Mangum Regional Medical Center

Quality and Patient Safety Committee Meeting Agenda for June 2025 and Meeting Minutes for June 2025

Other	
Other	

Meeting Location: OR	Reporting Period: May 2025	
Chairperson: Dr Gilmore	Meeting Date: 06/11/2025	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1402	Actual Finish Time: 1442
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: tentativel	y 07/10/2025 @ 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	Agenda Item Presenter Time Discussion/Conclusions Decision/Action Items					
		Allotted				
A. Call to Order	QM	1 min	Called to order at 1402	Approval: First – Chasity, Second– Dr G		
II	COMMITTE	E MEETIN	G REPORTS & APPROVAL OF MIN	IUTES		
Agenda Item	Presenter	Time	Discussion/Conclusions	Decision/Action Items		
		Allotted				
A. Quality and Patient Safety	Denise	2 min	Meeting minutes – May 2025	Approval: First – Kelley, Second – Chasity		
Committee	Jackson		- ·			

1. Approval of Meeting Minutes				
B. Environment of Care (EOC)	Mark	2 min	Meeting minutes – May 2025	Approval: First – Kelley, Second – Meghan
Committee	Chapman			
1. Approval of Meeting Minutes	-			
C. Infection Control Committee	Meghan	2 min	Meeting minutes – May 2025	Approval: First – Chasity, Second– Treva
1. Approval of Meeting Minutes	Smith		ICRA – approved	
D. Pharmacy & Therapeutics (P&T)	Chelsea	2 min	Meeting minutes – None	
Committee	Church/		Next P&T - June 19, 2025	
1. Approval of Meeting Minutes	Lynda James			
E. Heath Information Management	Jessica	2 min	Meeting Minutes – May 2025	Approval: First – Leticia, Second – Meghan
(HIM)/Credentialing Committee	Pineda/ Kaye			
1. Approval of Meeting Minutes	Hamilton			
D. Utilization Review (UR) Committee	Chasity	2 min	Meeting Minutes – May 2025	Approval: First – Pam, Second – Jessica
1. Approval of Meeting Minutes	Howell			
			PARTMENT REPORTS	
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	0 restraints	
			0 code blues	
B. Radiology	Pam Esparza	2 min	3 films repeated.	
C. Laboratory	Tonya	8 min	25 repeated labs	
	Bowan		2 blood cultures for the month with no	
			contaminates	
D. Respiratory Care	Heather	2 min	14 neb changes for the month	EKG cords are being wrapped tightly when
	Larson		0 vent days	put up causing them to break, CEO is
				aware, and other directors need to make
	C1 :	2 - :	T 1 1 4 CC ' D C 1	staff aware
E. Therapy	Chrissy	2 min	Total # of Sessions Preformed	
	Smith		137 -PT 117 -OT	
			117 -01 10 -ST	
			Improved Standard Assessment Scores:	
			10 - PT 10 - OT	

		1	1 CT	<u></u>
			1 - ST	
F. Materials Management	Waylon Wigington	2 min	5 back orders,0 late orders 0 Recalls	Working on getting chargeables stickered and stickered non-chargeables fixed
G. Business Office	Desarae Clinesmith	2 min	DL – 98%	Ongoing issues with DL/ins not being collect with ER visits after BO hours, BO is still sending missing information to CNO/BMO daily
H. Human Resources	Leticia	2 min	100%	-
	Sanchez		No new hires for the reporting period	
I. Environmental Services	Mark Chapman	2 min	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked 0 boiler checks – Boiler off 04/30/25 for the season 1 generator/transfer switch inspection	
K. Dietary	Treva Derr	2 min	99%	Education to employees on maintaining daily temps, monitoring for trends with this and further improvement actions as necessary
L. Information Technology	Desirae Galmore	2 min		
		IV	OLD BUSINESS	
		V.	NEW BUSINESS	
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. New Business	QM	2 min	See policy/procedures below	
VI. OUALIT	YASSURANC	E/PERFOI	RMANCE IMPROVEMENT DASHB	OARD REPORT
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items

A. Volume & Utilization	CM	5 min	AMA - None	
B. Case Management	CM	8 min	0 - re-admit	
C. Risk Management	QM	10 min	Deaths - 1 Patient admitted to SWB for comfort care, DNR on admit. Patient declined over hospital course as anticipated per end stage dx process. Patient expired while in patient. Complaints - None Grievances - None Workplace Violence Events - None Falls - 1 w/o injury - 1 w/minor injury 1 fall w/o injury - 1 in patient was transferring from chair to bed, with assist x 2 and gait belt. Pt lost balance when turning to set and started to fall, pt was assisted to the floor by staff with no injuries noted.	Palls - 1.) no post fall precautions added 2.) Pt was evaluated in the ER for initial complaint; provider evaluated post fall and noted no other injuries from the fall other than abrasion to knee Other - Line events (1) – Provider notified with order for xray obtained, provider okay's continued use of PICC. IP and CEO notified as well of PICC length discrepancy. Skin tear (1) – New iv started and first aid was administered to skin tear with Coban used in place of tape due to fragile skin. Other (2) –1.) No open areas or other issues noted.
			1 fall w/minor injury -1 ER patient was coming into the ER and tripped and fell. Patient states they were in a hurry and tripped. Ambulatory per normal post fall	2.) Heels floated, provider, family notified. Wound care ordered for further eval and treatment as warranted.
			Other – 3	

