

**Clinton Regional Hospital
Minutes for the Quality Assurance/Performance Program Meeting – Date August 14, 2024**

Present: Devina Perez, Admissions Director; Brenda Jennings, Quality/Infection Control/Employee Health; Janice Merrill, Facilities Director; David Barnett, Radiology Director; Holly Masqueller-Woodson; Materials Director; Stefanie Bustos, HIM Director; Stephanie Drum, Cardiopulmonary Director; Chasity Richardson, Administration Secretary/HR; Brendan Price, CNO; Len Lacefield, CEO; Cris Hickerson, Pharmacy Director; Janae Chittum, Medical Services Coordinator; Sarah Keys, EVS Manager

Excused: _____ Chief of Staff,

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Motion to call to order	Motion to approve the July Quality Assurance Performance Meeting August 14, 2024, at 1301.	Cris Hickerson motion to approve Quality Assurance/Performance Meeting being called to order at 1301, second by Brendan Price, all in favor.		
Old Business				
	1) Quality Meeting Minutes for July.	Cris Hickerson motion to approve Quality Meeting Min. for June, second by Brendan Price, all in favor.		
New Business				
			All Managers	8/9/24
Consent Items				
Dietary				
Dietitian & Kitchen Update	Nothing to report	No action required		90 Day Reporting
Lab				
Number of Blood Cx. Contaminated	Out of 30 blood cultures done in the lab no blood contamination was found for the month of July	No action required.	Arlene Oneal	90 Day Reporting
Number of transfusion reactions	Nothing to report for the month of July	No action required	Arlene Oneal	90 Day Reporting
Blood Utilization Monitoring	2 patients received blood for the month of July. All documents and documentation were in compliance.	No action required	Brendan Price Arlene Oneal	
Proficiency testing	Nothing to report for the month of July	No action required	Arlene Oneal	

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Correlations and Calibration Verifications	Nothing to report for the month of July	No action required	Arlene Oreal	
Peer Review				
Physician Peer Review	Nothing to report	No action required	Quality Director	90 Day Reporting
Anesthesia Peer Review	No surgeries to report	No action required	Quality Director	90 Day Reporting
Unexpected Outcomes	No surgeries or procedures to report	No action required	Quality Director	90 Day Reporting
	3 deaths – 2 ED and 1 MS	One death RCA was written up and staff nurse was education was done along with verbal and written counsel that will go into staff personnel file. Cris Hickerson motion to approve Mortality Review, second by Brendan Price, all in favor.	Dr. Dave Dr. Abernathy	done
Mortality Review				
Supply Chain Management				
Product Recalls/Backorders	<ol style="list-style-type: none"> 1. On 7/9, we received a product correction notification from Getinge regarding specific models of Atrium chest drains that lack sufficient precaution instructions for proper setup of catheters and patient tube connections. 2. On 7/16, we received a drug notification regarding potassium chloride ER capsules. 	<ol style="list-style-type: none"> 1. I located the chest drains we have on hand, which are in the ER. We did have one of the affected models, 2002-300. I taped a copy of the product correction warning poster to the one chest drain we had that was affected, so anyone who intends to use the item will see the necessary information. I also emailed nursing leadership to inform them of the notification. I completed the product response form accordingly the same day and emailed it back to the manufacturer. No further action is required at this time. 2. I took this notification to the pharmacy and verified with Cathy Bridges that we did not have the affected product listed in the notification. I completed the product response form accordingly and 	Holly Masquellier-Woodson	Monthly Reporting

