

Clinton Regional Hospital
Monthly Safety/Emergency Management Committee Meeting

Call to order: 4:28 Friday December 1, 2023

Safety/Emergency Management Meeting: December 1, 2023

Members: ~~Brenda Jennings, RN-IC (Not Present)~~
~~Sarah Keys, EVS (Not Present)~~
~~Janae Chittum, RN-CNO (Not Present)~~
 Janice Merrill, Facilities
 Mike Thomas, Life Safety Officer
 Holly Masquelier, Purchasing Agent

- 1) Safety Committee Meeting opened at 4:28 PM, December 1, 2023. Motion to open meeting by Janis Merrill , Second by Mike Thomas, all in favor
- 2) Motion to accept meeting Minutes from last Meeting Conducted October 25, 2023 by Janis Merrill and second by Mike Thomas, all in favor all in favor.

Topic	Discussion	Action	Person Responsible
OLD BUSINESS:			
A. (A) 8/25/23 Jackson Mechanical here to test reheats in OR and found 3 of the 4 found was not working appropriately. Re-Heat control valves are on order and have arrived for installation.	A) Reheat valves were ordered and will be installed by next committee meeting	A) Reheat valves are on order and will be installed. No action required at this time, project will be brought back until completed	Janis Merrill
B. Southwest Test and Balance report required follow up of another test and balance. The Exhaust fans were installed and Southwest Test and Balance are on site today on October 25, 2023.. Southwest staff indicated that all rooms were meeting standards and a report will	B) Report will be presented at next meeting, however all rooms meet minimum air exchanges. Austin Charles Created Negative air Pressure Procedure when patient are admitted to room	B) Holly made motion to approve Southwest Test Conducted on October 27, 2023 and approval Negative Air Flow test while patients are admitted to the room. Janis second motion, all in favor. Completed	B. Safety Officer will send Life Safety Committee Reports to Medical Staff Committee for approval

<p>C. (i) Air Born Isolation Monitors. (ii) Air Born Isolation</p>	<p>C. Air Born isolation monitors were programed and documented as being negative</p> <p>i) Med Surge monitors were programed and a policy was created to document negative air flow. Med Surge Staff and EVS staff will document air flow when patients are known or suspected</p>	<p>C. Air Born Isolation Monitor for Both ED Rooms and room 124 requires calibration. No action Required at this time, project will be brought back until completed</p>	<p>C. Janis Merrill</p>
<p>D. An Active Shooter</p>	<p>D. A drill will be conducted on October 27, 2023 after local EMS conducts a dry run. Also on this day a fire drill will be conducted.</p>	<p>D. An Active shooter drill was not conducted according to the specified date. Drill will be conducted in the near future. No action required, required drill will be brought back for documentation until completed</p>	<p>D. Safety Officer</p>
<p>E. Return air Ducts on the roof</p>	<p>E. Return ducts on the roof have been contracted to repair the insulation that has been damaged. After action documentation will be provided next safety committee meeting</p>	<p>E. M&M insulation have evaluated the repairs and the quote is supplied at this time. No action required, project will be brought back until completed.</p>	<p>E. Janis Merrill</p>
<p>F. Medical Gas Annual Inspection</p>	<p>F. Medical Gas Annual Inspection will be conducted on October 25, 2023 – October 26, 2023. After action documentation will be provided next Safety Committee meeting</p>	<p>F. Holly made motion to approve medical gas inspection completed November 8, 2023. Janis made motion to second the motion, all in favor. Deficiencies cited will be brought back for repair with a quote for \$2,200.</p>	<p>F. Safety Officer shall send Life Safety Committee Reports and Minutes to Medical Staff Committee Janis Merrill will take the quote to CEO for completion of deficiencies</p>

