

Clinton Regional Hospital

MINUTES FOR THE MEDICAL EXECUTIVE COMMITTEE – Date December 4, 2023

Present: Janae Chittum, Brenda Jennings, Cris Hickerson, David Barnett, Holly Masquier, Mike Thomas, Jeff Barlow, Dr. B Abernathy, Dr. Dave, DR. Carl

Lafoon

Excused:

Called to order at Boardroom December 04,2023 at 5pm By Len Lacefield
Meeting adjourned by Len Lacefield at 5:36pm

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Previous Minutes	Previous quarter MEC minutes presented for review	Motion to approve minutes by	GB	Next GB meeting
Old Business	Nothing to report			
New Business				
First new meeting since rewrite of the Medical Bylaws			GB	
Standing QA/PI Items				
Privileges				
1. Privilege Request for Emergency Room and Moderate Sedation	<p>Privilege Request for Emergency Room and Moderate Sedation</p> <p>Barlow Jeffery APRN-CNP Barlow (Bliss) Coty APRN-CNP Rothwell David MD Gallegos Fabian APRN-CNP Williamson Ross APRN-CNP Karlin John APRN-CNP</p>	<p>_Len_ made motion to approve all Privileges Dr. Dave_Second and all in favor.</p>	GB	<p>1. Governing Body will be asked to approve the physicians nominated for privileges</p>

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2. Hospitalist	<p>Lafron Carl APRN-CNP</p> <p>Laakman Daniel APRN-CNP</p> <p>Scruggs Deanna APRN-CNP</p> <p>Miller Laura APRN-CNP</p> <p>Carter Randall APRN-CNP</p> <p>Potter Susan APRN-CNP</p> <p>Hospitalist</p> <p>Bodenhamer Yumee APRN-CNP</p>	GB		2. Governing Body will be asked to approve the physicians nominated for privileges
3. Medical Director and Emergency Room Manager/Emergency Medicine	<p>Medical Director and Emergency Room Manager/Emergency Medicine</p> <p>Abernathy Bob DO</p>			3. Governing Body will be asked to approve the physicians nominated for privileges
4. Medical Director and Emergency Room	<p>Medical Director and Emergency Room</p> <p>Dave Mayank MD</p>			4. Governing Body will be asked to approve the physicians nominated for privileges
5. Emergency Medicine, Hospitalist and Moderate Sedation	<p>Emergency Medicine, Hospitalist and Moderate Sedation</p> <p>Sparks Audrann^a APRN-CNP</p>			5. Governing Body will be asked to approve the physicians nominated for privileges
6. Emergency Medicine, Moderate Sedation and Family Medicine	<p>Emergency Medicine, Moderate Sedation and Family Medicine</p> <p>Mann Mark MD</p>			6. Governing Body will be asked to approve the physicians nominated for privileges
7. Pathology Lab Director	<p>Pathology Lab Director</p> <p>Luu Ly MD</p>			7. Governing Body will be asked to approve the physicians nominated for privileges
8. Pathology	<p>Pathology</p> <p>Irwin Derek MD</p>			7. Governing Body will be asked to approve the physicians nominated for
9. Pediatrics	Pediatrics			

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	Umobuarie Ejechi MD		GB	privileges 8. Governing Body will be asked to approve the physicians nominated for privileges 9. Governing Body will be asked to approve the physicians nominated for privileges
Upcoming Appointment Renewals	No appointment renewals present for the reporting period.	No action needed at this time.	GB	Prior to next GB meeting
Peer Review				
Physician Peer Review	Nothing to report at this time	N/A – no action necessary	N/A	GB
Anesthesia Peer Review	Nothing to report at this time	N/A – no action necessary	N/A	GB
Unexpected Outcomes	No unexpected outcomes identified for this reporting period.	N/A – no action necessary	N/A	N/A
Supply Chain Management				
Product Recalls/Backorders	No backorders affecting patient flow or current inventory were reported. 1. Lab I-Stat Cartridge Product Notification - there was an update to cartridge-based instructions – the notice was sent to Arlene for future application. 2. Lab Immunohematology Reagent Product Notification – there were updates made to printer barcode labels for certain lots – the notice was sent to Arlene for future reference. 3. Surgery Valleylab FT10 Energy Platform Product Notification – this item was unable to be found in our facility – if it is found when surgery reopens, a software upgrade will need to take place for this item – the materials director completed the business reply form and emailed	No action needed at this time.	Material Management will present report to Medical Staff for approval	Medical Staff will recommend to Governing Body

