Parkland

Board of Managers

Agenda for the ***Board of Managers*** meeting of the Dallas County Hospital District is scheduled for ***Wednesday, February 28, 2024, at 12:50 PM (or immediately following HOMES meeting)*** at 5200 Harry Hines Blvd (WISH Building) Dallas, TX 75235, Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) A quorum will be physically present at the location of the meeting. Videoconferencing access is also possible via Webex. That application is available at https://www.webex.com/downloads.html. Teleconferencing access is possible by calling +1-415-655-0001. Both virtual access forms require inputting (meeting number: 2631 903 0030; meeting password: 1234) to join the meeting. The ***Board of Managers*** reserves the right to exercise discretion and may convene in Executive Session as permitted by Texas Government Code §§551.071 (consultation with attorney), 551.072 (deliberations regarding real estate), 551.074 (personnel matters), 551.076 (deliberations regarding security devices or security audits), 551.078 and/or 551.0785 (deliberations by medical committee or by governmental body that administers a public insurance, health or retirement plan regarding individuals' medical or psychiatric records), 551.085 (deliberation by governing board of certain providers of health care services), 551.087 (deliberation regarding economic development negotiations), 551.088 (deliberation regarding test item); Texas Government Code §418.183 (deliberation of information under §§418.175 – 418.182 for purposes of disaster management or disaster planning); Texas Health & Safety Code §161.032 (medical committee or medical peer review committee records, information or reports; and/or medical committee or medical peer review committee proceedings under Tex. Health & Safety Code Chapter 161 and/or Tex. Occ. Code Chapters 151 and 160); and/or as otherwise authorized by law on any item listed below. The ***Board of Managers*** may consider any of the agenda items in open or executive session and may continue the meeting as necessary to accomplish the business at the time and place designated by the Chair to reconvene.

	PAGE	TIME (MIN)	PRESENTER(S)
I. Opening/Call to Order/Declare a Quorum Present/Mission Statement/Opening Remarks ***Advance Wellness | Relieve Suffering | Develop and Educate*** **I CARE** **I**ntegrity **C**ompassion and Collaboration **A**ccountability **R**espect **E**quity			Chair
A. Invocation by Rev. Myron Hardy		5	Rev. Myron Hardy, The Omni Church
B. Public Comments Regarding Agenda Items *See public comment registration information and rules at https://www.parklandhospital.com/board-of-managers*			
II. Consent Agenda			
A. Minutes 2024-01-17 Facilities Committee	*5*	1	Chair
B. Minutes 2024-01-23 Audit Committee	*9*		
C. Minutes 2024-01-23 Budget & Finance Committee	*14*		
D. Minutes 2024-01-24 Quality of Care & Patient Safety Committee	*21*		
E. Minutes 2024-01-24 Board of Managers	*26*		
F. Approve Contracts over $200,000	*32*		
G. Approve Capital Substitution(s)	*72*		
H. Approve Prescriptive Authority Delegation for Advanced Practice Registered Nurses and Physician Assistants, SYS.MS.002	*75*		

		PAGE	TIME (MIN)	PRESENTER(S)
I.	Approve Investment Policy-Defined Benefit Plan, 8311-1-14	*80*		
J.	Approve Authorization to Settle Liability Claims, SYS.LEG.005	*130*		
K.	Approve Event Reporting to the Board of Managers, SYS.LEAD.009	*134*		
L.	Approve General Victim Assistance Grant	*138*		
M.	Approve Extension of External Review of Compliance Program	*142*		
N.	Approve Patient Settlements	*143*		
O.	Approve Medical Executive Committee Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers	*144*		
III.	**Reports Requiring Deliberation(s) or Approval(s)**			
A.	CEO Update on System Operations	*146*	10	Fred Cerise, MD
B.	Questions & Discussion Related to CEO Update on System Operations	*147*	5	Chair
IV.	**Executive Session** Tex. Gov't Code §§551.076, 551.089, 551.071, 551.074			
A.	Cybersecurity Update	*148*	60	Joe Longo, John Riggi
B.	Questions & Discussion Related to Cybersecurity	*244*	15	Chair
C.	Consultation with Attorney Regarding Parkland Center for Clinical Innovation (PCCI) and Pieces Technology, Inc (PTI) Agreement	*245*	10	Paula Denney, JD, Steve Roth, JD
D.	Discussion Regarding Roles and Responsibilities of the Board of Managers in the Governance and Strategic Direction of the System	*248*	90	Chair
E.	Personnel Matters Pertaining to Duties and Responsibilities of Chief Executive Officer	*249*	10	Chair
F.	Personnel Matters Pertaining to Duties and Responsibilities of Board Members	*250*	10	Chair
V.	**Executive Session Reference Documents** Tex. Occup. Code §160.007 Tex. Health & Safety Code §§161.0315 & 161.032 Tex. Gov't Code §§551.071			
A.	Medical Executive Committee Credentialing Report	*251*		
B.	Delineation of Privileges Cardiovascular and Thoracic	*273*		
C.	Patient Settlements	*284*		
VI.	**Action Items**			
A.	Board May Take Action on Any Agenda Item(s) Above			Chair

		PAGE	TIME (MIN)	PRESENTER(S)
B.	Approve Amended Retained Rights Agreement and PCCI Asset Purchase Agreement Resolution	*289*		Chair
VII.	**Adjourn**			Chair
A.	Closing Remarks			
B.	Call to Adjourn			

Invocation

Minutes 2024-01-17 Facilities Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Facilities Committee
January 17, 2024

Minutes of the Facilities Committee Development meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, January 17, 2024, scheduled for 9:30 a.m. in the WISH Building Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Committee Chair Vincent Hall noted that a quorum was physically present and called the meeting to order at 9:39 a.m. Committee members Todd Furniss, JD (arrived at 9:45 a.m.); Reina Gonzalez, JD; Farida Minner, RN; and John Proctor attended.

Board Member attendees included: Chair Marjorie Petty, JD, (via Webex); and Elizabeth Palacios, MD.

Staff Present (via Webex and in-person) included:

Beall Carothers, Director of Planning, Development & Construction
Brad Nitschke, Associate General Counsel
Donna Richardson, EVP Chief Nursing Executive
Edmundo Castañeda, EVP & Chief Operating Officer
Felicia Miller, EVP & Chief Talent Officer
Forrest Stovall, Governance Program Manager
Fred Cerise, President & Chief Executive Officer
Guy Toliver, Director Inclusion & Supplier Diversity
Jessica Hernandez, SVP Chief DEI Officer
John Raish, SVP Support Services
Kellee Boardingham, Executive Assistant
Pamela Bryant, SVP & Chief Supply Chain Officer
Rick Humphrey, EVP Chief Financial Officer
Roberto de la Cruz, EVP & Chief Clinical Officer
Saul Cordero, VP & Chief Governance Officer
Steven Roth, EVP & Chief Legal Officer
Vic Summers, SVP Chief Audit Executive

II. Mission Statement

Chair began the meeting by sharing an invocation and stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Reports Requiring Deliberation(s) or Approval(s)

A. Facilities Minority and Women-Owned Business Enterprises (MWBE) Report

Guy Toliver provided the MWBE Report. He reported on MWBE participation percentages for Construction Contracts over $200,000. Next, he reported on MWBE participation percentages for Professional Services Contracts over $200K. Lastly, he presented on MWBE participation percentages for Goods/Equipment Contracts over $200K.

The Committee asked questions and received further information related to the MWBE Report.

B. FY24 Projects

John Raish presented the FY24 Projects. He reviewed the projects and provided an update on the status of each.

- Former Campus Demolition
- Supply Chain Store Room Expansion & MRD Breakroom
- 15th Floor ICU Bed Conversion
- HOMES Relocation to Tex Oak
- OK Paper Warehouse Demolition & Surface Parking
- Operating Room 6 Hybrid Endovascular Room
- ED Psych Intake
- Oak West Behavioral Health Renovations
- Annie's Place Expansion
- Tex Oak Warehouse Roof Replacement
- Southeast COPC Conceptual Plan
- Vickery Clinic Replacement
- iARx Onsite Pharmacy Central Fill
- ASC Remodel for Physical Therapy Space
- Flexible Sigmoidoscopy Room Buildout
- 9th Floor Shell Buildout
- Developmental Cognitive Clinic Buildout
- ED Triage Expansion
- IR Expansion Project

The Committee asked questions and received further information related to the FY24 Projects. The Committee asked questions and received additional information related to the Southeast COPC Conceptual plan.

C. Acute Care Hospital Med-Surge to ICU Conversion

John Raish provided an update on the Acute Care Hospital Med-Surge to ICU Conversion project.

The Committee asked questions and received additional information related to the Acute Care Hospital Med-Surge to ICU Conversion project.

D. Former Campus Demolition Update
John Raish provided an update on the former campus demolition. He noted the progress made thus far and the expected timeline moving forward.

The Committee asked questions and received additional information related to the Former Campus Demolition Update.

VI. Executive Session

At 10:13 a.m., the Committee went into Executive Session as permitted by the closed meeting exceptions specified on the agenda.

A. Central Fill Pharmacy Renovation Update

B. Consultation with Attorney Regarding Potential Litigation for Construction & Design Defect Claims

Members of management were excused from the discussion of topics as necessary.

Members of management in executive session attendance included:

Beall Carothers, Brad Nitschke, Donna Richardson, Edmundo Castañeda, Felicia Miller, Forrest Stovall, Fred Cerise, Guy Toliver, Jessica Hernandez, John Raish, Kellee Boardingham, Pamela Bryant, Rick Humphrey, Roberto de la Cruz, Saul Cordero, Steven Roth, and Vic Summers

Chair adjourned Executive Session and moved into Open Session at 10:48 a.m.

VII. Adjourn

With no further business to discuss, the Committee Chair adjourned the meeting at 10:49 a.m.

SO RECORDED:

_____	_____
Vincent Hall	Steven Roth, JD, MPH
Committee Chair	Assistant Secretary

Minutes 2024-01-23 Audit Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Audit
January 23, 2024

Minutes of the Audit Committee meeting of the Board of Managers of the Dallas County Hospital District, held Tuesday, January 23, 2024, scheduled for 1:00 p.m. in the WISH Building Executive Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Committee Chair Todd Furniss, JD, noted that a quorum was physically present and called the meeting to order at 1:01p.m. Committee members Vincent Hall; Ramon Miguez, PE; and Elizabeth Palacios, MD, attended in-person.

Board Member attendees included: Chair Marjorie Petty, JD; Byron Cryer, MD; and Reina Gonzalez, JD, (via Webex).

Staff Present (via Webex and in-person) included:

Amy LaBarge, Director Internal Audit
Brad Nitschke, Associate General Counsel
Carrie Berge, VP Pharmacy Services
Donna Richardson, EVP Chief Nursing Executive
Edmundo Castañeda, EVP Chief Operating Officer
Felicia Miller, EVP Chief Talent Officer
Forrest Stovall, Governance Program Manager
Fred Cerise, President & Chief Executive Officer
Jessica Hernandez, SVP Chief DEI Officer
Jill Hassmann, VP Foundation Operations
Joseph Longo, SVP Chief Information Officer
Kellee Boardingham, Executive Assistant
Margaret Palmer, VP Professional Medical Affairs (via Webex)
Marsha Beasley, VP Foundation Finance
Melanie Roberts, SVP Chief Compliance & Ethics Officer
Michael Horne, President & CEO Parkland Health Foundation
Pamela Bryant, SVP Chief Supply Chain Office
Pat Jones, VP Correctional Health Services
Rick Humphrey, EVP Chief Financial Officer
Roberto de la Cruz, EVP Chief Clinical Officer
Saul Cordero, SVP Chief Governance & Strategy Officer
Stacy Dorsey, SVP Chief Workforce Strategy Officer
Steven Roth, EVP Chief Legal Officer
Tabitha Lee, VP Finance
Vic Summers, SVP Internal Audit
Vivian Johnson, SVP Clinical Services

Additional Attendees:
Chris Clark, FORVIS

Abbey Tonne, FORVIS
Lori Orta, Lori K. Orta, PC (via Webex)
Neal Choate, Lori K. Orta, PC

II. Mission Statement

Committee Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Reports Requiring Deliberation(s) or Approval(s)

A. Parkland's Foundation Financial Statements and Independent Auditor's Report, Fiscal Year 2023

Lori Orta presented the Parkland Foundation Audit Report. She reported an overall clean, unmodified opinion. Lori also shared there were no difficulties in performing the audit, no disagreements with management, no "second opinion" shopping, and no audit adjustments made. Next, Lori reviewed the Financial Statements and noted material changes from the previous fiscal year.

The Committee asked questions and received additional information related to Parkland's Foundation Financial Statements and Independent Auditor's Report, Fiscal Year 2023.

B. DCHD Financial Statement Audit, Fiscal Year 2023

Chris Clark reviewed the 2023 DCHD Financial Statement Audit. He presented an overall clean, unmodified opinion. He also reported no material weaknesses or deficiencies in internal controls. He reviewed the Audit Risk Areas & Key Disclosures then reviewed the Financial Statements and Financial Statement Adjustments. Lastly, he presented key metrics and benchmarks compared to similar organizations.

The Committee asked questions and received additional information related to the DCHD Financial Statement Audit, Fiscal Year 2023.

C. Audit Report Summary

Vic Summers presented the Audit Report Summary. He reviewed each open audit and identified areas of improvement.

The Committee asked questions and received additional information related to the Audit Report Summary.

D. Fiscal Year 2024 Audit Plan Update
Vic Summers presented the Fiscal Year 2024 Audit Plan Update. He added justification for audit items.

The Committee asked questions and received additional information related to the Fiscal Year 2024 Audit Plan Update.

E. Open Session Audit Follow-up Reports
Vic Summers presented the Open Session Audit Follow-up Reports. He noted one audit was closed since the last Audit meeting.

The Committee asked questions and received further information related to the Open Session Audit Follow-up Reports.

F. Internal Audit Services Assessment
Management reviewed the expected timeline for the upcoming Internal Audit Services Assessment.

The Committee asked questions and received further information related to the Internal Audit Services Assessment.

VI. Executive Session

At 2:14 p.m., the Committee moved into Executive Session as permitted by the closed meeting exceptions specified on the agenda.

Members of management were excused from the discussion of topics as necessary.

Members of management in executive session attendance included:

Amy LaBarge, Brad Nitschke, Donna Richardson, Edmundo Castañeda, Felicia Miller, Forrest Stovall, Fred Cerise, Jessica Hernandez, Joe Longo, Kellee Boardingham, Margaret Palmer, Melanie Roberts, Pamela Bryant, Pat Jones, Rick Humphrey, Roberto de la Cruz, Saul Cordero, Stacy Dorsey, Steven Roth, Tabitha Lee, and Vic Summers

A. Contract Labor Update (Verbal) [§§551.071]

B. Audit Report Summary [§§161.032]

C. Executive Session Audit Follow-up Reports [§§161.032]

D. Independent Briefing with Audit Committee Verbal (Compliance matters, personnel review, etc.) [§§161.032; §§551.074]

Chair adjourned Executive Session and moved into Open Session at 2:36 pm.

VII. Adjourn

With no further business to discuss, the Committee Chair entertained a motion to adjourn the meeting at 2:37 p.m.

Ramon Miguez, PE, motioned to adjourn the meeting. Elizabeth Palacios, MD, seconded the motion. The motion passed unanimously.

SO RECORDED:

Todd Furniss, JD Committee Chair	Steven Roth, JD, MPH Assistant Secretary

Minutes 2024-01-23 Budget & Finance Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Budget and Finance
January 23, 2024

Minutes of the Budget and Finance Committee meeting of the Board of Managers of the Dallas County Hospital District, held Tuesday, January 23, 2024, scheduled for 11:30 a.m. in the WISH Building Executive Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Committee Chair Ramon Miguez, PE, noted that a quorum was physically present and called the meeting to order at 11:32 a.m. Committee members Byron Cryer, MD, (arrived at 11:37 a.m.); and John Proctor attended in-person. Committee member Lisa Sutter attended via Webex. Board member Elizabeth Palacios, MD, was appointed for quorum prior to Dr. Cryer's arrival.

Committee member Eric G. Bing, MD, PhD; did not attend.

Board Member attendees included: Chair Marjorie Petty, JD; Todd Furniss, JD; Vincent Hall; Reina Gonzalez, JD (via Webex); and Elizabeth Palacios, MD.

Staff Present (via Webex and in-person) included:

April Audain, VP UT Contracts Administration
Ceazari Threadgill, VP Enterprise Service Management
Donna Richardson, EVP & Chief Nursing Executive
Edmundo Castañeda, EVP Chief Operating Officer
Felicia Miller, EVP & Chief Talent Officer
Forrest Stovall, Governance Program Manager
Fred Cerise, President & Chief Executive Officer
Guy Toliver, Director Inclusion-Supplier Diversity
Jessica Hernandez, SVP Chief DEI Officer
Joe Mayer, Director Treasury
Joseph Longo, SVP Chief Information Officer
Kellee Boardingham, Executive Assistant
Keri Disney-Story, VP Clinical Finance
Melanie Roberts, SVP Chief Compliance & Ethics Officer
Pam Bryant, SVP Chief Supply Chain Officer
Rick Humphrey, EVP & Chief Financial Officer
Roberto de la Cruz, EVP & Chief Clinical Officer
Ryan Bailey, Investment Committee Chair
Saul Cordero, SVP & Chief Governance & Strategy Officer
Steven Roth, EVP & Chief Legal Officer
Tabitha Lee, VP Finance
Vic Summers, SVP Internal Audit

II. Mission Statement

Committee Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Reports Requiring Deliberation(s) or Approval(s)

A. Approve Contracts over $200,000

Pam Bryant reviewed the briefing documents for contracts over $200,000. (See Appendix A of these minutes for more specific details on each contract.) Discussion of non-sole source contracts was first. Pam noted a delay on the review of Contract N1. Pam Bryant provided a brief overview of each contract and highlighted the MWBE participation.

Next, Pam presented the sole source contracts. She provided a brief overview of each contract and highlighted the MWBE participation.

Lastly, Pam reviewed the deviation and ratification contracts.

The Committee asked questions and received further information related to Contracts over $200,000.

Elizabeth Palacios, MD, motioned to recommend Board approval of Contracts over $200,000, excluding contract N1. John Proctor seconded the motion. The motion passed unanimously.

B. Parkland Financial Performance Presentation

Rick Humphrey reviewed the financial results for December 2023 and discussed significant performance variances.

For the month of December, Parkland Health recognized a net loss of ($8.0M) which is ($13.8M) unfavorable to the budgeted net income of $5.8M and ($6.5M) unfavorable compared to the prior year net loss of (1.5M).

Parkland Health's operating margin and operating cash flow margin for the month of December are 1.3% and 4.8%, respectively. The operating margin was favorable compared to budget of (0.4%) and the operating cash flow margin is also favorable compared to budget of 2.8%. Parkland Health's operating margin is favorable compared to the prior year operating margin of (3.2%) and favorable to the operating cash flow margin of 0.2% from the prior year.

Parkland Health's patient cash collections in December were $91.9M which is higher than budget by $0.8M and $9.8M above the prior year. Parkland Health's days cash on hand of 187.8 days for the month is an increase of 16.7 days compared to prior month of 171.1 days and compared to the prior year December of 185.0 days, an increase of 2.8 days.

Rick Humphrey reviewed the income statement for December 2023. He noted the variances to budget including Salaries and Benefits, Purchased Medical Services, and Supplies. He also noted the variance to budget related to Grants and Contributions as well as Nonoperating Income. Next, Rick reviewed the income statement for December 2023 including all Parkland entities.

The Committee asked questions and received further information related to the Income Statements.

Next, Rick reviewed the Key Statistics for the month of December. Hospital Discharges and Average Length of Stay had positive variances to budget. He noted the cash balance consistently increases year over year.

The Committee asked questions and received further information related to the Key Statistics.

VI. Executive Session

At 12:16 a.m., the Board went into Executive Session as permitted by the closed meeting exceptions specified on the agenda.

Members of management were excused from the discussion of topics as necessary.

A. Discussion of Investment Consulting Services Contract (N1)

B. Discussion Regarding Contract for Retirement Plans Investment Consultant

Members of management in executive session attendance included:

April Audain, Ceazari Threadgill, Donna Richardson, Edmundo Castañeda, Felicia Miller, Forrest Stovall, Fred Cerise, Guy Toliver, Jessica Hernandez, Joe Mayer, Joseph Longo, Kellee Boardingham, Keri Disney-Story, Melanie Roberts, Pam Bryant, Rick Humphrey, Roberto de la Cruz, Ryan Bailey, Saul Cordero, Steven Roth, Tabitha Lee, and Vic Summers

Chair adjourned Executive Session and moved into Open Session at 12:28 p.m.

VII. Reports Requiring Deliberation(s) or Approval(s)

A. Approve Contracts over $200,000, Contract N1

John Proctor motioned to recommend Board approval of Contract N1. Elizabeth Palacios, MD seconded the motion. The motion passed unanimously.

B. Approve Replacement of Investment Managers

Joe Mayer & Ryan Bailey presented the Replacement of Investment Managers for approval.

The Committee asked questions and received additional information related to the approval for the Replacement of Investment Managers

Byron Cryer, MD, motioned to recommend Board approval of the Replacement of Investment Managers. Lisa Sutter seconded the motion. The motion passed unanimously.

C. Approve 8311-1-14 Investment Policy-Defined Benefit Plan

Rick Humphrey reviewed the 8311-1-14 Investment Policy-Defined Benefit Plan. Joe Mayor and Ryan Bailey presented on the process and recommendations that the investment committee provided.

The Committee asked questions and received additional information related to the 8311-1-14 Investment Policy-Defined Benefit Plan.

