Parkland

Board of Managers

Agenda for the ***Board of Managers*** meeting of the Dallas County Hospital District is scheduled for ***Wednesday, June 20, 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: 2634 079 5618; 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. Pepa Paniagua		5	Rev. Pepa Paniagua Grace Presbytery
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 2024-05-01 Talent Development & Executive Compensation Committee	*5*	1	Chair
B. Minutes 2024-05-01 Governance, Compliance & Ethics Committee	*10*		
C. Minutes 2024-05-21 Budget & Finance Committee	*14*		
D. Minutes 2024-05-22 Quality of Care & Patient Safety Committee	*22*		
E. Minutes 2024-05-22 Board of Managers	*28*		
F. Approve Contracts over $200,000 *See details at https://www.parklandhospital.com/board-of-managers*	*35*		
G. Approve Capital Substitution(s) *See details at https://www.parklandhospital.com/board-of-managers*	*73*		

	PAGE	TIME (MIN)	PRESENTER(S)
H. Approve CLINOPS.PC.001 Guidelines for Triage and Provision of the Medical Screening Exam	*76*		
I. Approve System Policy 002 Patient's Rights and Responsibilities	*86*		
J. Approve Patient Settlements	*100*		
K. Approve Medical Executive Committee Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers	*101*		
III. Reports Requiring Deliberation(s) or Approval(s)			
A. CEO System Update	*103*	10	Fred Cerise, MD
B. Questions & Discussion Related to CEO System Update	*104*	10	Chair
C. FY25 Operating Plan	*105*	20	Fred Cerise, MD
D. FY25 Operating Plan Q&A	*127*	20	Chair
E. Review FY25 Parkland Health Budget Assumptions	*128*	20	Rick Humphrey
F. Review FY25 Parkland Health Budget Assumptions Q&A	*148*	20	Chair
G. Texas Healthcare Trustee (THT) Conference Update	*149*	5	Chair
IV. Executive Session			
A. Discussion of Master Service Agreement for Physician Services Contract Tex. Gov't Code §551.085	*150*	10	Edmundo Castañeda; Roberto de la Cruz; April Audain
B. Discussion of Master Service Agreement for Physician Services Contract Q&A Tex. Gov't Code §551.085	*159*	10	Chair
C. Consultation with Attorney Regarding Contract Dispute and Related Litigation Styled as Construction Cleaning, Inc. v. Dallas County Hospital District d/b/a Parkland Health Tex. Gov't Code §551.071	*160*	10	Steve Roth, JD; Brad Nitschke, JD
D. Consultation with Attorney Regarding Contract Dispute and Related Litigation Styled as Construction Cleaning, Inc. v. Dallas County Hospital District d/b/a Parkland Health Q&A Tex. Gov't Code §551.071	*161*	10	Chair
E. Discussion of Legal Obligations Under Texas Open Meetings Act Tex. Gov't Code §551.071	*162*	15	Steve Roth, JD; Jeff Giles, JD
F. Discussion of Legal Obligations Under Texas Open Meetings Act Q&A Tex. Gov't Code §551.071	*176*	15	Chair
V. Executive Session Reference Documents			
A. Medical Executive Committee Credentialing Report Tex. Health & Safety Code §§161.0315 & 161.032	*177*		
B. Delineation of Privileges Urology DoP – Triage Tex. Health & Safety Code §§161.0315 & 161.032	*202*		
C. Patient Settlements Tex. Gov't Code §§551.071	*214*		

	PAGE	TIME (MIN)	PRESENTER(S)
D. Consultation with Attorney Memo Regarding Life Insurance Program Tex. Gov't Code §§551.071	*218*		
VI. Action Items			
A. Board May Take Action on Any Agenda Item(s) Above			Chair
B. Discussion and possible action regarding the designation of a representative to decide the administrative appeal of Contracting Officer's Decision in the dispute styled as Construction Cleaning, Inc. v. Dallas County Hospital District d/b/a Parkland Health	*220*		Chair
VII. Adjourn			Chair
A. Closing Remarks			
B. Call to Adjourn			

Invocation

Minutes 2024-05-01 Talent Development & Executive Compensation Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Minutes of the Talent Development and Executive Compensation Committee meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, May 1, 2024, scheduled for 12:00 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 Lisa Sutter noted a quorum was physically present and called the meeting to order at 12:11 p.m. Committee members Reina Gonzalez, JD; Lisa Sutter; Farida Minner, RN; and Elizabeth Palacios, MD, were present.

Board Member attendees included: Ramon Miguez, PE; and Eric G. Bing, MD, PhD.

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

Carolyn Foster, Deputy General Counsel
Dan Enright, Director/Talent Mgmt. Analytics
Donna Richardson, EVP Chief Nursing Executive
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & Chief Executive Officer
Jessica Hernandez, SVP Chief DEI Officer
Kellee Boardingham, Executive Assistant
Lauryn Minter, Director Workforce Equity
Melanie Roberts, SVP Chief Compliance and Ethics Officer
Morgan Simmons, Governance Program Coordinator
Roberto de la Cruz, EVP Chief Clinical Officer
Sean Gorman, Mgr., Communications
Sharon Chisholm, Administrative Director OTM
Shauntee Mayfield, VP & Chief Experience Officer
Stacy Dorsey, SVP Workforce Strategy
Steven Roth, EVP & Chief Legal Officer
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 Board Talent Development & Executive Compensation Committee Charter

Chair, Lisa Sutter, asked for item A to be considered for approval.

Elizabeth Palacios, MD, motioned to recommend Board approval of the Board Talent Development & Executive Compensation Committee Charter. Vincent Hall seconded the motion. The motion passed unanimously.

B. Office of Talent Management Overview

Felicia Miller reminded the board of the 2024 goals for the Office of Talent Management. Felicia mentioned the focus this year is on productivity. Felicia presented May's workforce equity focus which is on disability and belonging. She defined the term ableism regarding what the Office of Talent Management is doing to create a more inclusive and welcoming environment surrounding pre-employment, post-employment, and staff growth.

The Committee members asked questions and received additional information related to the Office of Talent Management Overview.

C. Anti-Ableism

Dr. Lauryn Minter presented on the 2024 Anti-Ableism Strategic Plan. Lauryn mentioned Parkland's anti-ableism vision statement as it pertains to workforce equity and inclusivity. Lauryn presented on the most recent disability statistics in Texas and examples of these disabilities categorized as apparent and non-apparent. Lauryn next mentioned the benefits of sourcing and hiring disabled talent and provided insights into serving patients and faculty with disabilities. Lauryn presented Parkland's targeted approach to anti-ableism in Parkland's operations and provided current mechanisms to addressing the needs of disabled employees.

The Committee members asked questions and received additional information related to the Anti-Ableism presentation.

D. Benefits Update

Felicia Miller provided the Benefits Update. Felicia presented on the updated Cigna programs which resolved the recent malfunctions that occurred. She next mentioned the on-site health coaches hired by Cigna who will help in reaching out to patients on specific programs for chronic illnesses such as diabetes. These representatives assist with education individualizing the programs for a specific patient. Felicia updated the board on the recent employee health and wellness efforts regarding the hiring of two social workers who will assist employees in areas of support, resources, and counseling. Felecia finally presented the proposal to amend retirement programs to include step plan annual incentives regarding Parkland physicians.

The Committee members asked questions and received additional information specifically related to the Benefits Update.

E. Nursing and Physician Recruitment

Stacey Dorsey presented the 2024 overall statistics on vacancy rates, number of openings, and contract labor all of which continue to decrease from the 2022 statistics. Stacey reported the improvement in statistics after the collaboration efforts among Nursing and the Office of talent Management. She mentioned a new focus, post-COVID, on quality and candidate-centric talent acquisition. Stacey presented on the recruitment timeline for residents seeking employment and how the recruitment campaigns start far in advance to actual employment.

The Committee members asked questions and received additional information related to the Nursing and Physician Recruitment.

F. Recognition Programs

Felicia Miller presented Parkland-wide recognition efforts that are both internal and external to engage employees.

The Committee members asked questions and received additional information related to the Recognition Programs.

G. Nursing Engagement Survey Results

Donna Richardson presented the Nursing engagement survey results. Donna mentioned there was an 84% participation rate among the nurses. Over 80% of the question categories exceeded the benchmark scores showing significant improvement in overall engagement from 2021 results. Donna presented the areas in nursing that will be used as opportunities to improve.

The Committee members asked questions and received additional information related to the Nursing Engagement Survey Results.

H. People Metrics

Dan Enright presented the detailed percentages and metrics summary on vacancies and turnovers.

The Committee members asked questions and received additional information related to People Metrics.

VI. Adjourn

With no further business to discuss, Committee Chair Lisa Sutter adjourned the meeting at 1:49 p.m.

SO RECORDED:

_____	_____
Lisa Sutter	Steve Roth, JD, MPH
Committee Chair	Assistant Secretary

Minutes 2024-05-01 Governance, Compliance & Ethics Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Minutes of the Governance, Compliance and Ethics Committee meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, May 1, 2024, scheduled for 10:30 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 Reina Gonzalez, JD, noted that a quorum was physically present and called the meeting to order at 10:31 a.m. Committee members; Byron Cryer, MD, Ramon Miguez, PE, Lisa Sutter, and Eric G. Bing, MD, PhD, attended in-person.

Board Member Attendees Included: Vincent Hall.

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

Bruce McDaniels, VP & Chief Information Security Officer
Charlotte Nafziger, Dir., Reg Compliance & Privacy Officer
Donna Richardson, EVP Chief Nursing Executive
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & Chief Executive Officer
Gerry Baker, SVP Revenue Cycle (in-person)
Jennifer Wimberly, Staff Physician-Chair, Institutional Ethics Committee
Joe Longo, SVP & Chief Information Officer
Kellee Boardingham, Executive Assistant
Mary Lea Holmes, VP & Compliance Oversight
Melanie Roberts, SVP/Chief Compliance & Ethics Officer
Morgan Simmons, Governance Program Coordinator
Roberto de la Cruz, EVP & Chief Clinical Officer (via Webex)
Roshan Thayil, Sr. Director Compliance Programs
Steve Roth, EVP & Chief Legal Officer
Vic Summers, SVP Chief Audit Executive

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. Executive Session

At 10:32 a.m., the Committee went into executive session to discuss the items on the Executive Session agenda.

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

A. Oversight of Cybersecurity
B. Discussion of Board Conflict of Interest Reviews
C. Institutional Ethics Committee Report
D. Compliance and Ethics Report
   i. Accounting of Disclosures (AoD)
   ii. Annual Compliance Risk Assessment & ERM Survey
   iii. Bi-Annual Review – Code of Conduct and Ethics
   iv. Annual Compliance and Ethics Training
   v. Compliance Program Effectiveness Review
   vi. Electronic Health Record Monitoring
   vii. Regulatory Update
      a. Information Privacy
      b. Price Transparency
      c. Transparency in Coverage
E. Quarterly Report of Open Compliance Reviews
   Attorney-Client Privileged & Confidential

Members of management in executive session attendance included:

Donna Richardson, Felicia Miller; Fred Cerise; Gerry Baker; Jennifer Wimberly; Jessica Hernandez; Kellee Boardingham; Melanie Roberts; Morgan Simmons, Roberto de la Cruz; Roshan Thayil; Steve Roth; and Vic Summers

Committee Chair Reina Gonzalez, JD, adjourned Executive Session and moved into Open Session at 11:56 a.m.

VI. Adjourn

With no further business to discuss, Committee Chair Reina Gonzalez, JD, adjourned the meeting at 11:57 a.m.

SO RECORDED:

Reina Gonzalez, JD Committee Chair	Steve Roth, JD, MPH Assistant Secretary

Minutes 2024-05-21 Budget & Finance Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Budget and Finance
May 21, 2024

Minutes of the Budget and Finance Committee meeting of the Board of Managers of the Dallas County Hospital District, held Tuesday, May 21, 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 Eric G. Bing, MD, PhD, John Proctor and Farida Minner, RN, who was appointed for quorum, attended in-person.

Committee member Byron Cryer, MD, attended via Webex.