<p>G. Humidifiers for the Operating Rooms</p>	<p>G. Humidifiers are being installed for the entire Operating Room Suite No humidification was ever installed. Humidifiers were installed 11/13/2023. An in-service was provided for Craig at this time and a sign-in sheet was documented</p>	<p>G. Janis Made motion to approve installation and in-service. Second by Holly, all in favor. Completed</p>	<p>G. Safety Officer shall send Life Safety Committee Reports and Minutes to Medical Staff Committee</p>
<p>H. New Condenser Circulation Pump</p>	<p>H. Condenser cooling water pumps installed in Boiler room October 16, 2023 is leaking. Jackson Mechanical is repairing and after action will be provided next month.</p>	<p>H. Repairs on the Condenser Circulating Pump has been completed at this time, no further action is needed.</p>	<p>H. Janis Merrill</p>
<p>(I) Nurse call</p>	<p>I. Nurse call on South corridor of the east side of the Med Surge Hallway is not functioning. Interim Life Safety Measures have been implemented and all staff have been in-serviced until repaired.</p>	<p>I. Janis made motion to approve nurse call inspection and repair date 10-27-2023. Holly made motion to second, all in favor.</p>	<p>I. Safety Officer shall send Life Safety Committee Reports and Minutes to Medical Staff Committee</p>
<p>J. Helicopter Pad resurfacing and wind sock installation</p>	<p>J. Construction/ resurfacing was being funded by County Commissioners. Bids are being taken and resurfacing will be conducted. All involved including EMS Flight service</p>	<p>J. New lights and sock have been ordered and should be on site by mid December. Project will be brought back until completed.</p>	<p>J. Janis Merrill</p>

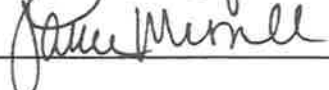
<p>K. Access Control System / Magnetic Locks</p>	<p>K. Access control system was repaired on October 25, 2023 and an upgrade to lock the emergency room department was signed. Installation of equipment will be installation will be completed in November, 2023 Sam with Summit Fire is installing equipment to replace and repair access control. In accordance with Security issues raised in the ER, a lock down system will be installed.</p>	<p>K. No action required at this time. Quote for \$13,500 to install magnetic locks to secure emergency room in accordance with rounding and security assessment. Instalation is not completed.</p>	<p>K Janis Merrill</p>
<p>New Business:</p> <p>A Failure of Major Laboratory Machine</p>	<p>A Quidel Triage Meterpro / Desk Top Analyzer not functioning due user error. After action conducted. Manufacture replaced equipment. 1500 dollar reagents were ordered and password protection was installed in the machine to prevent unauthorized use. Interim Policiy and Procedure was created for use during Lab Down Time Business Agreement has not been returned by Cordell and Weatherford Hospital.</p>	<p>A. Janis Merrill made motion to approve the lab equipment report, second by Janae Chittum, all in favor. Continuing monitoring will continue until lab is up and running completely.</p>	<p>Safety Officer will send safety Officer report and committee minutes to medical staff</p>
<p>B. Reserved</p>	<p>B.</p>	<p>B</p>	<p>Safety Officer</p>
<p>C. Semi-Annual Safety & Infection Control Inspection Reports</p>	<p>C. Semi-Annual Safety & Infection Control Inspections are presented at this time with Corrective Actions Identified from the Surveyed Departments.</p>	<p>C. Janis Merrill made motion to approve the inspections and Plan of Corrections, second by Holly M and all in favor</p>	<p>Safety Officer reports will be sent to Medical Staff Committee</p>

