

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for June 2024 and Meeting Minutes for May 2024

Meeting Location: OR	Reporting Period: May 2024	
Chairperson: Dr Gilmore	Meeting Date: 06/13/24	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1402	Actual Finish Time: 1440
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: 07/11/2024 @ 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 -- Nick/ Second – Pam

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 – April 2024	Approval: First – Tonya, Second – Nick
B. Environment of Care (EOC) Committee 1. <i>Approval of Meeting Minutes</i>	Mark Chapman	2 min	Provider office flooring needs replaced, ceiling tiles need replaced in pt area/waiting on tiles. Reviewing policies for bi-annual review	Approval: First – Pam , Second – Brittany
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	Dept Director not present – will defer reporting for next month	

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D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	Meeting min – 3/28/24; annual formulary, ozempic/mounjaro will not be ordered through the hospital, pt will use home meds P&T scheduled for Sept 2024	Approval: First – Brittany, Second – Nick
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jennifer Dryer/ Kaye Hamilton	2 min	Chart under wrong name corrected, HP correction on chart, multiple HPs on one chart, wrong dates on chart to be corrected No credentialing	Approval; First – Heather, Second - Pam
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Dept Director not present – will defer reporting for next month	

III. DEPARTMENT REPORTS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	0 restraints 10 PRBC with no reactions 0 code blue	
B. Radiology	Pam Esparza	2 min	4 films repeated	
C. Laboratory	Tonya Bowan	8 min	64 repeated labs, 2 expired orders that were not renewed by provider, applied for CLIA waved certificate for finger sticks d/t nursing completing theses. Education for the month; platelet, hypochromia, stool leukocyte	
D. Respiratory Care	Heather Larson	2 min	36 neb changes for the month 0 vent days PM on vents due	
E. Therapy	Chrissy Smith	2 min	Pt with assistive needs – 22 Total sessions for the month; 146 -PT 117 -OT	

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			14 -ST Improved Standard Assessment Scores: 11 - PT 0 - OT 1 - ST OT supervisory visits completed for the quarter	
F. Materials Management	Brittany Gray	2 min	6 back orders, no late orders, no recalls affecting the hospital Requisition training in process, removing inactive items from the item master, waiting on list of chargeable v non-chargeable items CS locked 5/20 and RM 18/ER being stocked by MM	
G. Business Office	Dannille Cooper	2 min	1 er with paperwork not signed, pt left before completing, BO began using the COA form 5/2024	
H. Human Resources	Bethany Moore	2 min	1 - background check completed 3 RN/ 1 RRT - license renewals	
I. Environmental Services	Mark Chapman	2 min	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked 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	2 min	Dept Director not present – will defer reporting for next month	
L. Information Technology	Tim Hopen	2 min	Dept Director not present – will defer reporting for next month	
IV. OLD BUSINESS				

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Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Old Business	QM	5 min	None	
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	5 min	<p>AMA 5 pts; 4 ER / 1 In-pt;</p> <p>1.) pt to the ER for c/o hypothermia. Pt family at bedside, there appears to be a lot of dynamics between family members. Pt became upset with family and demanded to leave the ER. Discussed r/b with pt, per provider pt was no in distress, no emergent symptoms at the time. Pt signed out AMA.</p> <p>2.) Pt to the ER for c/o NV/ab pain, PT evaluated and being treated, when pt suddenly wanted to leave, family requested assistance from nurse to talk to pt to stay in ER for further treatment. Nursing staff spoke with patient who was adamant in leaving, provider notified and spoke with pt as well. Pt began removing</p>	Noted Provider Trend, Kelley met with provider

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			<p>IV them self, nurse assisted and re-educated pt on R/B of leaving AMA. Pt signed AMA and left, nurse attempted to educate pt on labs in the parking lot without success, nurse then called pt phone with further results, unable to give results to person on the phone due to HIPPA and advised that they have pt call ASAP.</p> <p>3.) 1 pt to the ER for c/o vaginal bleeding, pt voices several gyn concerns. Provider discussed testing/tx for dx, pt voiced wanting to leave without testing/treatment, discussed R/B with patient, AMA signed</p> <p>4.) Pt sent to ER by HH for concern with lab results, pt and labs evaluated, discussed tx options with pt, pt declined stating that they wanted to go home, discussed R/B with pt, pt signed out AMA. 1 INPT)</p> <p>Pt in-pt for weakness, during the course of stay; pt reports a family emergency and needs to leave, spoke with pt about R/B of leaving, pt understands but needs to be with family. Signed out AMA</p>	
B. Case Management	CM	8 min	Dept Director not present – will defer reporting for next month	
C. Risk Management	QM	10 min	0 complaint / 0 grievances	