Board Member attendees included: Vincent Hall

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

Anthony Tarango, Mgr., Nursing
April Audain, , VP-UT Contracts Admin
Donna Richardson, EVP & Chief Nursing Executive
Edmundo Castaneda, EVP & COO
Fred Cerise, President & Chief Executive Officer (via Webex)
Gerry Baker, SVP/ Revenue Cycle
Guy Toliver, Dir. Inclusion-Supply Diversity
Jessica Hernandez, SVP & Chief DEI Officer
Joseph Longo, SVP Chief Information Officer
Keri Disney-Story, VP/Clinical Finance
Mary Lea Holmes, VP/Compliance Oversight
Morgan Simmons, Governance Program Coordinator
Pam Bryant, SVP Chief Supply Chain Officer
Rick Humphrey, EVP & Chief Financial Officer (via Webex)
Roberto de la Cruz, EVP & Chief Clinical Officer
Saul Cordero, SVP & Chief Governance & Strategy Officer
Steven Roth, EVP & Chief Legal Officer
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 Bryant provided a brief overview of each contract and highlighted the MWBE participation.

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

Eric G. Bing, MD, PhD, motioned to recommend Board approval of Contracts over $200,000. John Proctor, seconded the motion. The motion passed unanimously.

B. Approve Capital Substitutions

April Audain presented the capital substitutions for the month of May. April presented the first substitution amount of $368,835 regarding the replacement of endoscopy tower components, for approval. April presented the next substitution amount of $1,000,000 regarding equipment and instrumentation for the DaVinci lease, for approval. Lastly, April presented the substitution amount of $598,350 regarding the preventative health mobile units. These substitutions totaled to $1, 967,185.

The Committee asked questions and received additional information related to Capital Substitutions.

Eric G. Bing, MD, PhD, motioned to recommend Board approval of Capital Substitutions. Farida Minner ,RN, seconded the motion. The motion passed unanimously.

C. Parkland Financial Performance Presentation

Rick Humphrey reviewed the financial results for April 2024 and discussed significant performance variances.

For the month of April, Parkland Health recognized a net income of $3.9M which is $2.7M unfavorable to the budgeted net income of $6.6M and $4.5M unfavorable compared to the prior year net income of $8.4M.
Parkland Health's operating margin and operating cash flow margin for the month of April are 0.2% and 3.5%, respectively. The operating margin was favorable compared to budget of (0.1%) and the operating cash flow margin is favorable compared to budget of 3.2%. Parkland Health's operating margin is favorable compared to the prior year

operating margin of (0.6%) and favorable to the operating cash flow margin of 2.7% from the prior year.
Parkland Health's patient cash collections in April were $131.5M which is higher than budget by $36.6M and $47.6M above the prior year. Parkland Health's days cash on hand of 236.5 days for the month is an increase of 0.3 days compared to prior month of 236.2 days and compared to the prior year April of 251.6 days, a decrease of (15.1) days.

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

Next, Rick reviewed the Key Statistics and Operational Performance metrics for the month of April (FYTD). Rick mentioned in regard to revenue there was good volume and gross patient revenue for the month. April exceeded our budget and discharges. Length of stay was unfavorable; however ER visits is nearly 4% better than the previous year. Rick mentioned the ransomware attack from February which impacted billing, posting collections and patient verifications/intake for billing purposes, therefore our cash was impacted into March, but cash collections steadied and increased in April.

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

A. **Adjourn**
With no further business to discuss, Committee Chair Ramon Miguez, PE, adjourned the meeting at 12:37 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
													May 22, 2024
NON-SOLE SOURCE CONTRACTS - Sorted by Size													
N1		Expense	Courier Services for the Hospital system	Eagle Express	6/1/2024 - 5/31/2029	$1,392,256	$1,392,256	Request for Proposals (Best Value)	Yes	Pam Bryant, Supply Chain	0%	N/A	N/A
N2		Expense	Mod #3 Tractor Lease for Linen Services	Southwest International Trucks, Inc.	2/25/2019 - 5/24/2029	$218,000	$416,000	Invitation for Bids	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Jay Dyck, Linen Services	0%	N/A	N/A
N3		Capital	Mod #1 HOMES Construction	Taurus Commercial, Inc.	4/27/2023 - 8/31/2024	$173,084	$2,345,432	Invitation for Bids	Yes	Harrington, Planning, Design and Construction	57%	Hispanic	Male

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	DaVinci Lease Agreement	Intuitive Surgical	6/1/2024 - 5/31/2031	$9,800,000	$9,800,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Cheston Chan, Perioperative Services	0%	N/A	N/A
S2		Expense	State Medicaid Health Insurance Payment Program (HIPP) and PFA Patient Helper Program	Patient Funding Alternatives LLC	Last Signature - No Expiration	$2,000,000	$2,000,000		Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Gerry Baker, Patient Financial Services	0%	N/A	N/A
S3		Expense	OviTex Reinforced Tissue Matrix	TELA Bio	Last Signature - 5 Years	$875,000	$875,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Cheston Chan, Main OR	0%	N/A	N/A
S4		Expense	Mod #3 Adding funds	Intera Oncology	10/31/2023 - 10/12/2026	$865,000	$1,064,000	Sole Source	Yes	Cheston Chan, Perioperative Services	0%	N/A	N/A
S5		Capital	Mobile Medical Unit	CGS Premier, Inc.	Last Signature - 1 Year	$506,258	$506,258	Sole Source	No	Niccole McKinley, Wish Administration	0%	N/A	N/A
S6		Capital	Mobile Medical Clinic	Farber Specialty Vehicles	6/24/2024 - 6/24/2027	$404,577	$404,577	Sole Source	Yes	Colette White, Community Integrated Health	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
S7		Expense	Mod to Add Funds4 add funds and extend through November 30, 2024	Premier Radiology	8/1/2020 - 5/31/2024	$360,000	$1,100,415	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Crystal Harrison/Shawn Grady and Tina Hill, Correctional Health & Radiology	0%	N/A	N/A
S8		Expense	Mod #8 Adding funds Motor Street Garage Elevator Modernization	ThyssenKrupp Elevator	6/14/2012 - 10/31/2025	$306,132	$7,626,919	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Shabretta Manning, Engineering Services	0%	N/A	N/A
S9		Expense	Cooper Surgical Insorb Stapler and Forceps	Cooper Surgical Inc	Last Signature - 4/30/2026	$260,000	$260,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Cheston Chan, Perioperative Services	0%	N/A	N/A
S10		Expense	Coagu-Sense Point of Care PT/INR test kits	Coagu-Sense	Last Signature - 3 Years	$205,000	$205,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Sarah Muna/Scott Hampton, Laboratory Services	0%	N/A	N/A
S11		Expense	Mod #4 Outpatient Dialysis Services – Physician Services	Dallas Nephrology Associates	12/1/2021 - 5/31/2025	$190,000	$1,075,000	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Shannan Bradley, Care Management/Transitional Care	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
S12		Expense	Mod #11 ADD FUNDS ONLY Offsite Record Storage	Iron Mountain Information Management, LLC	5/5/2018 - No Expiration	$189,000	$1,185,409	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Denise Pickett , Legal Affairs	0%	N/A	N/A
S13		Expense	Mod #3 Scrub Dispensing Stations Lease and Maintenance	Innovative Product Achievements, LLC	3/1/2019 - 5/31/2027	$108,524	$387,104	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal	Jay Dyck, Linen Services	0%	N/A	N/A

Minutes 2024-05-22 Quality of Care & Patient Safety Committee

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Quality of Care and Patient Safety
May 22, 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, May 22, 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 Todd Furniss, JD; and Farida Minner, RN, attended in-person.

Board Member attendees included: Board Chair Marjorie Petty, JD, Reina Gonzalez, JD; Vincent Hall, Ramon Miguez PE, and Byron Cryer, MD.

Staff Present (via Webex and in-person) included:
Anthony E. Tarango Mgr., Nursing
Carmen Bowling, Interim SVP Nursing
Caroline Park, Trauma/Acute Surgery
Catherine Chen, Internal Medicine
David Alexander, SVP Nursing
Dawn Marchetto, SVP Nursing
Donna Richardson, EVP & Chief Nursing Executive
DeLancey Johnson, SVP & Associate Chief Talent Officer
Edmundo Castañeda, EVP & Chief Operating Officer
Elaine Duryea, Obstetrics & Gynecology, Assoc. Prof
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & CEO
Gretchen Blake, VP Quality & Clinical Effectiveness
James Griffin, President of the Medical Executive Committee
Jeffrey Metzger, Emergency Medicine
Jessica Hernandez, SVP & Chief DEI Officer
Joseph Chang, SVP & CMO
Judy Herrington, SVP Nursing
Karen Garvey, VP Safety & Clinical Risk Management
Kathleen Doherty, VP Nursing Surgical Services
Kellee Boardingham, Executive Assistant
Kristie Brown, Dir., Nursing/Trauma
Margaret Palmer, VP Professional Medical Affairs
Mary Leah Holmes, VP/Compliance Oversight
Michael Lane, SVP Chief Quality & Safety Officer
Michael Malaise, SVP Communications/Ext Affairs
Morgan Simmons, Governance Program Coordinator
Pedro Fernandez, Adult Phsychiatry
Roberto de la Cruz, EVP Chief Clinical Officer
Saul Cordero, SVP & Chief Governance & Strategy Officer

Sobha Fuller, SVP Nursing (via Webex)
Steven Roth, EVP Chief Legal Office
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 10:00 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:

Carmen Bowling, Dawn Marchetto, Donna Richardson, Edmundo Castañeda, Felicia Miller, Fredrick Cerise, Gretchen Blake, James Griffin, Joseph Chang, Judy Herrington, Karen Garvey, Kathleen Doherty, Kellee Boardingham, Margaret Palmer, Morgan Simmons, Michael Lane, Michael Malaise, Roberto de la Cruz, Saul Cordero, Sobha Fuller, and Steven Roth.

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. Cause Analysis (CA) Case Reviews and Guide

C. Clinical Quality Reports
   1. Department Performance Improvement Committee (PIC)/ Clinical Quality Committee (CQC) Annual Presentation
      a. Emergency Operations PIC
      b. Psychiatry and Behavioral Health PIC
      c. Trauma CQC

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 starting at 10:59 am.

A. Appointments/Reappointments

1. Medical Staff & Non-Physician Clinical Providers to Parkland Health
    a. Credentialing Report
    b. Delineation of Privileges (DoPs)
        i. Internal Medicine Infectious DoP
            a. High Resolution Anoscopy (HRA)
        ii. Chiropractic Care DoP
        iii. Robotics General Privilege Criteria
        iv. Urology DoP – Revision
        v. Ophthalmology DoP – Revision
        vi. Cardiovascular Disease (Laser Privileges for Interventional Cardiology)

The Board asked questions and received additional information.

Members of management in the MEC executive session attendance included:

Dawn Marchetto, Donna Richardson, Edmundo Castañeda, Felicia Miller, Fredrick Cerise, James Griffin, Joseph Chang, Karen Garvey, Kathleen Doherty, Kellee Boardingham, Margaret Palmer, Morgan Simmons, Michael Lane, Roberto de la Cruz, Saul Cordero, and Steven Roth.

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

The Committee conducted 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 12:20 pm.

IX. Action Items (Open Session)

A. Consent Agenda
   1. Approval of Policies
      a. Policy: CLINOPS.PC.001 Guidelines for Triage and Provision of the Medical Screening Examination (MSE)
      b. Policy: SYS.RR.002 Patient's Rights and Responsibilities

B. 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. Delineation of Privileges (DoPs)
         i. Internal Medicine Infectious Disease DoP
            a) High Resolution Anoscopy (HRA)
         ii. Chiropractic Care DoP
         iii. Robotics General Privilege Criteria
         iv. Urology DoP – Revision
         v. Ophthalmology DoP – Revision
         vi. Cardiovascular Disease (Laser Privileges for Interventional Cardiology)

Vincent Hall, motioned to recommend Board approval of the Consent Agenda. Byron Cryer, MD, seconded the motion. The motion passed unanimously.

Vincent Hall, motioned to recommend Board approval of the Medical Executive Committee Recommendations. Farida Minner, RN, seconded the motion. The motion passed unanimously.

X. Follow-Up Requests: None

XI. Closing Remarks

XII. Adjourn

With no further business to discuss, Committee Chair Elizabeth Palacios, MD, adjourned the meeting at 12:21 pm.

Parkland

MINUTES
Dallas County Hospital District Board of Managers

Quality of Care and Patient Safety
May 22, 2024

SO RECORDED:

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

Minutes 2024-05-22 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, May 22, 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 12:54 p.m.