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	<p>it back to the company, as requested on the product notification.</p> <p>4. Surgery Safelight Fiber Optic Cables (Clear and Gray) Voluntary Product Recall – these items were unable to be found in the facility – if they are found when surgery reopens, we can contact the manufacturer (Stryker) to get these replaced – certain lots lack adequate epoxy on proximal end, creating light output issues – the materials director completed the online business reply form and submitted it to the manufacturer, as requested on the recall notification.</p> <p>5. LifePak 15 AC Power Adapter (battery piece for defibrillators) – the materials director checked these for the facility – the facility did not have any of the effected serial numbers – this was a recall/replace situation as the effected serial numbers were not charging the defibrillators – the materials director completed the business reply form and emailed it back to the manufacturer (Stryker), as requested on the recall notification.</p>			
Equipment Management	<p>Equipment Management</p> <p>Stephen Cupps, Field Service Engineer with Space Labs, is on back on site today (11/30). He is continuing to unpack and assemble the new Spacelabs equipment, in addition to installing QUBE devices in the MedSurge department. All old equipment removed from the PACU and ICU areas during his previous visit have been shipped back to Spacelabs headquarters as of 11/28.</p> <p>Wednesday (11/29) an incident occurred in the lab, leading to the triage analyzer being broken. A new triage analyzer machine has been overnighted to the hospital and is expected to arrive today (11/30). Our</p>	No action needed at this time.	Material Management will present report to Medical Staff for approval	Ongoing

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	<p>facility will ship the broken machine back to the manufacturer. New controls will be ordered today (11/30) to calibrate the new machine, and proceed with use for the triage analyzer.</p>			
Medical Records				
Clinical Documentation Findings	<p>Issue with tracking AMA opened a help ticket with Evident to create AMA status</p>	<p>Ticket opened with Evident on Jan 22, 2023 not time given from Evident when it will be completed</p>	<p>Director of Nurses and Clinical Leadership will monitor</p>	<p>GB monitoring</p>
Radiology				
Radiology Report	<p>Radiology Appointment letter for Supervisor of Radiology Services Dr. Bart Rowlett MD, MRI schedule for repair starting 12/5/2023</p>	<p>Barlow__made motion to approve for Appointment letter for Supervisor of Radiology Services Dr. Rowlett __Abernathy_Second and all in favor</p>	<p>Radiation Safety Officer will present report to Medical Staff for approval</p>	<p>Ongoing</p>
Pharmacy				
Formulary requests and Standing Orders	<p>Orders Sets to be approved</p> <ul style="list-style-type: none"> • General/Adult/Admit Non-ICU • Meningitis/Adult • Pneumonia/Adult • General/Peds/Admit Non-ICU • Respiratory Illness/Peds • Suspected Sepsis/Peds/Admit Non-ICU 	<p>Orders Sets to be approved</p> <p>General/Adult/Admit Non-ICU</p> <ul style="list-style-type: none"> • Meningitis/Adult • Pneumonia/Adult • General/Peds/Admit Non-ICU • Respiratory Illness/Peds • Suspected Sepsis/Peds/Admit Non-ICU 	<p>Pharmacist will present to Medical Staff for approval</p>	<p>GB will approve on 11/15/2023 meeting</p>

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	<ul style="list-style-type: none"> • Severe Sepsis/Septic Shock/Adult • General/Adult/Admit ICU • PICC/Midline Insertion • Blood Product Administration/Adult • Altered Mental Status Protocol/Adult/ED • DKA/HHS/Adult • Ventilator Protocol/Adult • Insulin Infusion/Adult • Electrolyte Replacement/Adult • Heparin Therapy/Adult (Antixa) • Overdose/Adult • Sepsis/SIRS/Adult • UTI/Adult 			
Medication Errors	Nothing to report at this time	No action needed	Drug Room Supervisor	Ongoing
Backorders / Supply Issues Recalls	Ongoing shortages of lorazepam, lidocaine with epinephrine, bupivacaine with epinephrine, and clindamycin.	No action needed, however will continue to monitor, and manage our par levels assigned until DEA will allow more orders.	GB	
Pharmacists Report	See Minutes for the Pharmacy and Therapeutics Committee, Clinton Regional Crash Carts Medication list and	___Barlow ___made motion to approve Pharmacy and Therapeutics Committee, Clinton	Pharmacist will provide report to Medical Staff	Report on narcotics will be