Elizabeth Palacios, MD, motioned to recommend Board approval of 8311-1-14 Investment Policy-Defined Benefit Plan. Byron Cryer, MD, seconded the motion. The motion passed unanimously.

D. **Adjourn**

With no further business to discuss, Committee Chair Ramon Miguez, PE, adjourned the meeting at 12:50 p.m.

SO RECORDED:

_____	_____
Ramon Miguez, PE	Steven Roth, JD, MPH
Committee Chair	Assistant Secretary

Appendix A (Contracts Reviewed for Approval)

Item	Page No.	Contract Type	Service or Product	Supplier	Contract Term	Current Contract Approval Amount Request	New Approved Contract Value	Selection Method	Budgeted?	Business Owner / Dept.	MWBE %	MWBE Gender	MWBE Ethnicity
													January 24, 2024
NON-SOLE SOURCE CONTRACTS - Sorted by Size													
N1		Expense	Investment Consulting Services	Meketa Investment Group	2/1/2024 - 1/31/2029	$1,800,000	$1,800,000	Request for Proposals (Best Value)	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Joe Mayer, Treasury	0%	N/A	N/A
N2		Expense	Medical Equipment Planner	Introba, Inc.	1/29/2024 - 1/28/2029	$450,000	$450,000	Request for Proposals (Best Value)	Yes	Veronica Mendez, Planning, Design and Construction	25%	See Chart	See Chart
N3		Expense	Mod #2 Dark Fiber Connectivity Data Centers	Zayo Group	3/1/2018 - 1/24/2029	$221,880	$1,140,221	Request for Proposals (Low Price/Tech Accept)	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Darren Jones / Jeff DeFord, Information Technology	0%	N/A	N/A
N4		Capital	Central Fill Pharmacy Renovation	Falkenberg Construction Co. Inc.	1/29/2024 - 6/28/2024	$337,841	$337,841	Invitation for Bids	Yes	Paul Woodard, Planning, Design and Construction	79.61%	See Chart	See Chart
N5		Capital	Lumera 700 Ophthalmic Microscope	Carl Zeiss Meditec USA, Inc.	Last Signature - 2/2/2025	$329,231	$329,231	GPO Purchase	Yes	Shika Shakelli, Clinical Engineering	0%	N/A	N/A

Appendix A (Continued)

Item	Page No.	Contract Type	Service or Product	Supplier	Contract Term	Current Contract Approval Amount Request	New Approved Contract Value	Selection Method	Budgeted?	Business Owner / Dept.	MWBE %	MWBE Gender	MWBE Ethnicity
SOLE SOURCE CONTRACTS - Sorted by Size													
S1		Expense	Correctional Health Rollout	EPIC	1/24/2024 - 5/31/2025	$6,870,124	$6,870,124	Sole Source	Yes	Cynthia Hamilton / LeMar Oleson, Information Technology	0%	N/A	N/A
S2		Expense	ROSA Robot Support & Maintenance	Zimmer Biomet US, Inc.	Last Signature - 3 Years	$219,000	$219,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Travis Kobernick, Clinical Engineering	0%	N/A	N/A
S3		Expense	Mod #1 Services for Physician Time Study	UT Southwestern Medical Center	1/1/2021 - 12/31/2025	$187,200	$374,400	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Jim Blasingame, Government Reimbursement	N/A	N/A	N/A
S4		Revenue	Generalizing an Artificial Intelligence/Machine Learning Model for Pediatric Asthma Care in Safety Net Health	Kaiser Foundation Research Institute	2/1/2024 - 1/31/2026	($749,929)	($749,929)	Sole Source	N/A-Revenue	Leticia Blea, Research Administration	N/A	See Chart	See Chart
DEVIATION/RATIFICATION													
R1		Expense-Ratification	Reimbursement Agreement for Resident Stipends (Expense)	Children's Health Clinical Operations	7/1/2023 - 6/30/2028	$5,758,283	$5,758,283	Contract Award without Competition	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Elizabeth Ponce, Graduate Medical Education	N/A	See Chart	See Chart
R2		Revenue-Ratification	Reimbursement Agreement for Resident Stipends (Revenue)	Children's Health Clinical Operations	7/1/2023 - 6/30/2028	($28,661,045)	($28,661,045)	N/A-Revenue	N/A-Revenue	Elizabeth Ponce, Graduate Medical Education	N/A	See Chart	See Chart

Minutes 2024-01-24 Quality of Care & Patient Safety Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Quality of Care and Patient Safety
January 24, 2024

Minutes of the Quality of Care and Patient Safety Committee meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, January 24, 2024, scheduled for 10:00 a.m. in the WISH Building Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Committee Chair Elizabeth Palacios, MD, noted that a quorum was physically present and called the meeting to order at 10:00 am. Committee members Eric G. Bing, MD, PhD; Byron Cryer, MD; Todd Furniss, JD; and Farida Minner, RN, attended in-person.

Board Member attendees included: Board Chair Marjorie Petty, JD (arrived at 10:10 am); Reina Gonzalez, JD; Vincent Hall; and Ramon Miguez, PE.

Staff Present (via Webex and in-person) included:

Barry-Lewis Harris, Medical Director Correctional Health (via Webex)
Carlos Girod, UTSW Professor (via Webex)
Carmen Bowling, SVP Nursing
David Alexander, SVP Nursing
Dawn Marchetto, SVP Nursing
Denise Harrington, Director of Programs (via Webex)
Donna Richardson, EVP & Chief Nursing Executive
Edmundo Castañeda, EVP & Chief Operating Officer
Eugene Chu, UTSW Associate Professor (via Webex)
Felicia Miller, EVP & Chief Talent Officer
Forrest Stovall, Governance Program Manager
Geoff Camp, VP Operations Support
Gretchen Blake, VP Quality & Clinical Effectiveness
James Griffin, President of the Medical Executive Committee
Jessica Hernandez, SVP Chief DEI Officer
Joe Kwon, UTSW Assistant Professor (via Webex)
Joe Lockridge, UTSW Associate Professor (via Webex)
Jose Joglar, UTSW Professor (via Webex)
Joseph Chang, SVP Chief Medical Officer
Judy Herrington, SVP Nursing
Karen Garvey, VP Safety & Clinical Risk Management
Kathleen Doherty, VP Nursing
Kellee Boardingham, Executive Assistant
Laura Hochwalt, Sr. Director ED, Trauma, and Disaster Management
Madhuri Sopirala, UTSW Associate Professor (via Webex)
Margaret Palmer, VP Professional Medical Affairs (via Webex)
Marlin Suell, DCHD Chief of Police (via Webex)
Melanie Roberts, SVP Chief Compliance and Ethics Officer
Mike Lane, SVP & Chief Patient & Safety Officer

Regina Williams, Sr. Director of Nursing Correctional Health (via Webex)
Roberto de la Cruz, EVP Chief Clinical Officer
Saul Cordero, SVP & Chief Governance & Strategy Officer
Sobha Fuller, SVP Nursing
Steven Roth, EVP Chief Legal Officer
Vic Summers, SVP Chief Audit Executive

II. Mission Statement

Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Executive Session – Quality & Patient Safety Operations Section

At 10:01 a.m. the Committee moved into Executive Session as permitted by the closed meeting exceptions specified on the agenda.

Members of management were excused from the discussion of topics as necessary.

Members of management in executive session attendance included:

Barry-Lewis Harris, Carlos Girod, Carmen Bowling, David Alexander, Dawn Marchetto, Denise Harrington, Donna Richardson, Edmundo Castañeda, Eugene Chu, Felicia Miller, Forrest Stovall, Geoff Camp, Gretchen Blake, James Griffin, Jessica Hernandez, Joe Kwon, Joe Lockridge, Jose Joglar, Joseph Chang, Judy Herrington, Karen Garvey, Kathleen Doherty, Kellee Boardingham, Laura Hochwalt, Madhuri Sopirala, Margaret Palmer, Marlin Suell, Melanie Roberts, Mike Lane, Regina Williams, Roberto de la Cruz, Saul Cordero, Sobha Fuller, Steven Roth, and Vic Summers

In executive session, the Committee received the presentation and reports as specified in the posted agenda.

A. Chief Quality & Safety Officer Report: Executive Quality Committee (EQC) Summary

B. Patient Safety & Clinical Risk
   1. Workplace Safety Update
   2. Cause Analysis (CA) Case Reviews and Guide

C. Clinical Quality Reports
   1. Department Performance Improvement Committee (PIC)/ Clinical Quality Committee (CQC) Annual Presentation
      a. Medicine PIC
      b. Transplant PIC

The Committee reviewed all items on the agenda, asked questions and received additional information.

VI. Executive Session: Medical Executive Committee ("MEC")

James D. Griffin, MD, President of the Medical Executive Committee, discussed the items posted on the agenda.

A. Appointments/Reappointments
   1. Medical Staff & Non-Physician Clinical Providers to Parkland Health
      a. Credentialing Report

B. SYS.MS.002 Prescriptive Authority Delegation for APNs and PAs

The Board asked questions and received additional information.

Members of management in the MEC executive session attendance included:

Carlos Girod, Donna Richardson, Edmundo Castañeda, Eugene Chu, Felicia Miller, Forrest Stovall, James Griffin, Jessica Hernandez, Jose Joglar, Joseph Chang, Kellee Boardingham, Margaret Palmer, Melanie Roberts, Mike Lane, Roberto de la Cruz, Saul Cordero, and Steven Roth, and Vic Summers

VII. Executive Session: Chief Quality & Safety Officer (CQSO) One-on-One with Committee

The Committee did not conduct a One-on-One with the CQSO, Dr. Mike Lane.

VIII. Executive Session: Medical Executive Committee President One-on-One with Committee

The Committee conducted a One-on-One with the Medical Executive Committee President, Dr. James Griffin.

Chair adjourned Executive Session and moved into Open Session at 12:06 pm.

IX. Action Items (Open Session)

A. Approve Medical Executive Committee Recommendations
   1. Approval of the Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers
      a. Credentialing Report

B. SYS.MS.002 Prescriptive Authority Delegation for APNs and PAs

Byron Cryer, MD, motioned to recommend Board approval of the Medical Executive Committee Recommendations. Todd Furniss, JD, seconded the motion. The motion passed unanimously.

X. Adjourn

With no further business to discuss, Committee Chair Elizabeth Palacios, MD, adjourned the meeting at 12:07 pm.

SO RECORDED:

Elizabeth Palacios, MD Committee Chair	Steven Roth, JD, MPH Assistant Secretary

Minutes 2024-01-24 Board of Managers

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Minutes of the Board of Managers meeting of the Dallas County Hospital District, held Wednesday, January 24, 2024, scheduled for 12:50 p.m. (or immediately following the HOMES meeting) in the WISH Building Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Chair Marjorie Petty, JD, noted that a quorum was physically present and called the meeting to order at 12:50 p.m.

Board Member attendees included: Chair Marjorie Petty, JD; Eric G. Bing, MD, PhD; Byron Cryer, MD; Todd Furniss, JD; Vincent Hall; Ramon Miguez, PE; Farida Minner, RN; Reina Gonzalez, JD; Elizabeth Palacios, MD; and Lisa Sutter. John Proctor joined via Webex at 2:35 p.m. and left at 3:00 p.m.

Staff Present (via Webex and in-person) included:

Brad Nitschke, Associate General Counsel
Donna Richardson, EVP & Chief Nursing Executive
Edmundo Castañeda, EVP & Chief Operating Officer
Felicia Miller, EVP & Chief Talent Officer
Forrest Stovall, Governance Program Manager
Fred Cerise, President & Chief Executive Officer
Geoffrey Camp, VP Operations Support
Guy Toliver, Director Inclusion & Supplier Diversity
Jessica Hernandez, SVP Chief DEI Officer
Joe Mayer, Director Treasury
Karen Garvey, VP Safety & Clinical Risk Management
Kellee Boardingham, Executive Assistant
Jessica Hernandez, SVP Chief DEI Officer
Mario Garcia, Network Tech
Mary Stewart Hall, Manager Spiritual Care
Melanie Roberts, SVP Chief Compliance & Ethics Officer
Michael Lane, SVP Chief Quality & Safety Officer
Pam Bryant, SVP Chief Supply Chain Officer
Rick Humphrey, EVP & Chief Financial Officer
Roberto de la Cruz, EVP Chief Clinical Officer
Sara Filipelli, Sr. Associate Attorney
Saul Cordero, SVP Chief Governance & Strategy Officer
Steven Roth, EVP & Chief Legal Officer
Vic Summers, SVP Chief Audit Executive

II. Mission Statement

The Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Invocation

Mary Stewart Hall offered an invocation at the beginning of the meeting.

IV. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

V. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

VI. Consent Agenda

Approve Minutes 2023-12-19 Budget & Finance Committee

Approve Minutes 2023-12-20 Quality of Care & Patient Safety Committee

Approve Minutes 2023-12-20 Board of Managers

Approve Contracts over $200,000

Approve 2024 Southwestern Medical District Budget

Approve Sustainability Resolution

Approve Investment Committee Appointments

Approve Investment Policy-Defined Contribution, 8311-1-15

Approve Replacement of Investment Managers

Approve Patient Settlements

Approve Medical Executive Committee Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers

The Chair requested Contract N1 be removed for discussion to give the Board an opportunity to ask questions.

Vincent Hall motioned to approve the Consent Agenda with the exception of Contract N1. Ramon Miguez, PE, seconded the motion. The motion passed unanimously.

The Chair shared that Parkland was named one of the best places for working parents in Dallas 2023.

VII. Reports Requiring Deliberation(s) or Approval(s)

A. CEO Update on System Operations and Board FY24 Priorities
Dr. Fred Cerise provided an update on System Operations and Board FY24 Priorities. He reviewed several priority initiatives, how they are being measured, and the status of those initiatives.

B. Questions & Discussion Related to CEO Update on System Operations and Board FY24 Priorities
The Board asked questions and received additional information related to the CEO Update on System Operations and Board FY24 Priorities.

C. Approve Recognizing Board Members Retiring with a Board Resolution
Saul Cordero gave an overview of the Resolution Recognizing Retiring Board Members.

Byron Cryer, MD, motioned to approve Recognizing Board Members Retiring with a Board Resolution. Elizabeth Palacios, MD, seconded the motion. The motion passed unanimously.

D. Governance Updates
Saul Cordero recognized Forrest Stovall's promotion to Strategy & Integration team.

VIII. Executive Session

At 1:29 p.m., the Board went into Executive Session as permitted by the closed meeting exceptions specified on the agenda.

Members of management were excused from the discussion of topics as necessary.

A. Discussion Regarding Contract for Retirement Plans Investment Consultant

B. Workplace Safety Update

C. Questions & Discussion Related to Workplace Safety Update

D. Strategic Partnership for Facility Development Update

E. Questions & Discussion Regarding Strategic Partnership for Facility Development Update

F. Discussion Regarding Availability Study Contract

G. Consultation with Attorney Regarding Potential Litigation for Construction & Design Defect Claims

H. Discussion of Board Members Nominated to Serve as Board Officers

I. Personnel Matters Pertaining to Duties and Responsibilities of Chief Executive Officer

J. Personnel Matters Pertaining to Duties and Responsibilities of Board Members

Members of management in executive session attendance included:

Brad Nitschke, Donna Richardson, Edmundo Castañeda, Felicia Miller, Forrest Stovall, Fred Cerise, Geoffrey Camp, Guy Toliver, Jessica Hernandez, Joe Mayer, Karen Garvey, Kellee Boardingham, Jessica Hernandez, Mario Garcia, Melanie Roberts, Michael Lane, Pam Bryant, Rick Humphrey, Roberto de la Cruz, Sara Filipelli, Saul Cordero, Steven Roth, and Vic Summers

Chair adjourned Executive Session and moved into Open Session at 3:42 p.m.

IX. Action items (Open Session)

A. Approve Contracts over $200,000, Contract N1

Ramon Miguez, PE, motioned to approve Contracts over $200,000, Contract N1. Eric G. Bing, MD, PhD, seconded the motion. The motion passed unanimously.

B. Election of Officers of Parkland Health Board of Managers

The Board conducted the Election of Officers of Parkland Health Board of Managers for the Chair, Vice-Chair and Secretary positions. The Board voted by ballot with Marjorie Petty, JD, elected as Chair; Elizabeth Palacios, MD, elected as Vice-Chair; and Todd Furniss, JD, elected as Secretary.

Marjorie Petty, JD, received votes from Eric G Bing, MD, PhD; Byron Cryer, MD; Todd Furniss, JD; Reina Gonzalez, JD; Vincent Hall; Ramon Miguez, PE; Farida Minner, RN; Elizabeth Palacios, MD; Marjorie Petty, JD; and Lisa Sutter. John Proctor was absent.

Elizabeth Palacios, MD, received votes from Eric G. Bing, MD, PhD; Byron Cryer, MD; Todd Furniss, JD; Reina Gonzalez, JD; Vincent Hall; Elizabeth Palacios, MD. Lisa Sutter received votes from Ramon Miguez, PE; Farida Minner, RN; Marjorie Petty, JD; and Lisa Sutter. John Proctor was absent.

Todd Furniss, JD, received votes from Eric G. Bing, MD, PhD; Byron Cryer, MD; Todd Furniss, JD; Reina Gonzalez, JD; Vincent Hall; Ramon Miguez, PE; Farida Minner, RN; Elizabeth Palacios, MD; Marjorie Petty, JD; and Lisa Sutter. John Proctor was absent.

X. Adjourn

With no further business to discuss, the Chair adjourned the meeting at 3:56 p.m.

SO RECORDED:

_____	_____
Marjorie D. Petty, JD	Steven Roth, JD, MPH
Chair	Assistant Secretary

Approve Contracts over $200,000

Full Board - Contracts for Approval

Item	Page No.	Contract Type	Service or Product	Supplier	Contract Term	Current Contract Approval Amount Request	New Approved Contract Value	Selection Method	Budgeted?	Business Owner / Dept.	MWBE %	MWBE Gender	MWBE Ethnicity
February 28, 2024													
NON-SOLE SOURCE CONTRACTS - Sorted by Size													
N1		Capital	Annie's Place Learning Center Interior Improvements	The Whiting-Turner Contracting Company	Last Signature - 11/1/2024	$1,878,535	$1,878,535	MATOC	Yes	Paul Woodard, Parkland Design & Construction	23.6%	See chart	See chart
N2		Capital	Psych Intake Expansion	Falkenberg Construction Co., Inc.	Last Signature - 2/28/2025	$614,027	$614,027	Invitation for Bids	Yes	Mark Stewart, Parkland Design and Construction	36.40%	See chart	See chart
N3		Capital	ASC Physical Therapy Renovation	Azteca Enterprises, Inc.	Last Signature - 11/1/2024	$489,155	$489,155	MATOC	Yes	Laura Adair, Parkland Design and Construction	78.60%	See chart	See chart
N4		Capital	Pi Drive Drills	Stryker Sales, LLC, Instrument Division	Last Signature - 5/1/2024	$429,868	$429,868	GPO Purchase	Yes	Cheston Chan, Perioperative Services	0%	N/A	N/A

Full Board - Contracts for Approval

Item	Page No.	Contract Type	Service or Product	Supplier	Contract Term	Current Contract Approval Amount Request	New Approved Contract Value	Selection Method	Budgeted?	Business Owner / Dept.	MWBE %	MWBE Gender	MWBE Ethnicity
SOLE SOURCE CONTRACTS - Sorted by Size													
S1		Expense	Mod to Add Funds Add funding for COVID/Flu Testing Kits	Cepheid	3/9/2023 - 3/8/2024	$1,399,000	$2,899,000	Sole Source Modification	Yes	Kristi Morgan/Tim Lenz, Microbiology/Pathology	N/A	N/A	N/A
S2		Expense	Fleet Vehicle Maintenance for standard vehicles, maintenance vehicles, and police vehicles	Planet Ford Dallas Love Field	Last Signature - 3/1/2029	$875,000	$875,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Pamela Bryant, Finance Administration	0%	N/A	N/A
S3		Expense	Mod to Add Funds ROTEM delta System Consumables and Service Contract	Werfen USA, LLC	2/8/2023 - 2/12/2028	$833,500	$903,500	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Gene Fedorko/Tim Lenz, Hematology	0%	N/A	N/A
S4		Expense	Scrub Dispensing Stations Lease and Maintenance	Innovative Product Achievements, LLC	3/1/2024 - 2/28/2029	$815,340	$815,340	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Jay Dyck , Linen Services	0%	N/A	N/A
S5		Expense	Mod #5 Nutrition services	The American Bottling Company	1/17/2017 - 2/28/2025	$729,000	$1,163,000	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Jeffrey Madison, Nutrition Services	0%	N/A	N/A
S6		Expense	Provider Credentialing Software – Payer Enrollment	QGenda, LLC	Last Signature - No Expiration	$520,000	$520,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Jessica Isokariari / Gerry Baker, PFS Operations	0%	N/A	N/A
S7		Expense	ProCare Service	Stryker	3/1/2024 - 2/28/2027	$450,263	$450,263	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Cheston Chan, Strategy, Perioperative Services Administration	0%	N/A	N/A
S8		Expense	Epic Boost – Justin Hansmeyer	Epic	2/28/2024 - 10/25/2024	$316,200	$316,200	Sole Source	Yes	Deborah Johnson / LeMar Oleson, Information Technology	0%	N/A	N/A
S9		Capital	PureSteel™ Healthcare Reprocessing Sinks and Accessories	Pure Processing, LLC.	Last Signature - 3/8/2025	$234,261	$234,261	Sole Source	Yes	Cheston Chan, Perioperative Services	0%	N/A	N/A
S10		Expense	Mod #3 Endoscopic GI	Steris Corporation	3/1/2019 - 2/28/2025	$200,000	$800,000	Sole Source	Yes, for the current	Cheston Chan,	0%	N/A	N/A

Full Board - Contracts for Approval

Item	Page No.	Contract Type	Service or Product	Supplier	Contract Term	Current Contract Approval Amount Request	New Approved Contract Value	Selection Method	Budgeted?	Business Owner / Dept.	MWBE %	MWBE Gender	MWBE Ethnicity
S11		Expense	Mod #4 Orthopedic Implants	Wright Medical	7/1/2014 - 9/30/2024	$160,000	$816,500	Sole Source Modification	Yes	Cheston Chan, Perioperative Admin	0%	N/A	N/A
S12		Expense	Mod to Add Funds Reagents (A1C kit)	Sysmex America Inc	9/20/2016 - 4/23/2025	$144,000	$869,836	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Gene Fedorko/Tim Lenz, Hematology	0%	N/A	N/A
S13		Capital	Mod #1 Purchase an additional 4 Prismax Systems, Renal Replacement Therapy	Vantive US Healthcare LLC fka Baxter Healthcare Corporation	4/7/2023 - 6/30/2024	$121,360	$455,100	Sole Source Modification	Yes	Marcus Cooper, Clinical Engineering	0%	N/A	N/A

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Annie's Place Learning Center Interior Improvements	
Business Owner: Paul Woodard	**Business Owner Dept:** Parkland Design & Construction	**Contract Number:** POCRE-19160 A3
Vendor/Supplier/Contractor: The Whiting-Turner Contracting Company	**Source Selection Methodology:** MATOC	**Fair and Reasonable Price Determination:** Adequate Competition

Revenue, Expense or Capital:

Capital

	Contract Dates	Contract Price
Base Term:	Last Signature – 11/1/2024	$1,878,535
Out Years:	0 Year(s)	+$0
Total:	Last Signature – 11/1/2024	$1,878,535

Lowest Bidder

Is this contractor the lowest bidder/supplier? Yes
If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes
Does this contract have an IT Component? No
Does this contract have a Construction Component? Yes; and Construction is approved

Financial

Is Funding included in the applicable FY Budget? Yes
FTE Impact: None

Diversity

Potential for M/WBE engagement: Vendor will have M/WBE participation. The plan/program has been submitted and accepted.
Were M/WBE's Directly Solicited? Yes
Number Responding M/WBE's: 2
What % of this contract is M/WBE? 23.6%
M/WBE Race/Ethnicity? N/A
M/WBE Gender? N/A

Submitted By (Division VP): John Raish, Senior Vice President, Support Services

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Annie's Place Learning Center Interior Improvements

VENDOR: The Whiting-Turner Contracting Company

COST:

Base Term:	$1,878,535
Out Years:	+ $0
Total:	$1,878,535

Recommendation
Approve this contract for Annie's Place Learning Center Interior Improvements.

Background
This contract is for construction services for additional interior improvements to the existing Annie's Place Building at 2131-33 Butler Street. These improvements will allow the expansion of Annie's Place Learning Center, the facility which will provide child daycare for Parkland employee. Exterior improvements are also included. The Parkland-owned facility is managed by Mommies in Need.

M/WBE Participation

Subcontractors Services MWBE-Totals			
Ethnicity	**Gender**	**MWBE $**	**MWBE %**
Black	Male	$299,166	15.9%
Hispanic	Male	$61,426	3.3%
White	Female	$82,832	4.4%
Total		$443,424	23.6%

Fair and Reasonable Price Determination
A fair and reasonable price was determined through adequate competition. A solicitation was sent to MATOC contractors and Parkland received 4 bids. The costs have been reviewed by the Facilities team and a Fair and Reasonable price was determined through historical pricing for similar construction projects and the District's internal estimates. Based on Parkland's internal knowledge and assessment of the costs, the costs are in line with the market.

Vendor	Price Differential
The Whiting-Turner Contracting Company	$0
Vendor B	$20,419
Vendor C	$80,798
Vendor D	$487,740

Financial Forecast

Base Term	FY2024
Expenses	$1,878,535

Document Contact/Author:	Kimberly Bell

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Psych Intake Expansion	
Business Owner: Mark Stewart	**Business Owner Dept:** Parkland Design and Construction	**Contract Number:** POCRE-23868
Vendor/Supplier/Contractor: Falkenberg Construction Co., Inc.	**Source Selection Methodology:** Invitation for Bids	**Fair and Reasonable Price Determination:** Adequate Competition

Revenue, Expense or Capital:

Capital

	Contract Dates	Contract Price
Base Term:	Last Signature – 2/28/2025	$614,027
Out Years:	0 Year(s)	+$0
Total:	Last Signature – 2/28/2025	$614,027

Lowest Bidder

Is this contractor the lowest bidder/supplier? Yes
If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes
Does this contract have an IT Component? No
Does this contract have a Construction Component? Yes; and Construction is approved

Financial

Is Funding included in the applicable FY Budget? Yes
FTE Impact: None

Diversity

Potential for M/WBE engagement: Vendor will have M/WBE participation. The plan/program has been submitted and accepted.
Were M/WBE's Directly Solicited? Yes
Number Responding M/WBE's: 0
What % of this contract is M/WBE? 36.4%
M/WBE Race/Ethnicity? See chart
M/WBE Gender? See chart

Submitted By (Division VP): John Raish, Senior Vice President, Support Services

DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Psych Intake Expansion

VENDOR: Falkenberg Construction Co., Inc.

COST:		
	Base Term:	$614,027
	Out Years:	+ $0
	Total:	$614,027

Recommendation
Approve this contract for Psych Intake Expansion.

Background
This contract is for construction to expand the current Psych Intake space so that staff and patients are safer. The Psych Expansion project is needed to address the existing operational challenges that currently exist. In order to accommodate the number of Psych staff members, police and patients that are in the Psych Intake space. The Psych Intake expansion is part of Emergency Services Department.

M/WBE Participation

Subcontractors Services MWBE-Totals			
Ethnicity	**Gender**	**MWBE $**	**MWBE %**
Hispanic	Male	$ 50,000	8.14%
Black	Female	$ 57,170	9.31%
White	Female	$116,360	18.95%
Total		$223,530	36.4%

Fair and Reasonable Price Determination
A fair and reasonable price was determined through adequate competition. An Invitation for Bid was sent to contractors; Parkland received three bids. The costs have been reviewed by the Facilities team and a Fair and Reasonable price was determined through historical pricing for similar construction projects and the District's internal estimates. Based on Parkland's internal knowledge and assessment of the costs, the costs are in line with the market.

Vendor	Price Differential
Falkenberg Construction Company Inc.	$0
Vendor A	$ 17,442
Vendor B	$ 152,988

Financial Forecast

Base Term	FY2024
Expenses	$614,027

Document Contact/Author:	Kimberly Bell

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** ASC Physical Therapy Renovation	
Business Owner: Laura Adair	**Business Owner Dept:** Parkland Design and Construction	**Contract Number:** PONCS-18789 A20
Vendor/Supplier/Contractor: Azteca Enterprises, Inc.	**Source Selection Methodology:** MATOC	**Fair and Reasonable Price Determination:** Adequate Competition

Revenue, Expense or Capital:

Capital

	Contract Dates	Contract Price
Base Term:	Last Signature – 11/1/2024	$489,155
Out Years:	0 Year(s)	+$0
Total:	Last Signature – 11/1/2024	$489,155

Lowest Bidder

Is this contractor the lowest bidder/supplier? Yes
If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes
Does this contract have an IT Component? No
Does this contract have a Construction Component? Yes; and Construction is approved

Financial

Is Funding included in the applicable FY Budget? Yes
FTE Impact: None

Diversity

Potential for M/WBE engagement: This award is to a M/WBE vendor.
Were M/WBE's Directly Solicited? Yes
Number Responding M/WBE's: 2
What % of this contract is M/WBE? 78.6%
M/WBE Race/Ethnicity? See chart
M/WBE Gender? See chart

Submitted By (Division VP): John Raish, Senior Vice President, Support Services

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: ASC Physical Therapy Renovation

VENDOR: Azteca Enterprises, Inc.

COST:		
	Base Term:	$489,155
	Out Years:	+ $0
	Total:	$489,155

Recommendation
Approve this contract for ASC Physical Therapy Renovation.

Background
This contract is for renovations to the Physical Therapy Clinic due to increasing volumes and the need to increase space to accommodate associated growth. The location is ideal since it is above the outpatient surgery suite and adjacent to the occupational health clinic. Patients who have orthopedic procedures can come to the same location for physical therapy rehabilitation.

M/WBE Participation

Subcontractors Services MWBE-Totals			
Ethnicity	**Gender**	**MWBE $**	**MWBE %**
White	Female	$55,785	11.4%
Black	Male	$127,584	26.10%

Prime Contractor Self Performed Work			
Ethnicity	**Gender**	**MWBE $**	**MWBE %**
Hispanic	Male	$201,091	41.10%

Fair and Reasonable Price Determination
A fair and reasonable price was determined through adequate competition. A solicitation was sent to MATOC contractors and Parkland received 2 bids. The costs have been reviewed by the Facilities team and a Fair and Reasonable price was determined through historical pricing for similar construction projects and the District's internal estimates. Based on Parkland's internal knowledge and assessment of the costs, the costs are in line with the market.

Vendor	Price Differential
Azteca Enterprises, Inc.	$0
Vendor B	$90,178

Financial Forecast

Base Term	FY2024
Expenses	$489,155

Document Contact/Author:	Kimberly Bell

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Pi Drive Drills	
Business Owner: Cheston Chan	**Business Owner Dept:** Perioperative Services	**Contract Number:** POCP-23907
Vendor/Supplier/Contractor: Stryker Sales, LLC, Instrument Division	**Source Selection Methodology:** GPO Purchase	**Fair and Reasonable Price Determination:** Adequate Competition

Revenue, Expense or Capital:

Capital

	Contract Dates	Contract Price
Base Term:	Last Signature – 5/1/2024	$429,868
Out Years:	0 Year(s)	+$0
Total:	Last Signature – 5/1/2024	$429,868

Lowest Bidder

Is this contractor the lowest bidder/supplier? GPO Purchase

If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes

Does this contract have an IT Component? No

Does this contract have a Construction Component? No

Financial

Is Funding included in the applicable FY Budget? Yes

FTE Impact: None

Diversity

Potential for M/WBE engagement: Vendor self performs; there are no opportunities through subcontractors, and vendor does not have a corporate plan.

Were M/WBE's Directly Solicited? N/A-no solicitation performed

Number Responding M/WBE's: N/A-no solicitation performed

What % of this contract is M/WBE? 0%

M/WBE Race/Ethnicity? N/A

M/WBE Gender? N/A

Submitted By (Division VP): David Alexander, Senior Vice President, Perioperative Services

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Pi Drive Drills

VENDOR: Stryker Sales, LLC, Instrument Division

COST:		
	Base Term:	$429,868
	Out Years:	+ $0
	Total:	$429,868

Recommendation
Approve this contract for Pi Drive Drills.

Background
This contract is for the purchase of drills used in the operating room. These drills are used across multiple surgical service lines, including but not limited to oral/maxillofacial surgery; ear/nose/throat surgery; neurosurgery; plastic surgery; orthopedic surgery; podiatric surgery.

Fair and Reasonable Price Determination
The GPO contract and pricing was obtained in a solicitation process performed by Vizient. Market research conducted through ECRI shows that Parkland price is 9.4% higher than the average for other facilities. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Base Term	FY2024
Equipment / Licenses	$429,868

Document Contact/Author:	Andrew Barter

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod to Add Funds Add funding for COVID/Flu Testing Kits	
Business Owner: Kristi Morgan/Tim Lenz	**Business Owner Dept:** Microbiology/Pathology	**Contract Number:** POCP-22136 A4
Vendor/Supplier: Cepheid **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (02/22/2023): Modifications Totaling < $100,000 Modification # 1 Amount: Modification # 2 Amount: Modification # 3 Amount:	$1,500,000 $0 $0 $99,000
Revenue, Expense or Capital: Expense	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification to Add Funds:	 $1,300,000
Original Start Date: 3/9/2023 **Current Expiration:** 3/8/2024 **Mod Start Date:** 2/28/2024 **Expiration after this Mod:** 3/8/2024	New Contract Amount:	$2,899,000

Approvals

Has the final modification been approved by Legal for legal sufficiency? Legal approved base document, amendment has no changes

Does this modification have an IT Component? No

Does this modification have a Construction Component? No

Financial

Is Funding included in the applicable FY Budget? Yes

FTE Impact: None

Diversity

Current M/WBE Participation? N/A

M/WBE Race/Ethnicity? N/A

M/WBE Gender? N/A

Submitted By (Division VP): Vivian Johnson, Senior Vice President, Clinical Services

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod to Add Funds Add funding for COVID/Flu Testing Kits

VENDOR: Cepheid

COST:

BOM Approved Contract Total (02/22/2023):	$1,500,000
Modification # 1:	$0
Modification # 2:	$0
Modification # 3:	$99,000
Mod to Add Funds:	+ $1,300,000
Total:	$2,899,000

Recommendation
Approve this contract modification to Add funding for COVID/Flu Testing Kits.

Background
This contract is for the Cepheid equipment and the reagents that are proprietary to the system. The Microbiology department added non-respiratory assays to this agreement, and with this increased spend, the allotted amount from the previous approved amount is not enough to last until the current end date of 03/08/24 and the start date of the new agreement. This funding is to ensure Microbiology will have enough funding to carry them through until the new agreement with Cepheid is completed. These reagents are proprietary to the Cepheid equipment which is owned by Parkland.

Fair and Reasonable Price Determination
Market research conducted through ECRI shows that Parkland's price is average in comparison to other facilities. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	Total
$1,500,000	$1,399,000	$2,899,000

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. Limitations are imposed on the products/services by proprietary restrictions. The reagents are proprietary to the Parkland owned equipment.

Document Contact/Author:	Tamisha Smallwood

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Fleet Vehicle Maintenance for standard vehicles, maintenance vehicles, and police vehicles	
Business Owner: Pamela Bryant	**Business Owner Dept:** Finance Administration	**Contract Number:** PONCS-23799
Vendor/Supplier/Contractor: Planet Ford Dallas Love Field	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Market Price

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	Last Signature – 3/1/2027	$525,000
Out Years:	2 Year(s)	+$350,000
Total:	Last Signature – 3/1/2029	$875,000

Lowest Bidder

Is this contractor the lowest bidder/supplier? N/A-Sole Source

If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes

Does this contract have an IT Component? No

Does this contract have a Construction Component? No

Financial

Is Funding included in the applicable FY Budget? Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.

FTE Impact: None

Diversity

Potential for M/WBE engagement: Vendor self performs; there are no opportunities through subcontractors, but supplier diversity received their corporate plan.

Were M/WBE's Directly Solicited? N/A-no solicitation performed

Number Responding M/WBE's: 0

What % of this contract is M/WBE? 0%

M/WBE Race/Ethnicity? N/A

M/WBE Gender? N/A

Submitted By (Division VP): Pam Bryant, Senior Vice President, Chief Supply Chain Officer

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Fleet Vehicle Maintenance for standard vehicles, maintenance vehicles, and police vehicles

VENDOR: Planet Ford Dallas Love Field

COST:

Base Term:	$525,000
Out Years:	+ $350,000
Total:	$875,000

Recommendation
Approve this contract for Fleet Vehicle Maintenance for standard vehicles, maintenance vehicles, and police vehicles.

Background
This contract is for Parkland Fleet Vehicle Maintenance for standard vehicles, maintenance vehicles, and police vehicles. This service was sent out for public bid and Parkland received zero bids. This vendor is the closest vendor in proximity to the Parkland campus that can accommodate all listed vehicles. This is a backup vendor to our current vendor who is overwhelmed and taking long periods of time to return the vehicles.

Fair and Reasonable Price Determination
Sole Source pricing was determined based on the published rates by this vendor including a discount on price due to the volume of vehicles.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	FY2028	Totals
Maintenance	$175,000	$175,000	$175,000			$525,000
Out Years	**FY2024**	**FY2025**	**FY2026**	**FY2027**	**FY2028**	**Totals**
Maintenance				$175,000	$175,000	$350,000
Totals	**$175,000**	**$175,000**	**$175,000**	**$175,000**	**$175,000**	**$875,000**

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. The product or service has no competition. Went out to bid for RFP, but no vendors replied to the RFP. We then selected the vendor due to the location and services offered.

Document Contact/Author:	Elizabeth Addleman

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod to Add Funds ROTEM delta System Consumables and Service Contract	
Business Owner: Gene Fedorko/Tim Lenz	**Business Owner Dept:** Hematology	**Contract Number:** POCP-21969 A1
Vendor/Supplier: Werfen USA, LLC **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	Current Contract Amount:	$70,000
Revenue, Expense or Capital: Expense	Modification to Add Funds:	$833,500
Original Start Date: 2/8/2023 **Current Expiration:** 2/12/2028 **Mod Start Date:** 2/28/2024 **Expiration after this Mod:** 2/12/2028	New Contract Amount:	$903,500

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Legal approved base document, amendment has no changes
Does this modification have an IT Component?	No
Does this modification have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
FTE Impact:	None

Diversity

Current M/WBE Participation?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): Vivian Johnson, Senior Vice President, Clinical Services

DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Mod to Add Funds ROTEM delta System Consumables and Service Contract

VENDOR: Werfen USA, LLC

COST:		
	Current Contract Amount:	$70,000
	Mod to Add Funds:	+ $833,500
	Total:	$903,500

Recommendation
Approve this contract modification for ROTEM delta System Consumables and Service Contract.

Background
This contract is for our Werfen ROTEM analyzers. Parkland acquired 3 new ROTEM analyzers in February of 2023. ROTEM is the only analyzer in the market that provides real-time data on specific coagulation parameters, rather than an aggregate view of the entire coagulation cascade. The reagents that are used in the ROTEM system to perform testing for intra-operative assessment of patient coagulation status allow for optimal utilization of blood and blood products. These are the required testing reagents that are FDA approved to operate in the system and only available from this single US vendor Werfen. The initial contract that was completed for the capital purchase did not include the funding for the services and consumables and funding is now being added for the consumables and services.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that Parkland is paying the average price compared to other member hospitals that have purchased these or similar items. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	FY2025	FY2026	FY2027	FY2028	Total
$70,000	$138,917	$208,375	$208,375	$208,375	$69,458	$903,500

Sole Source Justification
The contract is for products for which there is only one source. Limitations are imposed on the products/services by intellectual property or proprietary restrictions. The reagents are proprietary to the equipment.

Document Contact/Author:	Tamisha Smallwood

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Scrub Dispensing Stations Lease and Maintenance	
Business Owner: Jay Dyck	**Business Owner Dept:** Linen Services	**Contract Number:** PONCS-23651
Vendor/Supplier/Contractor: Innovative Product Achievements, LLC	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Historical Pricing

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	3/1/2024 – 2/28/2029	$815,340
Out Years:	0 Year(s)	+$0
Total:	3/1/2024 – 2/28/2029	$815,340

Lowest Bidder

Is this contractor the lowest bidder/supplier?	N/A-Sole Source
If not, what premium will be paid for this contract over the lowest bidder?	N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency?	Yes
Does this contract have an IT Component?	No
Does this contract have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
FTE Impact:	None

Diversity

Potential for M/WBE engagement:	Vendor self performs; there are no opportunities through subcontractors, but supplier diversity received their corporate plan.
Were M/WBE's Directly Solicited?	N/A-no solicitation performed
Number Responding M/WBE's:	N/A-no solicitation performed
What % of this contract is M/WBE?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): Eric Walker, Vice President, Support Services

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Scrub Dispensing Stations Lease and Maintenance

VENDOR: Innovative Product Achievements, LLC

COST:		
	Base Term:	$815,340
	Out Years:	+ $0
	Total:	$815,340

Recommendation
Approve this contract for Scrub Dispensing Stations Lease and Maintenance.

Background
This contract is for ScrubEx scrub dispensing stations throughout the hospital to mitigate the excessive costs associated with inventory shrinkage of hospital-issued scrubs which the District currently utilizes. We have had these machines for the past several years. ScrubEx has no substitute or interchangeable components and is a standardization to existing equipment.

Fair and Reasonable Price Determination
Fair and reasonable price was based on historical data.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	FY2028	Totals
Expenses / Consumables	$31,453	$31,453	$31,453	$31,453	$31,451	$157,263
Equipment / Licenses	$127,967	$127,967	$127,967	$127,967	$127,969	$639,837
Software Hosting	$3,168	$3,168	$3,168	$3,168	$3,168	$15,840
Shipping and Handling	$2,400					$2,400
Totals	$164,988	$162,588	$162,588	$162,588	$162,588	$815,340

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. The products/services are additions or modifications to existing systems or equipment where there are no substitute or interchangeable components, software, or maintenance sources, and compatibility is paramount. Section 3-205.02 in the Dallas County Hospital District Purchasing Manual states that standardization of existing equipment constitutes a sole source.

Document Contact/Author:	Elizabeth Addleman

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod # 5 Nutrition services	
Business Owner: Jeffrey Madison	**Business Owner Dept:** Nutrition Services	**Contract Number:** PONCP-18117 A4
Vendor/Supplier: The American Bottling Company **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (11/17/20):	$434,000
	Previous Modifications Modification # 3 Amount: Modification # 4 Amount:	 $99,000 $90,000
Revenue, Expense or Capital: Expense	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification # 5 Amount:	 $540,000
Original Start Date: 1/17/2017 **Current Expiration:** 2/29/2024 **Mod Start Date:** 3/1/2024 **Expiration after this Mod:** 2/28/2025	New Contract Amount:	$1,163,000

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	No
Does this modification have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
FTE Impact:	None

Diversity

Current M/WBE Participation?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): Eric Walker, Vice President, Support Services

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 5 Nutrition services

VENDOR: The American Bottling Company

COST:

BOM Approved Contract Total (11/17/20):	$434,000
Modification # 3:	$99,000
Modification # 4:	$90,000
Modification # 5:	+ $540,000
Total:	$1,163,000

Recommendation
Approve this contract modification for Nutrition services.

Background
This contract is to purchase Dr. Pepper products from the bottler. These beverage products are sold in the Parkland Cafeteria, Park Market Convenience Store, and Starbucks. This one (1) year extension will allow for negotiation of a new three (3) year base Contract with two (2) one (1) year options. This is for Nutrition Services.

Fair and Reasonable Price Determination
Pricing for all beverage products will remain the same through the term of this extension, as fixed pricing was negotiated during original contract negotiations.

Financial Forecast

Current Contract Amount	FY2023	FY2024	FY2025	Total
$434,000	$99,000	$405,000	$225,000	$1,163,000

Sole Source Justification
Amerian Bottling is the sole bottler for Dr. Pepper products in North Texas. American Bottling does not allow distribution through foodservice vendors.

Document Contact/Author:	Theresa Isenhour

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Provider Credentialing Software – Payer Enrollment	
Business Owner: Jessica Isokariari / Gerry Baker	**Business Owner Dept:** PFS Operations	**Contract Number:** POIT-23741
Vendor/Supplier/Contractor: QGenda, LLC	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Market Price

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	Last Signature – No Expiration	$520,000
Out Years:	0 Year(s)	+$0
Total:	Last Signature – No Expiration	$520,000

Lowest Bidder

Is this contractor the lowest bidder/supplier? N/A-Sole Source

If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes

Does this contract have an IT Component? Yes; and IT approved

Does this contract have a Construction Component? No

Financial

Is Funding included in the applicable FY Budget? Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.

FTE Impact: None

Diversity

Potential for M/WBE engagement: Vendor self performs; there are no opportunities through subcontractors, and vendor does not have a corporate plan.

Were M/WBE's Directly Solicited? N/A-no solicitation performed

Number Responding M/WBE's: N/A-no solicitation performed

What % of this contract is M/WBE? 0%

M/WBE Race/Ethnicity? N/A

M/WBE Gender? N/A

Submitted By (Division VP): Gerry Baker, Senior Vice President, Revenue Cycle

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH & HOSPITAL SYSTEM
BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Provider Credentialing Software – Payer Enrollment

VENDOR: QGenda, LLC

COST:		
	Base Term:	$520,000
	Out Years:	+ $0
	Total:	$520,000

Recommendation
Approve this contract for Provider Credentialing Software – Payer Enrollment.

Background
This contract is for the purchase of Provider Enrollment Software for Patient Financial Services department. Parkland employs 800+ physicians and mid-level providers (Billable Providers) – medical, behavioral health and dental. Implementing enrollment software will ensure Parkland is not at risk for denied claims and associated reimbursement of services for reasons related to provider enrollment. Additionally, this will assist in reducing the overall claims denial rate.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that the Parkland price is 19.4% lower than the average for other member hospitals. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	FY2028	Totals
Expense	$112,000	$102,000	$102,000	$102,000	$102,000	$520,000

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. The product or service has no competition. The Qgenda application is a sole source because they the only provider that has the ability to interface and submit data through an online portal which is a requirement from a number of payers.

Document Contact/Author:	Baruh Bosch

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** ProCare Service	
Business Owner: Cheston Chan	**Business Owner Dept:** Strategy, Perioperative Services Administration	**Contract Number:** POCS-23786
Vendor/Supplier/Contractor: Stryker	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Historical Pricing

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	3/1/2024 – 2/28/2027	$450,263
Out Years:	0 Year(s)	+$0
Total:	3/1/2024 – 2/28/2027	$450,263

Lowest Bidder

Is this contractor the lowest bidder/supplier?	N/A-Sole Source
If not, what premium will be paid for this contract over the lowest bidder?	N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency?	Yes
Does this contract have an IT Component?	No
Does this contract have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
FTE Impact:	None

Diversity

Potential for M/WBE engagement:	Vendor self performs; there are no opportunities through subcontractors, but supplier diversity received their corporate plan.
Were M/WBE's Directly Solicited?	N/A-no solicitation performed
Number Responding M/WBE's:	N/A-no solicitation performed
What % of this contract is M/WBE?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): David Alexander, Senior Vice President, Nursing

Parkland

DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: ProCare Service

VENDOR: Stryker

COST:		
	Base Term:	$450,263
	Out Years:	+ $0
	Total:	$450,263

Recommendation
Approve this contract for ProCare Service.

Background
This contract is for repair services on orthopedic instruments, spine drills, and saws as well as restoration of that equipment to manufacturer specifications. This contract is purchased by and used in the sterile processing department.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Pricing has been negotiated down from $14,866 per month to $12,507 per month.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	Totals
Expenses / Consumables	$87,280	$149,622	$149,622	$63,739	$450,263

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. The Original Equipment Manufacturer (OEM) uses OEM parts for repairs and service that will not invalidate the warranty/certification/calibration. Stryker is the manufacturer of the equipment that we already have in the Main Operating Room Dept. and they are able to obtain all required OEM parts for repairs that other vendors do not have access to obtain.

Document Contact/Author:	Bryson Hendrix

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** Epic Boost – Justin Hansmeyer	
Business Owner: Deborah Johnson / LeMar Oleson	**Business Owner Dept:** Information Technology	**Contract Number:** POIT-23801
Vendor/Supplier/Contractor: Epic	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Historical Pricing

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	2/28/2024 – 10/25/2024	$316,200
Out Years:	0 Year(s)	+$0
Total:	2/28/2024 – 10/25/2024	$316,200

Lowest Bidder

Is this contractor the lowest bidder/supplier? N/A-Sole Source
If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes
Does this contract have an IT Component? Yes; and IT approved
Does this contract have a Construction Component? No

Financial

Is Funding included in the applicable FY Budget? Yes
FTE Impact: None

Diversity

Potential for M/WBE engagement: N/A-no solicitation performed
Were M/WBE's Directly Solicited? N/A-no solicitation performed
Number Responding M/WBE's: N/A-no solicitation performed
What % of this contract is M/WBE? 0%
M/WBE Race/Ethnicity? N/A
M/WBE Gender? N/A

Submitted By (Division VP): Joe Longo, Senior Vice President & Chief Information Officer

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH & HOSPITAL SYSTEM
BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Epic Boost – Justin Hansmeyer

VENDOR: Epic

COST:		
	Base Term:	$316,200
	Out Years:	+ $0
	Total:	$316,200

Recommendation
Approve this contract for Epic Boost – Justin Hansmeyer.

Background
This contract is for professional fees for optimization of the Epic system, which is optimizing and installing the best practices with EPIC including the latest functionality that we own with our current licenses. Given that we have been live on the system for over 20 years which was prior to any of the current best practices, this review is necessary for optimal performance.

Fair and Reasonable Price Determination
EPIC is the Electronic Medical Record (EMR) for Parkland.

Financial Forecast

Base Term	FY2024
Expenses	$316,200

Sole Source Justification
This contract is for a good or service for which it is impractical to obtain competition because of required delivery dates. Delays would cause extreme increase in cost or detriment to the District.

Document Contact/Author:	Tonya Calhoun

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: February 28, 2024	**Product or Service:** PureSteel™ Healthcare Reprocessing Sinks and Accessories	
Business Owner: Cheston Chan	**Business Owner Dept:** Perioperative Services	**Contract Number:** POCP-23701
Vendor/Supplier/Contractor: Pure Processing, LLC.	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Market Price

Revenue, Expense or Capital:

Capital

	Contract Dates	Contract Price
Base Term:	Last Signature – 3/8/2025	$234,261
Out Years:	0 Year(s)	+$0
Total:	Last Signature – 3/8/2025	$234,261

Lowest Bidder

Is this contractor the lowest bidder/supplier? N/A-Sole Source
If not, what premium will be paid for this contract over the lowest bidder? N/A

Approvals

Has the final contract been approved by Legal for legal sufficiency? Yes
Does this contract have an IT Component? No
Does this contract have a Construction Component? No

Financial

Is Funding included in the applicable FY Budget? Yes
FTE Impact: None

Diversity

Potential for M/WBE engagement: Vendor self performs; there are no opportunities through subcontractors, and vendor does not have a corporate plan.
Were M/WBE's Directly Solicited? N/A-no solicitation performed
Number Responding M/WBE's: N/A-no solicitation performed
What % of this contract is M/WBE? 0%
M/WBE Race/Ethnicity? N/A
M/WBE Gender? N/A

Submitted By (Division VP): David Alexander, Senior Vice President, Nursing

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: PureSteel™ Healthcare Reprocessing Sinks and Accessories

VENDOR: Pure Processing, LLC.

COST:		
	Base Term:	$234,261
	Out Years:	+ $0
	Total:	$234,261

Recommendation
Approve this contract for PureSteel™ Healthcare Reprocessing Sinks and Accessories.

Background
Reprocessing sinks are stainless steel sinks used to clean and decontaminate medical instruments. These sinks are needed for the Sterile Processing Department which is responsible for sterile processing of equipment across the hospital. These sinks align with industry standard and will allow for staff height adjustment. Most importantly and of highest concern: this purchase will allow for efficiency by streamlining the initial stage of cleaning, thus helping to alleviate the current backlog in Gastroenterology.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that the Parkland price is 1.5% higher than the average for other member hospitals. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Base Term	FY2024
Equipment / Licenses	$234,261

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. The products have documented size, weight, or other physical restrictions. The Pure Processing sinks are equipped with ergonomic wrist rest (that remove pinch points when cleaning), and the design has light hoods directly over the sinks (that provides additional lighting allowing for more detailed inspection and cleaning). Other sinks in the market don't have ergonomic wrist rest and lighting like this). Additionally, the sinks are capable of being adjusted up and down to accommodate the technicians' ergonomic needs. This will standardize with other sinks owned by Parkland.

Document Contact/Author:	Andrew Barter

Parkland

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod # 3 Endoscopic GI Supplies	
Business Owner: Cheston Chan	**Business Owner Dept:** Perioperative Administration	**Contract Number:** POCP-20973 A3
Vendor/Supplier: Steris Corporation **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (2/26/2019):	$600,000
	Modifications Totaling < $100,000 Modification # 1 Amount: Modification # 2 Amount:	 $0 $0
Revenue, Expense or Capital: Expense	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification # 3 Amount:	 $200,000
Original Start Date: 3/1/2019 **Current Expiration:** 2/29/2024 **Mod Start Date:** 3/1/2024 **Expiration after this Mod:** 2/28/2025	New Contract Amount:	$800,000

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	No
Does this modification have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
FTE Impact:	None

Diversity

Current M/WBE Participation?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): David Alexander, Senior Vice President, Nursing

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 3 Endoscopic GI Supplies

VENDOR: Steris Corporation

COST:

BOM Approved Contract Total (2/26/2019):	$600,000
Modification # 1:	$0
Modification # 2:	$0
Modification # 3:	+ $200,000
Total:	$800,000

Recommendation
Approve this contract modification for Endoscopic GI Supplies.

Background
This contract is for a sole-source agreement based on the patents held by Steris for certain GI procedural devices used during invasive internal procedures and the need to ensure interoperability with these devices. The vendor was originally determined through a Value Analysis initiative that involved a formal clinical evaluation by the physicians utilizing a quality, patient care impact, and cost/benefit analysis.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that the Parkland price is 0.7% lower than the average for other member hospitals. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	FY2025	Total
$600,000	$116,667	$83,333	$800,000

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. Limitations are imposed on the products/services by intellectual property or proprietary restrictions. Specifically, the implanted devices as well as the tools used to insert and remove items within the GI tract are protected by Patent.

Document Contact/Author:	Ashley Meister

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod # 4 Orthopedic Implants	
Business Owner: Cheston Chan	**Business Owner Dept:** Perioperative Admin	**Contract Number:** POCP-18116 A4
Vendor/Supplier: Wright Medical **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (9/28/2022):	$656,500
	Modifications Totaling < $100,000 Modification # 3 Amount:	$99,000
Revenue, Expense or Capital: Expense	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification # 4 Amount:	$61,000
Original Start Date: 7/1/2014 **Current Expiration:** 9/30/2024 **Mod Start Date:** 3/1/2024 **Expiration after this Mod:** 9/30/2024	New Contract Amount:	$816,500

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Legal approved base document, amendment has no changes
Does this modification have an IT Component?	No
Does this modification have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes
FTE Impact:	None

Diversity

Current M/WBE Participation?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): David Alexander, Senior Vice President, Nursing

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Mod # 4 Orthopedic Implants

VENDOR: Wright Medical

COST:

BOM Approved Contract Total (9/28/2022):	$656,500
Modification # 3:	$99,000
Modification # 4:	+ $61,000
Total:	$816,500

Recommendation
Approve this contract modification for Orthopedic Implants.

Background
This contract is for orthopedic implants and was completed as a Sole Source. The products used are for orthopedic implants for shoulders surgeries. This product is used by Surgery.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that the Parkland price is 12% lower than the average for other, similar facilities. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	Total
$656,500	$160,000	$816,500

Sole Source Justification
This contract is for a good or service for which it is impractical to obtain competition. Implants, heart valves, bone screws, prosthetics, etc. are patient care devices and are exempt.

Document Contact/Author:	Cheryl Robertson/Bryson Hendrix

Parkland

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod to Add Funds Reagents (A1C kit)	
Business Owner: Gene Fedorko/Tim Lenz	**Business Owner Dept:** Hematology	**Contract Number:** POCP-22737 A3
Vendor/Supplier: Sysmex America Inc **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (05/26/2020):	$725,836
	Modifications Totaling < $100,000 Modification # 1 Amount: Modification # 2 Amount:	$0 $99,000
Revenue, Expense or Capital: Expense	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification to Add Funds:	$45,000
Original Start Date: 9/20/2016 **Current Expiration:** 4/23/2025 **Mod Start Date:** 3/1/2024 **Expiration after this Mod:** 4/23/2025	New Contract Amount:	$869,836

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Legal approved base document, amendment has no changes
Does this modification have an IT Component?	No
Does this modification have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
FTE Impact:	None

Diversity

Current M/WBE Participation?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): Vivian Johnson, Senior Vice President, Clinical Services

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod to Add Funds: Reagents (A1C kit)

VENDOR: Sysmex America Inc

COST:

BOM Approved Contract Total (05/26/2020):	$725,836
Modification # 1:	$0
Modification # 2	$99,000
Mod to Add Funds:	+ $45,000
Total:	$869,836

Recommendation
Approve this contract modification for Reagents (A1C kit).

Background
This contract was created in 2016 to support A1C testing in the Hematology department. The Sysmex Variant II Turbo analyzer, owned by Parkland, is used in Hematology to perform A1C testing. The equipment is scheduled for replacement in 2025, but the equipment's life expectancy is still useful during the contract extension and funding is needed to carry this contract to term.

Fair and Reasonable Price Determination
Although this is sole source, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that the price offered to Parkland is the lowest price within the marketplace. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	FY2025	FY2026	Total
$725,836	$42,000	$72,000	$30,000	$869,836

Sole Source Justification
Parkland owns the Variant II Turbo analyzer currently being used in Hematology for A1C testing. The reagents are solely manufactured and distributed by Sysmex and specific to their instrumentation. No other vendor can supply the reagents and buffers.

Document Contact/Author:	Tamisha Smallwood

Parkland

Board Approval Request For Modification to Contract or Funding

BOM Date: February 28, 2024	**Modification:** Mod # 1 Purchase an additional 4 Prismax Systems, Renal Replacement Therapy	
Business Owner: Marcus Cooper	**Business Owner Dept:** Clinical Engineering	**Contract Number:** POCP-22028 A1
Vendor/Supplier: Vantive US Healthcare LLC fka Baxter Healthcare Corporation **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (3/29/2023):	$333,740
Revenue, Expense or Capital: Capital	Modification # 1 Amount:	$121,360
Original Start Date: 4/7/2023 **Current Expiration:** 3/31/2024 **Mod Start Date:** Last Signature **Expiration after this Mod:** 6/30/2024	New Contract Amount:	$455,100

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	No
Does this modification have a Construction Component?	No

Financial

Is Funding included in the applicable FY Budget?	Yes
FTE Impact:	None

Diversity

Current M/WBE Participation?	0%
M/WBE Race/Ethnicity?	N/A
M/WBE Gender?	N/A

Submitted By (Division VP): John Raish, Senior Vice President, Support Services

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 1 Purchase an additional 4 Prismax Systems, Renal Replacement Therapy

VENDOR: Vantive US Healthcare LLC fka Baxter Healthcare Corporation

COST:

BOM Approved Contract Total (3/29/2023):	$333,740
Modification # 1:	+ $121,360
Total:	$455,100

Recommendation
Approve this contract modification to Purchase an additional 4 Prismax Systems, Renal Replacement Therapy.

Background
This contract is to purchase 4 Prismax continuous renal replacement therapy systems, which are for use in the ICU units to replace kidney function in patients with renal failure. The current equipment is 11 + years old with a recommended life of 10 years. Due to being in a high usage environment it is recommended that these devices be replaced at their recommended life expectancy. Clinical Engineering's replacement strategy is to replace 1/3 of the fleet each FY beginning in FY2021 and ending in FY2024. These represent the final 4 units to be replaced and they are failing frequently.

Fair and Reasonable Price Determination
Although the item being purchased is a sole source for the reasons discussed below, this item is sold in substantial quantities in the commercial marketplace. Market research conducted through ECRI shows that the Parkland price is 7.7% lower than the average for other member hospitals. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	Total
$333,740	$121,360	$455,100

Sole Source Justification
This contract is for a good or service for which there is only one acceptable source. The products/services are additions or modifications to a fleet of equipment awarded through a competitive process to a single vendor. Fleet standardization. Parkland has many of these devices and these need to match the existing fleet.

Document Contact/Author:	Andrew Barter

CONTRACT RESOLUTION
Board of Managers
February 28, 2024

PARKLAND HEALTH

RESOLUTION NO. _____

Be it resolved, the Parkland Health Board of Managers, by a vote of _____ Yes and _____ Nay, does by this resolution (adopt/reject) _____ the following:

WHEREAS, Parkland Health management requested approval for certain contracts and approval/rejection is as checked below:

Approved	Rejected	Withdrawn	Type	Service or Product	Vendor	Contract Term	Aggregate Contract Amount Approved	Budgeted
			Capital	Annie's Place Learning Center Interior Improvements	The Whiting-Turner Contracting Company	Last Signature - 11/1/2024	$1,878,535	Yes
			Capital	Psych Intake Expansion	Falkenberg Construction Co., Inc.	Last Signature - 2/28/2025	$614,027	Yes
			Capital	ASC Physical Therapy Renovation	Azteca Enterprises, Inc.	Last Signature - 11/1/2024	$489,155	Yes
			Capital	Pi Drive Drills	Stryker Sales, LLC, Instrument Division	Last Signature - 5/1/2024	$429,868	Yes
			Expense	Mod to Add Funds Add funding for COVID/Flu Testing Kits	Cepheid	3/9/2023 - 3/8/2024	$2,899,000	Yes
			Expense	Fleet Vehicle Maintenance for standard vehicles, maintenance vehicles, and police vehicles	Planet Ford Dallas Love Field	Last Signature - 3/1/2029	$875,000	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Mod to Add Funds ROTEM delta System Consumables and Service Contract	Werfen USA, LLC	2/8/2023 - 2/12/2028	$903,500	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Scrub Dispensing Stations Lease and Maintenance	Innovative Product Achievements, LLC	3/1/2024 - 2/28/2029	$815,340	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Mod #5 Nutrition services	The American Bottling Company	1/17/2017 - 2/28/2025	$1,163,000	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Provider Credentialing Software – Payer Enrollment	QGenda, LLC	Last Signature - No Expiration	$520,000	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	ProCare Service	Stryker	3/1/2024 - 2/28/2027	$450,263	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Epic Boost – Justin Hansmeyer	Epic	2/28/2024 - 10/25/2024	$316,200	Yes
			Capital	PureSteel™ Healthcare Reprocessing Sinks and Accessories	Pure Processing, LLC.	Last Signature - 3/8/2025	$234,261	Yes
			Expense	Mod #3 Endoscopic GI Supplies	Steris Corporation	3/1/2019 - 2/28/2025	$800,000	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Mod #4 Orthopedic Implants	Wright Medical	7/1/2014 - 9/30/2024	$816,500	Yes
			Expense	Mod to Add Funds Reagents (A1C kit)	Sysmex America Inc	9/20/2016 - 4/23/2025	$869,836	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Capital	Mod #1 Purchase an additional 4 Prismax Systems, Renal Replacement Therapy	Vantive US Healthcare LLC fka Baxter Healthcare Corpora	4/7/2023 - 6/30/2024	$455,100	Yes

THEREFORE, BE IT RESOLVED, that the Parkland Health Board of Managers approves these contracts as noted.

Dated this 28th of February 2024.