Board Member attendees included: Chair Marjorie Petty, JD; Eric G. Bing, MD, PhD; Todd Furniss, JD; Reina Gonzalez, JD; Vincent Hall; Ramon Miguez, PE; Farida Minner, RN; Elizabeth Palacios, MD; Byron Cryer, MD and Lisa Sutter via Webex.

Board member John Proctor was not present.

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

Aida Somun, Chief Operating Officer - PCCI
Anthony Tarango, Mgr., Nursing
April Foran, Dir./Corp Communications & PIO
Donna Richardson, EVP & Chief Nursing Executive
Edmundo Castañeda, EVP & Chief Operating Officer
Edna Ruano, Public Policy Advisor
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & Chief Executive Officer
Jessica Hernandez, SVP Chief DEI Officer
John Raish, SVP Support Services
John Wilson, Director/PDC
Joseph Chang, SVP & CMO
Kellee Boardingham, Executive Assistant
Kyla Rankin, HOMES Project Director
Mary lea Holmes, VP/Compliance Oversight
Michael Lane, SVP Chief Quality & Safety Officer
Michael Horne, President & CEO Parkland Foundation
Morgan Simmons, Governance Program Coordinator
Pamela Bryant, SVP/Supply Chain Management
Paula Denny, Associate General Counsel, Legal Affairs
Rick Humphrey, EVP & Chief Financial Officer (via Webex)
Roberto de la Cruz, EVP & CCO
Saul Cordero, SVP & Chief Governance & Strategy Officer
Steve Miff, Chief Executive Officer - PCCI
Steven Roth, EVP & Chief Legal Office
Vic Summers, SVP Internal Audit

Additional Attendees:
Kristen Harrison, Associate Director at the Smith Group Dallas (via Webex)
Asma Momin, Mgr., Proj, Renos & New Const
Brian Briscoe, Architect/ Project Mgr HKS
Lannie Mclelen, Texas Tree Foundation
Neil B Alexander, Global Practice Director for HKS Advisory
Robert Prejean, Planning Management, Children's Health

II. Mission Statement

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

III. Invocation

Chaplin Benjemin Ries of Parkland Health 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

a. D-Magazine & Great 100 Winners Resolution

b. Minutes 2024-04-10 Audit Committee

c. Minutes 2024-04-13 Board of Managers

d. Minutes 2024-04-17 Facilities Committee

e. Minutes 2024-04-23 Budget and Finance Committee

f. Minutes 2024-04-24 Quality of Care & Patient Safety Committee

g. Minutes 2024-04-24 Board of Managers

h. Approve Professional Staff Quality Management Plan

i. Approve Contracts over $200,000
https://www.parklandhospital.com/board-of-managers

j. Approve Capital Substitution(s)
https://www.parklandhospital.com/board-of-managers

k. Approve Patient Settlements

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

Chair, Marjorie Petty, asked for item A to be removed briefly in order to congratulate the recipients of the D-Magazine award.

Todd Furniss, JD, motioned to approve Items B-L. Farida Minner, RN seconded the motion. The motion passed unanimously.

Vincent Hall, motioned to approve Item A. Ramon Miguez, PE, seconded the motion. The motion passed unanimously.

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

A. CEO System Update

Dr. Fred Cerise mentioned Parkland's yearly Celebrate Us events that occurred all throughout the week to make a special effort to celebrate all of Parkland's staff and their hard work. Dr. Cerise presented on the Reach for the Stars program and its excellence in in a Parkland employee's nursing and educational journey to demonstrate the opportunities afforded by this program. Dr. Cerise next presented an overview on the Southwestern Medical District to introduce the collaboration between the district and Parkland for the next presenters from the SWMD Texas Tree Foundation. Additionally, Dr. Cerise mentioned other updates regarding the Strategic Facilities Masterplan, Southeast Clinic Facility updates, Vickery Clinic at Richland College and Medicaid Reimbursement/ future changes to this program.

B. Questions & Discussion Related to CEO System Update

The Board asked questions and received additional information related to the CEO System Update

C. Southwestern Medical District Master Plan – Texas Tree Foundation

Lannie Mclelen presented on the Southwestern Medical District Transformation and the Power of Nature and Innovation. Lannie presented background on the SWMD partnership with the Texas Tree Foundation and the phases associated with this project. Lannie mentioned the need for a balance for the need and opportunities for the SWMD based on traffic and mobility, safety and security, human and environmental health and campus livability. Lannie presented on the previous phases of this project from its beginning in 2016. The SWMD master plan is now in the final few phases prior to

beginning the 30% to 100% landscape and civil construction documents for phase one of this project. Lannie gave the board information on the highest priority streetscape improvements and showed evidence-based studies on the extreme Texas heat versus SWMD walkability for patients, employees and the public. Lannie also presented renderings for the future design of the district.

D. Questions & Discussion Regarding Southwestern Medical District Master Plan – Texas Tree Foundation

The Board asked questions and received additional information related to the Southwestern Medical District Master Plan – Texas Tree Foundation

E. Parkland Center for Clinical Innovation (PCCI) Update

Steve Miff and Aida Somun presented on the most recent updates regarding Parkland's Center for Clinical Innovation. Steve mentioned the mission and purpose of PCCI at Parkland t provide background for the presentation. Steve presented on the major recent accomplishments from PCCI involving funding, growth and partnerships. Steve also mentioned PCCI's national recognition in AI leadership and participation in AI Medicine Innovation in equitable healthcare. Steve presented on Parkland's alignment and progress in various projects regarding AI and model development. Steve then mentioned what PCCI will focus on in the future as far as AI-in-medical care for Underserved Populations such as commercializing/selling IRIS and expansion of collaboration efforts among health systems.

F. Questions & Discussion Regarding Parkland Center for Clinical Innovation (PCCI) Update

The Board asked questions and received additional information related to the Parkland Center for Clinical Innovation (PCCI) Update

G. PCCI Amended and Restated Bylaws

Paula Denny presented the PCCI Amended and Restated Bylaws to the board. Paula presented on the background for the changes made to the bylaws to conform to corporate governance best practices, modernize outdated content, accurately reflect how PCCI currently does business and consolidate board directives. The Board responded to these changes and requested an update be made to the language of the PCCI Bylaws regarding the removal/addition process of a PCCI member to be concurrent to the Parkland Board's processes. The suggestion aims to amend the PCCI bylaws with this language, "Removal subject to the usual process of the Parkland Board, to take action," as long as the PCCI board contains 11 members, then, a maximum of two Parkland Board members can be represented on the PCCI Board.

Marjorie Petty motioned for the PCCI Amended and Restated Bylaw board recommendations to be considered and brought back to the board for approval.

Ramon Miguez, PE, motioned to approve this item and its exceptions. Farida Minner, RN seconded the motion. The motion passed unanimously.

H. Questions & Discussion Regarding PCCI Amended and Restated Bylaws
The Board asked questions and received additional information related to the PCCI Amended and Restated Bylaws

I. Southeast Facilities Concept Plan
Edmundo Castañeda reoriented the board on the purpose and recent strategic updates of the Southeast Facilities plan. Following Edmundo, Neil B. Alexander and Brian Briscoe from HKS presented on the project overview. Neil presented on the project processes and objectives regarding campus program development, market analysis, and population projections for the future needs of the Southeast clinic. Neil next presented on the conceptual planning and analysis for each phase from conception to implementation of the clinic and clinical services. Neil projected data forecasting the volume and need-based statistics of the future Southeast campus based on demand and community needs for the next five years. Brian presented the architect's phased approach opinion of cost based on the previous presentation for the Southeast clinic. Richard Humphrey presented on additional preliminary costs regarding the Southeast Pro Forma Income Statement with the new clinic and all associated costs. Following the presentation and the questions raised by the Board, Dr. Cerise restated the priority of this project and suggested the continuation of the first two phases of this project. The board agreed to proceed with the first two phases of design for the clinic and requested the simultaneous development of the master plan to confirm that this design will substantiate as proposed.

J. Questions & Discussion Related to the Southeast Facilities Concept Plan
The Board asked questions and received additional information related to the Southeast Facilities Concept Plan.

K. Board and Committee Charters Review Process
Marjorie Petty mentioned board committee charters and the review processes associated with such. Marjorie engaged the board in discussion regarding the expectations of the board during these processes and the upcoming charter approval timeline for FY24.

L. Discuss Board of Managers Annual Training and Board Development
Morgan Simmons provided information on upcoming Board Development opportunities such as the conference in San Antonio this July, through the Texas Healthcare Trustees organization.

The Board asked questions and received additional information related to the Annual Training and Board Development.

VIII. Executive Session

At 4:34 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 Performance of CEO and His Direct Reports

Chair adjourned Executive Session and moved into Open Session at 4:54 p.m.

IX. Adjourn

With no further business to discuss, the Chair adjourned the meeting at 4:54 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
June 20, 2024													
NON-SOLE SOURCE CONTRACTS - Sorted by Size													
N1		Revenue	Claim Scrubber and Eligibility RTE (Real Time Eligibility)	Waystar, Inc.	Last Signature - 5 years	$2,677,877	$2,677,877	Request for Proposals (Best Value)	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Kairon Francois, Kyle Cross, Patient Financial Services	0%	N/A	N/A
N2		Expense	Mod #8 Group Purchasing Organization Two Year Extension with One Year Renewal Option	Vizient	7/1/2017 - 6/30/2027	$2,619,268	$21,839,678	Non-Sole Source Modification	Yes	Pam Bryant, Supply Chain/Contracts	0%	N/A	N/A
N3		Expense	Hospice Care Services	Forefront Living Hospice, Pathway Hospice, LLC, & The Visiting Nurse Association of Texas	7/1/2024 - 6/30/2029	$950,000	$950,000	Request for Proposals (Best Value)	Yes	Umber Dickerson, Palliative Care	0%	N/A	N/A
N4		Capital	Mod #3 Purchase and installation of new and/or upgraded cameras at various locations	Siemens Industry, Inc.	2/23/2023 - 1 year	$602,296	$1,526,456	Non-Sole Source Modification	Yes	Bruce McDaniels / Joe Longo, Information Technologies	0%	N/A	N/A
N5		Expense	Mod #1 Contract extension and adding funds	Cancer Diagnostics Inc.	7/1/2021 - 6/30/2025	$139,000	$325,540	Request for Proposals (Low Price/Tech Accept)	Yes	Sarah Blacketer/Scott Hampton, Anatomic Pathology	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 #2 Remote Patient Monitoring Software and Hardware Lease Agreement	Current Health	7/1/2021 - 6/30/2027	$4,845,805	$7,061,633	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Cynthia Hamilton, Information Technology	0%	N/A	N/A
S2		Expense	Mod #1 Employee Group Life Insurance Coverage	Securian Financial (assumption of Minnesota Life contract)	1/1/2020 - 12/31/2029	$4,256,815	$15,226,407	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Dr. DeLancey Johnson, Total Rewards	0%	N/A	N/A
S3		Expense	STIMULAN Rapid Cure	Biocomposites	Last Signature - 5 Years	$875,000	$875,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Cheston Chan, Perioperative Services Administration	0%	N/A	N/A
S4		Expense	Mod #2 FY24 Master Services Agreement	The University of Texas Southwestern Medical Center	10/1/2023 - 9/30/2024	$500,000	$275,056,487	Sole Source Modification	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	April Audain, UT Contracts Administration	0%	N/A	N/A
S5		Expense	Licensed Training Provider Agreement	The American Red Cross	7/1/2024 - 6/30/2027	$491,361	$491,361	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Theresa Kaplan, Clinical Education	0%	N/A	N/A
S6		Capital	Mod #3 Benchmark Ventana H&E 600 Stainer	Roche Diagnostics Corporation	11/29/2021 - 6/20/2029	$375,937	$500,042	Sole Source Modification	Yes	Sara Blacketer, Anatomic Pathology	0%	N/A	N/A
S7		Expense	MY01 Compartment Syndrome Continuous Monitoring	MY01	Last Signature - 3 Years	$240,000	$240,000	Sole Source	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.	Cheston Chan, Perioperative Services Administration	0%	N/A	N/A
DEVIATION/RATIFICATION													
D1		Revenue: Court Approval-Approved Deviation	The Plaza at Richardson Sublease	Richardson Enterprises I, LLC	7/1/2024 - 8/31/2025	$0	$0	Real Estate – Exemption	N/A-Revenue	Beall Carothers, Planning Design & Construction	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
R1		Expense-Ratification	Mod #2 Congestive Heart Failure Program & Clinical Command Center Services Additions to Remote Patient Monitoring Program	Current Health	7/1/2021 - 6/30/2024	$574,600	$2,215,828	Sole Source Modification	Yes	Cynthia Hamilton, Information Technology	0%	N/A	N/A

Board Approval Request For Contracts Over $200,000

BOM Date: June 20, 2024	**Product or Service:** Claim Scrubber and Eligibility RTE (Real Time Eligibility)	
Business Owner: Kairon Francois, Kyle Cross	**Business Owner Dept:** Patient Financial Services	**Contract Number:** PONCS-23854
Vendor/Supplier/Contractor: Waystar, Inc.	**Source Selection Methodology:** Request for Proposals (Best Value)	**Fair and Reasonable Price Determination:** Adequate Competition

Revenue, Expense or Capital:

Revenue

	Contract Dates	Contract Price
Base Term:	Last Signature – 3 years	$1,559,020
Out Years:	2 Year(s)	+$1,118,857
Total:	Last Signature – 5 years	$2,677,877

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? 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? No
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): Gerry Baker, Senior Vice President, Revenue Cycle

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Claim Scrubber and Eligibility RTE (Real Time Eligibility)

VENDOR: Waystar, Inc.

