

Oklahoma Trauma and Emergency Response Advisory Council (OTERAC)
REGULAR MEETING
Wednesday, February 5, 2025 – 1:00 p.m.

Location of Meeting: Oklahoma County Medical Society
313 NE 50th Street • Oklahoma City, OK • 73105

The Oklahoma Trauma and Emergency Response Advisory Council meeting notice was posted on the OSDH website located at <https://oklahoma.gov/health/services/licensing-inspections/emergency-systems/oterac.html> as well as the Secretary of State's website located at <https://www.sos.ok.gov/meetings/legacy/search.aspx> on 11/18/2024.

Agenda

1. Call to Order..... Dr. David Teague, Chair
Dr. Teague called the meeting to order at 1:00 p.m.

2. Roll Call..... Edith Smith, Secretary
Edith Smith called roll call and quorum was met as follows.

Present at Roll Call	Absent at Roll Call
Dr. Alisa Cross	Dr. Julie Curry
Melissa Gullotto	
Brad LanCaster	
Edith Smith	
Dr. David Teague	
Matthew Young	

3. Approval of Minutes from November 6, 2024..... Dr. David Teague, Chair
Dr. Teague asked the Council to review the minutes from the November 6, 2024, meeting. Matt Young made a motion to approve the minutes, and Brad LanCaster seconded the motion. A roll call vote was taken and the motion passed as follows:

Ayes	Nays	Abstain
Dr. Alisa Cross		Melissa Gulloto
Brad LanCaster (2 nd)		
Edith Smith		
Dr. David Teague		
Matthew Young (1 st)		

4. Reports
 - EMS..... Lori Strider, EMS Coordinator
 - Licensure

Lori Strider reported that renewal applications are already coming in and being processed. She thanked everyone who is sending their applications in and said that any questions can be emailed to esystems@health.ok.gov.

- Trauma..... Wyatt Hockmeyer, EMS & Trauma Manager
 - Trauma Fund: disbursement and collection trends, event queries
 - EMResource: injury queries and informational events
 - Trauma Transfer and Referral Center
 - TReC budget and funding cycle
 - §63-1-2530.8. Recognition and certification of trauma transfer and referral centers - Rules establishing minimum standards - Data – Funding
 - TReC usage trends – 2024

Wyatt Hockmeyer reported on Trauma Fund numbers, EMResource, and TReC. 2024 TReC numbers were reported, and Dr. Teague asked if the calls were trending up or down and requested data from 2022 and 2023. Samantha Brown with OSDH informed the council that call numbers were trending down and that future reports will include multiple years data to provide a better understanding of the whole picture. Brad Lancaster asked about patient priority number reassignments and the QI/QA process for TReC. Lisa Fitzgerald from TReC explained how TReC does QI/QA and assured the council that priority changes by TReC staff are rare and all calls are screened by the medical director and herself. Dr. Teague then asked Wyatt Hockmeyer about the TReC budget and funding cycle. Michaelde'Angelo Tascier, Medical Facilities Service Director for OSDH stated that the agency has declined to provide information regarding the TReC budget.

- System Regional Continuous Quality Improvement..... Michaelde'Angelo Tascier, Medical Facilities Service Director
 Michaelde'Angelo Tascier presented the CQI report to the council. He gave an overview of the current CQI process. Missing from our current CQI In addition several areas of concern regarding the current CQI process were listed. They included but were not limited to the following: Title 63, §63-1-2530.5 mandates the establishment of regional trauma advisory boards to conduct CQI activities. OSDH plays a crucial role in overseeing this process not participate in the process to the degree in which the agency has in previous years. The agency has concerns regarding overreach in authority, scope, and influence. In addition, the current process is dependent on OSDH spearheading the committee's CQI efforts. The lack of baseline metrics, no defined target and lack of concrete data. He explained that there was a 0-response rate in 2024 to CQI letters, an absence of follow up, and scope/authority issues. He stated that requesting a response with a follow up action plan is out of scope of the Emergency Systems division. He reviewed CQI letter trends, and found that triage problems, documentation challenges, and delays in care made up most of the reasons for letters sent over the past few years. He explained that the letters sent to providers on behalf of the CQI committee were outside the CQI committee's and the OSDH emergency system program area's scope/authority. Moreover, likewise for the request of the CQI's committee to request a plan of action be provided by the providers who were issued letters outlining the identified infraction(s). Other issues of concern included how individual records were obtained, data

utilization, and the absence of a process to ensure the safeguarding of PHI. He is in contact with OSDH's legal department with concerns of lack defined process regarding how PHI is managed (requested, shared and destroyed) to ensure individuals confidentiality. Mr. Tascier provided a brief overview regarding how other States conduct their CQI efforts as they relate to EMS/Trauma. His report included opportunities for improvement that included the following: structured engagement, robust data collection, defined goals that align with laws, and adaptability. He stated that the current practice of using TReC shift reports to identify cases that are given consideration to be reviewed by the members of the committee provides a small sample size and may be overlooking some opportunities for improvement that would be region specific and/or consider differences in trauma types, and demographics by region. aid that he had 16 recommendations, but he believes the following are the most impactful: leveraging available data including Trauma Registry and EMResource, collaborating with institutions, addressing demographic changes, and regular performance review. Establish a statewide CQI group based on real-time data. Council Chair, Dr. Teague asked if part of the problem was that OSDH can request hospital and EMS records, but do not have an appropriate way to store them. Mr. Tascier explained that currently OSDH's legal department is reviewing whether it is appropriate for OSDH Emergency Systems staff to request medical records at all. Council member Matt Young, who is also a member of the Region 2,4,7 CQI committee, had a series of questions regarding the 0% response rate in 2024, as he knows they received responses in 2024. Dr. Cross also spoke about letters sent and received from Regions 6and 8 in 2024, but the cases were from 2022 and 2023. Matt Young is also aware that there were letters that committees requested to be written and sent, but OSDH did not have the staff to be able to complete that request at that time. Dr. Cross stated that it was important for CQI to continue and that there were staff to support it. Brad LanCaster said that it was important to respect the time of all the individuals that volunteer their time for CQI and also felt that moving away from case records would be detrimental to the system, as raw data does not offer the same context. Matt Young said that he has seen improvements by way of certain agencies and facilities appearing in CQI case records, receiving letters, and improving their practices, thereby no longer becoming the recipient of a letter. He went on to explain that he was always under the impression that CQI was nonpunitive and was based on using an educational approach for system improvement. Mr. Tascier explained that complaints and their findings can affect change. Dr. Teague commented that those involved in CQI feel it is very important to the trauma system and would be a good return on investment to ensure its continuity.

- Regional Trauma Advisory Board meetings.....Michaelde'Angelo Tascier, Medical Facilities Service Director
Michaelde'Angelo Tascier spoke about RTABS and based on the amount of available OSDH staff time, he would like to consider reducing the number of meetings and creating work

groups to fill the gaps between meetings. Brad LanCaster asked if the state was only going to support two meetings a year, and Mr. Tascier explained that he would like to reduce the frequency of the meetings. Dr. Teague asked what OSDH would be able to support, and Mr. Tascier could not give a definitive answer at the time but would like time to consider. Brad LanCaster brought up that some RTAB's have the requirement of meeting quarterly in their bylaws, and that it is something to consider.

- Injury Prevention Service: Programs and resources related to TBI prevention, falls prevention, sports concussion..... Kenner Wignall, Project Coordinator
Christian Bonds made the Injury Prevention Service report. They have updated the drug overdose dashboard, and it can be accessed on the OSDH website, and there is a 35-page statewide injury report also available on the website. He also spoke about concussion prevention, fall prevention, and the CarFit program for seniors. There is a train the trainer program available for CarFit.
- Emergency Preparedness and Response Service: Healthcare coalition, healthcare plans.....
..... Scott White, Emergency Response Manager
No report
- Education and Training Committee: EMS training, instructional guidelines, scope of practice, National Registry testing.....Dr. David Teague, Chair
There is no report due to the resignation of the chair. Dr. Teague asked OSDH to provide minutes from committee and never received so he has no ability to explain the scope of the committee. Brad LanCaster asked if there were any members from that committee in the meeting, and Blake Braden from Guthrie Fire identified himself and explained that he was a member of Education and Training Committee. Dr. Teague asked what they have been working on and Blake said that the previous meeting had no quorum and then the chair, Dr. Hunter, resigned so they had not met yet this year. The committee was working on EMT guidelines to work with the new National Registry testing processes. Matt Young asks how a chair gets selected, and Dr. Teague explained that there is a later agenda item to discuss.
- Medical Direction and Coordination Committee: State EMS Protocol.....
Dr. Patrick Cody, Committee Chair
Dr. Cody reported that the committee is still working on updating the state protocols and also spending time speaking about CQI. The committee wrote a statement on CQI, and he read it out loud. (Can add as addendum to minutes) Michaelde'Angelo Tascier asked if Dr. Cody's statement was part of the report and Dr. Cody explained that the statement was part of the committee's work that day and should be considered part of the report.
- Regional Trauma Advisory Boards: Trauma Trends, CQI reviews, standards of patient care:
 - Region 1 NW - Chad Campbell - no report
 - Region 2 NE - Heidi Gilbert – no report

- Region 3 SW - Brad LanCaster - Brad LanCaster made Region 3 report. Autism awareness presentation complete during last meeting and discussion about “go or no go” for interfacility transfers.
- Region 4 EC - Tricia Fleming – Dr. Campbell made the Region 4 report. The RPC met their 2024 goals, the RTAB had a presentation from Dr. Behm on prehospital trauma prioritization accuracy scores and elected the new board and officers.
- Region 5 SE - Pamela Cunningham – no report
- Region 6 Central - Jason Likens – no report
- Region 7 Tulsa - Krista Norrid-Keuchel – Jeremy McLemore made the Region 7 report. The RTAB discussed trauma registry issues and approved a quarterly injury prevention program for Region 7.
- Region 8 OKC - David Howerton – no report

Dr. Teague asked the RTABs to discuss with their regions on the proposal to modify the number of RTABS per year and report back in May.

- Stroke System of Care/OSSSAC Report: regional stroke plans, national initiatives..... Dr. John Barghols/Dr. Evgeny Sidorov, OSSSAC Co-Chairs

Melody Bridges reported on OSSSAC and OSSCAR business. New EMS and Hospital board members were elected in November, and if anyone needs help with regional stroke plans to reach out to her.

5. Discussion, consideration, and possible action and vote related to:

- OAC 310:667-59-3 Descriptions of Trauma and Emergency Operative Services
- OAC 310:667-59-20 Descriptions of Emergency Stroke Services

..... Dr. David Teague,

Chair

This item carried over from the previous meeting as it was only listed as a discussion item. Dr. Teague presented the language: the blue edits are his, and the red are typo corrections. Matt Young made a motion to accept and recommend the language, and Dr. Cross seconded the motion. A roll call vote was taken and the motion passed as follows.

Ayes	Nays	Abstain
Dr. Cross (2 nd)		
Melissa Gullotto		
Brad LanCaster		
Edith Smith		
Dr. Teague		
Matthew Young (1 st)		

Matt Young would like to see what an attestation looks like, and Dr. Teague asked to see the form at the next meeting if possible. Dr. Teague asked what will happen to this language next, and Michaelde’Angelo Tascier explained that the language would go to the policy committee, and if approved there will be an open meeting for comment. This will then be a consideration for the 2026

legislative session. The Council asks that they be informed of the outcome when the policy team discusses.

6. Discussion, consideration, and possible action and vote to recommend that OSDH explore all resources and hire appropriate personnel to continue regional CQI meetings..... Dr. David Teague, Chair
The Council voted on this item during public comment of November's meeting, but due to a concern regarding Robert's Rules of Order, this item is on the agenda to be discussed and voted on again. Council members discussed based on the earlier CQI report given by Michaelde'Angelo Tascier. Ultimately, they decided to carry this over to the next meeting pending more information regarding CQI, including a request to see a more complete plan from OSDH. Dr. Teague stated that he has heard endorsements of the current system from his fellow Council members.
7. Discussion, consideration, and possible action and vote to recommend that OSDH work with Trauma Managers and Registrars to identify avenues to modernize or replace current trauma registry software in the future.....Dr. David Teague, Chair
Dr. Teague explained that this agenda item came from the previous meeting's discussion regarding this topic and asked for comments from the Council. Edith Smith asked the committee to discuss the future of the current software for Trauma Registry is not being supported by ESO. Edith stated they have not been given a deadline for when the last entry can be made, but asked OSDH if they

were able to give an update. Wyatt Hockmeyer stated that he was not prepared to give an update on ESO. Michaelde'Angelo Tascier did inform the committee that it is high on OSDH radar. Dr. Teague asked is the support with the same vendor or others being considered? Michaelde'Angelo Tascier stated we are looking at all options and working with OSDH's IT, budget, and security departments to come up with the best solutions. Edith Smith made a motion that we ask the State to work with other Trauma Registers and Trauma Manager to identify and modernize our software problem". Dr. Cross seconded the motion, and it passed as follows.

Ayes	Nays	Abstain
Dr. Cross (2 nd)		
Melissa Gullotto		
Brad LanCaster		
Edith Smith (1 st)		
Dr. Teague		
Matthew Young		

8. Discussion, consideration and possible action and vote to appoint a chair for the Education and Training Committee.....Dr. David Teague, Chair
Brad LanCaster asked Blake Braden if the Education and Training Committee was working on anything time sensitive. Mr. Braden explained that they are waiting on the EMT skills assessment sheet to be approved. They currently have guidance to use old forms but need this form to be approved by the State to align with National Registry standards. After some discussion, Brad LanCaster made a motion to appoint Blake Braden as the interim chair of the Education and Training Committee. Matt Young seconded the motion, and it passed as follows.

Ayes	Nays	Abstain
Dr. Cross		
Melissa Gullotto		
Brad LanCaster (1 st)		
Edith Smith		
Dr. Teague		
Matthew Young (2 nd)		

9. Discussion with OSDH regarding the next steps for the previous OTERAC Council recommendation of a statewide assessment of the Oklahoma trauma system..... Dr. David Teague, Chair
Dr. Teague asked what happens to the vote from the previous meeting regarding the OTERAC recommendation for an assessment of the statewide trauma system. Michaelde'Angelo Tascier that the department will provide guidance about how information and recommendations are communicated between OTERAC and OSDH.

10. Comments from the Council and Chair.....Dr. David Teague, Chair
Dr. Teague commented the difficulty of finding OTERAC on the State's website. The committee was informed that the Emergency Systems website currently being redone. Matt Young asked if the 5-year Strategic Plan has been added to the website. He stated there has been no evidence that it has been completed.

11. Public Comment

Maryavis Howell informed the committee that trauma is the leading cause of death of ages 45 and up. She expressed her unhappiness with the lack of support and transparency from OSDH.

Dr. Worden informed the committee that he felt today's meeting was poor from OSDH. He expressed his concern with the lack of support from OSDH. He stated CQI should be confidential, and they know that CQI works based on decrease of deficiencies. He stated that Dr. Teague should receive answers from OSDH to his questions, since he was appointed by the governor.

Melody Bridges informed the committee that this Friday and Saturday in Tulsa, people can get free dental care.

Lindsey Lindsay is working with other hospitals looking at other Trauma Registry due to the current software being phasing out. She informed the committee that ESO will not help with technical issues. She said that the Trauma Registry is important, and they want to work with the state. She mentioned if hospitals brought different software, it would be more difficult for the state.

Dr Cody informed the committee that he has been volunteering at CQI since 2006. OSDH might need to rethink how we do CQI, and OSDH has put him in a hard spot since he can't answer questions from stakeholders. He asked for the decent curiosity to keep them informed since we are supposed to work as a team.

12. Next meeting – May 7, 2025, at the Tulsa County Medical Society

13. Adjournment

Matthew Young made a motion to adjourn, and Brad LanCaster seconded the motion. A roll call vote was taken and the meeting adjourned at 3:13 p.m.

Ayes	Nays	Abstain
Dr. Cross		
Melissa Gullotto		
Brad LanCaster		
Edith Smith		
Dr. Teague		
Matthew Young		