_____
Marjorie D. Petty, JD
Chair

_____
Steve Roth, JD, MPH
Assistant Secretary

Marjorie Petty, JD	Yes _____	No _____	Abstain _____	Absent _____
Elizabeth Palacios, MD	Yes _____	No _____	Abstain _____	Absent _____
Todd Furniss, JD	Yes _____	No _____	Abstain _____	Absent _____
Eric G. Bing, MD, PhD	Yes _____	No _____	Abstain _____	Absent _____
Byron Cryer, MD	Yes _____	No _____	Abstain _____	Absent _____
Reina Gonzalez, JD	Yes _____	No _____	Abstain _____	Absent _____
Vincent Hall	Yes _____	No _____	Abstain _____	Absent
Ramon Miguez, PE	Yes _____	No _____	Abstain _____	Absent _____
Farida Minner, RN	Yes _____	No _____	Abstain _____	Absent _____
John Proctor	Yes _____	No _____	Abstain _____	Absent _____
Lisa Sutter	Yes _____	No _____	Abstain _____	Absent _____

Approve Capital Substitution(s)

Parkland Health
2024 Capital Substitution
For February 2024 Board Meeting

Ref #	Division	Project Total	Substitution Amount	Description
1	Information Technology	$3,122,853	$376,567	**Access Layer Refresh FY24-Year 5 of 5 (CapReq 32685)**
	Explanation			This request is for year 5 of 5 of the refresh plan to harden the existing network in critical hospital locations by replacing aging infrastructure. The end of service/end of life hardware is no longer vendor supported. Should this infrastructure fail, vendor support would not be available and replacement hardware would not be readily available. Additional funds are needed for this project due to price increases.The purpose of this request is to continue with execution of the 5-year. Without replacement, there is risk of loss of service to all endpoint devices that connect on the access layer of the end of service/end of life hardware.
Grand Total		**$3,122,853**	**$376,567**	

PARKLAND HEALTH

RESOLUTION NO. _____

Be it resolved, the Parkland Health Board of Managers, by a vote of _____ Yes and _____ Nay, does by this resolution (adopt/reject) _____ the following:

WHEREAS, Parkland Health management requests approval for the use of contingency funds for capital items in the amount of $3,122,853 for FY23 as itemized in the listing presented to the Board of Managers, and

THEREFORE, BE IT RESOLVED, that the Parkland Health Board of Managers approves the use of funds as submitted.

Dated this ____th Day of _____2024.

_____
Marjorie Petty, JD
Chair

_____
Steven Roth, JD, MPH
Assistant Secretary

Marjorie Petty, JD	Yes_____	No _____	Abstain _____	Absent _____
Elizabeth Palacios, MD	Yes_____	No _____	Abstain _____	Absent _____
Todd Furniss, JD	Yes_____	No _____	Abstain _____	Absent _____
Eric G. Bing, MD, PhD	Yes_____	No _____	Abstain _____	Absent _____
Byron Cryer, MD	Yes_____	No _____	Abstain _____	Absent _____
Reina Gonzalez, JD	Yes_____	No _____	Abstain _____	Absent _____
Vincent Hall	Yes_____	No _____	Abstain _____	Absent _____
Ramon Miguez, PE	Yes_____	No _____	Abstain _____	Absent _____
Farida Minner, RN	Yes_____	No _____	Abstain _____	Absent _____
John Proctor	Yes_____	No _____	Abstain _____	Absent _____

Approve Prescriptive Authority Delegation for Advanced Practice Registered Nurses and Physician Assistants, SYS.MS.002

Prescriptive Authority Delegation for Advanced Practice Registered Nurses and Physician Assistants	SYS.MS.002	Published: 11/19/20
System		Page **1** of **4**

SCOPE:

This procedure covers prescriptive delegation for all Advanced Practice Providers (APPs) including Advanced Practice Registered Nurses (APRNs), [~~(c~~Clinical ~~n~~Nurse ~~s~~Specialists (CNSs), Certified Registered Nurse Anesthetists (CRNAs), ~~nurse anesthetists,~~ Certified Nurse Midwives (CNM~~W~~s), Nurse Practitioners (NPs)], ~~,~~ and Physician Assistants (PA,s). ~~nurse midwives, and nurse practitioners) and PAs (physician assistants).~~ This policy does not apply to CRNAs ~~certified registered nurse anesthetists in the provision~~ writing orders for drugs and devices for the purpose of administering anesthesia or ~~an~~ anesthesia-related services.

~~PRACTICE STATEMENT~~POLICY:

1. APPs (APRNs and PAs) must meet and maintain the following criteria before ~~they may order or prescribe~~ ordering or prescribing dangerous drugs, controlled substances, or medical devices at Parkland Health ("Parkland"):~~PHHS:~~

   A. Privileged for prescriptive authority at Parkland Health ~~& Hospital System~~ (Parkland~~HHS~~)

   B. Prescriptive authority delegation by a privileged ~~PHHS~~ Parkland ~~affiliated~~ physician on Parkland medical staff.

   C. Completion of a prescriptive authority agreement or prescriptive delegation/practice agreement with annual review

      1) If the APP practices within the hospital building, prescriptive authority delegation will be via a facility-based practice delegation, using a prescriptive authority delegation/practice agreement. This agreement covers all patients who are seen in the hospital building, both as in-patients, observation, or out-patients.

      2) Prescriptive authority delegation will be via a prescriptive authority agreement for all locations outside of the main hospital building.

~~If you have any questions about this document, contact Medical Staff Services. WHY? Seems we just receive DEA…would you know how to answer a question? I wouldn't at this point.~~

DRAFT

D. Notification of the Texas Medical Board (TMB) of each delegation within 30 days of the delegation and of any changes to the delegation

2. APPs must meet and maintain these additional criteria before ordering or prescribing ~~they may order or prescribe~~ controlled substances at Parkland~~ PHHS~~:

   A. Delegation for prescriptive authority for controlled substances from a privileged Parkland~~HHS~~ affiliated physician visible on the TMB website

   B. Current Drug Enforcement Administration (DEA) registration (if necessary for the APP to perform their job duties)

3. Prescriptive authority delegation is restricted to the population and sites listed in the document. Upon t~~t~~ransfer to another area or an addition of a new work site and delegation from a physician from another service, an additional prescriptive authority delegation is required. Additional prescriptive authority delegation is required for transfer to another area, addition of a new work site, and delegation from a physician from another service.

4. APPs may not use the physician's or the institution's DEA permit numbers.

5. Physicians may delegate prescriptive authority for Schedule II Controlled Substances to APPs with a facility~~-~~-based delegation or to APPs who are caring for patients enrolled in a hospice program.

6. If prescriptive authority for Schedule II Controlled Substances is delegated, prescriptions for these may be written only for patients:

   A. Who have been admitted to the hospital for an intended length of stay of 24 hours or greater~~;~~,

   B. Who are receiving services in the emergency department of the ~~hospital;~~hospital,

   C. Or ~~has~~ have elected to receive hospice care, and ~~is~~ are receiving hospice treatment from a qualified hospice provider; as a part of the plan of care for the treatment of a person who has executed a written certification of a terminal illness.

~~If you have any questions about this document, contact Medical Staff Services. WHY? Seems we just receive DEA…would you know how to answer a question? I wouldn't at this point.~~

DRAFT

7. A physician may delegate, via a written agreement, to certified nurse midwives (CNMs) the ordering of controlled substances, ~~via a written agreement~~, for the CNM~~'s~~ clients during intra-partum and immediate postpartum care. DEA registration is not required for the CNMs for the ordering of controlled substances under this agreement.

EQUIPMENT:

N/A

PROCEDURE:

1. The APP will request prescriptive authority privilege through Medical Staff Services.
2. Once the privilege is granted, the APP and the delegating physician will individualize the appropriate prescriptive authority document, using the appropriate format approved by ~~PHHS~~ Parkland. The delegation document must be reviewed and signed annually. These documents are posted on the Parkland~~HHS~~ Intranet.
3. The APP will notify the ~~Texas Medical Board~~ TMB of the delegation and the delegating physician will complete the delegation on-line.
4. If the physician has delegated controlled substances, the APP will request Controlled Substances Registration with the DEA. Copies of these permits will be maintained in Medical Staff Services.
5. The APP may begin ordering and prescribing dangerous drugs and medical devices after the privilege of prescriptive authority is granted, prescriptive authority document is signed and the TMB is notified of the delegation. The APP ~~APRN/PA~~ may begin ordering and prescribing controlled substances after the Medical Staff Office has received copies of the DEA registration.
6. The APP ~~APRN/PA~~ and physician will complete the quality assurance activities as described in the prescriptive authority document.

~~If you have any questions about this document, contact Medical Staff Services. WHY? Seems we just receive DEA…would you know how to answer a question? I wouldn't at this point.~~

DRAFT

DEFINITIONS:

Order: the act of an APP to authorize the administration of a drug or device to a patient or to authorize a pharmacist or other agent to dispense a drug to a patient in a hospital for immediate administration while the patient is in the hospital or for emergency use on the patient's release from the hospital.

Prescribe: the act of an APP to authorize a pharmacist or other agent to dispense a drug, device, or controlled substance to the ultimate user.

Prescriptive Authority Agreement: an agreement entered into by a physician and an APP through which the physician delegates to the APRN or PA the act of prescribing or ordering a drug or device. Prescriptive authority agreements are required for the delegation of the act of prescribing or ordering a drug or device in all practice settings, with the exception of a ~~facility based~~facility-based practice.

Prescriptive Delegation/Practice Agreement: written authorization delegating the act of prescribing or ordering a drug or device at a facility-based practice (licensed hospital).

REFERENCES:

Texas Administration Code §§193.1-193.14

Texas Administrative Code §§222.1-222.8

Texas Occupations Code Subchapter B Sections 157.051-157.060

~~If you have any questions about this document, contact Medical Staff Services. WHY? Seems we just receive DEA…would you know how to answer a question? I wouldn't at this point.~~

DRAFT

Approve Investment Policy-Defined Benefit Plan, 8311-1-14

8311-1-14
WD 02/08
RD-02/08/19
RD 3/31/21
RD 8/28/23
RD 1/23/24
23 Pages

PARKLAND HEALTH & HOSPITAL SYSTEM

FISCAL MANUAL

RETIREMENT PLAN INVESTMENT POLICY

DALLAS COUNTY HOSPITAL DISTRICT
RETIREMENT INCOME PLAN

8311-1-14
WD 02/08
RD-02/08/19
RD 3/31/21
RD 8/28/23
RD 1/23/24
23 Pages

PARKLAND HEALTH & HOSPITAL SYSTEM

FISCAL MANUAL

RETIREMENT PLAN INVESTMENT POLICY

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PARKLAND HEALTH & HOSPITAL SYSTEM

FISCAL MANUAL

RETIREMENT PLAN INVESTMENT POLICY

SECTION I

PURPOSE OF INVESTMENT POLICY

The Parkland Health & Hospital System ("Parkland") maintains a defined benefit pension plan known as the Dallas County Hospital District Retirement Income Plan ("Plan") that provides retirement benefits for those Parkland employees who are eligible to participate. The Plan was initially adopted January 1, 1982 by Parkland as a replacement for Social Security benefits. The purpose of the Plan is to provide financial security to our employees after retirement. The Plan is funded by the employees through a 6.2% payroll deduction (effective January 2018; no caps or limits) on base earnings, with Parkland providing any additional funding required to meet the actuarial determined contribution as calculated by an independent actuary. Since Parkland is a political subdivision of the State of Texas, the Plan is not subject to ERISA, but is subject to State regulation through the Texas Pension Review Board and the accounting for the Plan has to comply with Government Accounting Standards Board requirements. Any changes ~~of~~to the Plan require approval by Parkland's Board of Managers. This Investment Policy ("Policy") defines the investment policy for assets of the Plan. This Policy sets forth administration responsibilities for the Plan and Plan assets, asset allocation strategy for the Plan, investment guidelines for Plan assets and performance measurement standards for investment of Plan assets. The objectives of this Policy are formulated in response to the following:

- the anticipated financial needs of the Plan;
- consideration of risk tolerance; and
- the need to document and communicate with the Plan's investment managers, advisors, and service providers regarding the purpose of investment policy, administration, asset allocation strategy, investment guidelines and performance measurement standards for the Plan and the Plan assets and ultimately to Plan participants.

This Policy shall apply to the following parties that have responsibilities regarding the Plan Assets:

- Parkland's Board of Managers;
- The Budget and Finance Committee of Parkland's Board of Managers;
- Plan Investment Committee;
- Plan Investment Consultant;
- Plan Investment Managers;
- Plan Trustee(s)/Custodian(s); and
- Parkland's staff, as contemplated by this Policy and as requested from time to time by the Investment Committee and/or the Budget and Finance Committee.
- Transition Managers

PARKLAND HEALTH & HOSPITAL SYSTEM

FISCAL MANUAL

RETIREMENT PLAN INVESTMENT POLICY

This Policy shall be reviewed annually and communicated to ~~all of~~all the foregoing parties involved in the oversight of the Plan, together with any amendments of this Policy from time to time.

INVESTMENT OBJECTIVES

Investments will be made in the sole interest of the participants and beneficiaries of the Plan and in accordance with the following objectives:

- To ensure an adequate pool of assets to support the benefit obligations to participants, retirees and beneficiaries;
- Obtain a reasonable rate of return -consistent with a prudent level of portfolio risk, while controlling costs incurred in administering and managing the assets; and
- Improvement in the Plan's funded status, providing improved benefit certainty and benefit levels for employees participating in the Plan and the opportunity to reduce employer contributions to the Plan.

SECTION II

ADMINISTRATION

The Board of Managers is responsible for ensuring that all Plan assets are managed effectively and prudently. The responsibilities of the Board's Budget and Finance Committee and other parties related to the management of the Plan assets are as follows:

A. Budget and Finance Committee

The Budget and Finance Committee shall have the authority and responsibility to:

- Recommend adoption of this Policy and amendments from time to time as deemed necessary, desirable or appropriate;
- Recommend appointments to the Investment Committee;
- Select and appoint experienced and qualified Investment Managers to manage all or a portion of the Plan's assets, and to remove Investment Managers from time to time as deemed necessary, desirable or appropriate; Investment Managers shall be selected from established and financially

sound organizations that have a proven and demonstrable record in managing funds with characteristics appropriate for the risk/return profile of the Plan's assets. The process for the selection of Investment Managers for the Plan will involve a disciplined approach, and will be fully documented in the Budget and Finance Committee's records; and

- Approve the hiring of a Custodian and an Investment Consultant to assist the Investment Committee and Parkland staff in implementing policy and managing the Plan

- Monitor the investments of the Plan assets, including periodic monitoring (at least quarterly) of the investment performance results and a periodic analysis and review (at least quarterly) of the overall investment portfolio of the Plan and its performance as measured by the performance measurement standards set forth in this Policy.

B. Investment Committee

The Investment Committee shall:

- Serve as experienced investment professionals to the Budget and Finance Committee;

- Be composed of members who are selected based upon their overall investment experience, including managing or supervising similar-sized investment portfolios, and their willingness to serve as community volunteers without compensation, but with reimbursement for reasonable out-of-pocket expenses incurred in accomplishing their Investment Committee-related duties;

- Be subject to indemnification related to actions taken within the scope of their duties as members of the Investment Committee, to the fullest extent allowed by applicable law;

- Recommend to the Budget and Finance Committee appropriate Investment Consultants, Investment Managers, Trustees and Custodians, mutual funds or other vendors to implement the Policy; and

- Suggest investment goals and objectives for the Plan and recommend an appropriate asset allocation strategy to be incorporated into this Policy.

C. Investment Managers

Investment Managers shall:

- Manage an investment strategy within the guidelines set forth in this policy;

- Implement selection and timing of investments within the guideline limitations in this Policy, and consistent with each Investment Manager’s stated philosophy and style;

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- Supply timely written quarterly reports of investment performance results to Parkland staff;
- Meet and/or communicate with Parkland staff and the Investment Committee as requested to review investment performance and discuss current strategy;
- Notify the Investment Committee, the Budget and Finance Committee and Parkland staff in writing of any material deviations from the stated investment approach;
- Conduct the purchase and sale of investments in a manner designed to receive the combination of best price and execution;
- Promptly vote proxy ballots for the exclusive benefit of the Plan and in accordance with this Policy; and
- Proactively provide documentation of all relevant compliance issues to Parkland staff within seven (7) days, including, but not be limited to, the following:
    - Regulatory reports
    - Changes in personnel
    - Changes in ownership
    - Any notices to or from the Securities and Exchange Commission ("SEC")
    - The commencement of any judicial or administrative proceedings

D. Investment Consultant

The Investment Consultant shall:

- Disclose any relationship or revenue between themselves and any candidate manager they may introduce to the plan.
- Be approved by the Budget and Finance Committee based on a recommendation by the Investment Committee.
- Assist the Investment Committee, the Budget and Finance Committee and Parkland staff in an open and competitive process to select Investment Managers, and provide its rankings and recommendations for selection of Investment Managers to the Investment Committee and the Budget and Finance Committee.
- Review the performance of the Investment Managers versus their respective benchmarks and relevant peer groups; and make recommendations to the Investment Committee and Budget and Finance Committee as needed.

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- Monitor the Investment Managers' style and characteristics to ensure they are running strategies consistent with the Policy.

- Review and analyze investment performance reports from the Investment ~~Managers, and~~Managers and prepare and deliver comprehensive quarterly reports regarding the Investment Managers' performance to the Investment Committee, Budget and Finance Committee and Parkland staff.

- Present to the Investment Committee and Parkland staff any recommended changes to this Policy.

- Assist the Investment Committee, the Budget and Finance Committee and Parkland staff with the review of capital markets, this policy, investment structure, and investment strategies.

- Periodically revisit each benchmark index for its continued appropriateness.

- Monitor the total investment portfolio for unintended risk associated with over-allocation to certain securities within asset classes, sectors, or geography that may overlap.

- Educate the Investment Committee and Parkland staff on investment issues that could impact the Plan.

- Annual review of investment management fees and comparisons with fees of other managers with similar strategies.

E. Trustee/Custodian

The trustee/custodian shall:

- Be a reputable, well-established, financially sound financial institution that is recognized as an industry leader. The trustee/custodian shall be approved by the Budget and Finance Committee based on a recommendation by the Investment Committee.

- Fulfill all fiduciary duties required of a trustee/custodian by pertinent state and federal laws and regulations.

- Safe keep the Plan's assets in accordance with the Trust Agreement.

- Supply timely reports of transactions and valuations of Plan assets.

F. Staff

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Parkland staff shall:

- Implement the decisions of the Budget and Finance Committee and Investment Committee.
- Review asset allocation on an ongoing basis and initiate portfolio rebalancing pursuant to parameters in this Policy.
- Coordinate communications between the Investment Committee and the Budget and Finance Committee.
- Organize Investment Committee meetings and distribute materials related to the meetings.
- Coordinate review and execution of legal documents related to the Plan's investment and administration.

G. Transition Manager

Transition management is the cost effective and efficient portfolio restructuring of institutional assets from single or multiple investment managers/asset classes to a new investment allocation over a short-term investment horizon. During the transition process, the transition manager is looked upon as a discretionary caretaker of the portfolio(s) to be liquidated and as the conduit for the funding of the target portfolio(s). The responsibilities of a transition manager should include the following responsibilities.

- Transition management (portfolio transition) services from the legacy portfolio(s) to the target portfolio(s).
- The transition manager will act as a fully-discretionary fiduciary and will perform the transition with utmost care and prudence. The fund sponsor realizes that markets fluctuate and risks are inherent during the transition period. However, market forces do not absolve the transition manager from negligence and applying the highest level of care and prudence inherent in a fiduciary.
- Minimize tracking error and maintain asset class (benchmark) exposure. During the transition period, the preservation of capital must be taken into consideration through the expert use of all sources of liquidity, namely: in-kind transfers ("cherry picking" of the legacy portfolio for the target portfolio), internal and external crossing networks, primary exchanges, non-displayed liquidity, and principal trades. The strategic and tactical deployment of cash, futures, ETFs, and

other hedging strategies are included in the tools required to accomplish a smooth transition.

- Before the transition, the transition manager should provide the fund sponsor a written portfolio transition (liquidation) strategy, including the timeframe required, to achieve the desired objective of liquidating the legacy portfolio(s) and building (and/or funding) the target portfolio(s).

- During the transition period, daily reporting of all trade activity from commencement of the liquidation to the completion and full funding of the target portfolios should be available to Parkland.

- After the completion of the transition, the transition manager should provide Parkland with a report on the outcome and results of the transition. The report should include relevant statistics (i.e., tracking error, costs, VWAPs, t-standard, etc.) and full trading/transaction reports.

- Coordination of the firm's trading activity with investment managers (both legacy and target portfolios) and the custodial bank.

- The transition manager must carry the appropriate coverage for errors and omissions and professional liability insurance.

Conflicts of Interest

To avoid conflicts of interest, all members of the Investment Committee, the Budget and Finance Committee, Parkland staff and the Investment Consultant shall agree to adhere, and shall adhere, to Parkland's conflict of interest policies.

Investment Manager Selection Parameters

The following parameters articulate the general criteria used to select Investment Managers. -All or part of these criteria may be employed in choosing an Investment Manager.

- At the time of engagement, investment managers will affirm that they act in a fiduciary capacity towards the Plan and its participants.

- The Investment Manager must have an investment philosophy that is clearly defined.

- The Investment Manager must demonstrate that the broader organization and investment team have been stable and have committed the resources to maintain the success of its strategy.

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- An Investment Manager should have sufficient assets under management relative to the particular asset class and the placement size being awarded.

- An Investment Manager should have been managing the particular investment strategy chosen for at least three years prior to being retained by the Plan. This parameter can be waived if the Investment Manager has had experience with a comparable firm or strategy during that three-year time period.

- The Investment Manager's fee schedule should be reasonable in comparison to the relevant investment universe.

Other prudent criteria may be used by the Investment Committee and the Budget and Finance Committee to select investment options, as deemed necessary.

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Investment Manager Watch List Process

The Investment Consultant and/or the Investment Committee may recommend that an Investment Manager be placed on a "Watch List" if concerns develop regarding some aspect of the Investment Manager or its performance. Given that these concerns may or may not be of sufficient importance to justify termination of the Investment Manager, the Watch List is intended to serve as a management tool for the Investment Consultant and the Investment Committee to evaluate the Investment Manager. The Investment Committee may place an Investment Manager on the Watch List for any of the following reasons:

a. The Investment Manager has not met its performance standards for a sustained period.

b. The Investment Manager has changed key professionals responsible for the management of the strategy, or such change appears imminent.

c. The Investment Manager has had a significant change in ownership or control.

d. The Investment Manager has changed investment focus or has experienced style drift, departing materially from the investment objectives or parameters previously represented.

e. Judicial or administrative proceedings have been commenced that involve the Investment Manager.

f. The Investment Manager has violated, or received notice of a violation of, an SEC rule or regulation.

g. Other criteria, as determined by the Budget and Finance Committee, Investment Committee and Investment Consultant.

Formal Investment Manager Review

When an Investment Manager has been placed on the Watch List, the Investment Committee, in conjunction with the Investment Consultant, shall review the Investment Manager's operations and performance, and the Investment Committee and the Investment Consultant shall make any recommendations about the Investment Manager to the Budget and Finance Committee.

Upon completion of the review, the Budget and Finance Committee may (i) retain the Investment Manager, (ii) reduce the assets under management by the Investment Manager or (iii) terminate the Investment Manager and transfer the assets to a temporary index vehicle or a new Investment Manager.

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SECTION III

ASSET ALLOCATION STRATEGY

The Budget and Finance Committee is guided by the philosophy that asset allocation is the most significant determinant of long-term investment return. Asset allocation targets shall be established by the Budget and Finance Committee to achieve the total return objectives of the Plan within acceptable risk levels, as considered on a prospective basis.

The Investment Consultant will be responsible for providing asset class education and the necessary tools and analysis to enable the Investment Committee and Parkland's staff to make prudent recommendations to the Budget and Finance Committee, and to enable the Budget and Finance Committee to make prudent decisions, regarding the selection of asset classes, a strategic asset allocation, and allowable minimum and maximum ranges. When requested by the Investment Committee, Budget and Finance Committee, and/or Parkland staff an asset allocation study will be conducted by the Investment Consultant. The asset allocation strategy will be reviewed at least annually and any changes to the strategy may or may not require an asset allocation study.

The asset structure is designed to reflect a proper balance of the Plan's need for total return and the risk tolerance established by the Budget and Finance Committee.

The Budget and Finance Committee determined, based on extensive work done by the Investment Consultant and recommendations by the Investment Committee, that the Plan's desired investment objective has a strong probability of being achieved with an acceptable level of risk if the Plan invests in the Asset Classes as described on the following page.

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Asset Class	Strategic Target	Allowable Range
Total U.S. Equity	**36%**	**31% - 41%**
Large Cap Domestic Equity	26.7%	22.7% - 30.7%
Small/Mid Cap Domestic Equity (Growth & Value)	9.3%	6.3% - 12.3%
Total Non-U.S. Equity	**24%**	**19% – 29%**
Non-U.S. Equity	16%	12% - 20%
Non-U.S. Small Cap Equity	4%	2% - 6%
Emerging Market Equity	4%	2% - 6%
Total Fixed Income	**30%**	**26% - 34%**
Core Fixed Income	20%	16% - 24%
Core Plus Fixed Income	10%	8% - 12%
Private Real Estate	**10%**	**7% - 13%**

Within the Small/Mid Cap Domestic Equity Asset Classes, funds will be divided between growth and value style Investment Managers as recommended by the Investment Committee and determined by the Budget and Finance Committee. Exposure of the total Plan assets to cash equivalents on average should not exceed 5% of the total Plan's value on a market value basis. Each Investment Manager's portfolio should reflect the guidelines established for that particular Asset Class. Cash exposure may drop to zero at the discretion of the Investment Manager.

Rebalancing Policy

One essential component of a strategic asset allocation policy is the development and use of rebalancing ranges for the target allocation. The Budget and Finance Committee and Investment Committee believe that systematic rebalancing should reduce portfolio volatility and increase portfolio return over the long term. The ranges specified in the table above are a function of the expected volatility of each asset class and the proportion of the total fund allocated to the asset class.

If the Plan experiences positive cash flow (*i.e.*, contributions exceed disbursements), the Plan's assets shall be rebalanced by directing new contributions to the under-allocated assets. If the Plan experiences negative cash flow, funds to make distributions will be withdrawn from over-allocated assets. If the Plan's cash flow is not sufficient to keep the allocation within the defined ranges stated above, then purchase or sale transactions are required.

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The Budget and Finance Committee is charged with the responsibility of monitoring the asset allocation policy. In order to adhere to a systematic rebalancing policy, the Budget and Finance Committee delegates' authority to Parkland staff to follow and execute the asset allocation and rebalancing policy described in this Policy. The Investment Committee and the Investment Consultant will monitor the asset allocation on a quarterly basis at a minimum.

SECTION IV

INVESTMENT GUIDELINES

All investments shall be made solely in the interest of beneficiaries of the Plan, and for the exclusive purposes of providing benefits to such beneficiaries and defraying the reasonable expenses of administering the Plan.

All Plan assets should be properly diversified to reduce the potential of a single security or single sector of securities having a disproportionate or significant impact on the Plan.

Where institutional mutual or commingled funds (including index funds) are used, it is expected that the investments generally conform to these guidelines described below, though the Budget and Finance Committee recognizes that the prospectus or guidelines of the fund supersede those of the Plan. On a quarterly basis, the Investment Managers shall review their investments for compliance with these guidelines. If the investments differ from these guidelines in any material respect, the Investment Manager shall notify the Plan in writing. At least one Investment Manager shall be selected to manage an Asset Class. All Investment Managers shall comply with the Investment Manager guidelines included in Appendix A.

If there is any question regarding these guidelines and the authorization granted to purchase and/or hold a security because of its issuer, type, effective duration, or effective credit quality, the Investment Manager must consult with the Budget and Finance Committee and its Investment Consultant prior to purchase of the security.

The Budget and Finance Committee has established, based on recommendations by the Investment Committee and the Investment Consultant, the following Asset Classes as appropriate investment strategies for Plan Assets. The Budget and Finance Committee may, from time to time, modify this list based on, among other things, recommendations from the Investment Committee and/or the Investment Consultant:

- Domestic Equities
- Non-U.S. Equities

- Fixed Income and Cash Equivalents
- Private Real Estate

A. Domestic Equities

Domestic equities shall be restricted to securities of companies that are actively traded on major U.S. exchanges. Equity holdings may also include American Depositary Receipts (ADRs), Exchange-Traded Funds (ETFs), mutual funds registered under the Investment Advisers Act of 1940 and publicly traded partnerships (such as master limited partnerships) traded on U.S. exchanges. Preferred and convertible preferred stocks may be held. Publicly traded Real Estate Investment Trust (REITs) shares may be held and are considered part of the allocation to equities.

Futures and options can be used as a substitute for equity securities provided that they are at least 100% collateralized by high quality, low volatility fixed income securities and therefore do not represent leveraging of the assets.

B. Non-U.S. Equities

The majority non-U.S. equity holdings shall be securities issued by companies headquartered in countries included in the MSCI All Country World ex-U.S. Index (ACWI ex-U.S.). Issues may be purchased and sold on exchanges in other countries that offer a ready market for individual issues and have no restrictions on the transfer of funds to and from the U.S.

Managers holding foreign currency denominated securities are permitted to employ currency hedging strategies.

C. Fixed Income

Fixed income investments shall be marketable securities, which may include, but not necessarily be limited to U. S. Treasury, Federal Agencies and U.S. Government guaranteed obligations, and corporate issues. Mortgage pass-throughs, and non-dollar denominated bonds may also be held. Fixed income may include opportunistic or strategic allocations to High Yield, Non-U.S. and/or Emerging Market Debt securities at the discretion of the Investment Manager. Fixed Income managers may utilize ETFs, mutual funds registered under the Investment Advisers Act of 1940, commingled vehicles or separate accounts for managing their investments.

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Foreign currency fixed income holdings are restricted to investment grade securities of issuers in countries represented in the Citigroup World Government Non-U.S. Bond Index. Foreign currency securities must be actively traded in major markets.

Mortgage backed securities held should exhibit price, volatility, and liquidity similar to components of the Bloomberg ~~Barclays Capital~~ U.S. Mortgage Backed Securities Index. The intent is to invest only in the most conservative mortgage instruments issued by the Federal National Mortgage Association, Federal Home Loan Mortgage Corporation and Government National Mortgage Association.

Privately placed fixed income issues may be held if the credit risk is carefully evaluated and judged to conform to this Policy, and there is a secondary market for potential sale before maturity or call date.

In addition to the securities outlined above, the following securities are considered permissible for a fixed income manager, but only if specifically stated in the individual manager's guidelines:
Municipal Securities, Convertible Bonds, Collateralized Mortgage Obligations (CMO), Commercial Mortgage-Backed Securities (CMBS), Asset-Backed Securities (ABS), and Residential Mortgage-Backed Securities (RMBS).

If an Investment Manager has any questions about the authorization granted to purchase and/or hold a security because of its issuer, type, effective duration, or effective credit quality, the manager must consult with Parkland staff prior to purchase of the security.

The duration of each fixed income portfolio should not exceed 150% of the Bloomberg U.S. Aggregate Bond Index duration.

The weighted average credit quality of the portfolio will not fall below BBB- or equivalent. No more than 5% of the fixed income portfolio, at time of purchase, may be invested in issuances of any one company or entity, except for government or agency issues.

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d. ~~D.~~ **Cash Equivalents**

Cash equivalent reserves shall consist of cash instruments having a quality rating by at least one rating agency of A-1, P-1 or higher with an average maturity of 90 days or less.

E. Private Real Estate

Private real estate investments may be made through direct property ownership, or indirectly through such vehicles as joint ventures, general or limited partnerships, limited liability companies, private REITS, private mortgage loans (but not publicly traded mortgage securities) and other loans including mezzanine debt, or interests in companies or entities that directly or indirectly hold real estate or real estate interests, or other open-end commingled fund structures.

This Asset Class should be broadly diversified, investing primarily in existing, majority leased income-producing properties with strong cash flows that are expected to increase over time, providing potential for capital appreciation. Ownership should primarily be through equity interest with the use of leverage being limited to no more than 40% of the total assets in this Asset Class. This Asset Class should also be diversified by property types with investments in office, residential, retail, industrial, hotel and self-storage properties and by the various geographic regions of the country.

Prohibited Transactions

The following securities and transactions are not authorized without a written request that sets forth a detailed explanation and recommendation from the Investment Manager and that receives the prior written approval from the Investment Committee, except that the following prohibitions shall not apply to Investment Managers for the Private Real Estate Asset Class:

a. Collateralized debt obligations;

b. Letter stock and other unregistered equity securities;

c. Commodities or commodity contracts (except for unleveraged stock or bond index futures and currency futures and options);

d. Short sales, warrants or margin transactions; or any leveraged investments;

e. Venture capital partnerships or other private equity investments.

f. Bonds or other financial instruments issued by the Dallas County Hospital District or its affiliates.

Any financial options and futures employed must be primarily for defensive and hedge strategies undertaken to preserve principal. They may also be used as a substitute for the underlying security, providing there is no leverage.

Diversification

Investments shall be diversified with the intent to minimize the risk of large losses. Consequently, the total portfolio will be constructed and maintained to provide prudent diversification with regard to the concentration of holdings in individual issues, corporations or industries.

Not more than 5% of the total stock portfolio valued at market may be invested in the common stock of any one corporation. Not more than 25% of the total stock portfolio valued at market may be held in any one sector as defined by the Plan's Investment Consultant.

With the exception of securities issued by the U.S. Government and its agencies, no single fixed income issue will represent more than 5% of the total fixed income portfolio as measured by market value.

SECTION V

PERFORMANCE MEASUREMENT STANDARDS

The most important performance standard is the achievement of long-term investment results consistent with this Policy. The asset allocation policy will be the primary determinant of return over time. Implementation of this Policy will be directed toward achieving this standard with an acceptable level of risk measured by standard deviation.

Performance measurement standards are required for determining whether or not the Plan's goals are being met. They also provide an objective basis for evaluating how well individual Investment Managers

perform and how they complement each other and add value collectively. The performance measurement standards will be used as the benchmarks against which results will be measured and evaluated; however it is understood there is no guarantee that such results will be achieved.

There are performance measurement standards for the aggregate of the Plan assets as well as for each Asset Class and Investment Manager.

AGGREGATE PLAN ASSET PERFORMANCE MEASUREMENT STANDARDS

While keeping in mind the actuarial return assumptions of the Plan, the aggregate of the Plan's assets will be managed with the goal of achieving the following over a five-year period:

- An annualized rate of return, net of management fees, that meets the actuarial assumed return as determined by the Plan's actuary;
- A return, net of management fees, that outperforms a hypothetical portfolio composed of indices weighted according to the target allocation as mutually determined by the Investment Committee and Investment Consultant; and
- Comparable volatility of returns, as measured by the standard deviation of quarterly returns of the benchmark index as calculated by the Investment Consultant.

The return on the aggregate of the Plan's assets will periodically be compared to a weighted average composite of the asset class benchmarks and a universe of other public retirement income plans.

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To ensure that results of Investment Managers are fairly evaluated, the Investment Committee and the Budget and Finance Committee will use the following comparative performance statistics for actively managed products. The performance of the strategy managed by each Investment Manager will be expected to achieve minimum performance standards as follows and as set forth in the chart below. Active managers should:

a. Rank in the top 50% of an appropriate peer group of actively managed portfolios (as indicated below);

b. Meet or exceed an appropriate benchmark index (as indicated below), net of management fees;

c. Maintain a risk level, as measured by the standard deviation of quarterly returns, which is comparable to that of the appropriate benchmark index, as indicated below. To the extent that the Investment Manager takes more/less risk than the market and/or the appropriate peer group, returns are expected to increase/decrease commensurately; and

d. Meet the Individual Manager Guidelines set forth in Appendix A.

These performance measurement standards should be achieved over three-year ~~five-year~~ periods. Although failure to achieve these performance measurement standards will not result in the automatic termination of an Investment Manager, the Investment Committee and the Budget and Finance Committee shall review any Investment Manager that fails to achieve the standards and shall document its reasons for retaining the Investment Manager and such manager will be placed on a watch list.

The specific peer groups and benchmarks for each Asset Class are on the following page:

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Asset Class	**Peer Group** *Exceed 50th Percentile*	**Benchmark Index** *Outperform Net of Investment Fees*
U.S. Equity	~~*Callan Public Fund*~~*c Callan Public Find – Domestic Equity*	*Russell 3000 Index*
Large Cap Core (Passive)	*N/A*	S&P 500 +/- 10 basis points
Small/Mid Cap Value Equity	*Callan Small/Mid Cap Value Peer Group*	Russell 2500 Value
Small/Mid Cap Growth Equity	*Callan Small/Mid Cap Growth Peer Group*	Russell 2500 Growth
Non-U.S. Equity	*Callan Public Fund – Non-US Equity*	MSCI ACWI ex-US IMI
Non-U.S. Equity	*Callan Non-U.S. Equity Peer Group*	MSCI EAFE (net) or ACWI ex-US (net) Depending on the Manager
Non-U.S. Small Cap Equity	*Callan International Small Cap Peer Group*	MSCI World ex-US Small Cap (net)
Emerging Market Equity	*Callan Emerging Markets Equity Database*	MSCI Emerging Markets (net)
Private Real Estate	*Callan Real Estate Open End Peer Group*	NFI-ODCE Equal Weight Net
Fixed Income	*Callan Public Fund – Domestic Fixed Income*	Bloomberg US Aggregate
Core Fixed Income	*Callan Core Bond Fixed Income Peer Group*	Bloomberg US Aggregate
Core Plus Fixed Income	*Callan Core Bond Plus Peer Group*	Bloomberg US Aggregate

APPENDIX A

INDIVIDUAL MANAGER GUIDELINES

The Individual Manager Guidelines are in addition to the Investment Guidelines and Performance Measurement Standards set forth in the Investment Policy. Manager Guidelines are included for separate accounts. Mutual funds and commingled funds should follow the guidelines established by the Investment Manager.

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~~Wells Capital Management, Inc.~~Allspring
Fundamental Small/Mid Cap Growth Equity

Investment Strategy: The Fundamental Small to Mid-Cap Growth equity strategy is focused on bottom-up research striving to identify companies with strong business models and attractive growth fundamentals. A heavy emphasis is placed on proprietary in-house research. Investments are~~—~~made solely on the fundamentals of each investment with a strict valuation overlay.

Primary Benchmark:
- Russell 2500 Growth Index.

Return Expectations:
- Rank in the top 50% of the Callan Small/Mid Cap Growth Peer Group.
- Exceed the Primary Benchmark (after fees) over ~~3 to 5~~ 3-year time periods.

Risk Expectations:
- Risk adjusted performance measured by Sharpe Ratio that ranks above median versus the Callan Small/Mid Cap Growth Peer Group.
- Comparable to the Primary Benchmark over ~~3 to 5~~ 3-year time periods.

Cash Holdings
- On average, at least 95% of the investment account assets will be invested in equity or equity-related securities. Cash reserves should not exceed 15% of portfolio assets. Exceptions are allowed when building liquidity in anticipation of a large withdrawal or by special permission from the Investment Committee.

Non-U.S. Holdings
- Equity holdings may include non-U.S. securities, including American Depositary Receipts (ADRs), all of which must be traded on a U.S. stock exchange and be dollar-denominated. Non-U.S. securities may not exceed 20% at market value.

Equity Diversification
- Current market value of a single security cannot exceed 6% of the portfolio at market value. Any individual Sector weight should generally not exceed 40%. To exceed these limits, a request must be made to the Investment Committee.

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LSV Asset Management **Small/Mid Cap Value Equity**

Investment Strategy: LSV Asset Management's investment philosophy is that superior long term results can be achieved by systematically exploiting the judgmental biases and behavioral weaknesses that influence the decisions of many investors. Their security selection process is quantitative.

Primary Benchmark:

- Russell 2500 Value Index.

Return Expectations:

- Rank in the top 50% of the Callan Small/Mid Cap Value Peer Group.
- Exceed the Primary Benchmark (after fees) over ~~3 to 5~~3-year time periods.

Risk Expectations:

- Risk adjusted performance measured by Sharpe Ratio that ranks above median versus the Callan Small/Mid Cap Value Peer Group.
- Comparable to the Primary Benchmark over ~~3 to 5~~3 -year time periods.

Cash Holdings

- On average, at least 95% of the investment account assets will be invested in equity or equity-related securities. Cash reserves should not exceed 15% of portfolio assets. Exceptions are allowed when building liquidity in anticipation of a large withdrawal or by special permission from the Investment Committee.

Non-U.S. Holdings

- Equity holdings may include non-U.S. securities, including American Depositary Receipts (ADRs), all of which must be traded on a U.S. stock exchange and be dollar-denominated. Non-U.S. securities may not exceed 10% at market value.

Equity Diversification

- Current market value of a single security cannot exceed 5% of the portfolio at market value. Any individual Sector weight should generally not exceed 35%. To exceed these limits, a request must be made to the Investment Committee.

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Income Research + Management
IR+M Aggregate Core Fixed Income

Investment Strategy:

- Maintain duration neutral position (+/- 10% of Index).
- Overweight spread sectors when compensated to do so.
- Scour niche markets that can offer structural and price advantages.
- Carefully select what Income Research & Management believes are the most attractive diversified set of bonds in the investment grade universe.
- Incorporate Income Research + Management's best ideas in meaningful position sizes in all appropriate portfolios.

Primary Benchmark:

- Bloomberg Aggregate Bond Index.

Return Expectations:

- Rank in the top 50% of the Callan Core Bond Fixed Income Peer Group.
- Exceed the Primary Benchmark (after fees) over ~~3 to 5~~3-year time periods.

Risk Expectations:

- Risk adjusted performance measured by Sharpe Ratio that ranks above median versus the Callan Core Bond Fixed Income Peer Group.
- Comparable to the Primary Benchmark over ~~3 to 5~~3-year time periods.

Issuer Concentration:

- With the exception of US Treasury, US Agency, securities guaranteed by the full faith and credit of the US Government, and other sovereign-issued debt, no more than 5% of the portfolio may be invested in the securities of a single issuer. Plan investments in debt or other obligations of the plan sponsor are prohibited.

Credit Quality:

- The weighted-average quality of the portfolio shall be maintained at a minimum quality of AA- at all times.

- At least ninety percent of the portfolio shall be invested in fixed-income securities with a quality rating of investment grade by Moody's, Fitch or Standard & Poor's at the time of purchase. Up to ten percent of the portfolio at the time of purchase may be invested in securities with a quality rating of below investment grade or may be unrated.

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Duration Policy

- The average effective duration of all fixed income holdings must be maintained at plus or minus one year of the Bloomberg Aggregate Index duration.