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
		<p>returned it to the manufacturer via email the same day. There is no further action required ___ motion to approve Product recall and backorders report, second by ___, all in favor.</p>		
<p>Equipment Management</p>	<p>On 7/17, we received an equipment notification from GE Healthcare, regarding our Proteus XR/a machine, located in Radiology</p>	<p>Notification to David (Radiology Director) and confirmation that we do have the equipment. The notice stated the machine does not have a de-installation manual describing process steps for de-installing the device. These steps must be followed when de-installing the device. Since we are not planning to do any de-installation of the equipment at this time, I emailed the notice to our Radiology Director in case this information is needed in the future. I completed the product response form the same day and returned it to the manufacturer via email. There is no further action required at this time. David Barnett motion to approve Equipment Management, second by Cris Hickerson, all in favor.</p>	<p>Holly Masquellier-Woodson</p>	<p>Monthly Reporting done</p>
<p>Medical Records</p>				
<p>Delinquent medical records >30 days</p>	<p>See Report for July 2024</p>	<p>Work to continue to get delinquent charts up to date. Cris Hickerson motion to approve medical records, second by David Barnett, all in favor</p>	<p>Sarah Keys</p>	<p>August 31</p>
<p>Med/Surg</p>				
<p>Critical Values</p>	<p>Nothing to report</p>	<p>No action required</p>	<p>Brendan Price</p>	<p>August 90 Day Reporting</p>

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Number of Blood Consent obtained and documented appropriately	Two patients received blood products for the month of July.	One of the staff members on MS had to review the policy and guidelines on blood transfusion. The nurse was written up and education was done. Cris Hickerson motion to approve Blood consent and documentation, second by Sarah Keys, all in favor.	Brendan Price	done
HAC Pressure Ulcers per 1000 patient days	Nothing to report	No action required	Brendan Price	done
Mortality Review I/P Deaths	One death. See report for mortality review	Cris Hickerson motion to approve mortality review for IP, second by Sarah Keys, all in favor.	Brendan Price	done
Physician/Family Notification of Admission Audit Tool	Phy. Family Notifications for the month of July was 64%.	Goal for Phys. Family notifications is 95%. Education done to the staff about meeting the monthly requirements. Cris Hickerson motion to approve Physician/Family notification report; second by Sarah Keys, all in favor.	Brendan Price	done
Acute Care Pain Assessment and Reassessment	Only 38% were compliant for the month of July on pain assessment/reassessment, which makes 62% noncompliant.	Goal for Pain assessment/reassessment is 95%. Staff education was done during MS staff meeting. This was a verbal warning. Each individual member of staff will be audited for their pain scores and if they do not meet 95%, they will be written up and placed in their personnel file. Janice Merrill motion to approve pain assessment/reassessment audit for the month of July, second by David Barnett, all in favor.	Brendan Price	done
Radiology				
Radiology Report	2 nd quarter Radiology Committee Report. CT data lost with CT crash.	CT was repaired and reporting will resume next quarter. Cris Hickerson Motion to approve Radiology Report, second by Brenda Price, all in favor.	David Barnett	Done 90 day reporting

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
ED/Radiologist Interpretation Discrepancies	Repeat rate no techs above 5%	No action required	David Barnett	Done 90 Day Reporting
Imaging Critical Results <i>Communicated</i> within 60 minutes or less – AVG Time	Turnaround times for stat exams May 31 minutes 90% within 1 hour June 35 minutes 85% within 1 hour July 30 minutes 92% within 1 hour	No action required	David Barnett	Done 90 Day Reporting
Imaging Critical Tests <i>Completed</i> within 60minutes or less of order time – AVG Time	May 0 critical findings June 1 critical finding reported in 15 minutes (Not reportable as a stroke) July 0 critical findings	No action required	David Barnett	Done 90 Day Reporting
High level of disinfection Revital Ox Solutions	High level disinfectant US log May 0 exams requiring HLD June 1 exam requiring HLD July 0 exams requiring HLD	No action required	David Barnett	Done 90 Day Reporting
Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who received head CT or MRI Scan Interpretation within 45 min. of arrival	Will begin reporting for the next quarter	No action required	David Barnett	90 day Reporting
Emergency Room				
Percent Discharged and Admission	Nothing to report this month	No action required	Anita Ford	90 Day Reporting
Appropriate ER Transfers	34 ER transfers for the Month of July	No action required	Anita Ford	August 90 Day Reporting