COST:		
	Base Term:	$1,559,020
	Out Years:	+ $1,118,857
	Total:	$2,677,877

Recommendation
Approve this contract for Claim Scrubber and Eligibility RTE (Real Time Eligibility).

Background
Parkland is purchasing Eligibility RTE (Real Time Eligibility) services as well as Claim Scrubbing and cleaning house capabilities. These services are needed because Eligibility RTE allows practices to check insurance eligibility and benefits in real time. This will assist in increasing the amount and accuracy of patient collections at the time of service. The Cyber-attack on Change Healthcare which took place on February 21 prevented Parkland from having the capability to do real time eligibility checks on patients. This also impacted the clearing house capabilities which were completely down, and Parkland was unable to submit claims to payers. Parkland has $18M of unapplied payments and needs to find a new vendor to cover these two functions.

Fair and Reasonable Price Determination
Proposals to an open-bid solicitation were received and reviewed by a Parkland Evaluation Team. During the consensus meeting, the Evaluation Team selected the best value and experienced vendor for the award. No presentations were requested.

A fair and reasonable price was determined through adequate competition.

Competitive Range				
Vendor	**Key Strengths**	**Key Weaknesses**	**Non-Cost Score**	**Price Differential**
Waystar, Inc.	- Demonstrates relative experience with large organizations. - Strong references and they are local and they are like size with Parkland. They are also strong Epic facilities. - User friendly rejections messages is a plus for the billers, we have been struggling to create layman's terms rejection cheat		60	$0

	sheets for the billers using the Change system. - Does work with Medicaid and Medicaid and HMO. Did provide a list of other payers they work with. - Size and scope of customers would be more aligned with Parkland. - Does provide some additional services which would be beneficial to the organization. - Communication to CSM and support team regarding any delays.			
Vendor B		- No indication of experience with organization such as Parkland for Claims Scrubber/Clearinghouse services. - Details were not provided. - Past history at Parkland of some issues with payors not listed. - Need more details to be sure that we can get to that data and our people who need it have access to it. - Vague	44.41	$889,097.75

Waystar was the highest technically rated and the lowest price.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	FY2028	Totals
Expenses	$504,390	$519,522	$535,108			$1,559,020
Out Years	**FY2024**	**FY2025**	**FY2026**	**FY2027**	**FY2028**	**Totals**
Expenses				$551,161	$567,696	$1,118,857
Totals	$504,390	$519,522	$535,108	$551,161	$567,696	$2,677,877

Document Contact/Author:	Baruh Bosch

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 8 Group Purchasing Organization Two Year Extension with One Year Renewal Option	
Business Owner: Pam Bryant	**Business Owner Dept:** Supply Chain/Contracts	**Contract Number:** PONCS-18087 A6
Vendor/Supplier: Vizient **Basis of Original Contract Award** Request for Proposals (Best Value) **Basis of this Modification** Non-Sole Source Modification	BOM Approved Contract Total (6/28/2022)	$19,220,410
	Modification # 7 Amount:	$25,540
Revenue, Expense or Capital: Expense	Modification # 8 Amount: (Extension Yr3 $881,704)	$2,593,728
Original Start Date: 7/1/2017 **Current Expiration:** 6/30/2024 **Mod Start Date:** 7/1/2024 **Expiration after this Mod:** 6/30/2027	New Contract Amount:	$21,839,678

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	Yes; and IT approved
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): Pam Bryant, Senior Vice President, Chief Supply Chain Officer

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Mod # 8 Group Purchasing Organization Two Year Extension with One Year Renewal Option

VENDOR: Vizient

COST:

BOM Approved Contract Total (6/28/2022)	$19,220,410
Modification # 7:	$25,540
Modification # 8:	+ $2,593,728
Total:	$21,839,678

Recommendation
Approve this contract modification to Group Purchasing Organization Two Year Extension with One Year Renewal Option.

Background
Parkland's currently contracted Group Purchasing Organization ("GPO") is Vizient. Vizient competitively awards numerous contracts for hospital wide items including medical and surgical supplies, equipment, and services that Parkland may access directly. Parkland realizes about $4M annually from patronage as a result of the Vizient GPO relationship. Parkland also accesses and uses numerous tools provided by Vizient to increase and assist hospital operations.

Fair and Reasonable Price Determination
The overall pricing for the additional two years is consistent when compared to the current pricing.

Financial Forecast

Current Contract Amount	FY2023	FY2024	FY2025	FY2026	FY2027	Total
$19,220,410	$25,540	$216,144	$864,576	$864,576	$648,432	$21,839,678

Document Contact/Author:	Terence Durham

Board Approval Request For Contracts Over $200,000

BOM Date: June 20, 2024	**Product or Service:** Hospice Care Services	
Business Owner: Umber Dickerson	**Business Owner Dept:** Palliative Care	**Contract Number:** PPPS-24465, PPPS-24469, PPPS-24470
Vendor/Supplier/Contractor: Forefront Living Hospice, Pathway Hospice, LLC, & The Visiting Nurse Association of Texas	**Source Selection Methodology:** Request for Proposals (Best Value)	**Fair and Reasonable Price Determination:** Adequate Competition

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	7/1/2024 – 6/30/2027	$570,000
Out Years:	2 Year(s)	+$380,000
Total:	7/1/2024 – 6/30/2029	$950,000

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? 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, but supplier diversity received their corporate plan.
Were M/WBE's Directly Solicited? None available, per Supplier Diversity
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): Francesco Mainetti, VP Transformational Initiative, Operations Administration

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Hospice Care Services

VENDOR: Forefront Living Hospice, Pathway Hospice, LLC, & The Visiting Nurse Association of Texas

COST:

Base Term:	$570,000
Out Years:	+ $380,000
Total:	$950,000

Recommendation
Approve this contract for Hospice Care Services.

Background
The District released a request for proposal "RFP" for multi-level Hospice Care Service that includes Outpatient Routine Hospice Homecare, Outpatient Continuous Hospice Care, Inpatient Hospice Care, and Inpatient Hospice Respite Care. These hospice care services will be used for patients when no further curative or life-prolonging therapy is available as determined by District's Physician or based on the request of a patient or family member.

Fair and Reasonable Price Determination
A fair and reasonable price was determined through adequate competition.

Competitive Range				
Vendor	**Key Strengths**	**Key Weaknesses**	**Non-Cost Score**	**Price Differential**
Pathway Hospice, LLC			216	$1,252
The Visiting Nurse Association of Texas			212	$1,290
Forefront Living Hospice			205	$0
Vendor D		Vendor didn't clearly outline what their documentation for services rendered within seven (7) days as requested. Vendor's processes for admission are for their staffing for respite, not hospice respite. Vendor's response to past performance was not relevant to the services of the RFP.	125	$3,755

Pathway Hospice, LLC, The Visiting Nurse Association of Texas, and Forefront Living Hospice were chosen as the best value to Parkland based on a cost/technical tradeoff of price and non-price factors.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	FY2028	FY2029	Totals
Expenses / Consumables	$47,500	$190,000	$190,000	$142,500			$570,000
Out Years	**FY2024**	**FY2025**	**FY2026**	**FY2027**	**FY2028**	**FY2029**	**Totals**
Expenses / Consumables				$47,500	$190,000	$142,500	$380,000
Grand Totals	**$47,500**	**$190,000**	**$190,000**	**$142,500**	**$190,000**	**$142,500**	**$950,000**

Document Contact/Author:	Terence Durham

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 3 Purchase and installation of new and/or upgraded cameras at various locations	
Business Owner: Bruce McDaniels / Joe Longo	**Business Owner Dept:** Information Technologies	**Contract Number:** POIT-22098 A3
Vendor/Supplier: Siemens Industry, Inc. **Basis of Original Contract Award** GPO Purchase **Basis of this Modification** Non-Sole Source Modification	BOM Approved Contract Total (6/28/2023):	$924,160
	Modifications Totaling < $100,000 Modification 2 Amount:	$5,732
Revenue, Expense or Capital: Capital	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification 3 Amount:	$596,564
Original Start Date: 2/23/2023 **Current Expiration:** 2/22/2028 **Mod Start Date:** Last Signature **Expiration after this Mod:** 1 year	New Contract Amount:	$1,526,456

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	Yes; and IT approved
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): Joe Longo, Senior Vice President & Chief Information Officer

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 3 Purchase and installation of new and/or upgraded cameras at various locations

VENDOR: Siemens Industry, Inc.

COST:

BOM Approved Contract Total (6/28/2023):	$924,160
Modification # 2:	$5,732
Modification # 3:	+ $596,564
Total:	$1,526,456

Recommendation
Approve this contract modification to Purchase and installation of new and/or upgraded cameras at various locations.

Background
This contract is to purchase security cameras to maintain physical security at all facilities. Most devices have exceeded the expected lifespan (and firmware support) of 5 years and security risks increase each year that the devices are used beyond the intended expectancy. A 4-year plan has been established to replace/install/upgrade existing video surveillance throughout the enterprise. This is the 3rd phase of this 4-year plan.

Fair and Reasonable Price Determination
The Government Services Administration (GSA) contract and pricing was obtained in a solicitation process performed by GSA. Market research conducted through ECRI notes that our prices are consistent with that which has been previously quoted. ECRI is a reputable, private benchmarking firm that collects pricing data covering numerous medical services and products.

Financial Forecast

Current Contract Amount	FY2024	Total
$924,160	$602,296	$1,526,456

Document Contact/Author:	Farrah Smith

Parkland

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 1 Contract extension and adding funds	
Business Owner: Sarah Blacketer/Scott Hampton	**Business Owner Dept:** Anatomic Pathology	**Contract Number:** POCP-19616
Vendor/Supplier: Cancer Diagnostics Inc. **Basis of Original Contract Award** Request for Proposals (Low Price/Tech Accept) **Basis of this Modification** Sole Source Modification	Current Contract Amount:	$186,540
Revenue, Expense or Capital: Expense	Modification # 1 Amount:	$139,000
Original Start Date: 7/1/2021 **Current Expiration:** 6/30/2024 **Mod Start Date:** 7/1/2024 **Expiration after this Mod:** 6/30/2025	New Contract Amount:	$325,540

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): Jenni Burnes, VP, Ancillary Services, Operations Administration

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 1 Contract extension and adding funds

VENDOR: Cancer Diagnostics Inc.

COST:		
	Current Contract Amount:	$186,540
	Modification # 1:	+ $139,000
	Total:	$325,540

Recommendation
Approve this contract modification to Contract extension and adding funds.

Background
This contract is to renew our Histology and Anatomic Pathology antibodies, dyes, blades, and slides through Cancer Diagnostics. These slides and accessories are compatible with Parkland owned Slidemate printers in the laboratory, and antibodies are compatible with current IHC instruments.

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 remains below average pricing compared to 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
$186,540	$34,750	$104,250	$325,540

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. Slides are compatible with current slide printers in the laboratory and antibodies are compatible with current IHC instruments.