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SECTION I

PURPOSE OF INVESTMENT POLICY

The Parkland Health & Hospital System ("Parkland") maintains a defined benefit pension plan known as the Dallas County Hospital District Retirement Income Plan ("Plan") that provides retirement benefits for those Parkland employees who are eligible to participate. The Plan was initially adopted January 1, 1982 by Parkland as a replacement for Social Security benefits. The purpose of the Plan is to provide financial security to our employees after retirement. The Plan is funded by the employees through a 6.2% payroll deduction (effective January 2018; no caps or limits) on base earnings, with Parkland providing any additional funding required to meet the actuarial determined contribution as calculated by an independent actuary. Since Parkland is a political subdivision of the State of Texas, the Plan is not subject to ERISA, but is subject to State regulation through the Texas Pension Review Board and the accounting for the Plan has to comply with Government Accounting Standards Board requirements. Any changes to the Plan require approval by Parkland's Board of Managers. This Investment Policy ("Policy") defines the investment policy for assets of the Plan. This Policy sets forth administration responsibilities for the Plan and Plan assets, asset allocation strategy for the Plan, investment guidelines for Plan assets and performance measurement standards for investment of Plan assets. The objectives of this Policy are formulated in response to the following:

- the anticipated financial needs of the Plan;
- consideration of risk tolerance; and
- the need to document and communicate with the Plan's investment managers, advisors, and service providers regarding the purpose of investment policy, administration, asset allocation strategy, investment guidelines and performance measurement standards for the Plan and the Plan assets and ultimately to Plan participants.

This Policy shall apply to the following parties that have responsibilities regarding the Plan Assets:

- Parkland's Board of Managers;
- The Budget and Finance Committee of Parkland's Board of Managers;
- Plan Investment Committee;
- Plan Investment Consultant;
- Plan Investment Managers;
- Plan Trustee(s)/Custodian(s); and
- Parkland's staff, as contemplated by this Policy and as requested from time to time by the Investment Committee and/or the Budget and Finance Committee.
- Transition Managers

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This Policy shall be reviewed annually and communicated to all the foregoing parties involved in the oversight of the Plan, together with any amendments of this Policy from time to time.

INVESTMENT OBJECTIVES

Investments will be made in the sole interest of the participants and beneficiaries of the Plan and in accordance with the following objectives:

- To ensure an adequate pool of assets to support the benefit obligations to participants, retirees and beneficiaries;
- Obtain a reasonable rate of return consistent with a prudent level of portfolio risk, while controlling costs incurred in administering and managing the assets; and
- Improvement in the Plan's funded status, providing improved benefit certainty and benefit levels for employees participating in the Plan and the opportunity to reduce employer contributions to the Plan.

SECTION II

ADMINISTRATION

The Board of Managers is responsible for ensuring that all Plan assets are managed effectively and prudently. The responsibilities of the Board's Budget and Finance Committee and other parties related to the management of the Plan assets are as follows:

A. <u>Budget and Finance Committee</u>

The Budget and Finance Committee shall have the authority and responsibility to:

- Recommend adoption of this Policy and amendments from time to time as deemed necessary, desirable or appropriate;
- Recommend appointments to the Investment Committee;
- Select and appoint experienced and qualified Investment Managers to manage all or a portion of the Plan's assets, and to remove Investment Managers from time to time as deemed necessary, desirable or appropriate; Investment Managers shall be selected from established and financially

sound organizations that have a proven and demonstrable record in managing funds with characteristics appropriate for the risk/return profile of the Plan's assets. The process for the selection of Investment Managers for the Plan will involve a disciplined approach, and will be fully documented in the Budget and Finance Committee's records; and

- Approve the hiring of a Custodian and an Investment Consultant to assist the Investment Committee and Parkland staff in implementing policy and managing the Plan

- Monitor the investments of the Plan assets, including periodic monitoring (at least quarterly) of the investment performance results and a periodic analysis and review (at least quarterly) of the overall investment portfolio of the Plan and its performance as measured by the performance measurement standards set forth in this Policy.

B. Investment Committee

The Investment Committee shall:

- Serve as experienced investment professionals to the Budget and Finance Committee;

- Be composed of members who are selected based upon their overall investment experience, including managing or supervising similar-sized investment portfolios, and their willingness to serve as community volunteers without compensation, but with reimbursement for reasonable out-of-pocket expenses incurred in accomplishing their Investment Committee-related duties;

- Be subject to indemnification related to actions taken within the scope of their duties as members of the Investment Committee, to the fullest extent allowed by applicable law;

- Recommend to the Budget and Finance Committee appropriate Investment Consultants, Investment Managers, Trustees and Custodians, mutual funds or other vendors to implement the Policy; and

- Suggest investment goals and objectives for the Plan and recommend an appropriate asset allocation strategy to be incorporated into this Policy.

C. Investment Managers

Investment Managers shall:

- Manage an investment strategy within the guidelines set forth in this policy;

- Implement selection and timing of investments within the guideline limitations in this Policy, and consistent with each Investment Manager’s stated philosophy and style;

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- Supply timely written quarterly reports of investment performance results to Parkland staff;

- Meet and/or communicate with Parkland staff and the Investment Committee as requested to review investment performance and discuss current strategy;

- Notify the Investment Committee, the Budget and Finance Committee and Parkland staff in writing of any material deviations from the stated investment approach;

- Conduct the purchase and sale of investments in a manner designed to receive the combination of best price and execution;

- Promptly vote proxy ballots for the exclusive benefit of the Plan and in accordance with this Policy; and

- Proactively provide documentation of all relevant compliance issues to Parkland staff within seven (7) days, including, but not be limited to, the following:

    - Regulatory reports
    - Changes in personnel
    - Changes in ownership
    - Any notices to or from the Securities and Exchange Commission ("SEC")
    - The commencement of any judicial or administrative proceedings

D. Investment Consultant

The Investment Consultant shall:

- Disclose any relationship or revenue between themselves and any candidate manager they may introduce to the plan.

- Be approved by the Budget and Finance Committee based on a recommendation by the Investment Committee.

- Assist the Investment Committee, the Budget and Finance Committee and Parkland staff in an open and competitive process to select Investment Managers and provide its rankings and recommendations for selection of Investment Managers to the Investment Committee and the Budget and Finance Committee.

- Review the performance of the Investment Managers versus their respective benchmarks and relevant peer groups; and make recommendations to the Investment Committee and Budget and Finance Committee as needed.

- Monitor the Investment Managers' style and characteristics to ensure they are running strategies consistent with the Policy.

- Review and analyze investment performance reports from the Investment Managers and prepare and deliver comprehensive quarterly reports regarding the Investment Managers' performance to the Investment Committee, Budget and Finance Committee and Parkland staff.

- Present to the Investment Committee and Parkland staff any recommended changes to this Policy.

- Assist the Investment Committee, the Budget and Finance Committee and Parkland staff with the review of capital markets, this policy, investment structure, and investment strategies.

- Periodically revisit each benchmark index for its continued appropriateness.

- Monitor the total investment portfolio for unintended risk associated with over-allocation to certain securities within asset classes, sectors, or geography that may overlap.

- Educate the Investment Committee and Parkland staff on investment issues that could impact the Plan.

- Annual review of investment management fees and comparisons with fees of other managers with similar strategies.

E. Trustee/Custodian

The trustee/custodian shall:

- Be a reputable, well-established, financially sound financial institution that is recognized as an industry leader. The trustee/custodian shall be approved by the Budget and Finance Committee based on a recommendation by the Investment Committee.

- Fulfill all fiduciary duties required of a trustee/custodian by pertinent state and federal laws and regulations.

- Safe keep the Plan's assets in accordance with the Trust Agreement.

- Supply timely reports of transactions and valuations of Plan assets.

F. Staff

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Parkland staff shall:

- Implement the decisions of the Budget and Finance Committee and Investment Committee.
- Review asset allocation on an ongoing basis and initiate portfolio rebalancing pursuant to parameters in this Policy.
- Coordinate communications between the Investment Committee and the Budget and Finance Committee.
- Organize Investment Committee meetings and distribute materials related to the meetings.
- Coordinate review and execution of legal documents related to the Plan's investment and administration.

G. Transition Manager

Transition management is the cost effective and efficient portfolio restructuring of institutional assets from single or multiple investment managers/asset classes to a new investment allocation over a short-term investment horizon. During the transition process, the transition manager is looked upon as a discretionary caretaker of the portfolio(s) to be liquidated and as the conduit for the funding of the target portfolio(s). The responsibilities of a transition manager should include the following responsibilities.

- Transition management (portfolio transition) services from the legacy portfolio(s) to the target portfolio(s).
- The transition manager will act as a fully-discretionary fiduciary and will perform the transition with utmost care and prudence. The fund sponsor realizes that markets fluctuate and risks are inherent during the transition period. However, market forces do not absolve the transition manager from negligence and applying the highest level of care and prudence inherent in a fiduciary.
- Minimize tracking error and maintain asset class (benchmark) exposure. During the transition period, the preservation of capital must be taken into consideration through the expert use of all sources of liquidity, namely: in-kind transfers ("cherry picking" of the legacy portfolio for the target portfolio), internal and external crossing networks, primary exchanges, non-displayed liquidity, and principal trades. The strategic and tactical deployment of cash, futures, ETFs, and

other hedging strategies are included in the tools required to accomplish a smooth transition.

- Before the transition, the transition manager should provide the fund sponsor a written portfolio transition (liquidation) strategy, including the timeframe required, to achieve the desired objective of liquidating the legacy portfolio(s) and building (and/or funding) the target portfolio(s).

- During the transition period, daily reporting of all trade activity from commencement of the liquidation to the completion and full funding of the target portfolios should be available to Parkland.

- After the completion of the transition, the transition manager should provide Parkland with a report on the outcome and results of the transition. The report should include relevant statistics (i.e., tracking error, costs, VWAPs, t-standard, etc.) and full trading/transaction reports.

- Coordination of the firm's trading activity with investment managers (both legacy and target portfolios) and the custodial bank.

- The transition manager must carry the appropriate coverage for errors and omissions and professional liability insurance.

Conflicts of Interest

To avoid conflicts of interest, all members of the Investment Committee, the Budget and Finance Committee, Parkland staff and the Investment Consultant shall agree to adhere, and shall adhere, to Parkland's conflict of interest policies.

Investment Manager Selection Parameters

The following parameters articulate the general criteria used to select Investment Managers. All or part of these criteria may be employed in choosing an Investment Manager.

- At the time of engagement, investment managers will affirm that they act in a fiduciary capacity towards the Plan and its participants.

- The Investment Manager must have an investment philosophy that is clearly defined.

- The Investment Manager must demonstrate that the broader organization and investment team have been stable and have committed the resources to maintain the success of its strategy.

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- An Investment Manager should have sufficient assets under management relative to the particular asset class and the placement size being awarded.

- An Investment Manager should have been managing the particular investment strategy chosen for at least three years prior to being retained by the Plan. This parameter can be waived if the Investment Manager has had experience with a comparable firm or strategy during that three-year time period.

- The Investment Manager's fee schedule should be reasonable in comparison to the relevant investment universe.

Other prudent criteria may be used by the Investment Committee and the Budget and Finance Committee to select investment options, as deemed necessary.

Investment Manager Watch List Process

The Investment Consultant and/or the Investment Committee may recommend that an Investment Manager be placed on a "Watch List" if concerns develop regarding some aspect of the Investment Manager or its performance. Given that these concerns may or may not be of sufficient importance to justify termination of the Investment Manager, the Watch List is intended to serve as a management tool for the Investment Consultant and the Investment Committee to evaluate the Investment Manager. The Investment Committee may place an Investment Manager on the Watch List for any of the following reasons:

a. The Investment Manager has not met its performance standards for a sustained period.

b. The Investment Manager has changed key professionals responsible for the management of the strategy, or such change appears imminent.

c. The Investment Manager has had a significant change in ownership or control.

d. The Investment Manager has changed investment focus or has experienced style drift, departing materially from the investment objectives or parameters previously represented.

e. Judicial or administrative proceedings have been commenced that involve the Investment Manager.

f. The Investment Manager has violated, or received notice of a violation of, an SEC rule or regulation.

g. Other criteria, as determined by the Budget and Finance Committee, Investment Committee and Investment Consultant.

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Formal Investment Manager Review

When an Investment Manager has been placed on the Watch List, the Investment Committee, in conjunction with the Investment Consultant, shall review the Investment Manager's operations and performance, and the Investment Committee and the Investment Consultant shall make any recommendations about the Investment Manager to the Budget and Finance Committee.

Upon completion of the review, the Budget and Finance Committee may (i) retain the Investment Manager, (ii) reduce the assets under management by the Investment Manager or (iii) terminate the Investment Manager and transfer the assets to a temporary index vehicle or a new Investment Manager.

SECTION III

ASSET ALLOCATION STRATEGY

The Budget and Finance Committee is guided by the philosophy that asset allocation is the most significant determinant of long-term investment return. Asset allocation targets shall be established by the Budget and Finance Committee to achieve the total return objectives of the Plan within acceptable risk levels, as considered on a prospective basis.

The Investment Consultant will be responsible for providing asset class education and the necessary tools and analysis to enable the Investment Committee and Parkland's staff to make prudent recommendations to the Budget and Finance Committee, and to enable the Budget and Finance Committee to make prudent decisions, regarding the selection of asset classes, a strategic asset allocation, and allowable minimum and maximum ranges. When requested by the Investment Committee, Budget and Finance Committee, and/or Parkland staff an asset allocation study will be conducted by the Investment Consultant. The asset allocation strategy will be reviewed at least annually and any changes to the strategy may or may not require an asset allocation study.

The asset structure is designed to reflect a proper balance of the Plan's need for total return and the risk tolerance established by the Budget and Finance Committee.

The Budget and Finance Committee determined, based on extensive work done by the Investment Consultant and recommendations by the Investment Committee, that the Plan's desired investment objective has a strong probability of being achieved with an acceptable level of risk if the Plan invests in the Asset Classes as described on the following page.

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Asset Class	Strategic Target	Allowable Range
Total U.S. Equity	**36%**	**31% - 41%**
Large Cap Domestic Equity	26.7%	22.7% - 30.7%
Small/Mid Cap Domestic Equity (Growth & Value)	9.3%	6.3% - 12.3%
Total Non-U.S. Equity	**24%**	**19% – 29%**
Non-U.S. Equity	16%	12% - 20%
Non-U.S. Small Cap Equity	4%	2% - 6%
Emerging Market Equity	4%	2% - 6%
Total Fixed Income	**30%**	**26% - 34%**
Core Fixed Income	20%	16% - 24%
Core Plus Fixed Income	10%	8% - 12%
Private Real Estate	**10%**	**7% - 13%**

Within the Small/Mid Cap Domestic Equity Asset Classes, funds will be divided between growth and value style Investment Managers as recommended by the Investment Committee and determined by the Budget and Finance Committee. Exposure of the total Plan assets to cash equivalents on average should not exceed 5% of the total Plan's value on a market value basis. Each Investment Manager's portfolio should reflect the guidelines established for that particular Asset Class. Cash exposure may drop to zero at the discretion of the Investment Manager.

Rebalancing Policy

One essential component of a strategic asset allocation policy is the development and use of rebalancing ranges for the target allocation. The Budget and Finance Committee and Investment Committee believe that systematic rebalancing should reduce portfolio volatility and increase portfolio return over the long term. The ranges specified in the table above are a function of the expected volatility of each asset class and the proportion of the total fund allocated to the asset class.

If the Plan experiences positive cash flow (*i.e.*, contributions exceed disbursements), the Plan's assets shall be rebalanced by directing new contributions to the under-allocated assets. If the Plan experiences negative cash flow, funds to make distributions will be withdrawn from over-allocated assets. If the Plan's cash flow is not sufficient to keep the allocation within the defined ranges stated above, then purchase or sale transactions are required.

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The Budget and Finance Committee is charged with the responsibility of monitoring the asset allocation policy. In order to adhere to a systematic rebalancing policy, the Budget and Finance Committee delegates' authority to Parkland staff to follow and execute the asset allocation and rebalancing policy described in this Policy. The Investment Committee and the Investment Consultant will monitor the asset allocation on a quarterly basis at a minimum.

SECTION IV

INVESTMENT GUIDELINES

All investments shall be made solely in the interest of beneficiaries of the Plan, and for the exclusive purposes of providing benefits to such beneficiaries and defraying the reasonable expenses of administering the Plan.

All Plan assets should be properly diversified to reduce the potential of a single security or single sector of securities having a disproportionate or significant impact on the Plan.

Where institutional mutual or commingled funds (including index funds) are used, it is expected that the investments generally conform to these guidelines described below, though the Budget and Finance Committee recognizes that the prospectus or guidelines of the fund supersede those of the Plan. On a quarterly basis, the Investment Managers shall review their investments for compliance with these guidelines. If the investments differ from these guidelines in any material respect, the Investment Manager shall notify the Plan in writing. At least one Investment Manager shall be selected to manage an Asset Class. All Investment Managers shall comply with the Investment Manager guidelines included in Appendix A.

If there is any question regarding these guidelines and the authorization granted to purchase and/or hold a security because of its issuer, type, effective duration, or effective credit quality, the Investment Manager must consult with the Budget and Finance Committee and its Investment Consultant prior to purchase of the security.

The Budget and Finance Committee has established, based on recommendations by the Investment Committee and the Investment Consultant, the following Asset Classes as appropriate investment strategies for Plan Assets. The Budget and Finance Committee may, from time to time, modify this list based on, among other things, recommendations from the Investment Committee and/or the Investment Consultant:

- Domestic Equities
- Non-U.S. Equities

- Fixed Income and Cash Equivalents
- Private Real Estate

A. Domestic Equities

Domestic equities shall be restricted to securities of companies that are actively traded on major U.S. exchanges. Equity holdings may also include American Depositary Receipts (ADRs), Exchange-Traded Funds (ETFs), mutual funds registered under the Investment Advisers Act of 1940 and publicly traded partnerships (such as master limited partnerships) traded on U.S. exchanges. Preferred and convertible preferred stocks may be held. Publicly traded Real Estate Investment Trust (REITs) shares may be held and are considered part of the allocation to equities.

Futures and options can be used as a substitute for equity securities provided that they are at least 100% collateralized by high quality, low volatility fixed income securities and therefore do not represent leveraging of the assets.

B. Non-U.S. Equities

The majority non-U.S. equity holdings shall be securities issued by companies headquartered in countries included in the MSCI All Country World ex-U.S. Index (ACWI ex-U.S.). Issues may be purchased and sold on exchanges in other countries that offer a ready market for individual issues and have no restrictions on the transfer of funds to and from the U.S.

Managers holding foreign currency denominated securities are permitted to employ currency hedging strategies.

C. Fixed Income

Fixed income investments shall be marketable securities, which may include, but not necessarily be limited to U. S. Treasury, Federal Agencies and U.S. Government guaranteed obligations, and corporate issues. Mortgage pass-throughs, and non-dollar denominated bonds may also be held. Fixed income may include opportunistic or strategic allocations to High Yield, Non-U.S. and/or Emerging Market Debt securities at the discretion of the Investment Manager. Fixed Income managers may utilize ETFs, mutual funds registered under the Investment Advisers Act of 1940, commingled vehicles or separate accounts for managing their investments.

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Foreign currency fixed income holdings are restricted to investment grade securities of issuers in countries represented in the Citigroup World Government Non-U.S. Bond Index. Foreign currency securities must be actively traded in major markets.

Mortgage backed securities held should exhibit price, volatility, and liquidity similar to components of the Bloomberg U.S. Mortgage Backed Securities Index. The intent is to invest only in the most conservative mortgage instruments issued by the Federal National Mortgage Association, Federal Home Loan Mortgage Corporation and Government National Mortgage Association.

Privately placed fixed income issues may be held if the credit risk is carefully evaluated and judged to conform to this Policy, and there is a secondary market for potential sale before maturity or call date.

In addition to the securities outlined above, the following securities are considered permissible for a fixed income manager, but only if specifically stated in the individual manager's guidelines:
Municipal Securities, Convertible Bonds, Collateralized Mortgage Obligations (CMO), Commercial Mortgage-Backed Securities (CMBS), Asset-Backed Securities (ABS), and Residential Mortgage-Backed Securities (RMBS).

If an Investment Manager has any questions about the authorization granted to purchase and/or hold a security because of its issuer, type, effective duration, or effective credit quality, the manager must consult with Parkland staff prior to purchase of the security.

The duration of each fixed income portfolio should not exceed 150% of the Bloomberg U.S. Aggregate Bond Index duration.

The weighted average credit quality of the portfolio will not fall below BBB- or equivalent. No more than 5% of the fixed income portfolio, at time of purchase, may be invested in issuances of any one company or entity, except for government or agency issues.

D. <u>Cash Equivalents</u>

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Cash equivalent reserves shall consist of cash instruments having a quality rating by at least one rating agency of A-1, P-1 or higher with an average maturity of 90 days or less.

E. Private Real Estate

Private real estate investments may be made through direct property ownership, or indirectly through such vehicles as joint ventures, general or limited partnerships, limited liability companies, private REITS, private mortgage loans (but not publicly traded mortgage securities) and other loans including mezzanine debt, or interests in companies or entities that directly or indirectly hold real estate or real estate interests, or other open-end commingled fund structures.

This Asset Class should be broadly diversified, investing primarily in existing, majority leased income-producing properties with strong cash flows that are expected to increase over time, providing potential for capital appreciation. Ownership should primarily be through equity interest with the use of leverage being limited to no more than 40% of the total assets in this Asset Class. This Asset Class should also be diversified by property types with investments in office, residential, retail, industrial, hotel and self-storage properties and by the various geographic regions of the country.

Prohibited Transactions

The following securities and transactions are not authorized without a written request that sets forth a detailed explanation and recommendation from the Investment Manager and that receives the prior written approval from the Investment Committee, except that the following prohibitions shall not apply to Investment Managers for the Private Real Estate Asset Class:

a. Collateralized debt obligations;

b. Letter stock and other unregistered equity securities;

c. Commodities or commodity contracts (except for unleveraged stock or bond index futures and currency futures and options);

d. Short sales, warrants or margin transactions; or any leveraged investments;

e. Venture capital partnerships or other private equity investments.

f. Bonds or other financial instruments issued by the Dallas County Hospital District or its affiliates.