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	Departmental Narcotic Boxes	Regional Crash Carts Medication list and Abernathy __Second and all in favor		presented to board on 11/15/2023
Infection Prevention				
Hand Hygiene Compliance	See Infection Control Minutes	No Action at this time	Infection Control Nurse reports to medical staff	Ongoing
Disinfectant Compliance	Disinfectant compliance noted without trending issues and within defined threshold. The Infection Prevention nurse continues to observe disinfectant use so that education can be provided during missed process steps. Continue to utilize Sani-Cloths for disinfection, Dispatch for bleach, and Matricide as a high-level disinfectant. High level disinfectants monitored for temperature, disposal, testing, and timing to ensure compliance with manufacturer recommendations. The Infection prevention nurse continues to ensure staff are aware of disinfectant kill times and appropriate processes related to using the disinfectants.	No Action at this time	Infection Prevention Nurse reports to medical staff	Ongoing
Sterilization	No Sterilization processes were reviewed and discussed. No sterilization equipment use for the month has been reported or identified. The Infection Prevention nurse continues to review and ensure	No approval of a report is needed at this time	Infection Prevention Nurse	Ongoing

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	appropriate processes are executed and maintained within the sterile processing area.			
SSI Identification	No SSI's reported or identified for the reporting period. Physician surveys continue to be forwarded to physician offices monthly, results aggregated, and investigations initiated to identify potential infections, sources of infection, trending, and any opportunities for improvement.	No approval of a report is needed at this time	Infection Prevention Nurse	Ongoing
Housekeeping	Housekeeping evaluated during rounding and daily through clinical workflow. No issues identified at this time. The housekeeping management team is notified of any findings. High-level dusting periodically validated, no concerns reported.	No action necessary at this time. Will continue to monitor and report any discrepancies noted with housekeeping during rounding.	Infection Prevention Nurse	Ongoing
Influenza Program	See Infection Control Minutes	No Action need at this time	Infection Prevention Nurse	Ongoing
Rounding Report	See Infection Control Minutes	No Action need at this time	Infection Prevention Nurse	Ongoing
Employee Health				
Employee Illnesses	See Infection Control Minutes	No Action need at this time	Infection Prevention Nurse	Ongoing
Bloodborne exposures Sharp Injuries Employee Injuries	No bloodborne pathogen exposures were reported for this reporting period. Bloodborne pathogen exposures followed by the Infection Prevention nurse. No sharp injuries reported. No employee injuries reported or identified.	Will continue to actively encourage employees to understand there are protective structures in place to support reporting of quality and safety concerns while penalizing reprisals in response to reporting.	Infection Prevention Nurse	Ongoing
Employee Health Files	No pending/outstanding employee health files identified. Employee Health files remain complete. All employee health files	Continue to actively maintain employee health documentation compliance.	Infection Prevention Nurse	Ongoing