			Line events (1) – During weekly PICC dressing change, House sup noted that the dressing was saturated, external length was noted to be 5 cm with previous documentation noted at 3 cm. Skin tear (1) – Pt with c/o pain to iv site, nurse noted that iv was leaking with flushes. This iv was d/c'd and during removal of the tape, pt received a skin tear. Other (2) – 1.) During rounds, pt noted to have bruising to (r) 5th toe. Origin unknow and pt is not able to recall events that may have lead to bruising. 2.) Nursing noted pressure ulcer to pt heel during rounds.	
D. Nursing	CCO	2 min	97% - preferred pharmacy 1 was not completed by the house sup, CNO notified Nurse	CNO continues to monitor pain assessments and bed side scanning, there seems to be a TrueBridge issue with bedside scan report that IT has been made aware of. House Sups continue to monitor PRN pain medication reassessments to ensure completion
E. Emergency Department	CCO/QM	5 min	1.) ER log compliance – 96%2.) EDTC Data – 75%	1.) ER log compliance – continued trend with shift/nurses, CNO and Nurses are made aware of missing info in real time, however trend continues

				2.) 2 charts do not reflect that packet was sent, 1 nurse assumes it got sent to the receiving facility, 1 reports that this is not what other facility does. CNO and Nurses have been made aware of correct procedure multiple times. Monitoring for staff trend on the go forward
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – June 2025 After hours access - 57 ADR - 0 Med errors – 0 Dose omissions – 4	Dose omissions –3 of the medications were documented as unavailable without notification to Pharmacy staff and where available. CNO made aware of this and Pharmacist will address Medical Staff of this
G. Respiratory Care	RT	2 min	0 unplanned decannulation 100% resp assessments 100% on Chart checks	
H. Wound Care	WC	2 min		D
I. Radiology	RAD	2 min	0- CT reactions 100% - pt site verification	
J. Laboratory	LAB	5 min		
K. Infection Control/Employee Health	IC/EH	5 min	0 – Inpt HAIs 0 – MRDO 0 – VAE 0 – Cdiff 0 – CAUTI 0 - CLASBI	

L. Health Information Management	HIM	2 min	- D/C Note Compliance	
(HIM)			- Progress Notes	
			- ED DC Instructions	
			- ED provider Dx	
M. Dietary	Dietary	2 min	100% on cleaning schedules	
			on Daily Meal counts	
N. Therapy	Therapy	2 min	Gait belt usage – 100%	
O. Human Resources (HR)	HR	2 min	No new hires for the reporting period	
P. Business Office	BOM	2 min	Cost shares – 100%	
			Med Neccesity Verification – 100%	
Q. Environmental Services	EVS	2 min	10/10 on room cleans	
R. Materials Management	MM	2 min	Electronic Requisitions –	
	DO.			
S. Life Safety	PO	2 min	Fire extinguisher Inspections -100%	
			Egress checks – 100%	
T. Emergency Preparedness	EP	2 min	No new hires for the month	
U. Information Technology	IT	2 min	32 IT events for the month	
V. Outpatient Services	Therapy	2 min	Temp logs – 100%	Outpatient therapy services remain busy
W. Strong Minds	N/A	N/A	Coming 2025	
		VII. POL	ICIES & PROCEDURES	
Agenda Item	Presenter	Time	Discussion/Conclusions	Decision/Action Items
_		Allotted		
A. Review and <i>Approve</i>	QM	10 min	1.) Systems Monitoring and Assessment	1.) Approval: First – Kelley, Second –
			Policy	Meghan
			2.) Win10 Configuration Standard Policy	2.) Approval: First – Kelley, Second – Nick
			3.) Employee Access to Personal Medical Records Policy	3.) Approval: First – Kelley, Second – Chasity

		4.) Asset Management Policy				
		5.) Device Retirement Policy	4.) Approval: First – Kelley, Second – Meghan			
		6.) Therapeutic Phlebotomy Policy	5.) Approval: First – Kelley, Second –Nick			
		7.) Patient Consent for Therapeutic Phlebotomy	6.) Approval: First – Tonya, Second – Chasity			
		8.) Therapeutic Phlebotomy Record				
		9.) IRCA	7.) Approval: First – Tonya, Second – Kelley			
			8.) Approval: First – Tonya, Second – Meghan 9.) Approval: First – Kelley, Second – Jessica			
	VIII. PERFORMANCE IMPROVEMENT PROJECTS					
	IX. OTHER					
		. ADJOURNMENT				
Agenda Item	Presenter Time Allotted	Discussion/Conclusions	Decision/Action Items			

A. Adjournment	QM	1 min	There being no further business, meeting	
			adjourned at 1442 by Chasity seconded	
			by Leticia	

MEMBERS & INVITED GUESTS							
Voting MEMBERS							
Kelley Martinez	Nick Walker	Carlos Mendoza	Lynda James	Chrissy Smith			
Treva Derr	Chasity Howell	Jessica Pineda	Desare Clinesmith	Meghan Smith			
Pam Esparza	Waylon Wigington	Tonya Bowen	Leticia Sanchez	Diane Sanders (teams)			
Chelsea Church (teams)	Dr Gilmore (teams)	D. Galmor (teams)	Kaye Hamilton (teams)				
Non-Voting MEMBERS							
Denise Jackson							