

**MEDICAL CONTROL BOARD
EASTERN AND WESTERN DIVISIONS
EMERGENCY PHYSICIANS FOUNDATION**

The regularly scheduled meeting of the Medical Control Board was held, pursuant to Oklahoma Statute, Title 25 & 307.1 on Wednesday, July 10th, 2019 10:00 am at the following locations:

EMSA Eastern Division Headquarters in the Conference Room
1417 N. Lansing Avenue, Tulsa, OK

EMSA Western Division Headquarters in the Conference Room
1111 Classen Drive, Oklahoma City, OK

NOTICE AND AGENDA for the regularly scheduled meeting of the Medical Control Board of the Emergency Physicians Foundation, Eastern and Western Divisions, was posted in the Office of the Deputy City Clerk of Tulsa, Tuesday, July 9th, 2019 and in the Office of the City Clerk of the City of Oklahoma City on Tuesday, July 9th, 2019 more than 24 hours prior to the time set for the regularly scheduled meeting of the Medical Control Board.

- 1. Roll Call** disclosed a quorum at 10:10 am and the meeting was called to order by Dr. Russell Anderson.

MEMBERS PRESENT:

Dr. Roxie Albrecht
Dr. Russell Anderson
Dr. Jeffrey Dixon
Dr. David Gearhart
Dr. David Smith
Dr. John Nalagan
Dr. Keri Smith

MEMBERS ABSENT

Dr. Chad Borin
Dr. Barrett Bradt
Dr. Karyn Koller
Dr. Mike Smith

OTHERS PRESENT:

Dr. Jeffrey Goodloe, OMD
Dr. Curtis Knoles, OMD
Matt Cox, OMD
Zack Sinsheimer, AMR
David Howerton, OMD
Duffy McAnallen, OMD
Frank Gresh, EMSA
Jim Winham, EMSA
Bryan Jones, EMSA
John Graham, EMSA
Jeremy Coombs, AMR
Tyler Wedman, AMR
Ashton Kelley AMR

Mike Kisler, AMR
Heath Wright, AMR
Bill Downs, OKCFD
Frank Zarones OUMC
Kim Richards AMR
Ryan Mackey OKCFD
Dr. Anna Wanahita RBI
David Gooshaw AMR
Lacey Shafer AMR
Rusty Friske AMR
Bryon Schultz AMR

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2. Review and Approval of March 2019 MCB Meeting Minutes

MOTION: Dr. David Smith

SECOND: Dr. John Nalagan

Aye:

Dr. Roxie Albrecht
Dr. Russell Anderson
Dr. David Gearhart
Dr. David Smith
Dr. Jeffrey Dixon
Dr. John Nalagan
Dr. Keri Smith

ABSENT

Dr. Chad Borin
Dr. Barrett Bradt
Dr. Mike Smith
Dr. Karyn Koller

3. EMSA President Report

John Graham provided April and May 2019 EMSA President Report, as Mr. Winham was out of town at the time of the meeting.

Mr. Graham made the comment that in all his years in the system, he has never seen overall compliance this good. Dr. Goodloe asked Mr. Graham if he believed that the BLS program has assisted in improving compliance, to which Mr. Graham deferred to Mr. Jeremy Coombs.

Frank Gresh provided an update on the EHR, which the EMSA board voted to single source a new EHR provider, ESO. He then provided feedback from a recent visit to Johnson County, Kansas with Matt Cox and Bryan Jones having joined him. This team visited the local ambulance, fire departments, and a hospital, being able to witness an EMS EHR directly deposit into the hospitals EPIC EHR once locked and synced to the server. He also spoke to ESO's infrastructure and that ESO has a PhD that oversees data and how it is acquired.

Dr. David Smith asked about how accurately and quickly the EMS EHR attaches to the hospital EHR, and Mr. Gresh spoke about scanning the patient's medical record number or encounter number. Dr. Smith stressed the need to have early identification to treat key patients (STEMI, stroke, etc.) to reduce waste and get resources to that patient.

Dr. Goodloe reminded the MCB that representatives from the KC area will be attending the OMD regional retreat this fall and we can acquire further insight to ESO and its performance. Dr. Goodloe also opened the opportunity for any MCB physician to attend the meeting, whether virtual or in person.

