

TOPIC	DISCUSSION AND FINDINGS	RECOMMENDATION	FOLLOW-UP/ACTION
Call to Order 4:30 PM	The following members were present on the attached sign-in roster.	A quorum was present and the meeting was called to order.	None.
Introduction(s)			
	None	None	None.
Public Comments			
	None	None	None.
Minutes			
Meeting Minutes	Approval of April 6, 2020 MEC minutes	None	Motion to approve April 6, 2020 MEC minutes 1 st Motion: Dr. Padron 2 nd Motion: Dr. Carlson All approved
Old Business			
Critical Test and Critical Values Policy	All MEC members were given a copy of the Critical Test and Critical Values Policy for review prior to MEC meeting. This policy was created to define tests considered to be critical and to provide timely communication of the results to the appropriate Licensed Independent Practitioner.	None	Motion to approve the Critical Test and Critical Values Policy 1 st Motion: Dr. Padron 2 nd Motion: Dr. Carlson All approved
MD-1 Provider Handoff Policy	All MEC members were given a copy of the MD-1 Provider Handoff policy for review prior to MEC meeting. The policy was created to ensure continuity of care is provided for all patients.	None	Motion to approve the MD-1 Provider Handoff Policy 1st Motion: Dr. Padron 2nd Motion: Dr. Carlson All approved
MD-1a Provider Handoff Procedure	All MEC members were given a copy of the MD-1a Provider Handoff Procedure for review prior to MEC meeting. This Hand-Off Communication is the communication or update from one provider to another when responsibility	None	Motion to approve the MD-1a Provider Handoff Policy 1st Motion: Dr. Padron 2nd Motion: Dr. Carlson All approved

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	of patient's care is transferred from provider to provider; department to department; service to service and from one level of care to another level of care with the goal of patient's safety, quality of care and efficiency.		
New Business			
EPCS Encounter Issues – EDIS and Medhost			
Infection Control Plan 2020 – draft	Jennifer Glisson provided the Infection Control Plan for 2020 to all MEC members for review prior to MEC meeting for review. The Infection Prevention, Control, and Employee Health Plan was organized, developed, and implemented to positively impact the quality, safety, and the patient care services provided here at the hospital. Its focus is a multidisciplinary, systematic, and coordinated hospital wide approach to reduce the risk of acquiring and transmitting infections among patients, employees, licensed independent practitioners, contract employees, volunteers, students, and visitors. This plan supports and strengthens the mission and vision of Lakeside Medical Center. All MEC members stated that the plan was created very well.		Motion to approve Infection Plan 2020 1 st Motion: Dr. Carlson 2 nd Motion: Dr. Perezalonso
Report			
Treasurer Report	Amount in PNC account: \$ 87,011.99 Dr. Carlson is currently working on the activating LMC MEC information in Sunbiz. It is taking longer due to COVID-19.	None	Dr. Carlson to update LMC MEC business information in Sunbiz.
Committee Reports			
CCU report	All members received the March 2020 vs March 2019 CCU report.	None	None

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P&T Committee Report	<p>Charlene Murray provided the April 2020 P&T Summary report, the March P&T Meeting Minutes and the Hazardous Drug Management Policy and Procedure.</p> <p>Medication Variances MD ordered Zofran 1mg IV, PO given Diovan 80mg found in Atorvastatin pocket in Pyxis RN removed prescription page from Pyxis for personal use Robitussin DM ordered, ER RN gave AC, to 2 patients PACU RN did not document verbal order for Morphine 2mg Control Substance - None reported</p> <p>Adverse Drug Event Patient had BG 44; patient on Hypothermia protocol</p> <p>Antimicrobial Stewardship DOT 232 Antimicrobial purchases \$8,685.42</p> <p>Remote Order Verification 0 Variance - 2630</p> <p>MDI Reuse Risk Factors: May not be appropriate for isolated patient Method for disinfecting might not be appropriate for COVID-19 Individual compliance with disinfecting protocol</p>	None	None