Document Contact/Author:	Tamisha Smallwood

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 2 Remote Patient Monitoring Software and Hardware Lease Agreement	
Business Owner: Cynthia Hamilton	**Business Owner Dept:** Information Technology	**Contract Number:** POIT-19724 A3
Vendor/Supplier: Current Health **Basis of Original Contract Award** Request for Proposals (Best Value) **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (06/20/2021):	$2,215,828
Revenue, Expense or Capital: Expense	Modification # 2 Amount:	$4,845,805
Original Start Date: 7/1/2021 **Current Expiration:** 6/30/2024 **Mod Start Date:** 7/1/2024 **Expiration after this Mod:** 6/30/2027	New Contract Amount:	$7,061,633

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	Yes; and IT approved
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): Joe Longo, Senior Vice President & Chief Information Officer

DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 2 Remote Patient Monitoring Software and Hardware Lease Agreement

VENDOR: Current Health

COST:

BOM Approved Contract Total (06/20/2021):	$2,215,828
Modification # 2:	+ $4,845,805
Total:	$7,061,633

Recommendation
Approve this contract modification to Remote Patient Monitoring Software and Hardware Lease Agreement .

Background
This contract provides supplies (tablets, charges and varying vital signs devices which make up the Kits) used in the remote patient monitoring (RPM) program.

RPM includes software licenses and Kits that provide remote tracking and trending of specific vital signs for enrolled patients. This allows outreach and optimization of the plan of care between follow-up appointments and leads to improved patient outcomes and ED utilization avoidance. The Hospital at Home (H@H) program provides low-acuity inpatient care to patients in the comfort of their home and opens hospital beds for higher-acuity patients.

Fair and Reasonable Price Determination
The original award was based on a Request for Proposal (Best Value).

Financial Forecast

Current Contract Amount	FY2023	FY2024	FY2025	FY2026	FY2027	Total
$2,215,828	$131,535	$1,022,520	$1,287,425	$1,619,825	$784,500	$7,061,633

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.

Document Contact/Author:	Andrew Barter

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 1 Employee Group Life Insurance Coverage	
Business Owner: Dr. DeLancey Johnson	**Business Owner Dept:** Total Rewards	**Contract Number:** HR-23152 A1
Vendor/Supplier: Securian Financial (assumption of Minnesota Life contract) **Basis of Original Contract Award** Request for Qualifications **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (09/24/2019):	$10,969,592
Revenue, Expense or Capital: Expense	Modification # 1 Amount:	$4,256,815
Original Start Date: 1/1/2020 **Current Expiration:** 12/31/2024 **Mod Start Date:** 1/1/2025 **Expiration after this Mod:** 12/31/2029	New Contract Amount:	$15,226,407

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): Felicia Miller, Executive Vice President & Chief Talent Officer

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: Mod # 1 Employee Group Life Insurance Coverage

VENDOR: Securian Financial (assumption of Minnesota Life contract)

COST:

BOM Approved Contract Total (09/24/2019):	$10,969,592
Modification # 1:	+ $4,256,815
Total:	$15,226,407

Recommendation
Approve this contract modification for Employee Group Life Insurance Coverage.

Background
The vendor provides life insurance coverage to all District employees as an employer benefit and employees and their spouses may select Supplemental Live coverage as an employee optional benefit.

Fair and Reasonable Price Determination
The pricing for this extension has not changed.

Financial Forecast

Current Contract Amount	FY2024	FY2025	FY2026	FY2027	FY2028	Total
$10,969,592	$851,363	$851,363	$851,363	$851,363	$851,363	$15,226,407

Sole Source Justification
The extension of the contract at this time has been determined to be in the best interests of the District.

Document Contact/Author:	James Floyd

Board Approval Request For Contracts Over $200,000

BOM Date: June 20, 2024	**Product or Service:** STIMULAN Rapid Cure	
Business Owner: Cheston Chan	**Business Owner Dept:** Perioperative Services Administration	**Contract Number:** POCP-24346
Vendor/Supplier/Contractor: Biocomposites	**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-Years	$525,000
Out Years:	2 Year(s)	+$350,000
Total:	Last Signature – 5-Years	$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, 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: STIMULAN Rapid Cure

VENDOR: Biocomposites

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

Recommendation
Approve this contract for STIMULAN Rapid Cure.

Background
This contract is for the purchase of synthetic bone substitute used to fill skeletal system defects, including infected sites. This product is requested for Ortho Trauma and Plastics Hand Service lines. This was requested by the Surgical Value Analysis Committee.

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 average as compared to 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**	**FY2029**	**Totals**
Expenses / Consumables	$58,333	$175,000	$175,000	$116,667			$525,000
Out Years	**FY2024**	**FY2025**	**FY2026**	**FY2027**	**FY2028**	**FY2029**	**Totals**
Expenses / Consumables				$58,333	$175,000	$116,667	$350,000
Grand Totals	**$58,333**	**$175,000**	**$175,000**	**$175,000**	**$175,000**	**$116,667**	**$875,000**

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:	Bryson Hendrix

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 2 FY24 Master Services Agreement	
Business Owner: April Audain	**Business Owner Dept:** UT Contracts Administration	**Contract Number:** POCS-23606 A2
Vendor/Supplier: The University of Texas Southwestern Medical Center **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	BOM Approved Contract Total (9/27/23):	$274,556,487
	Modifications Totaling < $100,000 Modification # 1 Amount:	$0
Revenue, Expense or Capital: Expense	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification # 2 Amount:	$500,000
Original Start Date: 10/1/2023 **Current Expiration:** 9/30/2024 **Mod Start Date:** 10/1/2023 **Expiration after this Mod:** 9/30/2024	New Contract Amount:	$275,056,487

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): April Audain, Vice President, UT Contracts Administration

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Mod # 2 FY24 Master Services Agreement

VENDOR: The University of Texas Southwestern Medical Center

COST:

BOM Approved Contract Total (9/27/23):	$274,556,487
Modification # 1:	$0
Modification # 2:	+ $500,000
Total:	$275,056,487

Recommendation
Approve this contract modification for FY24 Master Services Agreement.

Background
UTSW personnel in Parkland's Obstetrics Service (OB) assess clinical outcomes, identify opportunities to improve those outcomes and study ways to deliver cost-effective, value-driven care. This amendment memorializes Parkland's agreement to reimburse UTSW for its services provided in FY24 in the amount of $500,000. This $500,000 is Foundation funded. In addition to its services in the NICU and OB Service, UTSW will provide Parkland with annual reports of projects and publications as well as an explanation of the benefits to Parkland's patients of UTSW's work under this amendment, and attribution in any publications using information collected during the arrangement.

Breast Imaging patients with a Payor Name of SAR Radiology Foundation Grant and Benefit Plan Name of SAR Breast Health Donor Fund will be a payable payor plan through the MSA. This amendment memorializes Parkland's agreement to reimburse UTSW for these specific services provided in FY24 based on Medicare rates and is now incorporated in the MSA agreement.

Fair and Reasonable Price Determination
The fair market value (FMV) for these services is evaluated on an annual basis by an external third-party identified through Parkland's vendor selection process in accordance with institutional policies & procedures and regulatory requirements. Funds are budgeted to cover the expense of this contract.

Financial Forecast

Current Contract Amount	FY2024	Total
$274,556,487	$500,000	$275,056,487

Sole Source Justification
This contract is for a good or service for which it is impractical to obtain competition. The contract is an Interlocal Agreement which is between local government entities or political subdivisions of the state of Texas to carry out a governmental purpose. Examples are contracts with UT, the City of Dallas, Dallas County, etc. that serve our governmental purpose of providing care to the indigent. The government entity for this contract is the University of Texas Southwestern Medical Center.

Document Contact/Author:	April Audain

Parkland

Board Approval Request For Contracts Over $200,000

BOM Date: June 20, 2024	**Product or Service:** Licensed Training Provider Agreement	
Business Owner: Theresa Kaplan	**Business Owner Dept:** Clinical Education	**Contract Number:** PONCS-23917
Vendor/Supplier/Contractor: The American Red Cross	**Source Selection Methodology:** Sole Source	**Fair and Reasonable Price Determination:** Published Catalog Price

Revenue, Expense or Capital:

Expense

	Contract Dates	Contract Price
Base Term:	7/1/2024 – 6/30/2027	$491,361
Out Years:	0 Year(s)	+$0
Total:	7/1/2024 – 6/30/2027	$491,361

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:	This is a sole source contract.
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): Donna Richardson, Executive Vice President, Chief Nursing Executive

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Licensed Training Provider Agreement

VENDOR: The American Red Cross

COST:		
	Base Term:	$491,361
	Out Years:	+ $0
	Total:	$491,361

Recommendation
Approve this contract for a Licensed Training Provider Agreement for Clinical Education.

Background
This contract is to purchase a licensing agreement to provide Parkland Staff certified as Red Cross Instructors all the content and materials required to teach and certify participants in Red Cross resuscitation courses. Included in this Agreement is the online portion of the blended learning class and the in-person skill session required for certification along with courses taught in the all-instructor led format. The agreement also allows Parkland Staff certified as Red Cross instructors to teach and certify staff internally along with allowing Parkland Staff certified as Red Cross Instructors to teach and certify people in the community.

The Course Licensing Program simplifies and streamlines training and makes administration easier and more efficient by providing Red Cross training (the online content/portion of the blended learning classes) directly on Parkland Health's internal learning management system (LMS).

In addition this content is available to all Parkland Health employees regardless of their role, i.e. clinical vs non-clinical.

Fair and Reasonable Price Determination
This is a sole source. There was no competition since Red Cross is the creator of the content.

Financial Forecast

Base Term	FY2024	FY2025	FY2026	FY2027	Totals
Expenses / Consumables	$40,947	$163,787	$163,787	$122,840	$491,361

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 American Red Cross is the sole creator. This training is required by Parkland, and it meets or exceeds Joint Commission standards.

Document Contact/Author:	Theresa Isenhour

Parkland

Board Approval Request For Modification to Contract or Funding

BOM Date: June 20, 2024	**Modification:** Mod # 3 Benchmark Ventana H&E 600 Stainer	
Business Owner: Sara Blacketer	**Business Owner Dept:** Anatomic Pathology	**Contract Number:** POCP-20332 A3
Vendor/Supplier: Roche Diagnostics Corporation **Basis of Original Contract Award** Sole Source **Basis of this Modification** Sole Source Modification	Current Contract Amount:	$124,105
	Modifications Totaling < $100,000 Modification # 1 Amount: Modification # 2 Amount:	 $8,720 $62,597
Revenue, Expense or Capital: Capital	Modification that increases contract value to $100,000 more than BOM Approved Contract Total Modification # 3 Amount:	 $304,620
Original Start Date: 11/29/2021 **Current Expiration:** 11/28/2026 **Mod Start Date:** 6/21/2024 **Expiration after this Mod:** 6/20/2029	New Contract Amount:	$500,042

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): Jenni Burnes, VP, Ancillary Services, Operations Administration

DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Mod # 3 Benchmark Ventana H&E 600 Stainer

VENDOR: Roche Diagnostics Corporation

COST:

Current Contract Amount:	$124,105
Modification # 1:	$8,720
Modification # 2:	$62,597
Modification # 3:	+ $304,620
Total:	$500,042

Recommendation

Approve this contract modification for Benchmark Ventana H&E 600 Stainer.

Background

This contract is to replace the two existing hematoxylin and eosin (H&E) stainers that have reached end of life. Service is still supported but parts are not guaranteed. The lab uses these instruments in order for pathologists to issue results. The H&E stainers are the first test performed on all patient tissue samples submitted to the Anatomic Pathology Lab. It allows for Pathologists to begin their assessment of the tissue removed from the patients and begin their individualize treatment plans. The lab requires 2 stainers to manage the high volume through-put and maintain turn-around time.

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 20% 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	FY2022	FY2023	FY2024	Total
$124,105	$8,720	$62,597	$304,620	$500,042

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 H&E 600 from Roche offers a unique direct to drain feature that would allow reagents to be disposed of safely down the drain instead of laboratory staff having to empty hazardous chemicals daily into hazardous waste containers.

Document Contact/Author:	Kimberly Bell

Board Approval Request For Contracts Over $200,000

BOM Date: June 20, 2024	**Product or Service:** MY01 Compartment Syndrome Continuous Monitoring	
Business Owner: Cheston Chan	**Business Owner Dept:** Perioperative Services Administration	**Contract Number:** POCP-24349
Vendor/Supplier/Contractor: MY01	**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 Years	$240,000
Out Years:	0 Year(s)	+$0
Total:	Last Signature – 3 Years	$240,000

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): David Alexander, Senior Vice President, Nursing

Parkland

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

SUBJECT: MY01 Compartment Syndrome Continuous Monitoring

VENDOR: MY01

COST:		
	Base Term:	$240,000
	Out Years:	+ $0
	Total:	$240,000

Recommendation
Approve this contract for MY01 Compartment Syndrome Continuous Monitoring.

