



Oklahoma State Department of Health  
Creating a State of Health

Southeast Region (5) Regional Trauma Advisory Board  
Pittsburg County Health Department  
1400 East College Avenue  
McAlester, Oklahoma

May 14, 2015 – 10:30 AM  
MINUTES

- I. Call to Order – 10:38 A.M.
- II. Introductions and Announcements None
- III. Approval of Minutes – February 12, 2015 Motion to approve minutes made by James Keesee, Wewoka Fire Department. Seconded by Jauquetta Trotter Pushmataha County Hospital. Roll call vote passed unanimously.
- IV. Reports
  - A. Emergency Systems Report – Brandon Bowen if you have questions with Trauma Registry please contact Dr. Kenneth Stewart. Questions about OKEMSIS please contact Mr. Martin Lansdale.

OTERAC is tasked with four major areas to present non-binding recommendations and resolutions to the Department of Health. This committee has formed a number of working groups formed to help with the mission of the council.

1. Trauma System Improvement Development
2. Emergency Response Development
3. Injury Prevention
4. Catastrophic Health Emergencies

It is very possible we can establish a system of care for day to day, destination plans for Trauma, Stroke, STEMI, Pediatrics Catastrophic Emergencies etc. We would like to work with the RTABS to create a consolidated regional plan. Instead of just a trauma plan have a book that has appendixes for trauma, stroke, STEMI etc. We encourage this region to form working groups for Stroke and STEMI in your RPC meetings.

5. Vertical time line for CQI. What is causing the delays?
  - a. When did patient arrive?
  - b. When was patient seen by provider?
  - c. When was decision made to keep or transfer the patient?
  - d. When was TReC called?
  - e. When was patient placed?
  - f. When was EMS called?
  - g. When did EMS arrive?

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- h. When did EMS depart?
- i. When did patient arrive at definitive care?

Question was asked why it seems they do not get a response of follow up that a CQI case was received or what happened with the referral. Brandon apologized if that happened because it is the exception not normal. It was also asked if the region could get more feedback from CQI. It was also asked what is going to replace the MAC for cases that do not meet the CQI requirements. We are currently working to replace the committee but are not sure of what it will be called or the exact makeup of the committee.

**B. Regional Sub-Committee Report**

1. Regional Education Planning Committee Kari Beggs discussed the REPC committee forming working groups and what the working groups would be working on. She discussed goals of the committee such as Trauma Plan Revision, RTAB Attendance, Trauma Plan Compliance and Time sensitive medical conditions. Some of the barriers member compliance, member by-in money, and training. Bylaw recommendations were board rotation, board membership of 50/50 split, board member absences, attendance expectations and officers. Time sensitive medical conditions suggested were stroke, stemi, hazmat, snake bites, MCI's/MS. The committee also sent out a stroke stemi survey and asked that you complete this survey for your agency or facility and return it to Kari. REPC would like to recommend changes to the region 5 bylaws.
2. Attendance changed to general members can be subject to licensure action if they miss one meeting per year. You can have a proxy for your agency. Any member organization may request and excused absence but it will take a unanimous vote to excuse the absence.
3. Board Membership change for 60% hospital and 40% EMS would like to change it so board membership is 50% hospital and 50% EMS.
4. Board membership should consist of these types of people. We would like to omit people like business office, surgeon, operating room nurse, and rehabilitation practitioner and safety officer. These are just suggestions. Your member representative should have the authority to make a decision on behalf of the agency.
5. Permanent Members to the Board the two level III hospitals also the two EMS agencies that have the highest call volume be permanent members. The EMS agencies might change from year to year.
6. Proxies shall be delivered to the RTAB Chair prior to calling to order of the meeting.
7. Term for officers shall be one year with the option to renew for one year.
8. Officers is automatically removed from the board if he or she miss one posted meeting without making arrangements for a proxy to attend or arrange for a unanimous vote by the RTAB.
9. Officers shall appoint all committee chairs.

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10. Minimum membership requirements for CQI the committee would like to remove Physician Assistance/ARNP, OR Nurse and Ground Ambulance Provider and place them under other members that can make up a CQI committee.
  11. Committee member is indefinite unless removed by the committee or member resigns.
  12. Trauma Plan survey we need everybody to go back look at your counties and make sure it reflects your county accurately and send them back to Kari so we can pass this along to the working groups and bring them to the RPC and then back to the RTAB for changes if needed.
- C. Continuous Quality Improvement (CQI) Sub-Committee Nothing to report. Charles McNear presented the RTAB with two cases from CQI for Region 5.
- D. Medical Emergency Response Center (MERC) – Kari Beggs Just saw the EMResource we do not have very good response from the EMS agencies. Please get with me after this meeting so we can get you a log in and active on EMResource.
- V. Business (Discussion and appropriate action)
- A. REPC recommends changes presented to the bylaws. Motion made by Michael Garrison, EagleMed. Seconded by Chelsea Bishop, McAlester Regional Medical Center. Roll Call vote passed unanimously.
  - B. Add Robyn Baldrige, Medical Center of South East Oklahoma and Brian Norton, Bryan County EMS to the REPC committee. Also add Michael Garrison, EagleMed to the CQI committee. Motion made by Chelsea Bishop, McAlester Regional Medical Center. Seconded by Cindy Conley, McCurtain Memorial Hospital. Roll call vote passed unanimously.
- VI. Public Comment
- Blair Apple from EMSC talked about a couple of projects going on we have cards for CEU's on a web site. We also have pediatric code cards if you would like some.
- Sean Oats announced an OTEP at McAlester Regional tomorrow morning at 9:30 A.M. if you would like to attend.
- Regional Medical Planning Group is meeting next Wednesday at 10:00 A.M. we have a new resource it is a medical rehab trailer. It is at Bryan County.
- VII. Next Meeting
- A. RTAB – August 13, 2015– 10:30 AM Pittsburg County Health Department
  - B. CQI – August 13, 2015 – 1:00 PM Pittsburg County Health Department
  - C. REPC – As Called
- VIII. Adjournment – Motion to adjourn made by Patsy Green, Latimer County General Hospital. Seconded by Michael Garrison, EagleMed at 12:00 P.M.