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Dr. Goodloe asked Mr. Gresh to update the MCB regarding the Pulsepoint App, including any confirmed usage of the App to date. Mr. Gresh reports less than 1000 signups for Pulsepoint, approx. 5-6 notifications in OKC, and 4-5 in Tulsa in the last 30 days. Mr. Gresh provided a background for Pulsepoint.

Dr. Anderson arrived at 10:28 AM for a quorum, and a vote to approve the minutes was taken at that time. Minutes approved (see vote sheet for results).

4. Chief Medical Officer Report

Dr. Goodloe updated the MCB on the new Administrative Assistant, Ms. Kim Richard, including credentials and previous experience regarding positions held within work organizations and Oklahoma State University. Ms. Richard will begin her position effective July 15, 2019.

Dr. Goodloe recognized Dr. Wanahita in her attendance at the MCB, valuable for discussion regarding a recently published policy statement from the American Stroke Association, "Recommendations for the Establishment of Stroke Systems of Care: A 2019 Update" by Adeoye et al. DOI: 10.1161/STR.000000000000173.

This manuscript recommends the following in EMS systems (paraphrased): 1) EMS leaders and medical oversight should develop education programs for the public and encourage rapid activation of 911 and implementation with local, regional and state agencies and hospitals. 2) Triage paradigms and protocols should reflect rapid identification of stroke, such as LAPSS, FAST, etc. It is encouraged to transport an identified stroke patient to a facility that is capable of providing care (tPA, LVO extraction, etc.). 3) In major metropolitan areas that have multiple facilities in close proximities, to transport to a facility that has the highest stroke care capability.

Dr. Wanahita spoke to regional support of the EMS system and she strongly supports the MCB having interest in acute stroke care and thanked the MCB for their diligent efforts to update EMS stroke care for Oklahomans and putting the patient first v hospital v hospital competition. She believes the EMS system is ahead of other EMS providers regarding stroke care and stroke identification protocols.

Dr. Goodloe updated the MCB that both city councils (OKC and Tulsa) approved the FY 2019-2020 budget and both city councils thanked the MCB/OMD and the EMS system for hard work and dedication to citizens.

Dr. Goodloe then spoke in regards to the Annual Report from the Office of the Medical Director and its availability for review, with a new inclusion being the 2017 Cardiac Arrest Report. Mr. McAnallen reported on recent training for the OMD team regarding the Reed Process for investigation and interrogation in incident reviews, highlighting the benefits of standardizing

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the approach throughout the OMD team. Mr. McAnallen felt it was a great benefit to the team. This is the process that the FBI, CIA, etc. utilizes and has been around since 1947.

Assistant Chief Medical Officer Report

Dr. Knoles updated the MCB on the fall EMSA/OMD/AMR conference, and several of the speakers that will be present (Drs. Brent Myers and Ed Racht) and offered that if anyone on the MCB wanted to speak during the conference that availability to do so is present.

5. Review and Approval on Protocol: 14G: Patient Prioritization & 17B: MCB Table Categorization of Hospitals

Dr. Goodloe spoke to the changes in this protocol about stabilized CPAP (NIPPV) patients would be transported with priority (red lights and siren or not) at paramedic discretion. Also updated the stroke time frame to reflect symptoms up to 23 hours being a Priority 1 transport.

Dr. Goodloe updated categories for Integris Deaconess (cardiology service lines) and Saint Anthony Hospital (stroke service line) capabilities.

Dr. David Smith verified Integris Deaconess capabilities.

MOTION: Dr. David Smith

SECOND: Dr. John Nalagan

Aye:

Dr. Roxie Albrecht
Dr. Russel Anderson
Dr. David Gearhart
Dr. David Smith
Dr. Jeffrey Dixon
Dr. John Nalagan
Dr. Keri Smith

ABSENT

Dr. Chad Borin
Dr. Barrett Bradt
Dr. Mike Smith
Dr. Karyn Koller

6. Review and Approval of EMR and Ambulance Inspection Form

Dr. Goodloe spoke to updated equipment totals to meet OSDH requirements and a recent review of the airway bag committee from data they collected. This was regarding IGel placements and storage requirements for all affiliated agencies.