Background
This contract is for the purchase of Continuous Monitoring devices for detection of Acute Compartment Syndrome (ACS), which is a major limb-threatening muscle complication. The device provides reliable pressure data when monitoring for ACS.

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 9% 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	Totals
Expenses / Consumables	$33,333	$80,000	$80,000	$46,667	$240,000

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 and is the only device that reads data for 18-24 hours continuously for ACS.

Document Contact/Author:	Bryson Hendrix

Parkland

Approved Deviation Request New Contract

Must be approved before: June 6, 2024	**Reason for deviation request:** Effective date of the new sublease agreement, naming the new operator of the facility has an effective date of 7-1-24

BOM Date: June 20, 2024	**Product or Service:** The Plaza at Richardson Sublease	
Business Owner: Beall Carothers	**Business Owner Dept:** Planning Design & Construction	**Contract Number:** TBD
Vendor/Supplier/Contractor: Richardson Enterprises I, LLC	**Source Selection Methodology:** Real Estate – Exemption	**Fair and Reasonable Price Determination:** Market Price

Revenue, Expense or Capital:

Revenue: Court Approval-Approved Deviation

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

Lowest Bidder

Is this contractor the lowest bidder/supplier? N/A-Real Estate
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? N/A-Revenue
FTE Impact: None

Diversity

Potential for M/WBE engagement: N/A-Real Estate
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): Geoffrey Camp, VP, Operations Support, Operations Administration

Request: Authorize the appropriate Contracting Officer to execute this contract with the stipulation that it will be presented to the Parkland Board of Managers for approval at the next regularly scheduled meeting.

Fred Cerise
Fred Cerise (Jun 6, 2024 17:10 CDT)
Dr. Fred Cerise, President & CEO **Date:** Jun 6, 2024

RFMA
RFMA (Jun 7, 2024 14:48 CDT)
Chair Finance Committee **Date:**

DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: The Plaza at Richardson Sublease

VENDOR: Richardson Enterprises I, LLC

COST:

Base Term:	$0
Out Years:	+ $0
Total:	$0

Recommendation
Approve this contract for The Plaza at Richardson Sublease.

Approved Deviation Reason
Effective date of the new sublease agreement, naming the new operator of the facility has an effective date of 7-1-24.

Background
This is a Quality Incentive Payment Program (QIPP) nursing facility sublease transaction like other QIPP sublease agreements and was initially approved by the Parkland Board of Managers and Commissioners Court. A new sublease will be entered into as a part of the change of managers from a Gulf Coast LTC Partners entity to Richardson I Enterprises, LLC, a Creative Solutions In Healthcare entity. There will be no material change in Parkland's obligations under the new sublease.

Under the terms of the sublease agreement, it should be noted that the agreement is structured to automatically renew on an annual basis on 9/1/2025, unless terminated by either party. The parties have the right to terminate the agreement with or without cause by providing a minimum of 60 days written notice (without cause) and 30 days (with cause).

For the purposes of this document, the sublease term is contemplated to commence upon execution by the parties with an expiration of August 31, 2025, continuing a yearly basis thereafter unless terminated per the terms of the agreement.

Fair and Reasonable Price Determination
All rental payments are the responsibility of the Management Company per the terms of the separate Management Agreement.

Financial Forecast

Base Term	All Years
Base Rental Payments	$0

Sole Source Justification
N/A – Real Estate Exemption

Document Contact/Author:	Beall Carothers, Director, Real Estate Development

Monthly Ratification Report

Require Board Approval

Contract Date	Contract Number	Vendor Name	Description	Amount	Cost Center Number	Department
7/1/2024	POIT-19724 A2 & A3	Current Health	Congestive Heart Failure Program & Clinical Command Center Services Additions to Remote Patient Monitoring Program	$2,215,828	85000	IT-IT Administration

CEO Approval

Fred Cerise

Fred Cerise (Jun 6, 2024 17:18 CDT)

Dr. Fred Cerise

Jun 6, 2024

Date

Item R1

Ratification Request Contract Modification

BOM Date: June 20, 2024	**Modification:** Mod # 2 Congestive Heart Failure Program & Clinical Command Center Services Additions to Remote Patient Monitoring Program	
Business Owner: Cynthia Hamilton	**Business Owner Dept:** Information Technology	**Contract Number:** POIT-19724 A2 & A3
Vendor/Supplier: Current Health **Basis of Original Contract Award** Request for Proposals (Best Value) **Basis of this Modification** Sole Source Modification	Aggregate amount last approved by the BOM (6/20/2021):	$1,641,228
Revenue, Expense or Capital: Expense-Ratification	Amount to be Ratified:	$574,600
Original Start Date: 7/1/2021 **Current Expiration:** 6/30/2024 **Mod Start Date:** 7/1/2024 **Expiration after this Mod:** 6/30/2024	New Contract Amount:	$2,215,828

Approvals

Has the final modification been approved by Legal for legal sufficiency?	Yes
Does this modification have an IT Component?	Yes; and IT approved
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): Joe Longo, Senior Vice President & Chief Information Officer

DALLAS COUNTY HOSPITAL DISTRICT
PARKLAND HEALTH BOARD BRIEFING DOCUMENT

Parkland

SUBJECT: Mod # 2 Congestive Heart Failure Program & Clinical Command Center Services Additions to Remote Patient Monitoring Program

VENDOR: Current Health

COST:

Aggregate amount last approved by the BOM (6/20/2021):	$1,641,228
Amount to be Ratified	+ $574,600
Total:	$2,215,828

Recommendation

Approve this contract modification to Congestive Heart Failure Program & Clinical Command Center Services Additions to Remote Patient Monitoring Program.

Ratification Reason

This Ratification for $574,600 includes $102,080 from a previous purchase and $472,520 for services. The previous purchase to add $102,080 was understood to be extension of existing software licenses. After review of the new requirement for renewals and changes to the contract it was determined that the $102,080 was for products only and should have been sent to the Board for approval. The request to add $472,520 is to cover the cost of Current Health's Clinical Command Center (CCC) monitoring services which were utilized by the operational units. These services were noted as optional in the contract with pricing but were not funded on the contract. The services have been brought inhouse so no further costs will be incurred and the CCC services have been terminated.

Background

This contract provides supplies (tablets, charges and varying vital signs devices which make up the Kits) used in the remote patient monitoring (RPM) program.

RPM includes software licenses and Kits that provide remote tracking and trending of specific vital signs for enrolled patients, which allows outreach and optimization of the plan of care between follow-up appointments and leads to improved patient outcomes and ED utilization avoidance. The Hospital at Home (H@H) program provides low-acuity inpatient care to patients in the comfort of their home and opens hospital beds for higher-acuity patients.

The CCC monitoring services were described and priced out as optional in Exhibit A-1 to the License and Services Agreement (POIT-19724A1 BOM Mod # 1). However, they were not funded on the contract. HaH patients must be monitored. The using department decided to utilize the CCC monitoring services while they worked on getting their own monitoring program in place. Parkland now has our own staff and program in place for these monitoring services, so the CCC services were no longer required as of April 15, 2024.

Fair and Reasonable Price Determination

The original award was based on a Request for Proposal (Best Value).

Financial Forecast

Current Contract Amount	FY2024	Total
$1,641,228	$574,600	$2,215,828

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. Current Health was awarded the Remote Patient Monitoring contract for virtual care through the Request for Proposal process. Hospital at Home and Chronic Condition Management Programs, both of which are considered Remote Patient Monitoring, were added later.

Document Contact/Author:	Andrew Barter

CONTRACT RESOLUTION
Board of Managers
June 20, 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
			Revenue	Claim Scrubber and Eligibility RTE (Real Time	Waystar, Inc.	Last Signature - 5 years	$2,677,877	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Mod #8 Group Purchasing Organization Two Ye	Vizient	7/1/2017 - 6/30/2027	$21,839,678	Yes
			Expense	Hospice Care Services	Forefront Living Hospice, Pathway Hospice, LLC, & The Visiti	7/1/2024 - 6/30/2029	$950,000	Yes
			Capital	Mod #3 Purchase and installation of new and/or	Siemens Industry, Inc.	2/23/2023 - 1 year	$1,526,456	Yes
			Expense	Mod #1 Contract extension and adding funds	Cancer Diagnostics Inc.	7/1/2021 - 6/30/2025	$325,540	Yes
			Expense	Mod #2 Remote Patient Monitoring Software and	Current Health	7/1/2021 - 6/30/2027	$7,061,633	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Mod #1 Employee Group Life Insurance Coverag	Securian Financial (assumption of Minnesota Life contract)	1/1/2020 - 12/31/2029	$15,226,407	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	STIMULAN Rapid Cure	Biocomposites	Last Signature - 5 Years	$875,000	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Mod #2 FY24 Master Services Agreement	The University of Texas Southwestern Medical Center	10/1/2023 - 9/30/2024	$275,056,487	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Expense	Licensed Training Provider Agreement	The American Red Cross	7/1/2024 - 6/30/2027	$491,361	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Capital	Mod #3 Benchmark Ventana H&E 600 Stainer	Roche Diagnostics Corporation	11/29/2021 - 6/20/2029	$500,042	Yes
			Expense	MY01 Compartment Syndrome Continuous Mon	MY01	Last Signature - 3 Years	$240,000	Yes, for the current fiscal year. Additional years costs will be budgeted in the appropriate fiscal year budgets.
			Revenue: Court Approval-Approved	The Plaza at Richardson Sublease	Richardson Enterprises I, LLC	7/1/2024 - 8/31/2025	$0	N/A-Revenue
			Expense-Ratification	Mod #2 Congestive Heart Failure Program & Cli	Current Health	7/1/2021 - 6/30/2024	$2,215,828	Yes

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

Dated this 20th of June 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 June 2024 Board Meeting

Ref #	Division	Project Total	Substitution Amount	Description
1	Facilities	$1,137,672	$1,137,672	**Elevator Destination Dispatch Screens**
	Explanation	Our current elevator kiosk dispatching system fixture has been discontinued and all related spare parts have also been permanently discontinued from production. The lack of available parts has resulted in numerous failures of our elevator kiosk dispatching system. Elevators in the main hospital and the WISH clinic building are impacted. This submission requests to replace 170 destination dispatch screens.		
	Driver(s) of Increased Expense:	Production discontinuation of the current elevator kiosk dispatching system and related components		
	Description of Item:	Elevator destination dispatch screens		
2	Laboratory Services	$272,110	$272,110	**Blood Irradiator**
	Explanation	The blood irradiator provides radiation to blood products to prevent the spread of white blood cells, which could cause "graft vs. host" disease in immunocompromised patients. The current blood irradiator (9 years old) has been experiencing more frequent failures over the past year. Each time the irradiator malfunctions, we incur additional expenses by purchasing irradiated blood from our supplier and repair costs. There have also been delays in patient care due to the unavailability of irradiated blood.		
	Driver(s) of Increased Expense:	malfunctioning equipment		
	Description of Item:	Blood irradiator: used to provide radiation to blood products to prevent the spread of white blood cells		
	Grand Total	**$1,409,782**	**$1,409,782**	

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 $1,409,782 for FY24 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 CLINOPS.PC.001 Guidelines for Triage and Provision of the Medical Screening Exam

CLINOPS.PC.001 Guidelines for Triage and Provision of the Medical Screening Examination (MSE)

Policy

- The policy outlines guidelines for triaging patients using the Emergency Severity Index[1] at Parkland's various emergency services to ensure accurate and consistent care.

Requirements regarding this document are found in:

- The Joint Commission
- CMS Conditions of Participation

Background:

- Last published 10/29/22.
- Non-substantive changes proposed to improve flow of information.
- Added definition of Workflow member

Reviews and approvals of this version:

- Shanna Choate, Nursing Procedure Specialist
- Nursing Operations Specialists
- Lydia DeJong, Director of Regulatory Affairs
- Brad Nitschke, Associate General Counsel
- Parkland Quality of Care & Patient Safety Committee (scheduled for 5/15/24)
- Board of Managers Quality of Care & Patient Safety Committee (scheduled for 5/22/24)
- Board of Managers (scheduled for 6/20/24)

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[1] The Emergency Severity Index (ESI) is a system used in emergency departments to categorize patients based on the urgency of their conditions and the number of resources needed for their care.