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Mortality Review of ED Deaths	2 deaths in ED. See mortality peer review	No action required	Anita Ford	90 Day Reporting
<i>Critical Lab Follow-up Report</i>	6 critical lab follow-ups from the ED –	One trans. OU and results faxed; one talked with pt. and encouraged to follow-up with provider; one message left to return call; one faxed copy of lab to OU; one faxed copy to Mercy; one left message and faxed copy to PCP. Janice Merrill motion to approve Critical Lab follow-up report, second by David Barnett, all in favor.	Brenda Jennings	Done Monthly reporting
Pharmacy				
Backorders/Supply Issues Recalls	Nothing to report this month	No actions required	Cris Hickerson	90 Day Reporting
# of adverse drug reactions reported	Nothing to report this month	No actions required	Cris Hickerson	90 Day Reporting
Adverse Drug Reaction Rate	Nothing to report this month	No actions required	Cris Hickerson	90 Day Reporting
Pharmacy & Therapeutics Committee	Nothing to report this month	No action required	Cris Hickerson	90 Day Reporting
Antibiotic Stewardship	Nothing to report this month	No action required	Cris Hickerson	90 Day Reporting
Infection Prevention				
Infection Control Surveillance Report	Nothing to report	No action required	IC Nurse	90 day reporting
Sterilization	No surgeries to report; No OR Department	No actions required	IC Nurse	90 Day Reporting
Influenza Program	Out of season.	No action required	IC Nurse	Nov. 2024
Credentialing Committee				
Credentialing Report	4- Pending approval for privileges 12 – pending exclusion reports due by 10/30/24	Paperwork done waiting on approval. Janice Merrill motion to approve Credentialing report, second by David Barnett, all in favor.	Deby Landis	90 Day Reporting
Employee Health				
Employee Health new employee paperwork and flu vaccines.	66- vaccinated Covid 3- partial Covid vaccinated	Will continue to receive exemptions until the end of the month. Janice	Brenda	Aug 31st

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
	33- not vaccinated with Covid 38- to date received the Religious Exemption	Merrill motion to approve Employee health report, second by David Barnett, all in favor.		
Employee Illnesses	Nothing to report	No action required	Brenda	90 Day Reporting
Bloodborne exposures, Sharp Injuries, Employee Injuries	Nothing to report	No action required	Brenda	90 Day Reporting
Process Improvement				
Admission – Pt. Rights	96% for the month of July.	Goal met of 95%. Goal has been met two months in a row. David Barnett motion to approve admission report, second by Brendan Price, all in favor.	Devina Perez	Done
Airborne Isolation	Airborne Isolation Monitors: monitors for both Med Surg and ER. ER being monitored with a Manometer. Until monitors have been installed.	David Barnett motion to approve Isolation report, second by Brendan Price, all in favor.	MS Director ED Director	done
Order Sets	Nothing to report for the month of June	No action required	Pharmacy Director	Monthly Reporting
LifeShare	Lifeshare done on all three deaths.	No action required. David Barnett motion to approve Lifeshare report, second by Brendan Price, all in favor.	ED Director and MS Director	Monthly Reporting
Left without being seen in ED	Two in ED- gave no reason, walked out of room and left.	No action required	Anita Ford	Monthly Reporting
Falls	Fall in ED 7.15.24. Confused demented patient was brought to ED and fell out of bed.	Patient was evaluated by ED provider and had one abrasion on arm from fall, patient monitored and transferred to higher level of care, David Barnett motion to approve Fall report, second by Janice Merrill all in favor	Brendan Price	Monthly Reporting done
Boiler Room Review	Within Range	No action required	Janice Merrill	Monthly Reporting April, May, June done
Influenza Vaccination counts	Nothing to report, out of season	Vaccinations for employees will begin the first week of October.	Brenda Jennings	Nov. 2024
Patient Satisfaction	Nothing to report	No action required.	Case Management	90 Monthly Reporting