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	Policy Update/Protocol Update Emergency Standing Order – add Glucose 40 gel ENfit Enteral feed Albuterol MDI reuse Covid-19 medication storage		
Department Reports			
Credentialing Report	All MEC members were given a copy of all physicians applying for Initial Appointment and Reappointment for review and approval.	None	Motion to approve the list of Physicians attached applying for Initial Appoint and Reappointment. 1 st Motion: Dr. Perezalonso 2 nd Motion: Dr. Padron All Approved
Graduate Medical Education Report	Provided a copy of the approved Minutes from April 23, 2020 GMEC meeting Today the LMC FM Program received ACGME initial accreditation. Residents have been involved with COVID Testing and making masks Graduation will be COVID friendly Board Updates: <ul style="list-style-type: none"> The following residents has passed their Board Exam: <ul style="list-style-type: none"> Danny Abouekde, DO David Lepoff, DO Samuel Espinal, DO Terry Parsons, DO 	None	None
Delinquent Medical Records	Discussed the Delinquent Medical Records report with all members of MEC. Average Monthly Discharge rate has increased from last month to the	None	None

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	month of March 2020 with the rate being 1993. There are 39 deficiencies greater than 30 days and all physicians have been set a letter notifying of their delinquent notes.		
Emergency Department Report	Discussed the ED Report for March 2020 in MEC packet that is pulled from the EDIS. They have been doing pretty well for turnaround time.	None.	None
Surgery Services report	Dr. Davis provided the surgical procedures comparing Current year 2020 to FY2019 for the month of March.	None	None
Lab Report	Dinaliza provided the Laboratory report for the month of March 2020. Lab reviewed 30 blood transfusion records with 5(17%) incomplete documentation. The action plan created: Daily Transfusion log provided by DON started 04/02/2020. Wastage: 3 units of plateletpheresis expired. On hand supply kept to comply for massive transfusion protocol.	None	None
OB Services Report	MEC members were given OB reports to all MEC members. OB reported 9 deliveries with 3 vaginal deliveries and 6 C-sections.	None.	None
Chief Medical Officer	QUALITY Ongoing Morning Multidisciplinary Discharge Meetings COVID-19 ongoing monitoring, forecasting, and reacting Review of Quality Performer Fall Outs provided by Sylvia SERVICE Reviewed and approved initial-credentialing and re-credentialing packages for all physicians and	None.	None

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	<p>providers coming to MEC this month for final approval.</p> <p>Met with Physicians and Providers to review their Ongoing Provider Practice Evaluation & Focused Professional Practice Evaluation and discuss their strengths and opportunities for improvement.</p> <p>Review of Risk Qualls with communication to physicians involved</p> <p>Review of Delinquent Medical Records</p> <p>GROWTH</p> <p>Pandemic long-term response</p>		
Risk Management Report	<p>Risk Management provided the executive summary for the month of March 2020. Alyssa recorded 7234 patient encounters, 17 medication variances, 137 patient care with 70 as AMA and 41 AWOL/Elopement. For non-patient events Alyssa reported 3 medication variances.</p>	None	None
Director of Nursing Report	<p>QUALITY</p> <p>Through this pandemic, each nurse is showing leadership by providing, facilitating, and promoting the best possible care.</p> <p>In reviewing current staff, skill sets were determined to float staff to other areas of the hospital or to assist as "helping hands"</p> <p>We review new admission records daily and determine if any staff's safety was jeopardized during the care of a suspected COVID 19 patient - such as a negative screening initially and later becomes a positive screen</p>	None	None

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	<p>In addition, charts are reviewed to confirm the process is being followed such as PPE applied, PUI form completed, terminal cleaning, etc</p> <p>SERVICE The community recognizes staff: Christ Fellowship, PBSO, Trustbridge and even chalk designs on the sidewalk. This supports helps uplift staff during this difficult time Discussions with physicians and managers took place on April 7 to create a surge plan not only for COVID 19 but also as a plan to be prepared for any crisis.</p> <p>GROWTH Beginning periodic scheduled rounding on the different units to meet with staff. Feedback is essential and the information received shared at leadership meetings for continuous improvement. Having conversations with staff/physicians to determine what is going well, or what is not going well and discussed with those managers involved.</p>		
Continuous Quality & Patient Safety Improvement Committee Report	Sylvia Hall Provided the Quality Management Report to all MEC members which discussed updates on all quality reports, quality meeting dates and time, and staff development.		
Executive Director	<p>Janet Moreland provided the Executive Director Report and discussed the following:</p> <p>GROWTH Glades Stabilization Unit Update</p>		

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	Lakeside Medical Center Dialysis Outpatient Unit Update Lakeside Medical Center - Walk/Run Trail/Garden ANNOUNCEMENTS Dr. Matthew's credentials has been terminated OB Services Dr. Abu – vacation (May 25, 2020 through June 21, 2020) COVID- 19 Planning Surge Planning – ER holds etc.		
Adjournment	Meeting adjourned at 5:44 PM Next meeting June 1, 2020		