MOTION: Dr. David Smith

SECOND: Dr. John Nalagan

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Aye:

Dr. Roxie Albrecht
Dr. Russel Anderson
Dr. David Gearhart
Dr. David Smith
Dr. Jeffrey Dixon
Dr. John Nalagan
Dr. Keri Smith

ABSENT

Dr. Chad Borin
Dr. Barrett Bradt
Dr. Mike Smith
Dr. Karyn Koller

7. Review and Approval of MPDS 13.2 Updates

Dr. Goodloe spoke to the upgrade to MPDS 13.2 with a total of 9 new protocols and the OMD recommendations for response configurations and priorities.

MOTION: Dr. David Smith

SECOND: Dr. John Nalagan

Aye:

Dr. Roxie Albrecht
Dr. Russel Anderson
Dr. David Gearhart
Dr. David Smith
Dr. Jeffrey Dixon
Dr. John Nalagan
Dr. Keri Smith

ABSENT

Dr. Chad Borin
Dr. Barrett Bradt
Dr. Mike Smith
Dr. Karyn Koller

8. Review and Approval of April and May 2019 MCB Financial Statements

MOTION: Dr. John Nalagan

SECOND: Dr. Keri Smith

Aye:

Dr. Roxie Albrecht
Dr. Russel Anderson
Dr. David Gearhart
Dr. David Smith
Dr. Jeffrey Dixon
Dr. John Nalagan
Dr. Keri Smith

ABSENT

Dr. Chad Borin
Dr. Barrett Bradt
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Dr. Karyn Koller

9. Information Items

10. New Business

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Dr. Goodloe introduced Matt Cox, Division Chief, Critical Care Analytics, OMD to discuss “Project SPEDDI”, a collaborative Lean Six Sigma project between OMD, EMSA, AMR, and Hillcrest Medical Center in an effort to improve EMSA EHR availability and delivery to Emergency Department staff.

Matt Cox introduced project SPEDDI members in attendance, Mr. Russell Friske, Mr. Mike Kisler, Ms. Ashton Kelley, and Ms. Lacey Shafer. Dr. Goodloe also thanked Mr. Heath Wright, LSSBB and Director of Operations for EMSA Eastern Division, for his guidance and counsel on the team.

The development of the problem statement discovered that 0% of EHRs were available to Hillcrest Medical Center emergency department staff, regardless of time frame. After this initial discovery, the team proceeded to gather data from the current process, such as process capability in conjunction with hands on process walking (known as GEMBA).

Dr. Goodloe spoke to the collaborative spirits and efforts from all involved agencies, including outstanding work by Hillcrest Emergency Department Director Lindy Bauer, RN/BSN, and assistance from the Health Information Management Department at Hillcrest Medical Center.

The baseline process identified was highly unstable, though the vast majority (90%+) of EMSA EHRs were completed within the MCB 2-hours post patient arrival at ED policy. It was also key to obtain “Critical to Quality” information from the receiving ED physicians on what they expected to receive from EMSA personnel in regards to information about patient assessments, vitals, etc. All physicians whom were queried during the process related that they “Only really look at the narrative, vitals, meds given, interventions, and the patients meds/allergies, and really didn’t need to see all the other stuff (i.e. signatures, HIPAA notices, etc.).

As the team continued to work through potential solutions, a key idea came to light: utilize the encode sheet to relay information provided during the encode from EMSA field personnel to ED staff, and provide an extra area for arriving medics to write any further notes to the receiving Emergency Department physician or staff.

Mr. Heath Wright then reiterated to the MCB and attendees that the form would not replace the completed EHR being delivered to the physicians, however would provide a bridge to assist in early communication between ED physicians and EMSA field personnel to relay critical patient information. Dr. Goodloe agreed, and reported to the MCB that there are ongoing efforts to improve delivery of the EHR, directly speaking to a new EMSA EHR in the process of being on boarded, which would provide a new solution of electronic delivery directly into a hospital’s EHR.

11. Next Meeting – September 11, 2019

12. Adjournment

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Upon Motion by Dr. John Nalagan and seconded by Dr. Keri Smith, the Medical Control Board voted to adjourn the meeting at 11:46am.

Approved By:
David Smith, MD
MCB Secretary

Date Approved: