OKLAHOMA
State Department
of Health

Southwest (3) Regional Education Planning Committee
Great Plains Technology Center
4500 Southwest Lee Boulevard
Lawton, OK 73505
February 20th, 2020 – 9:00 am

MINUTES

The meeting notice was filed with the Oklahoma Secretary of State on February 7th, 2020 at 1:53 pm. The meeting notice/agenda was physically posted at the Oklahoma State Department of Health Central Office, 1000 Northeast 10th Street, Oklahoma City, OK 73117 and the Oklahoma State Department of Health website for the Region 3 RTAB on Friday, February 14th, 2020. Meeting notice was also placed at the Great Plains Technology Center Conference Room, 4500 Southwest Lee Boulevard, Lawton, OK 73505.

I. Call to Order

The meeting was called to order by Chair Brad Lancaster at 9:05 am.

II. Roll Call

Roll call was taken with the following members present: Brad Lancaster, Beth Malone, Dan McLeod, Bob Stewart, Rachel Talley, Scott Tanner, and Tyler Walters. JenaLu Simpson was absent.

III. Introductions and Announcements

Jennifer Woodrow introduced Jamie Lee as the Region 3 Quality and Survey Analyst.

IV. Approval of Minutes – October 3rd, 2019

A motion to approve the October 3rd, 2019 minutes as written was made by Bob Stewart and seconded by Tyler Walters. There was no discussion and the motion passed 7-0.

V. Reports

A. Interfacility Working Group report

Dan McLeod reported that progress had initially been delayed due to obligations within his agency. Currently the group is working to gain insight from Region 3 EMS services to include Southern Oklahoma Ambulance Service, Murray County EMS, Johnston County EMS, Marshall County EMS, Air Evac Ardmore and one hospital system, Mercy Hospital Ardmore. Dr. Phillip Sloan has joined the group and will be a huge benefit bringing insight from his almost 30 years of service which now includes service to both Southern Oklahoma Ambulance Service and SSM Health St. Anthony Hospital – Oklahoma City ambulance service. Mr. McLeod noted that a good discussion occurred at the RTAB Leadership between EMS and Hospital providers. Points of discussion included where the friction points are occurring during interfacility transfers and what is deemed detrimental to EMS and Hospitals during this process. Other points of discussion between Committee members included the following:

- Each region and EMS system will have their own personal perspective to addressing interfacility transfers because most services depend on the revenue from the transfers but some services feel the transfers are becoming detrimental to their 911 system.
- Transferring patients to hospitals based upon affiliation rather than capability is increasing strain on EMS systems and personnel and may lead to overutilization of transport by Air EMS.
- Rural and midlevel practitioners are placing patients at hospitals who auto accept patients rather than wait for acceptance from the closest most appropriate facility.
- Transfers are being requested for patients that do not require immediate care and may not receive treatment until the following day. Transfers should be triaged and requested in a more controlled manner.

- Knowing what capabilities are closest and utilizing those capabilities is beneficial to all. An education piece should provide the capabilities of surrounding hospitals to include southern out of state resources.

Jenifer Woodrow noted that issues regarding interfacility transfers are being discussed in the OTERAC Rules and Regulations and Systems Improvement and Development workgroups. The workgroups were made aware of the work being done in Region 3 and hopefully information and resources can be shared between all groups to help solve the problem. Ms. Woodrow suggested that members begin to submit QI referrals for any system issue regarding interfacilty transfers to the Region 3 QI Committee. Jamie Lee gave a brief overview of the QI process once referrals are received and systems issues are found. Ms. Woodrow also suggested that the trauma plan be reviewed to ensure destination guidelines reflect out of state resources. Chair Brad Lancaster requested members and the working group formalize goals for both hospitals and EMS agencies and what they would like to see accomplished in order to begin drafting an outline.

VI. Business

B. Review of attendance email with possible vote to approve

Committee members reviewed the proposed email and Region 3 Bylaws regarding attendance. Members discussed amending existing bylaws to allow absences to be excused prior to removal of appointed representatives and RTAB members from the Board. Proposed amendments will be brought to the next meeting for approval. Members then discussed sending another letter to the postal address of a facility for an excused absence in the event of a second absence and if the letter would be addressed from an OSDH or REPC representative. Hospital and EMS rules related to RTAB participation requirements were discussed. Members agreed the Region 3 RTAB Coordinator should send the following in an email with an attached RTAB Authorized Representative Form to any member organization after the first unexcused absence:

You are receiving this email because your facility has not met the attendance requirements set forth by the Southwest Regional Trauma Advisory Board Bylaws. Because the current representative authorized by your facility has not met attendance requirements as set forth by the Board, your representative has been removed from the Board and will need to appoint a new member to take their place. To appoint a new member, please complete and return the attached RTAB Authorized Representative Form to esystems@health.ok.gov or fax to 405-271-4240. Please note that any member organization that subsequently fails to ensure participation by their representative may be reported to both the Oklahoma Trauma System Improvement and Development Advisory Council (OTERAC) and the member organization's licensing authority.