Guidelines for Triage and Provision of the Medical Screening Examination (MSE)	CLINOPS.PC.001	Published: 10/23/19
Clinical Operations		Page **1** of **8**

PURPOSE:

To establish consistent guidelines utilizing the Emergency Severity Index (ESI) acuity system for the triage of patients that present to the Parkland Health ~~& Hospital System~~ (Parkland~~) Main Emergency Department, Obstetric/Gynecologic Emergency Services (OGES), Urgent Care Emergency Center (UCEC), Psychiatric Emergency Department (PED), or Labor & Delivery Triage~~ for care.

These guidelines will result in an accurate and consistent system by which patients are receive a Medical Screening Exam (MS), receive stabilization if an emergency medical condition (EMC) exists, and are triaged to the appropriate area for care~~ and receive their medical screening examination and stabilization and treatment if an emergency medical condition exists~~.

SCOPE:

All Parkland Health ~~& Hospital System ("Parkland") facilities, including but not limited to hospitals, ambulatory surgery centers, clinics, and all corporate departments/divisions.~~Workforce members.

PROCEDURE:

1. Medical Screening Exams are performed for patients presenting to
   - A. The Main Emergency Department
   - B. Obstetric/Gynecologic Emergency Services (OGES)
   - C. Urgent Care Emergency Center (UCEC)
   - D. Psychiatric Emergency Department (PED)
   - E. Labor & Delivery Triage

~~1.~~2. Patients will be triaged to the appropriate area to provide them with optimal care.

DRAFT

A. Triage Documentation will include the following ~~which is located in the legal medical record:~~

1) Name of patient
2) Date of Arrival
3) Time of arrival
4) The patient's date of birth
5) Mode of arrival
6) Chief Complaint
7) Subjective and/or objective assessment that addresses the chief complaint ~~documented~~
8) Emergency Severity Index (ESI Level)
9) Initial set of Vital signs
10) Any interventions initiated at Triage

~~2.~~3. ESI Acuity Application Process:

A. Level One patient requires immediate lifesaving interventions.

1) Examples include but are not limited to: airway, emergency medications, or other hemodynamic intervention (IV, supplemental O2, monitor, ECG, or labs DO NOT count); and/ or any of the following clinical conditions: intubated, apneic, pulseless, severe respiratory distress, SPO2<90, acute mental status changes, or unresponsive (defined as a patient that is either nonverbal and not following commands acutely or requires noxious stimulus), Level one Trauma activation, intubations, and HazMat decontamination.

B. Level Two patients have a condition that may require immediate interventions.

1) Three broad questions to be asked to help determine whether the patient meets Level 2 criteria are: is this a high-risk situation, is the patient confused,

DRAFT

lethargic, or disoriented, and is the patient in severe pain or distress? Examples include but are not limited to: chest pain, level 2 trauma activation, and any patient meeting rapid physician evaluation criteria. Any patient meeting Level 3 score with abnormal vital signs should be considered for up triage to Level 2 acuity.

C. Level Three patients may require many different resources (see table below). Consider up triage to ESI Level 2 if any vital signs criterion is exceeded.

D. Level Four patients are stable but may require one resource (see table below).

E. Level Five patients are stable with no resources required for their care (see table below).

F. Resource prediction is an important part of the ESI for patients identified as Level 3, 4, or 5. Resource allocation is only used for less acute patients. Assignment of ESI level 3, 4, or 5 are decided by assessing both acuity and predicting resource needs. See table in Addendum to identify resources for the ESI triage system.

~~3.~~4. Laboring Patient

A. Laboring patients of all ages 20 weeks' and above gestation will be directly escorted to the Labor & Delivery area for triage and evaluation.

~~4.~~5. Patient Population

A. The Main Emergency Department, OGES, Urgent Care Emergency Center (UCEC), Psychiatric Emergency Department (PED), or Labor & Delivery Triage determines the appropriate treatment location for the evaluation of and provides care to all patient populations ~~as outlined below in Section VII~~.

B. Pediatric Patients: In order to provide the best alternative for care to the pediatric patient that presents to the Main Emergency Department, OGES, Urgent Care Emergency Center, and/or Labor & Delivery Triage, the option of transfer/transport to an appropriate care facility will be presented to the patient's guardian.

DRAFT

C. A ~~medical screening exam~~Medical Screening Examination (and treatment and stabilization as needed for identified emergency medical condition) will be performed on all patients prior to transfer to the appropriate care facility.

D. A ~~memorandum of transfer~~Memorandum of Transfer will be completed on all patients transferred to another appropriate acute care facility.

~~5.~~6. Areas Of Emergency Care Delivery

A. Main Emergency Department

1) All burn patients regardless of age

2) All patients with medical complaints; however, pediatric patients may be transferred to another appropriate care facility as described above in Section VI.

3) All patients received from juvenile care centers, regardless of age

4) Trauma patients age 14 and older

B. Labor & Delivery Triage

1) Females 20 weeks' and above gestation for any complaint EXCEPT trauma less than 96 hours old and ESI ≤2

2) All pregnant asthma patients of any gestational age

C. Obstetric/Gynecologic Emergency Services (OGES)

1) Gynecological chief complaint after age of menarche

a) Without traumatic injuries <96 hours old

2) Pregnant patients less than 20 weeks gestation

3) Alleged sexual assault on female patients age 13 and older

4) Females presenting with abdominal pain below the umbilicus

DRAFT

5) Gynecological oncology patients with any complaint, unless they have an ESI 1 or vital signs outside of established parameters below

6) Vaginal bleeding

7) Vaginal discharge

8) Vaginal/perineal sores in the female patients

9) Postpartum complaints: status post vaginal delivery or cesarean section within 6 weeks

10) No general rashes

11) All patients must have vital signs within the following parameters:

   a) Systolic B/P >90

   b) Diastolic B/P <130

   c) Pulse >60 and <130

   d) Patients with vital signs outside of above noted parameters may be sent to the Main Emergency Department for care.

   e) All non-obstetric patients with blood sugars >400 will be sent to Main ED for care

D. Psychiatric Emergency Department (PED) Intake Area

1) Adult patients (18 or greater) presenting with law enforcement under emergency detention or mental illness warrant

2) Voluntary adult patients who present to the ED with a psychiatric chief complaint/no medical complaint.

E. Urgent Care Emergency Center (UCEC)

1) Patients being treated in the UCEC will meet established criteria.

DRAFT

2) ESI Level 3 with vital signs within the pre-determined parameters may also be treated in the UCEC.

~~6.~~7. During emergencies or disasters, Parkland may be operating under allowances of an 1135 Wavier from CMS. See the Parkland Emergency Operations Plan Annex JJ: 1135 Waiver Procedure for details.

EQUIPMENT:

N/A

DEFINITIONS:

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:

Condition of participation, Special Responsibilities of Medicare Hospitals in emergency cases, 42 C.F.R. §489.24(a), (2013).

DRAFT

Guidelines for Triage and Provision of the Medical Screening Examination (MSE)	CLINOPS.PC.001	Published: 10/23/19
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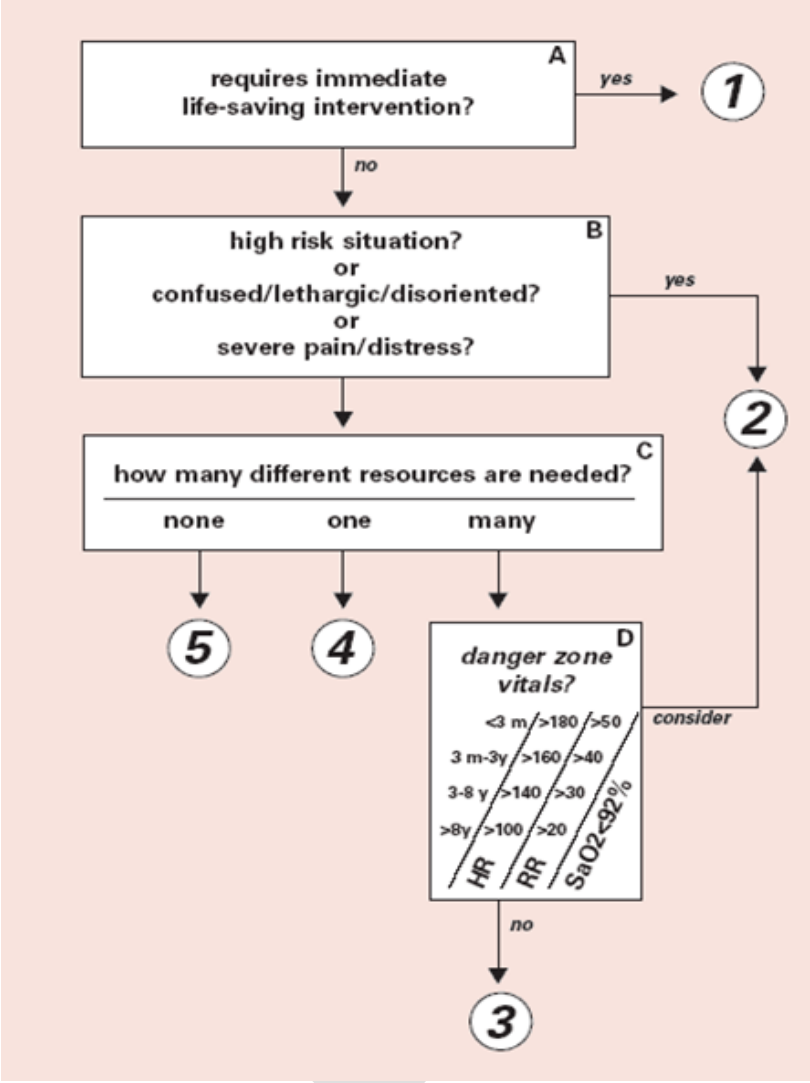
Addendum A – ESI Triage Algorithm



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Parkland

Guidelines for Triage and Provision of the Medical Screening Examination (MSE)	CLINOPS.PC.001	Published: 10/23/19
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Notes:

A. Immediate life-saving intervention required: airway, emergency medications, or other hemodynamic interventions (IV, supplemental O2, monitor, ECG or labs DO NOT count); and/or any of the following clinical conditions: intubated, apneic, pulseless, severe respiratory distress, SPO_2<90, acute mental status changes, or unresponsive.

Unresponsiveness is defined as a patient that is either:
(1) nonverbal and not following commands (acutely); or
(2) requires noxious stimulus (P or U on AVPU) scale.

B. High risk situation is a patient you would put in your last open bed.
Severe pain/distress is determined by clinical observation and/or patient rating of greater than or equal to 7 on 0-10 pain scale.

C. Resources: Count the number of different types of resources, not the individual tests or x-rays (examples: CBC, electrolytes and coags equals one resource; CBC plus chest x-ray equals two resources).

Resources	*Not Resources*
• Labs (blood, urine) • ECG, X-rays • CT-MRI-ultrasound-angiography	• History & physical (including pelvic) • Point-of-care testing
• IV fluids (hydration)	• Saline or heplock
• IV or IM or nebulized medications	• PO medications • Tetanus immunization • Prescription refills
• Specialty consultation	• Phone call to PCP
• Simple procedure =1 (lac repair, foley cath) • Complex procedure =2 (conscious sedation)	• Simple wound care (dressings, recheck) • Crutches, splints, slings

D. Danger Zone Vital Signs
Consider uptriage to ESI 2 if any vital sign criterion is exceeded.
Pediatric Fever Considerations
1 to 28 days of age: assign at least ESI 2 if temp >38.0 C (100.4F)
1-3 months of age: consider assigning ESI 2 if temp >38.0 C (100.4F)
3 months to 3 yrs of age: consider assigning ESI 3 if: temp >39.0 C (102.2 F), or incomplete immunizations, or no obvious source of fever

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AHRQ Pub. No. 05-0046-1
May 2005

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Approve System Policy 002 Patient's Rights and Responsibilities

SYS.RR.002 Patient Rights and Responsibilities

Policy Description:

The policy outlines patient rights and responsibilities, ensuring respect and informed consent for treatment at Parkland Health. It applies to all workforce members.

Requirements regarding this document are found in:

- The Joint Commission
- The Centers for Medicare & Medicaid Services (CMS)
- Title X, U.S. Public Health Service Act
- Texas Health & Safety Code

Background:

- Last published 7/13/21.

Changes

- Minor change adds definition of workforce members.

