

Chair  
David Howerton

Vice-Chair  
Brad Smith

Treasurer  
Cindy Moore

Secretary  
Jason Likens

**Oklahoma City Area (8) Regional Trauma Advisory Board**  
**Regional Planning Committee**  
**Samis Education Center**  
**1200 Children's Avenue**  
**Oklahoma City, OK 73104**  
**May 23<sup>rd</sup>, 2018 – 9:00 am**

**MINUTES**

**I. Call to Order**

The meeting was called to order by Chair Brad Smith at 9:10 am.

**II. Welcome and Introductions**

All attendees introduced themselves. In addition to the committee members, the following guests were present: Kacy Pinnick (Oklahoma Surgical Hospital), Rowdy Anthony (OU Medical Center), Dr. Bob Letton (OU Medical Center), Dr. Ryan Kennedy (OU Medical Center), and Liz Webb (OU Medical Center).

**III. Roll Call**

Roll call was taken with the following members present: Brad Smith, David Howerton, Larry Terry, Lindsey Henson, Renae Kirkhart, Chris Prutzman, and Richelle Rumford. Ms. Rumford left the meeting at 10:56 am. Jennifer McGuire was not present/

**IV. Approval of Minutes – August 8<sup>th</sup>, 2017**

A motion to approve the minutes was made by Renae Kirkhart and seconded by Chris Prutzman. There was no discussion, and the motion passed 7-0.

**V. Reports/Updates**

**A. Emergency Systems Quarterly Activity Report**

Mr. Daniel Whipple provided the Emergency Systems report stated that several regions throughout the state are beginning to review the recently approved quality improvement indicators. Regional quality improvement committee efforts include sending letters to hospital Emergency Department Medical Directors in an effort to emphasize the need for accurate documentation upon which informed decisions can be made about the trauma system in practice.

**B. Trauma Rotation Committee Report from Previous Meeting**

The previous meeting reviewed and approved the on-call schedules for this time period. The next meeting on June 5<sup>th</sup>, 2018 will be discussing the National Emergency Department Overcrowding Score (NEDOCS) and reviewing the Region 8 bylaw draft regarding the body.

**VI. Business**

**A. Review, discussion, and possible vote to approve amendments of the Regional Trauma Plan to include:**

1. Hospital burn capabilities in Tulsa and Oklahoma City and revision of destination changes aligning with current hospital capabilities

Doctors Letton and Kennedy were present to discuss the capabilities of OU Medical Center (OUMC) regarding pediatric burns. The medical director of the INTEGRIS Baptist Medical Center (IBMC) Paul Silverstein Burn Center, Dr. Christopher Lentz, was invited but unable to attend. The committee began by reviewing the number of burn patients receiving definitive care in Oklahoma City and Tulsa in calendar year 2017. Mr. Anthony asked where the data originated, and it was explained that it was obtained from both the Trauma Registry and Oklahoma EMS Information System (OKEMSIS). Mr. Anthony questioned the data as he stated OUMC treated more than 100 burn patients from 2015-2017 about 85% of which were pediatric patients; the adult burn data presented showed only The Children's Hospital campus, and it reflected that they did not treat any adult patients. Dr. Letton and Kennedy explained that from their experience, IBMC has had variability in the burn patients that they accept but has not accepted burn patients with concomitant trauma, regardless of injury severity. Dr. Letton stated that OUMC is attempting to improve consistency throughout the system regarding accepting burn patients; he is hopeful that



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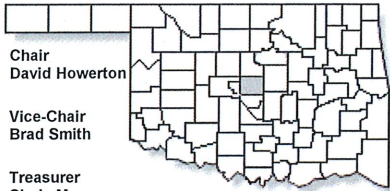
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the opening of a new Neonatal Intensive Care Unit on the sixth floor of the hospital will improve capacity problems. The new unit is slated to open in approximately eighteen months. Dr. Letton further stated that he feels all pediatric burns should be first evaluated at OUMC due to the increased number of specialty pediatric resources available to that health system. Currently his main concern is the patient that has between 45-60% body surface area burns and may need skin grafts during continued treatment as those are the largest portion of patients transferred from OUMC. He believes that a partnership with IBMC will be beneficial for patient outcomes once key resources can be identified at both facilities. Further thoughts on the current Oklahoma City burn capabilities involve whether a back-up facility needs to be named for cases of capacity issues. It was discussed how OUMC could be a back-up to IBMC and vice-versa. The committee requested that Hillcrest Medical Center in Tulsa be contacted to ascertain their capabilities in order to decrease the number of out-of-state transfers, especially for those patients receiving SoonerCare as it is difficult to pay for out-of-state medical care with it.