D. Quarterly Fire Drill Report	D. A Fire Drill was conducted on November 11, 2023 in the Emergency Room Area.	D. Holly Masquelier made motion to approve drill, second by Janis Merrill and all in favor	D. Safety Officer reports will be sent to Medical Staff Committee
Monthly Safety Officer Report	Safety Officer report identified on going issues with the facility	Holly Masquelier made motion to approve safety officer report, second by Janis Merrill and all in favor	Safety Officer will present to Medical Staff Committee
ROUTINE CONSENT REPORTS	Items A, D, Q were not acceptable to be approved. All eye washes are not documented in meeting report, Dailey air flow was not being documented with new humidistats and boiler and water treatment logs were not provided.	Holly Masquelier made motion to approve Consent Reports with exceptions A, D & Q , second by Janis Merrill and all in favor	. Safety Officer reports will be sent to Medical Staff Committee. Janis Merrill will bring completed consent reports called out as not meeting standard on next committee meeting
A. Eye Wash Weekly Run Monthly Report	A. See documentation for Eye Wash Weekly Run Report.	A. NOT ACCEPTED, BRING BACK NEXT COMMITTEE MEETING	Facilities
B. Monthly Fire Suppression Gauge reading, Control Valve and twin Connection Inspection	B. At this time supporting documentation is indicating that the system is being monitored and documented	B. See attached report	Facilities
C. Monthly Portable Fire Extinguishers Report	C. This inspection has been completed this month.	C. See attached report	Facilities
D. Dailey Air Flow & Humidity reports for OR 1 & 2 and Procedure Room	D. This inspection has been completed this month.	D. NOT ACCEPTED, BRING BACK NEXT COMMITTEE MEETING	Facilities
E. Monthly Egress Lights Testing Report	E. This inspection has been completed this month.	E. See attached report	Facilities
F. Annual Boiler License Report	F. Inspectors have completed Boiler Inspection	F. See attached License	Facilities
G. Monthly Exit Signs	G. Exit sign testing is conducted monthly and documented	G. See attached documentation	Facilities
H Weekly Emergency Generator Inspection	H. This inspection is conducted weekly, and no issues reported or documented	H. See attached documentation	Facilities
I. Monthly Generator and Transfer	I. This inspection was completed with		

Switch Inspection	documentation	I See attached documentation	Facilities
J. Monthly Battery Backup Lights for DR and Transfer Switch	J. Battery backup testing is conducted monthly and documented	J. See attached documentation	Facilities
K. Monthly Medical Gas Inspection	K. This inspection has been completed at this time	K. See attached documentation	Facilities
L. Monthly Recall for Purchasing, Supplies	L. Documentation supporting products that were recalled are supplied.	L. See attached documentation	Facilities
N. Biohazard Manifests Monthly Report	N. No Manifests to report at this time		
O. Monthly Bio Medical Report	O. Biomedical Safety Testing Reports Have been conducted during this time period	O. See attached documentation	Facilities
P. Seldom Used Fixtures Monthly Report ⁹	P. Inspections were completed at this time	P. See attached documentation	Facilities
Q. Boiler Water Treatment Monthly Report	Q. Water Consultant Performed Appropriate testing.	Q. NOT ACCEPTED, BRING BACK NEXT COMMITTEE MEETING	Facilities
ADJOURN	Motion to adjourn and date to meet on Jan 3, 2024 next month	Holly Masquelier made motion to Adjourned and meet Jan 3, 2024 and second by Janis Merrill , all in favor	Mike Thomas will send meeting agenda, reports and minutes to Medical Staff Committee for review and approval.

Safety Officer:  Date: 12/1/2023

Attendance  Date: 12/1/2023

Attendance  Date: 12/1/2023

Clinton Regional Hospital
 Monthly Safety/Emergency Management Committee Meeting

Call to order: Mike Thomas

Safety/Emergency Management Meeting: October 25, 2023

Members: Brenda Jennings, RN IC
 Sarah Keys, EVS
 Janae Chittum, RN CNO
 Janice Merrill, Facilities

Motion to accept meeting Minutes from last Meeting Conducted September 8, 2023 by Janae Chittum and Seconded by Brenda Jennings, all in favor.

