

**Southwest (3) Regional Education Planning Committee
Microsoft Teams**

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October 1st, 2020 – 9:00 am

MINUTES (Unofficial Copy)

There was no physical meeting location and the following members participated remotely using the Microsoft Teams teleconferencing platform: Brad Lancaster, Beth Malone, JenaLu Simpson, Robert Stewart, Rachel Talley, Scott Tanner, and Tyler Walters.

The meeting notice was filed with the Oklahoma Secretary of State on September 18th, 2020 at 2:26 pm. The meeting notice/agenda was posted on the Oklahoma State Department of Health website for the Region 3 REPC on September 24th, 2020.

I. Call to Order – Chair Brad Lancaster

The meeting was called to order by Chair Brad Lancaster at 9:02 am.

II. Roll Call – Chair Brad Lancaster

Roll call was taken with the following members present: Brad Lancaster, Beth Malone, JenaLu Simpson, Bob Stewart, Rachel Talley, Scott Tanner, and Tyler Walters. Beth Malone joined the meeting at 9:15 am and Scott Tanner joined at 9:45 am.

III. Introductions and Announcements – Chair Brad Lancaster

No introduction nor announcements were made.

IV. Approval of Minutes – August 6th, 2020 – Chair Brad Lancaster

A motion to approve the minutes as written was made by JenaLu Simpson and seconded by Tyler Walters. There was no discussion and the motion passed 5-0.

V. Reports

A. Interfacility Transfer Working Group Report – Dan McLeod

Brad Lancaster reported that the working group has not been able to meet due to COVID-19 and time constraints. The group hopes to have something to report at the next meeting.

VI. Business

A. Review of RTAB member attendance for discussion, consideration, possible action and vote to approve recommendations to RTAB Chair for possible licensure action – Chair Brad Lancaster
Members reviewed the following requests for excused absences:

- Cheryl Simco representing Harmon Memorial Hospital requested an excused absence for the August 6th, 2020 RTAB meeting stating they received information that the meeting was cancelled and never received notification regarding the virtual meeting. The committee reviewed previous attendance noting that the facility has regularly attended meetings.
- Kendal Washburn representing Lawton Indian Hospital requested an excused absence for the August 6th, 2020 RTAB meeting. Mr. Washburn was present for the meeting but was counted absent due to not meeting auditory requirements of the Open Meeting Act.
- Sheila Lewis representing Southwest Oklahoma Ambulance Authority requested an excused absence for the August 6th, 2020 RTAB meeting stating she stated her name when signing into the meeting and again during roll call. Review of the video recording prior to the meeting could not confirm the statement. The committee reviewed previous attendance noting 0% attendance for 2019 and 2020.
- JenaLu Simpson representing Medic West requested an excused absence for the February 20th, 2020 RTAB meeting stating she was present at the meeting but was late and did not sign in. Tyler Walters confirmed her statement noting they sat together at the meeting.

A motion to recommend to the Chair approval of absence for Harmon Memorial Hospital, Lawton Indian Hospital, and Medic West was made by Tyler Walters and seconded by Bob Stewart. There was no discussion and the motion passed 6-0.

- B. Review of 2021 trauma system goals for discussion, consideration, possible action and vote to approve recommendations for planning and implementation – Chair Brad Lancaster
Jennifer Woodrow presented the following 2021 trauma systems goals:

- Decrease the number of Priority 1 patients transported by ambulance services to a Level III or Level IV Trauma Center by 3% (10.20 patients) 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% (4.8 minutes) by the end of calendar year 2021

