

**Mangum Regional Medical Center**  
**Quality and Patient Safety Committee Meeting**  
**Agenda for Sept 2024 and Meeting Minutes for Sept 2024**

Other

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Other

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<b>Meeting Location: OR</b>	<b>Reporting Period: Aug 2024</b>	
<b>Chairperson: Dr Gilmore</b>	<b>Meeting Date: 09/12/24</b>	<b>Meeting Time: 14:00</b>
<b>Medical Representative: Dr Gilmore</b>	<b>Actual Start Time: 1402</b>	<b>Actual Finish Time: 1433</b>
<b>Hospital Administrator/CEO: Kelley Martinez</b>	<b>Next Meeting Date/Time: 10/10/2024 @ 14:00</b>	

**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	<b>1 min</b>	Called to order at 1402	Approval: First --Pam, Second – Heather

**II. COMMITTEE MEETING REPORTS & APPROVAL OF MINUTES**

**Mangum Regional Medical Center**  
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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 – June/ July 2024	Approval: First – Danielle Second – Brittany
B. Environment of Care (EOC) Committee 1. <i>Approval of Meeting Minutes</i>	Mark Chapman	2 min	Aug Min	Approval: First – Brittany, Second – Pam
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	Aug Min	Approval; First –Brittany, Second - Chrissy
D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	2 <sup>nd</sup> Quarter Min	Approval: First – Meghan, Second – Pam
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jennifer Dryer/ Kaye Hamilton	2 min	No Credentialing for the month	
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Aug Min	Approval; First – Brittany , Second – Meghan

**III. DEPARTMENT REPORTS**

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	0 restraints 7 PRBC with no reactions 1 code blue; successful resuscitation with transfer to higher level of care for further treatment	
B. Radiology	Pam Esparza	2 min	3 films repeated	Encouraged Director to monitor and notate reasons for repeat films; movement, artifact, tech error, etc
C. Laboratory	Tonya Bowan	8 min	70 repeated labs, 3 rejected , needed 5 replacement requisitions those where obtained. Change to CPL services on	

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			8/19/24. Dimension EXL pm completed on 8/1/24, working on updating 2 missing services reports from Seimens. 2 employees with certifications that were updated this month. 10 pt reports that has to be reported for calibration issues, those were fixed	
D. Respiratory Care	Heather Larson	<b>2 min</b>	29 neb changes for the month 0 vent days	All Hamilton T1 vents are now Bipap/CPAP compatible
E. Therapy	Chrissy Smith	<b>2 min</b>	Pt with assistive needs –  Total sessions for the month; 152 -PT 110 -OT 1 -ST Improved Standard Assessment Scores: 11 - PT 10 - OT 0 - ST	Out pt remains busy and the Pt gym is doing good, no problems
F. Materials Management	Brittany Gray	<b>2 min</b>	4 back orders, No late orders, No recalls	MM having issues with Quality Reporting/Workbook, Director has reached out to IT and is waiting on fix
G. Business Office	Dannille Cooper	<b>2 min</b>	Ins card/DL being missed with registering patients	BOM to monitor for trends
H. Human Resources	Bethany Moore	<b>2 min</b>	No new employees for Aug, completed 4 background checks in August for Sept new hires	
I. Environmental Services	Mark Chapman	<b>2 min</b>	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	<b>2 min</b>	24 extinguishers checked	

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			boiler turned off for warm weather months on 4/30/24; no inspections while boiler is not running  1 generator/transfer switch inspection	
K. Dietary	Treva Durr	<b>2 min</b>	Director not present, will defer til next month	
L. Information Technology	Tim Hopen	<b>2 min</b>	Director not present, will defer til next month	
<b>IV. OLD BUSINESS</b>				
<b>Agenda Item</b>	<b>Presenter</b>	<b>Time Allotted</b>	<b>Discussion/Conclusions</b>	<b>Decision/Action Items</b>
A. Old Business	QM	5 min	None	
<b>V. NEW BUSINESS</b>				
<b>Agenda Item</b>	<b>Presenter</b>	<b>Time Allotted</b>	<b>Discussion/Conclusions</b>	<b>Decision/Action Items</b>
A. New Business	QM	2 min	See Policy and Appointment below	
<b>VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT</b>				
<b>Agenda Item</b>	<b>Presenter</b>	<b>Time Allotted</b>	<b>Discussion/Conclusions</b>	<b>Decision/Action Items</b>
A. Volume & Utilization	CM	<b>5 min</b>	AMA - 1 in pt and 2 ER AMA pt for the month, no trend noted for AMAs.	
B. Case Management	CM	<b>8 min</b>	3 re-admits for the month; 2 d/c home with decline at home. 1 d/c for procedure and returned	Discussed with CM monitoring to make sure all due diligence has been done prior to pt D/C to help decrease a potential re-admit
C. Risk Management	QM	<b>10 min</b>	0 complaint / 0 grievances  Other – None	

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**Quality and Patient Safety Committee Meeting**  
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			<p><b>Falls -</b>  3 in pt falls without injuries – fall precautions in place prior to fall with precautions added as warranted per patient specific needs</p> <p>2 inpt falls with minor injuries – 1 with fall precautions in place sustained skin tear with fall, first aide provided, and post fall precautions added as warranted per patient needs. 1 inpt with fall precautions in place prior to fall, sustained reinjury to current wound, first aide provided and post fall precautions added as warranted per patient needs</p> <p><b>Mortality -</b> 1 inpt; pt had overall decline while in pt related to primary dx, family opted for comfort care and pt expired</p>	
D. Nursing	CCO	<b>2 min</b>	<p>Oral pain reassessment – 95%</p> <p>IV pain reassessment at 67%</p> <p>Pain reassessment in the ER continues to be an issue</p>	
E. Emergency Department	CCO/QM	<b>5 min</b>	<p>2 ER readmits - no trend noted</p> <p>incomplete logs – 3, 1 triage level missing, 1 provider seen by date/time, 1 admit date/time (all travel nurses, both day shift)</p>	<p>QM/CEO continue to monitor log in real time and notify nurses on any missing information, numbers have improved with this</p>