Any financial options and futures employed must be primarily for defensive and hedge strategies undertaken to preserve principal. They may also be used as a substitute for the underlying security, providing there is no leverage.

Diversification

Investments shall be diversified with the intent to minimize the risk of large losses. Consequently, the total portfolio will be constructed and maintained to provide prudent diversification with regard to the concentration of holdings in individual issues, corporations or industries.

Not more than 5% of the total stock portfolio valued at market may be invested in the common stock of any one corporation. Not more than 25% of the total stock portfolio valued at market may be held in any one sector as defined by the Plan's Investment Consultant.

With the exception of securities issued by the U.S. Government and its agencies, no single fixed income issue will represent more than 5% of the total fixed income portfolio as measured by market value.

SECTION V

PERFORMANCE MEASUREMENT STANDARDS

The most important performance standard is the achievement of long-term investment results consistent with this Policy. The asset allocation policy will be the primary determinant of return over time. Implementation of this Policy will be directed toward achieving this standard with an acceptable level of risk measured by standard deviation.

Performance measurement standards are required for determining whether or not the Plan's goals are being met. They also provide an objective basis for evaluating how well individual Investment Managers perform and how they complement each other and add value collectively. The performance measurement

standards will be used as the benchmarks against which results will be measured and evaluated; however it is understood there is no guarantee that such results will be achieved.

There are performance measurement standards for the aggregate of the Plan assets as well as for each Asset Class and Investment Manager.

AGGREGATE PLAN ASSET PERFORMANCE MEASUREMENT STANDARDS

While keeping in mind the actuarial return assumptions of the Plan, the aggregate of the Plan's assets will be managed with the goal of achieving the following over a five-year period:

- An annualized rate of return, net of management fees, that meets the actuarial assumed return as determined by the Plan's actuary;
- A return, net of management fees, that outperforms a hypothetical portfolio composed of indices weighted according to the target allocation as mutually determined by the Investment Committee and Investment Consultant; and
- Comparable volatility of returns, as measured by the standard deviation of quarterly returns of the benchmark index as calculated by the Investment Consultant.

The return on the aggregate of the Plan's assets will periodically be compared to a weighted average composite of the asset class benchmarks and a universe of other public retirement income plans.

INVESTMENT MANAGERS

To ensure that results of Investment Managers are fairly evaluated, the Investment Committee and the Budget and Finance Committee will use the following comparative performance statistics for actively managed products. The performance of the strategy managed by each Investment Manager will be expected to achieve minimum performance standards as follows and as set forth in the chart below. Active managers should:

a. Rank in the top 50% of an appropriate peer group of actively managed portfolios (as indicated below);

b. Meet or exceed an appropriate benchmark index (as indicated below), net of management fees;

c. Maintain a risk level, as measured by the standard deviation of quarterly returns, which is comparable to that of the appropriate benchmark index, as indicated below. To the extent that

the Investment Manager takes more/less risk than the market and/or the appropriate peer group, returns are expected to increase/decrease commensurately; and

d. Meet the Individual Manager Guidelines set forth in Appendix A.

These performance measurement standards should be achieved over three-year periods. Although failure to achieve these performance measurement standards will not result in the automatic termination of an Investment Manager, the Investment Committee and the Budget and Finance Committee shall review any Investment Manager that fails to achieve the standards and shall document its reasons for retaining the Investment Manager and such manager will be placed on a watch list.

The specific peer groups and benchmarks for each Asset Class are detailed here:

Asset Class	**Peer Group** *Exceed 50th Percentile*	**Benchmark Index** *Outperform Net of Investment Fees*
U.S. Equity	*Callan Public Find – Domestic Equity*	*Russell 3000 Index*
Large Cap Core (Passive)	*N/A*	S&P 500 +/- 10 basis points
Small/Mid Cap Value Equity	*Callan Small/Mid Cap Value Peer Group*	Russell 2500 Value
Small/Mid Cap Growth Equity	*Callan Small/Mid Cap Growth Peer Group*	Russell 2500 Growth
Non-U.S. Equity	*Callan Public Fund – Non-US Equity*	MSCI ACWI ex-US IMI
Non-U.S. Equity	*Callan Non-U.S. Equity Peer Group*	MSCI EAFE (net) or ACWI ex-US (net) Depending on the Manager
Non-U.S. Small Cap Equity	*Callan International Small Cap Peer Group*	MSCI World ex-US Small Cap (net)
Emerging Market Equity	*Callan Emerging Markets Equity Database*	MSCI Emerging Markets (net)
Private Real Estate	*Callan Real Estate Open End Peer Group*	NFI-ODCE Equal Weight Net
Fixed Income	*Callan Public Fund – Domestic Fixed Income*	Bloomberg US Aggregate
Core Fixed Income	*Callan Core Bond Fixed Income Peer Group*	Bloomberg US Aggregate

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Core Plus Fixed Income	*Callan Core Bond Plus Peer Group*	Bloomberg US Aggregate

APPENDIX A

INDIVIDUAL MANAGER GUIDELINES

The Individual Manager Guidelines are in addition to the Investment Guidelines and Performance Measurement Standards set forth in the Investment Policy. Manager Guidelines are included for separate accounts. Mutual funds and commingled funds should follow the guidelines established by the Investment Manager.

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INDIVIDUAL MANAGER GUIDELINES

Allspring
Fundamental Small/Mid Cap Growth Equity

Investment Strategy: The Fundamental Small to Mid-Cap Growth equity strategy is focused on bottom-up research striving to identify companies with strong business models and attractive growth fundamentals. A heavy emphasis is placed on proprietary in-house research. Investments are made solely on the fundamentals of each investment with a strict valuation overlay.

Primary Benchmark:
- Russell 2500 Growth Index.

Return Expectations:
- Rank in the top 50% of the Callan Small/Mid Cap Growth Peer Group.
- Exceed the Primary Benchmark (after fees) over 3-year time periods.

Risk Expectations:
- Risk adjusted performance measured by Sharpe Ratio that ranks above median versus the Callan Small/Mid Cap Growth Peer Group.
- Comparable to the Primary Benchmark over 3-year time periods.

Cash Holdings
- On average, at least 95% of the investment account assets will be invested in equity or equity-related securities. Cash reserves should not exceed 15% of portfolio assets. Exceptions are allowed when building liquidity in anticipation of a large withdrawal or by special permission from the Investment Committee.

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Non-U.S. Holdings

- Equity holdings may include non-U.S. securities, including American Depositary Receipts (ADRs), all of which must be traded on a U.S. stock exchange and be dollar-denominated. Non-U.S. securities may not exceed 20% at market value.

Equity Diversification

- Current market value of a single security cannot exceed 6% of the portfolio at market value. Any individual Sector weight should generally not exceed 40%. To exceed these limits, a request must be made to the Investment Committee.

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LSV Asset Management
Small/Mid Cap Value Equity

Investment Strategy: LSV Asset Management's investment philosophy is that superior long-term results can be achieved by systematically exploiting the judgmental biases and behavioral weaknesses that influence the decisions of many investors. Their security selection process is quantitative.

Primary Benchmark:

- Russell 2500 Value Index.

Return Expectations:

- Rank in the top 50% of the Callan Small/Mid Cap Value Peer Group.
- Exceed the Primary Benchmark (after fees) over 3-year time periods.

Risk Expectations:

- Risk adjusted performance measured by Sharpe Ratio that ranks above median versus the Callan Small/Mid Cap Value Peer Group.
- Comparable to the Primary Benchmark over 3-year time periods.

Cash Holdings

- On average, at least 95% of the investment account assets will be invested in equity or equity-related securities. Cash reserves should not exceed 15% of portfolio assets. Exceptions are allowed when building liquidity in anticipation of a large withdrawal or by special permission from the Investment Committee.

Non-U.S. Holdings

- Equity holdings may include non-U.S. securities, including American Depositary Receipts (ADRs), all of which must be traded on a U.S. stock exchange and be dollar-denominated. Non-U.S. securities may not exceed 10% at market value.

Equity Diversification

- Current market value of a single security cannot exceed 5% of the portfolio at market value. Any individual Sector weight should generally not exceed 35%. To exceed these limits, a request must be made to the Investment Committee.

PARKLAND HEALTH & HOSPITAL SYSTEM

FISCAL MANUAL

RETIREMENT PLAN INVESTMENT POLICY

APPENDIX A

INDIVIDUAL MANAGER GUIDELINES

Income Research + Management
IR+M Aggregate Core Fixed Income

Investment Strategy:

- Maintain duration neutral position (+/- 10% of Index).
- Overweight spread sectors when compensated to do so.
- Scour niche markets that can offer structural and price advantages.
- Carefully select what Income Research & Management believes are the most attractive diversified set of bonds in the investment grade universe.
- Incorporate Income Research + Management's best ideas in meaningful position sizes in all appropriate portfolios.

Primary Benchmark:

- Bloomberg Aggregate Bond Index.

Return Expectations:

- Rank in the top 50% of the Callan Core Bond Fixed Income Peer Group.
- Exceed the Primary Benchmark (after fees) over 3-year time periods.

Risk Expectations:

- Risk adjusted performance measured by Sharpe Ratio that ranks above median versus the Callan Core Bond Fixed Income Peer Group.
- Comparable to the Primary Benchmark over 3-year time periods.

Issuer Concentration:

- With the exception of US Treasury, US Agency, securities guaranteed by the full faith and credit of the US Government, and other sovereign-issued debt, no more than 5% of the portfolio may be invested in the securities of a single issuer. Plan investments in debt or other obligations of the plan sponsor are prohibited.

Credit Quality:

- The weighted-average quality of the portfolio shall be maintained at a minimum quality of AA- at all times.

- At least ninety percent of the portfolio shall be invested in fixed-income securities with a quality rating of investment grade by Moody's, Fitch or Standard & Poor's at the time of purchase. Up to ten percent of the portfolio at the time of purchase may be invested in securities with a quality rating of below investment grade or may be unrated.

Approve Authorization to Settle Liability Claims, SYS.LEG.005

SYS.LEG.005 Authorization to Settle Liability Claims

Requirements regarding this document are found in:

- Texas Civil Practices and Remedies Code

Background:

- Last published 2/25/21.
- Management has no recommended changes.

Approvals:

- Director of Policies and Procedures
- Steve Roth, EVP and CLO
- Executive Compliance Committee (scheduled for 1/17/24)
- Board of Managers Governance, Compliance, and Ethics Committee (scheduled 2/7/24)
- Board of Managers (scheduled 2/28/24)

Authorization to Settle Liability Claims	SYS.LEG.005	Published: 2/25/21
System		Page **1** of **2**

PURPOSE:

The Dallas County Hospital District is a political sub-division of the State of Texas and has limited liability for personal injuries or property damage to the extent allowed under the Texas Tort Claims Act, Texas Civil Practice and Remedies Code Chapter 101, et seq.

SCOPE:

Parkland's Chief Executive Officer, Parkland's General Counsel, and the Board of Managers.

PROCEDURE:

1. Settlements and Claims That Do Not Exceed $100,000:

   A. The Chief Executive Officer, acting in consultation with and through the General Counsel, shall have the authority to settle any claim that does not exceed $100,000.

2. Settlements and Claims over $100,000:

   A. Settlement of claims over $100,000 will be referred to the Board of Managers for approval.

3. All claims for bodily injury, death, or injury to, or destruction of property shall be made by the claimant or an authorized representative of the claimant in writing, shall be signed, and shall be made within the period prescribed by law.

4. Claims shall be investigated by the Institutional Risk Manager or designee, who shall report the results of the investigation and make recommendations to the General Counsel and the Chief Executive Officer as necessary for action.

EQUIPMENT:

N/A

DRAFT

DEFINITIONS:

N/A

REFERENCES:

Tex. Civ. Prac. & Rem. Code Ann. §74.001 et. seq. (2003)

DRAFT

Approve Event Reporting to the Board of Managers, SYS.LEAD.009

SYS.LEAD.009 Crisis Information Reporting to the Board of Managers

Background:

- Last published 2/25/21.
- Reviewed every three years.

Updates:

- Updated to “Parkland Health” throughout.
- Updated Scope.
- Added "Workforce Member” to Definitions section.

Reviews and approvals of this version:

- Ciel Murphy, Director of Legal Operations
- Steve Roth, CLO
- Executive Compliance Committee (scheduled for 12/17/23)
- Board Governance Compliance and Ethics Committee (scheduled for 2/7/24)
- Board of Managers (scheduled for 2/28/24)

Crisis Information Reporting to the Board of Managers Policy	SYS.LEAD.009	Published: 2/25/21
System		Page **1** of **2**

PURPOSE:

The Board of Managers (the Board) of the Dallas County Hospital District d/b/a Parkland Health ~~& Hospital System~~ (Parkland) has established the following policy and procedures (Policy) to ensure that as set forth herein operational, compliance, financial, legal and regulatory, patient care and safety, and reputational concerns and developments are timely reported to the Chair of the Board and/or the appropriate Board Committee Chair. This Policy is intended to operate consistently with and to utilize the reporting lines and processes that have been established between senior management and the Board for reporting information.

This Policy does not affect the right of all personnel to report concerns or matters directly to the Board.

SCOPE:

All Parkland Health ~~& Hospital System~~\ ("Parkland") ~~employees, contract employees, physicians, and students.~~Workforce members.

POLICY:

1. Reporting

   A. The Chief Executive Officer ("CEO") shall be responsible for timely reporting the Crisis Information to the Board as required under this Policy. The CEO will notify the Board Chair and appropriate Committee Chair(s) as required by this Policy or direct another member of senior management to make the notification. The Board Chair may disclose, or direct the appropriate member of senior management to disclose, the Crisis Information to other members of the Board, as appropriate. Upon being notified of Crisis Information, the Board or appropriate Committee Chair(s) shall decide whether to notify the other members of the Board or Committees before the next regularly scheduled meeting.

DRAFT

B. If the CEO is unavailable then senior management shall be responsible for reporting Crisis Information as required by this Policy.

C. All verbal and written communications regarding Crisis Information shall be treated as highly confidential.

2. Interaction with Other Policies

A. Any communications falling within the scope of Parkland's procedures for handling existing accounting, compliance, quality and patient safety, or auditing communications shall also be handled in accordance with those policies.

DEFINITIONS:

Crisis Information means any conduct, development, event, matter or proceeding that in the judgment of the CEO is of sufficient importance to warrant disclosure to the Board and/or appropriate Committee Chair(s) because it involves a probable, material, and significant financial, operational, compliance, legal or regulatory, quality or patient safety, or reputational risk. When making this determination, the CEO will also take into consideration special concerns of the Board.

Workforce Member: An Officer, board member, employee, volunteer, contractor, vendor, trainee, or other person whose conduct, in the performance of work for Parkland, is under the direct control of Parkland or a Parkland Affiliate, whether or not he or she is paid by Parkland or a Parkland Affiliate. "Workforce member" also includes all physicians, other members of the medical staff, and non-physician clinical providers, whether or not employed by Parkland.

REFERENCES:

N/A

DRAFT

Approve General Victim Assistance Grant

General Victim Assistance Grant

Overview

Parkland Health operates the Victim Intervention Program/Rape Crisis Center (VIP). VIP provides 24/7 crisis response to the main hospital and clinics, provides education and outreach throughout Dallas County and within the Parkland system, and provides trauma-informed family therapy services to a diverse client population. The General Victim Assistance grant program is administered through VIP and focuses on providing crisis response services and counseling services to victims of sexual assault, domestic violence, human trafficking, and other violent crimes in Dallas County.

Office of the Governor/Public Safety Office
Grant Request: $700,000

This request does have a match requirement of 20%, which equals $175,000. This requirement will be met with Indirect Cost applicable to the grant.

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
DBA PARKLAND HEALTH
EXECUTIVE SUMMARY

General Victim Assistance Grant
Application # 1751017

OVERVIEW: The Parkland Health General Victim Assistance grant program is funded by the Office of the Governor, Public Safety Office. Parkland Health operates the Victim Intervention Program/Rape Crisis Center (VIP). VIP provides 24/7 crisis response to the main hospital and clinics, provides education and outreach throughout Dallas County and within the Parkland system, and provides trauma-informed family therapy services to a diverse client population. The General Victim Assistance grant program is administered through VIP and focuses on providing crisis response services and counseling services to victims of sexual assault, domestic violence, human trafficking, and other violent crimes in Dallas County.

The grant period is from October 1, 2024, through September 30, 2025. The requested grant award is **$700,000** and is inclusive of salary, fringe, supplies, training, and indirect costs. The grant also requires a 20% required match of $175,000 for a total project cost of $875,000. The match amount is comprised of indirect costs.

The Office of the Governor requires a resolution from the County Commissioners Court that:

- Identifies the authorized official who has the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency;
- The agency agrees to provide applicable matching funds;
- In the event of loss or misuse of the Criminal Justice Division funds, Dallas County Hospital District assures that the funds will be returned to the Office of the Governor in full; and
- Approval of the grant application submission.

Parkland Health requests Board approval to seek the Dallas County Commissioners Court approval for submission of the General Victim Assistance Grant to the Office of the Governor/Public Safety Office.

DALLAS COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS
RESOLUTION NO._____

Grant Application Confirmation Number: 1751017

WHEREAS, The Dallas County Hospital District Board of Managers finds it in the best interest of the citizens of Dallas County that the Parkland Health General Victim Assistance Grant Program be operated for the grant period of October 1, 2024, through September 30, 2025; and

WHEREAS, The Dallas County Hospital District Board of Managers agrees that in the event of loss or misuse of the Office of Governor funds, Dallas County Hospital District assures that the funds will be returned to the Office of Governor in full.

WHEREAS, The Dallas County Hospital District Board of Managers has authorized the Executive Vice President and Chief Financial Officer as the grantee's Authorized Official (AO). The AO is given the power to apply for, accept, reject, alter, or terminate the grant on behalf of the applicant agency.

NOW THEREFORE, BE IT RESOLVED that the Dallas County Hospital District Board of Managers approves the submission of the grant application by the Dallas County Commissioners Court for the FY 2025 Parkland Health General Victim Assistance Grant Program to the Office of the Governor, Public Safety Office.

Dated this 28th day of February 2024.

_____
Marjorie D. Petty, JD
Chair

_____
Steven Roth, JD, MPH
Assistant Secretary

Marjorie D. Petty, JD	Yes_____	No_____	Abstain_____	Absent_____
Elizabeth Palacios, MD	Yes_____	No_____	Abstain_____	Absent_____
Todd Furniss, JD	Yes_____	No_____	Abstain_____	Absent_____
Eric G. Bing, MD, PhD	Yes_____	No_____	Abstain_____	Absent_____
Byron Cryer, MD	Yes_____	No_____	Abstain_____	Absent_____
Reina Gonzalez, JD	Yes_____	No_____	Abstain_____	Absent_____
Vincent Hall	Yes_____	No_____	Abstain_____	Absent_____
Ramon Miguez, PE	Yes_____	No_____	Abstain_____	Absent_____
Farida Minner, RN	Yes_____	No_____	Abstain_____	Absent_____
John Proctor	Yes_____	No_____	Abstain_____	Absent_____
Lisa Sutter	Yes_____	No_____	Abstain_____	Absent_____

Approve Six Month Extension of External Review of Compliance Program

Approve Patient Settlements

Approve Medical Executive Committee Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH

RESOLUTION NO. _____

RESOLUTION

Be it resolved, the Dallas County Hospital District Board of Managers by a vote of _____YES and ____ NAY, does by this resolution (adopt/reject) _____the following:

WHEREAS, the Medical Executive Committee recommends approval of the Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers as presented.

THEREFORE BE IT RESOLVED that the Board of Managers approves the recommended Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers.

Dated this 28th of February, 2024

_____ _____

Marjorie D. Petty, JD
Chair

Steve Roth, JD, MPH
Assistant Secretary

Marjorie D. Petty, JD	Yes_____ No_____ Abstain _____Absent_____
Elizabeth Palacios, MD	Yes_____ No_____ Abstain _____Absent_____
Todd Furniss, JD	Yes_____ No_____ Abstain _____Absent_____
Eric G. Bing, MD, PhD	Yes_____ No_____ Abstain _____Absent_____
Byron Cryer, MD	Yes_____ No_____ Abstain _____Absent_____
Reina Gonzalez, JD	Yes_____ No_____ Abstain _____Absent_____
Vincent Hall	Yes_____ No_____ Abstain _____Absent_____
Ramon Miguez, PE	Yes_____ No_____ Abstain _____Absent_____
Farida Minner, RN	Yes_____ No_____ Abstain _____Absent_____
John Proctor	Yes_____ No_____ Abstain _____Absent_____
Lisa Sutter	Yes_____ No_____ Abstain _____Absent_____

CEO Update on System Operations

Questions & Discussion Related to CEO Update on System Operations

Cybersecurity Update

Questions & Discussion Related to Cybersecurity

Executive Session

Consultation with Attorney Regarding Parkland Center for Clinical Innovation (PCCI) and Pieces Technology, Inc (PTI) Agreement

Executive Session

Discussion Regarding Roles and Responsibilities of the Board of Managers in the Governance and Strategic Direction of the System

Executive Session

Personnel Matters Pertaining to Duties and Responsibilities of Chief Executive Officer

Executive Session

Personnel Matters Pertaining to Duties and Responsibilities of Board Members

Medical Executive Committee Credentialing Report

Delineation of Privileges Cardiovascular and Thoracic

Patient Settlements

Approve Amended Retained Rights Agreement and PCCI Asset Purchase Agreement Resolution