Dan Whipple clarified that the length of stay time starts when the patient comes through the door until the time the patient departs the facility enroute to the receiving facility. Beth Malone discussed the need for hospitals to have a plan in place to immediately prepare for the arrival, assessment, and treatment of patients upon EMS notification noting her facility's success with such a plan regarding stroke patients. Members discussed reasons that Priority 1 trauma patients are not being delivered to the appropriate facility to include inappropriate trauma triage and inappropriate destination choice. Brad Lancaster discussed how the availability of EMS units and volume of interfacility transfers can affect destination decisions emphasizing the need to develop a interfacility transfer and resource utilization education piece. Jennifer Woodrow stated she spoke with Dan McLeod, Chair of the work group, who stated he doesn't have the time to head the group due to COVID. Ms. Woodrow asked if anyone else would like to lead and help with the group being careful not to reach quorum for the REPC. Brad Lancaster agreed to serve lead the working group with Rachel Talley and JenaLu offering to serve as members. Jennifer Woodrow asked if the committee was interested in providing Oklahoma Trauma Education Program (OTEP) Training to assist with the trauma systems goals. Brad Lancaster stated that OTEP is a part of the solution and will be included in the education piece but is not sufficient to fix all of the problems. Brad Lancaster asked members to take some time to gather additional thoughts on how to improve on the trauma system goals to be emailed to him along with suggestions for possible new members. Mr. Lancaster will try to put together a meeting with suggested members to discuss any suggestions and begin an outline for the education piece. Dan Whipple suggested Dr. Thompson out of Mercy Hospital Ardmore serve on the working group to help with the physician aspect of the group. Tyler Walters suggested Dr. Vice also be asked to join working group. Bob Stewart suggested adding the goal of decreasing or limiting the number of non-Priority 1 patients transferred from a Level III or IV trauma center to a higher level trauma facility. Dan Whipple noted that trauma patients that go to the wrong facility typically have a delay of four or more hours to definitive care. Mr. Whipple identified the need to provide education regarding choosing appropriate destinations and, if needed, requesting ALS or air intercept to ensure patients get to the right facility the first time and not just the closest hospital. Bob Stewart asked if there was any data showing how many transports to an inappropriate facility were caused by medics not properly prioritizing the patient or delay of transport due to no EMS units available. Mr. Stewart stated two things are needed to correct those problems to include better training of the medics to correctly prioritize the patients and better training of the ERs regarding what patients should and should not be emergently transported to higher-level trauma centers. Dan Whipple stated some data exist but data is only as good as to what data is entered into OKEMSIS. Bob Stewart suggested the first training to offer medics should be on how to correctly enter data into OKEMSIS. Dan Whipple agreed part of the education piece should include correct documentation and should also include patient prioritization and appropriate destinations. Mr. Whipple also noted that every EMS agency is required to submit a Department approved destination protocol for trauma patients and asked if this protocol is actually being looked at as part of the quality assurance process. Brad Lancaster reemphasized the need to develop an education piece regarding interfacility transfers and resource utilization taking into consideration both hospital and EMS needs and how to accommodate those needs and bridge the education gap. Mr. Lancaster noted the need to show something measurable to both sides to increase buy in. Bob Stewart suggested looking at OKEMSIS to see if there is a way to make it clearer or more functional to improve data. Brad Lancaster responded that the data set is already there and that educating medics to appropriately prioritize the patient is key. The working group will continue working on the education piece and report on progress at the next scheduled meeting.

- C. Review of 2021 Committee Meeting Dates for discussion, consideration, possible action and vote to approve – Chair Brad Lancaster

1. February 4th, 2021 at Great Plains Technology Center – 9:00 am
2. April 1st, 2021 at Great Plains Technology Center – 9:00 am
3. August 5th, 2021 at Great Plains Technology Center – 9:00 am
4. October 7th, 2021 at Great Plains Technology Center – 9:00 am

A motion to approve the proposed 2021 committee meeting dates, times, and venues was made by Tyler Walters and seconded by Bob Stewart. There was no discussion and the motion passed 7-0.



VII. New Business – Chair Brad Lancaster

(For matters not reasonably anticipated 48 hours prior to the meeting)
No new business was presented.

VIII. Next Meeting – Chair Brad Lancaster

- A. Quality Improvement Committee
December 3rd, 2020 – 11:00 am
 - B. Regional Education Planning Committee
February 4th, 2021 – 9:00 am
 - C. Regional Trauma Advisory Board
February 4th, 2021 – 10:30 am
- Next meeting dates were announced with no discussion.

IX. Adjournment – Chair Brad Lancaster

A motion to adjourn was made by Robert Stewart and seconded by Tyler Walters. The meeting adjourned at 9:58 am.

Approved

Brad Lancaster, Chair
Southwest (3) Regional Education Planning Committee
April 1, 2021