approving. All Directors aware of listed policies/procedure that are HELD will be sent out via email for a local 14-day review, Kaye requested that providers be included in this review process, and Kaye will email those contacts to QM.</p>
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Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

			11. Error Investigation and Documentation 12. Use and Care of PPE 13. Pathologist Review of Results 14. Proficiency Testing Policy 15. Reporting to OSDH 16. Specimen Rejection 17. Specimen Storage 18. Turn-Around Times 19. Corrected Reports 20. Chemical Hygiene and Exposure Control 21. Blood Bank Alarm System 22. Blood Culture Collection 23. Evacuated Tube Collection 24. FDA Medical Device Reporting Procedure 25. Look back for Transmitted Disease Policy 26. Platelet Poor Plasma	
B. Review and <i>Approve to Retire</i>				
VIII. PERFORMANCE IMPROVEMENT PROJECTS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024

A. Performance Improvement Project (PIP)	QM	2 min	The following 2024 proposed PIPs are at Corporate for approval - 1.) Bed side scanning 2.) Pain Assessment	
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IX. OTHER

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Risk Manager Appointment	QM	1 min	Approved Feb 2024	
B. Infection Preventionist	QM	1 min	Approve - Megan Smith for Infection Prevention for MRMC for the 2024 year	Approval; First - Nick Second - Melissa

X. ADJOURNMENT

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Adjournment	QM	1 min	There being no further business, meeting adjourned by seconded by Nick/Melissa at 1455	

MEMBERS & INVITED GUESTS

Voting MEMBERS				
Kelley Martinez <input type="checkbox"/>	Nick Walker <input type="checkbox"/>	Chasity Howell <input type="checkbox"/>	Meghan Smith <input type="checkbox"/>	Danielle Cooper
Tonya Bowen <input type="checkbox"/>	Pam Esparza <input type="checkbox"/>	Carlos Mendoza	Jennifer Dreyer	Brittany Gray <input type="checkbox"/>
Lynda James	Bethany Moore	Tim Hopen (teams) <input type="checkbox"/>	Kaye Hamilton (teams) <input type="checkbox"/>	Mark Chapman <input type="checkbox"/>
Melissa Tunstall <input type="checkbox"/>	Dr Gilmore (teams) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Voting MEMBERS				
Denise Jackson <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVITED GUESTS				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date Minutes Approved:	
Signature of ChairPerson:	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for March 2024 and Meeting Minutes for February 2024