



Oklahoma State Department of Health
Creating a State of Health

Tulsa (Region 7) Regional Trauma Advisory Board
Saint John Medical Center
1923 South Utica Avenue
Tulsa, OK

January 7, 2014 – 1:00 P.M.
Minutes

- I. Call to Order: Meeting called to order at 1:06 P.M.
- II. Roll Call: Roll call by verbal response – Quorum met
- III. Introductions and Announcements: None
- IV. Approval of Minutes – July 2, 2013: Motion made by Saint John Medical Center to approve minutes. Motion seconded by Bailey Medical Center. Roll call vote, motion approved.
- V. Reports:
 - A. Johnnie Gilpen discussing the PELA site surveys and putting all the data together. He directed you to the second to last page of the packet and discussed the importance of Region 7 and 8 of inputting the data. During the May tornado's in the Oklahoma City area 49 people from the REMMS teams from around the state we in Oklahoma City. They had planned to use the PELA sites to transfer patient but nobody knew where they were. So please help us enter this information so if another major storm happens we can use these sites. When you go to input this information please try and have all the information needed. If you get kicked out or exit the program without all the information input basically all the information is lost. The basic information needed is the classification of the PELA site, Latitude and Longitude. Please try and put these in in degrees. Also a contact name and number so we can follow up on the information. Also follow up with the air services because if you use google earth some of the locations can be five to ten miles off. If you have questions please do not hesitate to contact Johnnie at (405) 271-4027 or johnnieg@health.ok.gov.
 - B. Emergency Systems Report: Sean Oats, I'm excited to introduce two new EMS Administrators to the team. They are Mr. Brian Wilson and Ms. Caitlin Holland. I have a couple of items to discuss with you before we get into the Emergency Systems Report. The first is the Pictorial Directory if you have not already signed for one please go over and sign for one and take it. We have printed one per agency. The second is Authorized Representative Forms. The reason Dr. Fairless asked you to state your name for Roll Call is we have to make sure for the Board members that we know who is authorized to represent your agency. If we have no authorized representative then that agency cannot vote. If you are not available to attend you can send a proxy on your agency letterhead stating who you authorize to represent you.
This time you have two Emergency Systems Reports one for the last quarter and one annual report which sums up the whole year. Please take time to look through these. If you have questions feel free to talk to me.
We have copies in your packet of some graphs that represent data that was requested in discussions after last quarters RTAB. It is discharge status as reported to us. This information comes from the Trauma Registry and OKEMSIS. The first graph is broken down into patients that arrived directly from the scene and patients that were transferred into facilities. The next graph is ISS scores of patients received either directly or transfer. The third graph is Crude Mortality by ISS Score and the final graph is the distribution of bed delay for region 7 hospitals.



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The majority of turnaround time is approximately 40 minutes. If you like this data or want different data please let me know about what you want. How are you going to present this data to your decision makers? A comment was made about bed delays they were not sure they could present this data without it being broken down to specific hospitals so they could take it to the administrative teams and begin the discussion of how they could start to improve their times. Sean addressed that getting specific data for the individual hospitals would be almost impossible. The data we can access is when an ambulance arrived at a hospital and when they went back into service. The internal times of the hospitals we do not have access to. We can pull OKEMSIS this information with the peak times of the day and day of the week and remember this is only 911 calls being presented to the hospital. The question was asked is there a way to pull data on whether a patient was admitted to the receiving hospital or discharged from the ER? Johnnie Gilpen explained that if the patient meet the criteria to be entered into the Trauma Registry they could pull that data, but if not they could not pull that data.

- C. It has been brought up on multiple occasions' documentation. In the packet directly behind the graphs you will see two cases. This is what I see when I am at a CQI meeting this is all we see. This is a snap shot and this is all the information that Jennifer Shaw collects from the patients records. Members of the CQI committee see all the patient's information and they still say I do not know what was done with this patient. These are just examples of CQI cases we see around the state. If you have questions for me meet me after the meeting.

The question was asked how many CQI cases are reviewed. How are these cases presented to you? Most cases are pulled by Jennifer when see queries the Trauma Registry with certain criteria. Referrals from facilities have all but dried up. We receive very few referrals from facilities. Dr. Sacra was asked to discuss a little about the Peer Review process. He stated that they did receive positive reviews and were making good progress and had very little turn over. Unfortunately this committee was disbanded by the Governor in streamlining Government with unfortunate consequences. He is currently working with Jennifer in trying to keep the process going.

VI. Regional Sub-Committee Report:

1. Regional Planning Committee: None
2. CQI Sub-Committee: See attached

- VII. Presentation: – Robert Irby presented information about education to get your EMT's their education and present it to the State Health Department. He directed them to the States web page presented the forms that the State requires for a medic to recertify. He also gave them the phone # at the office with Casey's name and email address to direct their questions and information. Robert then walked them through the appropriate paperwork and where to find it on the states web page. He discussed the transition process as well as obtaining course authorization numbers for refresher classes and continuing education credits. At the end he again advised that if they had any questions they could contact himself of Casey Brockelman at (405) 271-4027 or email at caseyb@health.ok.gov, or roberti@health.ok.gov.



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- VIII. Business:
- A. Chairperson Sue Watkins asked the group why they were at this meeting. Then she asked if they were there because their agency was required to be there. She said that there are two or three groups of trauma providers at these meetings. Two that deal with trauma daily and the other that does not. She asked what the group could do to help those that do not deal with trauma on a daily basis.
1. It was brought up that maybe some education on the clinical aspects of patient care.
 2. One idea was to present the rules and regulations of what is required, or maybe a civic lesson on how trauma system came about and how the committee can help evolve the trauma system for the state.
 3. As a group discuss how they could possibly help in the process of getting the Trauma Registry and OKEMSIS to talk with each other to help obtain better data.
 1. Have a person from a hospital that deals with the Trauma Registry present how they interact with the registry
 2. Have a person from and EMS agency present on how they interact with OKEMSIS
 3. Have a person from the State Health Department present on how this data is collected and used.
- B. Sue asked how the information from the RTAB meetings was being distributed at their agencies. She asked if any of them ever read the newsletter from the State Health Department. Then presented that maybe that might be a good way to get some of the information and data disseminated to the region.
- IX. Public Comment:
- A. Sean Oats advised that for those interested that we had printed information of the Trauma Fund for them that they could pick up. He also reminded them that they could sign for and pick up their agencies Pictorial Directory.
- X. Next Meeting:
- RTAB- April 1, 2014
Hillcrest Hospital
1120 South Utica Ave
Tulsa, OK
- RPC – April 1, 2014
Hillcrest Hospital
1120 South Utica Ave
Tulsa, OK
- CQI – Region 2/4/7 March 13, 2014
Saint Francis Hospital
6161 South Yale Avenue
Tulsa, OK
- XI. Adjournment: Motion made by Bailey Medical Center to adjourn at 2:50 P.M.