C. Review current RTAB member attendance for discussion and possible vote to approve recommendation to RTAB Chair for State licensure action

Members reviewed RTAB attendance with no recommendation made for State licensure action and the need to ensure failure of participation notices be sent to all appointed representatives and the organization's leadership. Members requested that the attendance sheet reflect excused absences. Jennifer Woodrow noted that current authorized forms are requested on the RTAB sign in sheet if needed and excused absences will be noted with an asterisks on future attendance sheets.

To ensure documentation regarding excused absences is maintained, members requested bylaws be amended so that notification of a missed meeting be submitted to both the RTAB Chair and OSDH. Bylaws will be amended and brought to the next meeting for approval. The suggestion was made that the RTAB Chair state if an absence is excused during roll call in order for that absence to be reflected in the minutes. The Committee identified a possible problem of acknowledgement of attendance by someone other than the RTAB Member's authorized representative during roll call and documented on the RTAB sign in sheet.

D. Review and possible vote to approve amended Region 3 Trauma Plan

At the request of the Committee, Jennifer Woodrow clarified that Grady EMS District is a 522 district and not a licensed EMS agency, therefore, not included as an EMS provider. However, Grady EMS District is an interested party and approved by the RTAB as a general member.

E. Discussion, consideration, possible action and vote to approve amended Region 3 Bylaws as follows:

F. Vacancies and request or recommendations for committee membership

i. Notice of a vacancy, new request, or recommendations for committee membership shall be distributed to Board members at least ten (10) days prior to a scheduled meeting by written or verbal communication.

ii. Volunteers~~/recommendations~~ or nominations to fill the vacancy in membership or new requests for membership on this committee shall be accepted and voted on at the next scheduled meeting of the Board.

Jennifer Woodrow presented the proposed Bylaw language and clarified the draft bylaws apply only to the Quality Improvement Committee and do not apply to any other standing committee, including the REPC.

A motion to approve Business items B, D, and E as described was made by Bob Stewart and seconded by Tyler Walters. There was no further discussion and the motion passed 7-0.

F. 2021 trauma system goals discussion

Brad Lancaster discussed the following two goals to be voted on for approval at the RTAB and asked the Committee for recommendations on possible additional goals.

- Decrease the number of Priority 1 patients transported by ambulance services to a Level III or Level IV Trauma Center by 3% by the end of the calendar year
- Decrease the statewide average length of stay at Level III and Level IV Trauma Centers for patients having an ISS of ≥16 by 3% by the end of calendar year 2021

The Committee discussed recommending the addition of the following goals:

- Maintain 75% compliance rate on EMResource drills and surveys
- Increase OTEP Training with specific goals to be determined by RTAB

A. AHA Rural EMS Stroke Triage Algorithm discussion

The Severity-Based Stroke Triage Guideline Algorithm for Rural EMS was presented to the Committee for review and discussion. Jenifer Woodrow noted the proposed algorithm was approved on January 31st, 2020 by OSSAC and requested members review and submit suggestion for improvement before the algorithm is presented to OTERAC for final approval.

B. Discussion on defining a process to determine Board Member rotation

Jennifer Woodrow presented the original and current Board Member rotations included in the member packet noting that the rotations need to be updated with certain issues needing to be addressed such as language regarding permanent board members, removal of permanent board members due to attendance, and corporations holding multiple licenses. A draft Board rotation is needed before the third quarter RTAB in order to propose and vote to approve 2021 Board members. Chair Brad Lancaster called for a special meeting to address the rotation discussion and requested members email Jennifer Woodrow possible meeting dates.

C. EMResource divert time discussion

Jennifer Woodrow discussed a discrepancy between the divert time found in the EMResource manual and how long a facility is actually allowed to remain on divert status. The manual states the divert time to be two hours with EMResource allowing for only one hour. Members noted that one hour may not be enough time to fix the problems that caused the divert and emergencies can override a divert. All members agreed to recommend to the EMResource Work group that divert status match the manual and be allowed for two hours.

VII. New Business

There was no new business.

VIII. Next Meeting

A. Regional Trauma Advisory Board
Great Plains Technology Center
4500 Southwest Lee Boulevard
Lawton, OK 73505
February 20th, 2020 – 10:30 am

OKLAHOMA
State Department
of Health

B. Quality Improvement Committee
Comanche County Memorial Hospital
3401 West Gore Boulevard
Lawton, OK 73505
March 5th, 2020 – 11:00 am

C. Regional Education Planning Committee
Great Plains Technology Center
4500 Southwest Lee Boulevard
Lawton, OK 73505
April 7th, 2020 – 9:00 am

IX. Adjournment

A motion to adjourn the meeting was made by Dan McLeod and seconded by Beth Malone. The meeting adjourned at 10:22 am.

Approved

Brad Lancaster, Chair
Southwest (3) Regional Education Planning Committee
July 17th, 2020