Topic	Discussion	Action	Person Responsible
<p>OLD BUSINESS</p> <p>A. (A) SWTB: 8/25/23 Jackson Mechanical here to test reheats in OR and found 3 of the 4 found was not working appropriately. Re-Heat control valves are on order and have arrived for installation.</p> <p>B. (B): Fire Alarm: Fire alarm deficiencies have been repaired and the panel is now in green status. On the last Life Safety, Director of Engineer contacted Johnson Controls who provides fire suppression system and conducted a face to face zoom call and identified that nothing was in need of repair. A new work order that maintenance has started in September 2023 to do checks on the riser rooms.</p> <p>C. (C) Southwest Test and Balance report required follow up of another test and balance. The Exhaust fans were</p>	<p>A)</p> <p>B)</p> <p>C)</p>	<p>A) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>B) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>C) Brenda made motion to approve, seconded by Janae, all in favor.</p>	

<p>installed and Southwest Test and Balance are on site today on October 25, 2023. Documentation will be provided next meeting. Southwest staff indicated that all rooms were meeting standards and a report will</p> <p>D. Helicopter Pad resurfaced</p>	<p>D)</p>	<p>D) No action needed at this time</p>	
<p>New Business:</p> <p>E. (A) Air Born Isolation Monitors on Med Surge were programed and a policy was created to document negative air flow. Med Surge Staff and EVS staff will document air flow when patients are known or suspected.</p> <p>F. (B) Air Born Isolation rooms in Emergency Room are not functioning. In the interim, staff will utilize VANOMETER to document air flow daily until monitors are repaired.</p> <p>G. (C) An Active Shooter drill will be conducted on October 27, 2023 after local EMS conducts a dry run. Also on this day a fire drill will be conducted.</p>	<p>.E)</p> <p>E)</p>	<p>F) Janae made motion to approve, second by Brenda, all in favor</p> <p>G) Janae made motion to approve, second by Brenda, all in favor</p> <p>H) Janae made motion to approve, second by Brenda, all in favor</p>	

<p>H. (D) 4 Scrub Sink Valves and Med Surge plumbing fixtures were repaired throughout the hospital. No after action required.</p> <p>I. (E) Return air Ducts on the roof have been contracted to repair insulation that has been damaged. After action documentation will be provided next safety committee meeting</p> <p>J. (F) Medical Gas Annual Inspection is being conducted on October 25, 2023 – October 26, 2023. After action documentation will be provided next Safety Committee meeting</p> <p>K. (G) Humidifiers for the Operating Room Suite are being installed. No humidification was ever installed. Also the re-heat boxes that eliminates humidity on high humidity days are being repaired. 8 valves are on order and an after action documentation for both humidifiers and Re-Heat boxes will be provided at next safety committee meeting.</p> <p>L. (H) ALFA contracting completed smoke wall patching for the entire building. All walls were inspected and all zones are protected for horizontal evacuation.</p> <p>M. (I) New Circulation Pump condenser cooling water installed in Boiler room</p>		<p>I) Janae made motion to approve, second by Brenda, all in favor</p> <p>J) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>K) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>L) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>M) Brenda made motion to approve, seconded by Janae, all in favor.</p>	
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<p>October 16, 2023 is leaking. Jackson Mechanical is repairing and after action will be provided next month.</p> <p>N. (J) Nurse call system is not functioning</p> <p>O. (H) Adoption of 2012 Life Safety Code, Identifying Patient Care Bed Locations, Anesthesia Locations, Wet Locations and Conscious sedation locations is requested to be approved.</p> <p>P. Helicopter Pad resurfacing</p>		<p>N) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>O) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>P) Brenda made motion to approve, seconded by Janae, all in favor.</p> <p>Q) No action needed at this time.</p>	
Q.			
R.			Facilities
S.			Facilities
ROUTINE CONSENT REPORTS			
A. Monthly Manometer Readings for HEPA filters		No issues indicated in October 2023	Facilities
B. Monthly Fire Suppression Gauge reading, Control Valve and twin Connection Inspection	This inspection has not been documented as per previous PM stated since being closed but was monitored during daily and weekly walk thru building (Reference to "A" for explanation of our previous system)	No issues indicated in October 2023	Facilities
C. Monthly Portable Fire Extinguishers Report	This inspection has been completed month.	No issues indicated in October 2023	Facilities
D. Weekly Emergency Generator Inspection	This inspection is conducted weekly, and no issues reported or documented	No issues indicated in October 2023	Facilities
E. Monthly Generator and Transfer Switch Inspection	No issues currently	No issues indicated in October 2023	Facilities
F. Monthly Battery Backup Lights for OR and Transfer Switch	Battery backup testing is conducted monthly and documented	No issues indicated in October 2023	Facilities
G. Monthly Medical Gas Inspection	This inspection has not been documented as per previous PM stated since being closed but was monitored during daily and weekly walk thru building	No issues indicated in October 2023	Facilities
H. Monthly Recall for Purchasing, Supplies	Currently in the process of setting up the purchasing department. Inventory	No issues indicated in October 2023	Facilities