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			<p>Other – 2 other events (skin tears)</p> <p>1. pt dislodged their IV, uncertain how this occurred, pt not able to recall event that may have lead to iv dislodge</p> <p>2.) Pt had incont episode, while turning pt they "bumped" hand on bed rail with skin tear occurring</p> <p>Falls w/o injury – 2</p> <p>1.) Pt family notified nursing of fall, pt found on bathroom floor, reports becoming weak and falling to the floor. No injuries noted</p> <p>2.)Pt assisted x 1 with gait belt from shower chair to bed, during transfer pt leg gave out and pt was not able to complete transfer, pt assisted to the floor. No injuries noted</p> <p>Mortality - None</p>	
D. Nursing	CCO	2 min	Total number of charts with pain medication administration were accounted for, excluding duplicate charts. Post assessment, 3 PO and 0 IV, administration(s) not completed	The charge nurse is now responsible for ensuring all nurses f/u with pain reassessments. Excluding ED. Will continue to remind nursing staff to reassess patients. The majority of reassessments are completed.

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E. Emergency Department	CCO/QM	5 min	2 ER readmits - No trends or patterns were identified, no further action needed 3 incomplete logs – Real time monitoring as of last month, numbers decreased. All 3 are the provider seen by date/time, all different nurses	Readmits were not due to lack of education, care on MRMC part
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – Sept 2024 After hours access 100% to date 1 ADR in April; celexa, pt with rash, celexa was not reported as allergy, med stopped/tx treated for reaction Med errors - March – 9 April – 3 May – 2	CNO education on med errors as needed r/t med error
G. Respiratory Care	RT	2 min	100 % on chart checks	
H. Wound Care	WC	2 min	No in-pt wound development for the month	
I. Radiology	RAD	2 min	1 - delays in reads for the month (1 xray)	
J. Laboratory	LAB	5 min	Stat turn around time – 100% Corrected reports – 1, pt entered wrong by nursing and not caught by lab staff; lab had to be reran – educated staff on name/DOB verification No blood culture contaminations	

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K. Infection Control/Employee Health	IC/EH	5 min	Dept Director not present – will defer reporting for next month	
L. Health Information Management (HIM)	HIM	2 min	92% H&P completion – 1 SWB not complete 100% Progress Note Completion	
M. Dietary	Dietary	2 min	Dept Director not present – will defer reporting for next month	
N. Therapy	Therapy	2 min	100%	
O. Human Resources (HR)	HR	2 min	100% - 90-day competency Annual education – 2 employees have not completed education requirements; 1 CNA/1 PT. CNA taken off schedule once past due until education completed	
P. Business Office	BOM	2 min	100%	
Q. Environmental Services	EVS	2 min	10/10 on room cleans	
R. Materials Management	MM	2 min	Requisitions – 100% Editing stock sheets per dept to ensure dept has each item available to them to request	
S. Life Safety	PO	2 min	Boiler was shut down due to warm weather season and will not be back in operation until fall, inspections are only required when boiler is in operation, shut off 4/30/24	
T. Emergency Preparedness	EP	2 min	1 employee oriented	
U. Information Technology	IT	2 min	Dept Director not present – will defer reporting for next month	

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V. Outpatient Services	Therapy	2 min	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	Moderate Sedation Audit Tool After Sedation Education for Child After Sedation Education for Adult Moderate Sedation Procedure - Nursing Moderate Sedation Procedure – Provider Consent for Moderate Sedation Moderate Sedation Self Study Guide Moderate Sedation Policy Hospital Financial Assistance Policy	First approval – Nick Second approval – Dr. G
B. Review and <i>Approve to Retire</i>				

VIII. PERFORMANCE IMPROVEMENT PROJECTS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
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 1440 by Tonya seconded by Mark	

MEMBERS & INVITED GUESTS				
Voting MEMBERS				
Melissa Tunstall	Nick Walker	Danielle Cooper	Lynda James	
Kaye Hamilton (teams)	Mark Chapman	Heather Larson	Brittany Gray	Chrissy Smith
Jennifer Dreyer	Pam Esparza	Tonya Bowen	Bethany Moore	Chelsea Church
Tim Hopen (teams) *left before reporting	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"/>
INVITED GUESTS				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date Minutes Approved:	
Signature of ChairPerson:	