2. Changes in definition of "On-Call Facility" within the Glossary to reflect current hospital rotation  
The current definition of "On-Call Facility" in the Region 8 Trauma Plan does not reflect the current practice where the on-call facility provides services for unassigned Priority 2 patients that require, at minimum, neurosurgical, oromaxillofacial, or hand services. Language was added to align the current practice with the definition. A motion to accept the "On-Call Facility" definition was made by Chris Prutzman and seconded by David Howerton. There was no discussion, and the motion passed 7-0.
  3. Hospital ophthalmology capabilities and determination of appropriate pre-hospital destination  
Mr. Whipple stated that recently a patient with an ophthalmological injury was treated at a facility that did not have known ophthalmology capability and asked if the committee would like to review the capabilities of metro hospitals. The Region 8 Trauma Rotation Committee also plans on discussing this at its next meeting to identify potential resources. Ms. Rumford stated that the Dean McGee Eye Institute has a contract with OU Medical Center to provide those services and that the Eye Institute may have similar agreements with other hospitals. The committee agreed to allow the Trauma Rotation Committee to seek information about ophthalmology resources and use it to refine the destination plan if necessary.
- B. Discuss and vote to approve Region 8 Regional Trauma Advisory Board Bylaw amendments  
Mr. Whipple began the topic by discussing the draft language requested from the last committee meeting. The main changes include:
- Amending the geographic description of the region
  - Changing the term length of Board Members and Officers from two to three years
  - Adding e-mail as a means of notification for a proxy
  - Removing the Treasurer position and associated duties
  - Allowing the nomination to fill and election for a vacant officer position to occur at the next scheduled meeting if notice is distributed at least ten days before said meeting
  - Removal of the Medical Audit Committee from the Quality Improvement Committee section
  - Creation of a Trauma Rotation Committee and associated language
  - Adding e-mail as a means notification of resignation
  - Creation of Attachment A to describe the process for creating the Board Member rotation





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The committee provided feedback regarding the bylaw draft. One item is that the Trauma Rotation Committee should only be allowed to amend the on-call hospital rotation schedule autonomously; any other actions by the board should be considered a recommendation until it is approved by the RTAB. Another amendment to the draft included how a facility can be defined as "routinely receiving pre-hospital trauma patients." It was recommended that the list of receiving hospitals as defined by the Medical Control Board be used. That language was incorporated into both the definition of permanent Board Members and rotating Board Members. During this discussion, the attendance requirements of Board Members and Officers were amended to align with that of the General Members.

A motion to accept the draft language with the amendments for Board Member and Officer attendance, Trauma Rotation Committee, and Board Member Rotations was made by David Howerton and seconded by Lindsey Henson. There was no further discussion, and the motion passed 6-0.

**C. Creation of workgroups for review of:**

1. Regional bylaws
2. Trauma Plan

Mr. Whipple discussed how there is no set review period of the trauma plan and bylaws, and some of the bylaw updates from today's meeting should have been amended previously. He explained how working groups can discuss the information via phone or e-mail and do not need to meet in person to conduct work.

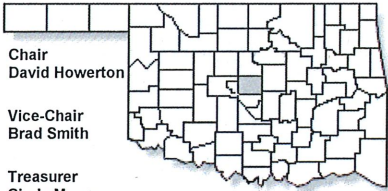
Mr. Smith volunteered to lead the bylaw working group, and Mr. Howerton agreed to lead the trauma plan working group. The working groups will provide their feedback prior to the fourth quarter.

**VII. Public Comment**

Mr. Smith asked if the Region 8 RPC should review data regarding Pre-Existing Landing Areas (PELA) sites. It was discussed how Region 8 has little need for PELA sites and of how once the list of sites is published, there is no guarantee that the sites are maintained and safe for use. Mr. Smith then asked if the Medical Audit Committee (MAC) would be reconstituted and if it would require legislation to do so. At this time, there are no known legislative efforts to reconstitute the committee.

**VIII. Next Meeting**

- A. Trauma Rotation Committee  
Oklahoma State Medical Association  
313 Northeast 50<sup>th</sup> Street  
Oklahoma City, OK 73105  
June 5<sup>th</sup>, 2018 – 5:30 pm
- B. Oklahoma Trauma and Emergency Response Advisory Council  
Oklahoma State Department of Health  
1000 Northeast 10<sup>th</sup> Street  
Oklahoma City, OK 73117  
June 6<sup>th</sup>, 2018 – 1:00 pm



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- C. Quality Improvement Committee  
The Children's Center  
6800 Northwest 39<sup>th</sup> Expressway  
Bethany, OK 73008  
July 10<sup>th</sup>, 2018 – 10:30 am
- D. Regional Trauma Advisory Board  
The Children's Center  
6800 Northwest 39<sup>th</sup> Expressway  
Bethany, OK 73008  
July 10<sup>th</sup>, 2018 – 12:30 pm
- E. Regional Planning Committee– As Called

**IX. Adjournment**

A motion to adjourn was made by Lindsey Henson and seconded by David Howerton. The meeting adjourned at 11:26 am.

Approved

  
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Brad Smith, Chair  
Regional Planning Committee, Oklahoma City Area (8) Regional Trauma Advisory Board  
August 19<sup>th</sup>, 2019