	was performed on 9/28/23 on what stock is in there as of now.		
I. Monthly Legionella Water program	Nothing currently	No issues indicated in October 2023	Facilities
J. Monthly Exit Signs	Exit sign testing is conducted monthly and documented	No issues indicated in October 2023	Facilities
K. Monthly Egress Light Inspection	Egress light testing is conducted monthly and documented	No issues indicated in October 2023	Facilities
L. Monthly Bio Medical Report	Commercial Medical Equipment has been contracted to provide bio-med services for our facility.	New Space Lab Monitors will need to be inspected and Two Blanket warmers and Sterilizers will be Repaired and documented as completed.	Facilities
M. Operating Room Temperature and Humidity Logs	Once the reheats are installed logs will be conducted.	Surgery Suite is currently not conducting business	Facilities
Routine Monthly Safety Officer Report stating all Consent Reports are complete	No changes or questions currently for the consent reports.	Motion was made to approve the reports by Janice Merrill and 2 nd by Brenda Jennings	
ADJOURN	No questions at this time motion were made to approve and adjourn by		

LAST NAME	FIRST NAME	DEGREE	PRN/ILEGE REQUESTED 1	PRIVILEGE REQUESTED 2	PRIVILEGE REQUESTED 3
Barlow	Jeffery	APRN-CNP	Emergency Medicine	Moderate Sedation	
Barlow (Bliss)	Coty	APRN-CNP	Emergency Medicine	Moderate Sedation	
Rothwell	David	MD	Emergency Medicine	Moderate Sedation	
Gallegos	Fabian	APRN-CNP	Emergency Medicine	Moderate Sedation	
Williamson	Ross	APRN-CNP	Emergency Medicine	Moderate Sedation	
Williams	Darbl	APRN-CNP	Hospitalist		
Karlin	John	APRN-CNP	Emergency Medicine	Moderate Sedation	
Laffoon	Carl	APRN-CNP	Emergency Medicine	Moderate Sedation	
Bodenhamer	Yumee	APRN-CNP	Hospitalist	Emergency Medicine	
Dave	Mayank	MD	Medical Director	Emergency Medicine	
Abernathy	Bob	DO	Emergency Room Manager	Family Medicine	Emergency Medicine
Laakman	Daniel	APRN-CNP	Emergency Medicine	Moderate Sedation	
Scruggs	Deanna	APRN-CNP	Emergency Medicine	Moderate Sedation	
Miller	Laura	APRN-CNP	Emergency Medicine	Moderate Sedation	
Carter	Randall	APRN-CNP	Emergency Medicine	Moderate Sedation	
Potter	Susan	APRN-CNP	Emergency Medicine	Moderate Sedation	
Sparks	Audrianna	APRN-CNP	Emergency Medicine	Hospitalist	Moderate Sedation
Mann	Mark	MD	Emergency Medicine	Moderate Sedation	Family Medicine
Irwin	Derek	MD	Pathology		
Luu	Ly	MD	Pathology	Lab Director	
Umobuarie	Ejechi	MD	Pediatrics		