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
30 Day Readmission	Nothing to report for the month of July	No action required	Case Management	90 Monthly Reporting
Discharge Follow-up Calls	Out of 12 patients, 11 were contacted that makes a percentage of 92% in the month of July.	Cris Hickerson motion to approve follow-up call report, second by Cris Hickerson, all in favor.	Case Management	Monthly Reporting
PHIDDO Report	Nothing to report for the month of July	No action required	Infection Control	Monthly Reporting
Contracted Services				
Contracts	Nothing to report	No action required	Len Lacerfield	
Risk Management				
Incident Reports:	<p>1) 7.1.24-Heparin medication left out on pt. IV pole& was accessible to anyone. The oncoming nurse found a partial syringe of heparin on top of IV pump. The nurse had pulled Heparin and used it for the clotted off central line.</p> <p>2) 7.3.24-- There was an order for foley Cath to be flushed Q hr. But was only flushed twice on the 12-hr. shift.</p> <p>3) 7.3.24-- Pt. was receiving blood. Order for 500cc bag to be hung but nurse use 1000cc bag of NS. This allowed blood to back up into NS bag because it didn't clamp NS bag. The bag of NS did not get scanned in MAR.</p> <p>7.3.24- Coban was found on IV site too tight. Coban wrapped around forearm to cover IV site so tight hand was swelling and IV clamps left indentation in patient's arm.</p>	<p>All done by two nurses. The CNO did education one on one with the nurse. Cris Hickerson motion to approve Incident Reports, second by Sarah Keys, all in favor.</p>	Brendan Price	Done
Root Cause Analysis	Pt was admitted as OBS for transfusion of 3units PRBC for hgb 5.5. BP reported to be 84/20.	No repeat BP done; gave Norco 10, no rapid response called, didn't question order from provider. Staff education over Rapid Response, scenarios will be administered on a quarterly basis for continuation of education. The nurse wrote up, education gave to nurse to review, policy gave to nurse to review and sign when understood.	Brenda Jennings Brendan Price	Done

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Complaints/Grievances	Nothing to report	Cris Hickerson, motion to approve RCA report, second by David Barnett, all in favor	Quality Director	Done
Sentinel Events	None to report	No action required	Quality Director	90 day Monthly Reporting
Education				
New/Pending/Staff	Nothing to report	No action required	Brenda	90 day Monthly Reporting
Competencies/Education material	Administration of Blood Products	Education for all nursing staff Cris Hickerson motion to approve Education material, second by Sarah Keys, all in favor.	Brendan Price	done Monthly Reporting
Annual Training	Nothing to report	No action required	Brendan Price	90 day Monthly Reporting
Ongoing Education	Nothing to report	No action required	Janae Chittum	90 day Monthly Reporting
New Procedures or Techniques	None at this time	No action required	Janae Chittum	90 day Monthly Reporting
Disaster Preparedness				
Disaster Preparedness	Nothing to report this month	No action required	Janice Merrill	90 day Reporting
Drills	Nothing to report this month	No action required	Janice Merrill	90 day Reporting done
Emergency Operation Plan	Nothing to report this month	No action required	Janice Merrill	90 day Reporting
Environment of Care				
Temperature & Humidity Levels	Humidifiers are checked daily and there are no issues currently	David Barnett motion to approve Temperature and Humidity report logs, second by Sarah Keys, all in favor	EOC Director	90 day Monthly Reporting

Agenda Item	Discussion	Action/Recommendations	Responsible Party	Projected Completion Date
Water Management Program Control measures Applicable validation Flushing lines Water mgmt. plan review	Monitored and check daily with no issues	David Barnett Motion to approve Water mgmt. logs. program, second by Sarah Keys_, all in favor.	EOC Director EVS	90 day Monthly Reporting
Fire/Safety/Life Safety	See minutes for the month of June	David Barnett motion to approve Life safety minutes, second by Sarah Keys, all in favor.	EOC Director	90 day Reporting
Hazardous Waste/Chemical Management/	Overage on hazardous waste pickup	Education was sent out to all employees detailing what should and should not be placed in the red bags/bins. There was also an acknowledgement on proper regulated medical waste disposal to read and sign. David Barnett motion to approve Hazardous waste report, second by Janice Merrill, all in favor.	Janice Merrill Sarah Keys	90 day Reporting
Policies & Procedures/Forms	Administration of Blood and Blood Products; American Heart Association Education, Employee Covid testing form/order,	No action required	Brendan Price	Monthly Reporting
Environmental Services	All logs were 100%	No action required	Sarah Keys	done Reporting
ICRA for Construction & Remodel	Nothing to report	No action required	IC Director	90 day Reporting
Motion to adjourn	Brenda Jennings recommended to adjourn 1345.	Cris Hickerson Motion to adjourn Quality Meeting at, second by Brendan Price, all in favor		