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Process Improvement	have been reviewed and are current.			
Dashboard Review	Committee discussed indicators included on the dashboard. No trends identified at this time because this is the first month of patient care. Will continue to scrutinize identified indicators and make recommendations for action as warranted.		GB	Prior to next GB meeting
PI Studies	Current performance improvement studies include the following:		GB shall approve	GB will approve on 11/15/2023
Patient Satisfaction	Currently working on a contract with Press Ganey to track Patient Satisfaction	Will bring back next meeting with contract	GB shall approve	GB will Approve on 11/15/2023
Tumor Board Submissions Pathology	Nothing to report at this time	No Action need at this time	Clinical Leadership or designee	Ongoing
Contracted Services				
Patient-Related Contracted Services	Currently working on contracted services with satisfaction goals	Will bring back to next meeting	Leadership	Ongoing
Risk Management				
Incident Reports	No Incident Reports to at this time	No Action need at this time	Brenda Jennings	Ongoing
Root Cause Analysis	No Root Cause Analysis' were required to be conducted during this reporting period.	No action necessary, will continue to monitor incidents and conduct RCA's as appropriate.	Brenda Jennings	Ongoing
Complaints/Grievances	See AQPI/Performance Improvement Minutes	No Action Need at this time.	Brenda Jennings	Ongoing
Sentinel Events	See AQPI/Performance Improvement Minutes	No Action Need at this time.	Leadership	Ongoing
Education				
New/Pending/Staff Meetings Annual Training Ongoing Education	MedTrainer training, Corporate Compliance, HIPPA, Emergency Preparedness and Response, Fire Safety,	Due date for Completion Dec 6,2023.	Clinical Leadership	Ongoing

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New Procedures or Techniques Laser Training	Grievance/Compliant, Hand Hygiene, OSHA airborne , droplet, Bloodborne pathogens, disaster preparedness were sent out to all staff to complete.			
Disaster Preparedness				
Disaster Preparedness	See Life Safety/Emergency Management Committee Meeting minutes	_____made motion to approve See Life Safety/Emergency Management Committee Meeting minutes for _____Second and all in favor	Safety Officer	Ongoing
Drills	See Life Safety/Emergency Management Committee Meeting minutes	Abernathy__ made motion to approve See Life Safety/Emergency Management Committee Meeting minutes for __Barlow__ Second and all in favor	Safety Officer Clinical Manager	Ongoing
Emergency Operation Plan	See Life Safety/Emergency Management Committee Meeting minutes	__Abernathy__ made motion to approve See Life Safety/Emergency Management Committee Meeting minutes for __Barlow__ Second and all in favor	Safety Officer	Ongoing
Environment of Care				
Temperature & Humidity Levels	See Life Safety/Emergency Management Committee Meeting minutes temperatures, humidity levels, and airflows throughout the facility to ensure compliance.	__Barlow__ made motion to approve See Life Safety/Emergency Management Committee Meeting minutes for __Dave__ Second and all in favor	Safety Officer	Ongoing

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Utility Management	Discussed vendors and utility management processes that were necessary for this reporting period. No utilities requiring repair at this time.	No Action at this time	Safety Officer	Ongoing
Fire Safety/Life Safety	See Life Safety/Emergency Management Committee Meeting minutes	_Abernathy _____ made motion to approve See Life Safety/Emergency Management Committee Meeting minutes for _Dave___ Second and all in favor	Safety Officer	Ongoing
Hazardous Waste/Chemical Management/SDS	No issues with hazardous waste or chemical management were reported. Staff instructed to query SDS hotline for any chemical SDS needs. SDS and IFU's are actively maintained in their respective binders for review.	No action at this time	Safety Officer	Ongoing
Log Management	Logs are reviewed and analyzed frequently for discrepancies and omission trends. The Safety Officer reviews any documented findings that are outside of the set parameters to ensure no systemic issues are present and that actions are documented. No deviations or concerns related to log management identified for this reporting period.	No action necessary at this time, notation only. Will continue to review logs frequently and regularly.	Safety Officer	Ongoing
Rounding Report	Discussed findings identified during life safety rounds. No significant trends or issues discovered.		Safety Officer	Ongoing
Policies & Procedures/Forms				
Forms	No new forms at this time to review	No Action at this time	GB	Prior to next GB meeting
Policy	Policies developed and/or modified to include: Medical Record/HIPPA/Security,	Barlow_____ made motion to	GB	Prior to next GB meeting

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	Ethics, Rights and Responsibilities, Laboratory Policy and Procedures, Materials Management, Vendor Policy	approves Medical Record/HIPPA/Security, will bring next meeting Ethics, Rights and Responsibilities, Laboratory Policy and Procedures, Materials Management, Vendor Policy for Abernathy__Second and all in favor		
Competencies/Education material	Departments are currently working on department Competencies and/or education material	Bring to next meeting	Each Hospital Departments	Prior to next GB meeting

Next meeting will be announced.