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**Quality and Patient Safety Committee Meeting**  
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F. Pharmacy & Therapeutics (P&T)	Pharmacy	<b>2 min</b>	Next P&T – Dec 2024  After hours access - 77  ADR - None  Med errors – 3 1. Demadex ordered TID, nurse misheard and gave all at once 2-3. Pt missed 2 doses of Meropenem	Med errors – 1-3, nursing advised to clarify orders carefully with provider before entering and providers encouraged to enter orders themselves to help elevate any miss understanding.
G. Respiratory Care	RT	<b>2 min</b>	100% on chart checks	
H. Wound Care	WC	<b>2 min</b>	No inpatient wound development for the month	
I. Radiology	RAD	<b>2 min</b>	2 - delays in reads for the month	Director f/u on these with reports that DIA is very busy as delay in turn around time
J. Laboratory	LAB	<b>5 min</b>	No blood culture contaminations	
K. Infection Control/Employee Health	IC/EH	<b>5 min</b>	No HAI/CAUTI/CALSBI for the month 1 EH incident for the month with fall, WC was completed after evaluation in the ER	EH manual up for approval today, will follow WC case for any issues
L. Health Information Management (HIM)	HIM	<b>2 min</b>	Director not present, will defer until next month	
M. Dietary	Dietary	<b>2 min</b>	Director not present, will defer until next month	
N. Therapy	Therapy	<b>2 min</b>	Out pt remains very busy, PT gym complete and doing well	
O. Human Resources (HR)	HR	<b>2 min</b>	None-due - 90-day competency  Annual education – pt time PT has not completed annual education	Discussed with HR to get with PT director and CEO to decide what next steps should be with PRN employee who has not completed annual education

**Mangum Regional Medical Center**  
**Quality and Patient Safety Committee Meeting**  
**Agenda for Sept 2024 and Meeting Minutes for Sept 2024**

P. Business Office	BOM	<b>2 min</b>	BO is having issues with patient's ID and insurance cards being obtained during visits	Discussed with BOM keeping track of staff and TOS to look closer to at any potential trends with missing info at visits
Q. Environmental Services	EVS	<b>2 min</b>	10/10 on room cleans	No operational issues, continue with bleach-based cleaning solution
R. Materials Management	MM	<b>2 min</b>	Requisitions – All dept except ER/Nursing are submitting requisitions for supplies now	
S. Life Safety	PO	<b>2 min</b>	100%	
T. Emergency Preparedness	EP	<b>2 min</b>	0 employee oriented	
U. Information Technology	IT	<b>2 min</b>	Director not present, will defer until next month	
V. Outpatient Services	Therapy	<b>2 min</b>	Data tool being added to workbook	Email out to creator regarding this still not on workbook
W. Strong Minds	N/A	N/A	N/A	Policies were approved in April 2024 for the SM program, looking for Councilor?

**VII. POLICIES & PROCEDURES**

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	HIPAA Manual Dietary Manual EH Manual Radiology Technician Skills Competency Informed Consent for IV Contrast Procedures	First approval – Meghan Second approval – Brittany

**Mangum Regional Medical Center**  
**Quality and Patient Safety Committee Meeting**  
**Agenda for Sept 2024 and Meeting Minutes for Sept 2024**

			Contrast Extravasation Instructions Form Diagnostic Imaging – Pregnancy Consent Radiology Services and Staff Policy Radiology TOC Radiology IV Contrast Administration Radiology Pregnant Patients Policy Mat. Management TOC MM Purchasing Policy In Use Product Evaluation Form MM Stores Requisition Form MM Product Recall Log MM Supply Stock Rotation Policy MM Recall Policy	
B. Review and <i>Approve to Retire</i>			301 Generator 302 HVAC 303 Med Gas 304 EES2 305 Electrical Wiring	First approval – Danielle Second approval – Dr Gilmore
<b>VIII. PERFORMANCE IMPROVEMENT PROJECTS</b>				
<b>Agenda Item</b>	<b>Presenter</b>	<b>Time Allotted</b>	<b>Discussion/Conclusions</b>	<b>Decision/Action Items</b>



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A. Performance Improvement Project (PIP)	QM	2 min	1.) Bed side scanning 2.) Pain Assessment 3.) Stroke	
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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	Approved – March 2024	

**X. ADJOURNMENT**

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Adjournment	QM	1 min	There being no further business, meeting adjourned at 1433 by Dr G seconded by Heather	

**MEMBERS & INVITED GUESTS**

<b>Voting MEMBERS</b>				
Danielle Cooper	Tonya Bowen	Bethany Moore	Chrissy Smith	Meghan Smith
Kaye Hamilton (teams)	Mark Chapman	Heather Larson	Brittany Gray	
Jennifer Dreyer	Pam Esparza			
Dianne (teams)	Dr Gilmore (teams) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Non-Voting MEMBERS</b>				
Denise Jackson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>INVITED GUESTS</b>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Date Minutes Approved:</b>	
<b>Signature of ChairPerson:</b>	