



Oklahoma State Department of Health  
Creating a State of Health

## Region 3 Regional Trauma Advisory Board

Great Plains Technology Center  
4500 West Lee Blvd, Lawton, OK, 73505

### MEETING MINUTES April 3, 2014 @ 10:30 AM

- I. **Call to Order:** By Cheryl Simco at 10:40 AM
- II. **Roll Call:** Quorum Met.
- III. **Introductions and Announcements:**
- IV. **Approval of previous minutes:**

Motion to approve minutes of March 6, 2014 made by Eugene Dicksion and seconded by Richie Bohach. Motion passed unanimously.
- V. **Reports:**
  - A. Emergency Systems Report – Sean Oats see handouts in your packet
    1. Grace Pelley is the Trauma Systems Administrative Program Manager as of March 24, 2014. She has moved over from the Trauma Fund for the time being Trauma Fund is her major priority.
    1. Pictorial Directories: Please take one if you were absent at the last meeting. We have one for each agency and think this will be helpful.
    2. PELA sites: Has anyone tried to enter a new one. We are working with Bill Henrion right now to see how those will look on EMResource.
    3. Question about OKEMISIS see Martin Lansdale Trauma Registry Dr. Stewart.
    4. Continuous Quality Improvement Sub – Committee see information in packet you will see that we sent out six good job letters with one that went out for good documentation.



Oklahoma State Department of Health  
Creating a State of Health

B. Regional Planning Committee – Bob Swietek

1. Nothing to report but you will notice at the bottom of your agenda we have a meeting scheduled on June 5, 2014 9:00 AM in the Garden Way Room at Comanche County Memorial Hospital. We will be looking at the Regional Plan
2. Hospital Advisory Council met yesterday discussion a lot about transferring patients to the appropriate place in the appropriate time. Right now hospitals are classified as primary and secondary stroke facilities. They are looking to reclassify Level 1 facility which is a comprehensive stroke hospital. Level 2 primary stroke hospital. Level 3 stroke ready hospital and Level 4 as a not stroke ready hospital. Some of this will go back to the Hospital Advisory Council for further review because there were questions about how the facilities would be certified as a comprehensive and primary facility. It will probably be a certification from an outside entity. This process will probably take a couple of years because we still have to write rules and regulations.
3. He saw yesterday for the first time in the regulations we are supposed to have a Stroke Registry. It is in the rules and regulations with the trauma registry we just don't have one.

C. Regional Medical Planning Groups / SW Medical Emergency Response Center – Wade Caldwell

1. April 22<sup>nd</sup> there will be an S & S requesting group if you want credit you will have to participate. It will be sometime between 10:00 AM and 1:00 PM.
2. Sometime around the first of June we will have access of a nursing home that it being demolished for five days to conduct exercises in. If your agency is interested in participating please contact Cecilia and have her place you on the list.



Oklahoma State Department of Health  
Creating a State of Health

3. April 17 Web EOC will have a drill no time on that at this time.
4. June 19 Ada will be holding a Tri County exercise primarily on communications there will also be a healthcare coalition communications aspect to this exercise.

VI. **Business:**

A. Efficiency Study – Sean Oats

1. How can we add value to these meetings? Our focus as a Trauma Advisory Board is Trauma. We do not have core values for Trauma. We have core values for almost everything else. You can walk around almost any hospital and see time to balloon and others but we do not have definitive values for Trauma.
2. We are challenging all Regional Advisory Boards members to look at their process for the trauma patient. How do you assure that patient gets the proper testing and treatment and the time the decision is made to transfer that patient to the appropriate facility? What we are trying to do is see what the general times are? Is an hour realistic we do not know? EMS what is your process for making sure when you receive the call to transfer a priority one patient to the appropriate facility you can accomplish that?
3. Does anyone have a process you can speak on? What we would like at the next RTAB is some discussion on how your facility or agency handles these patients? Comanche County EMS stated they use a rotation to transfer patients to the appropriate facilities. They do not have a written policy it is decided case by case. Kirks Ambulance uses a rotation also. They do have a written policy. Jefferson Memorial Hospital does track time to decision but it is not written. Their goal is time to decision of 30 minutes or less. Comanche County Memorial Hospital calls in the appropriate teams when they receive a trauma alert. Their goal is to have the patient out the door in two hours or less if they cannot efficiently treat the patient.



Oklahoma State Department of Health  
Creating a State of Health

4. It was brought up they would like to see the times of the level III hospitals in the metro areas. They think these times are because of the larger hospitals than the rural hospitals.
5. It was discussed that they thought a lot of the issue is physicians not knowing time restraints. They might need to be trained that there are other alternatives available to better treat that patient.

VII. **Public Comment:**

None

VIII. **Next Meeting:**

Regional Trauma Advisory Board – August 7, 2014

Great Plains Technology Center

4500 West Lee Boulevard

Lawton, OK 73505

Regional Education and Planning Committee – June 5, 2014 @ 9:00 AM

Comanche County Memorial Hospital

3401 West Gore Boulevard

Lawton, OK 43505

Continuous Quality Improvement – June 5, 2014 @ 11:00 AM

Comanche County Memorial Hospital

3401 West Gore Boulevard

Lawton, OK 73505

- IX **Adjournment:** Motion to adjourn made by Eugene Dickson, motion seconded by John Stegall at 11:18 AM.