Reviews and approvals of this version:

- Ciel Murphy, Director Legal Operations
- Miranda Bond, Administrative Director, Patient Relations
- Denise Harrington, Director of Programs
- Lydia deJong, Director of Regulatory Affairs
- Brad Nitschke, Associate General Counsel
- Parkland Quality of Care & Patient Safety Committee (scheduled for 5/15/24)
- Board of Managers Quality of Care & Patient Safety Committee (scheduled for 5/22/24)
- Board of Managers (scheduled for 6/19/24)

Parkland

Patient's Rights and Responsibilities	SYS.RR.002	Published: 7/13/21
System Manual		Page **1** of **12**

PURPOSE:

To describe the patient's rights and responsibilities, to notify the patient of his/her rights and responsibilities~~,~~ and outline how Parkland Health puts its respect for patient rights into action.

SCOPE:

All Parkland Health W~~w~~orkforce members.

PROCEDURE:

1. General

   A. Parkland Health respects and supports patient's rights and wants each patient to understand his/her responsibilities as a partner in the plan of care.

   B. In accordance with the requirements of Title X of the Public Health Service Act regarding provision of family planning services and other preventative health services, such services are provided to clients solely on a voluntary basis.

2. Informing Patients of Their Rights and Responsibilities

   A. Every patient admitted to the hospital will receive a copy of the Consent for Treatment and Patient Rights and Responsibilities form. Within twenty-four (24) hours after the patient is admitted to the hospital the Patient Rights and Responsibilities form will be explained to the patient or the patient's legally authorized representative, if appropriate.

   B. Patients that present at any outpatient clinic location shall be given a copy of the Consent for Treatment and Patient Rights and Responsibilities form on the first visit where it shall be reviewed with him/her.

   C. Each patient will be asked to sign a copy of the Consent for Treatment and Patient Rights and Responsibilities form stating that he/she has read the document and understands the rights and responsibilities specified in the document.

DRAFT

1) If the patient/legally authorized representative is unable to sign due to illness or emergency, or the patient/legally authorized representative refuses to sign, two hospital employees must sign the form as witnesses and indicate the reason the patient/legally authorized representative is unable/refusing to sign.

2) The unsigned form must be placed in the medical record.

3) The patient or legally authorized representative will be offered the opportunity to ask questions or ask for clarification.

D. Language assistance services should be used as appropriate.

E. Signs outlining Patient Rights and Responsibilities will be prominently and conspicuously posted in key areas of the facility, available to patients/legally authorized representatives, employees, and visitors.

F. A lower literacy version of the Patient Rights and Responsibilities form will be included in the Patient Information Packet.

1) The lower literacy version is written at a seventh (7^{th}) grade reading level per the Flesch-Kincaid Grade Level Scale as determined by the House-wide Patient Education Committee.

2) The House-wide Patient Education Committee will edit the form to the determined reading level.

3. Patient's Rights and Responsibilities

A. As a patient, you have the **right** to:

RIGHT	CITATION(S)
1. participate in the development and implementation of your plan of care	**42 CFR 482.13(b)(1)** **JC RI.01.02.01**
2. information necessary to make informed decisions regarding your care, treatment and services	**25 TAC 133.42(a)(1)(D)** **42 CFR 482.13(b)(2)** **JC RI.01.02.01**
3. request, accept or refuse treatment, and to be informed of the medical consequences of refusal	**25 TAC 133.42(a)(1)(C)(i)** **42 CFR 482.13(b)(2)** **JC RI.01.02.01, EP 3** **JC RI.01.03.01**
4. formulate advance directives, have hospital staff and practitioners comply with those directives, and appoint a surrogate to make health care decisions on your behalf	**25 TAC 133.42(a)(1)(C)(ii)** **42 CFR 482.13(b)(3)** **JC RI.01.05.01**

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RIGHT	CITATION(S)
5. have individuals and physicians of your choice notified promptly of your admission to the hospital	**42 CFR 482.13(b)(4)**
6. personal privacy and an environment that preserves dignity and contributes to your positive self-image	**25 TAC 133.42(a)(1)(H)** **42 CFR 482.13(c)(1)** **JC RI.01.06.05** **JC RI.01.01.01, EP4 & EP7**
7. receive considerate and respectful care (including consideration of the psychosocial, spiritual, and cultural variables that influence the perceptions of illness)	**25 TAC 133.42(a)(1)(B)(i)** **42 CFR 482.13(c)(3) & (2)** **JC RI.01.01.01**
8. receive care in a safe setting, free from all forms of neglect, exploitation, abuse and harassment	**42 CFR 482.13(c)(3) & (2)** **JC RI.01.06.03**
9. confidentiality of your information and clinical records	**25 TAC 133.42(a)(1)(H);** **42 CFR 482.13(d)(1)**
10. access to information in your clinical records by you and your legally designated representative within a reasonable time frame	**25 TAC 133.42(a)(1)(I)** **42 CFR 482.13(d)(2)** **JC RI.01.01.01, EP2** **JC RI.01.02.01, EP1**
11. freedom from restraint or seclusion that is not medically necessary or not imposed to ensure the immediate physical safety of you, staff or others and safe implementation of restraint or seclusion when used	**42 CFR 482.13(e) & (f)**
12. receive visitors (including support persons), subject to clinical restrictions or limitations, including the right to determine who may or may not visit	**42 CFR 482.13(h)** **JC RI.01.01.01, EP2 & EP28**
13. reasonable response to request and needs for treatment or service regardless of age, race, ethnicity, national origin, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation and gender identity or expression	**25 TAC 133.42(a)(1)(A)** **JC RI.01.01.01, EP29** **Affordable Care Act Section 1557 (45 CFR part 92)**
14. end- of- life care that optimizes comfort and dignity, effectively manages pain and includes consideration of psychosocial, spiritual and cultural concerns	**25 TAC 133.42(a)(1)(B)(ii)** **JC RI.01.05.01**
15. receive information about patient rights and patient complaint resolution processes	**25 TAC 133.42(a)(1)(E)** **42 CFR 482.13(a)(2)** **JC RI.01.07.01**
16. participation in discussion and resolution of ethical issues that affect your care	**25 TAC 133.42(a)(1)(F)**
17. be informed of any human experimentation, research or educational projects affecting your treatment and refuse to participate in any such activities without jeopardizing your access to care	**25 TAC 133.42(a)(1)(G)** **JC RI.01.03.05**
18. have a legally authorized representative exercise these rights on your behalf to the extent permitted by law	**25 TAC 133.42(a)(1)(J)**
19. receive information in a manner that you can understand	**JC RI.01.01.03**
20. give or withhold consent regarding the production or use of recordings, films, photographs, videos, or other images of you for purposes other than the provision of care, and also to request the cessation of such production or use.	**JC RI.01.03.03**

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RIGHT	CITATION(S)
21. receive information about the individuals responsible for providing your care, including student doctors, nurses and other health care providers who assist in your care	**JC RI.01.04.01**
22. access protective and advocacy services	**JC RI.01.07.03**
23. receive information about hospital policy regarding Cardiopulmonary Resuscitation (CPR) in the event your circulatory or respiratory function stops and communicate your wishes and be involved in treatment decisions regarding CPR	**25 TAC 166.201 et seq**

B. A minor receiving comprehensive medical rehabilitation services is entitled to: [1]

RIGHT	CITATION(S)
1. appropriate treatment in the least restrictive setting available	**25 TAC 133.42(b)(1)(A)**
2. not receive unnecessary or excessive medication	**25 TAC 133.42(b)(1)(B)**
3. an individualized treatment plan and to participate in the development of the plan	**25 TAC 133.42(b)(1)(C)**
4. a humane treatment environment that provides reasonable protection from harm and appropriate privacy for personal needs	**25 TAC 133.42(b)(1)(D)**
5. separation from adult patients	**25 TAC 133.42(b)(1)(E)**
6. regular communication between the minor patient and the patient's family	**25 TAC 133.42(b)(1)(F)**

[1] Additional rights applicable to patients of hospitals providing comprehensive medical rehabilitation services. *See* 25 TAC 133.42(b).

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C. As a patient, you have the **responsibility** to: [2]

RESPONSIBILITY	CITATION(S)
1. provide complete and accurate information that facilitates your care, treatment and services	**JC RI.02.01.01, EP 1**
2. ask questions or acknowledge when you do not understand the treatment course or care decision	**JC RI.02.01.01, EP 1**
3. follow your treatment plan and the hospital's instructions, rules, and regulations	**JC RI.02.01.01, EP 1**
4. respect the rights of others, being considerate and respectful of patients, visitors and staff	**JC RI.02.01.01, EP 1**
5. fulfill financial obligations to the hospital and physician	**JC RI.02.01.01, EP 1**

[2] According to TJC standards, patient responsibilities can be shared verbally, in writing, or both. *See* JC RI.02.01.01, EP 2.

4. The Healthcare Team

A. The healthcare team honors the trust patients place in them, and respects each patient's rights and values by:

1) Recognizing and embracing the patient as a partner in his/her healing process.

2) Assisting patients and their families to understand the nature of their illness by explaining in terms consistent with their education and health literacy knowledge, values and beliefs. Patients and, when appropriate, their families shall be informed about the outcomes of care, including unanticipated outcomes.

3) Fostering independence by encouraging self-help and individual responsibility while acknowledging their patients' values and beliefs.

4) Honoring the patients' rights to privacy and confidentiality. Employees do not discuss patients' medical concerns with others except as needed to provide patient care or within the guidelines of treatment, payment or healthcare operations. Fellow employees and friends are often patients and their rights to privacy and confidentiality shall be are honored in the same manner.

5) Focusing on opportunities to enhance clinical safety and recognizing the rights of patients and families to be informed about unexpected outcomes.

Validating the patient and/or family member understand the Patient Rights and Responsibilities that pertain to patients and is afforded the opportunity to

ask questions or seek clarification and to have those questions or concerns thoroughly answered or addressed.

5. Concerns regarding your care:

   A. You have the right to tell us when you have a concern or complaint about your health care services.

   B. If you present a concern, your care will not be affected in any way. An issue can be addressed most promptly by talking with your nurse or other health care provider.

   C. If you feel an issue is not being addressed appropriately, please contact the Patient Relations Department at 469-419-0820. A representative will contact you within two business days. You may file a complaint directly with an oversight agency regardless of whether you have used the Parkland complaint process.

   D. If you feel your concern is not being addressed by Parkland, you may contact:

Texas Department of State Health Services
Health Facility Compliance Group (MC1979)
P.O. Box 149347
Austin, TX 78714-9347
888-973-0022

The Joint Commission
Office of Quality Monitoring
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
800-994-6610

KEPRO (Medicare patients)
5201 West Kennedy Boulevard, Suite 900
Tampa, FL 33609
1-888-315-0636
1-855-843-4776 (TTY)
1-833-868-4060 (FAX)

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Office for Civil Rights (discrimination concerns)

U.S. Department of Health and Human Services
Office for Civil Rights
Centralized Case Management Operations
200 Independence Ave., S.W.
Suite 515F, HHH Building
Washington, D.C. 20201
Customer Response Center: (800) 368-1019
Fax: (202) 619-3818
TDD: (800) 537-7697
Email: ocrmail@hhs.gov
Online Portal: https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf

For End Stage Renal Disease (ESRD) patients:

Texas Department of State Health Services
Patient Quality Care Unit
1100 W. 49th Street
Austin, TX 78756
(888) 973-0022
www.dshs.state.tx.us/facilities/complaints.aspx

ESRD Network of Texas, Inc.
4040 McEwen Suite 350
Dallas, TX 75244
(877) 886-4435
www.esrdnetwork.org

EQUIPMENT:

N/A

DEFINITIONS:

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

REFERENCES:

Tex. Health & Safety Code 166.201 et seq.

Title X, U.S. Public Health Service Act, 42 U.S.C. 300 et seq.

Centers for Medicare & Medicaid Services: §482.13, §482.58, §483.10, §483.15

2021 Joint Commission Comprehensive Accreditation and Certification Manual

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APPENDIX A – END STAGE RENAL DISEASE PATIENTS

As a patient, you have a right to:

RIGHT	CITATION(S)
1. respect, dignity, and recognition of your individuality and personal needs, and sensitivity to your psychological needs and ability to cope with ESRD	**42 CFR 494.70 (a)(1)** **25 TAC 117.42 (1)**
2. receive all information in a way that you can understand	**42 CFR 494.70 (a)(2)** **25 TAC 117.42 (4)**
3. privacy and confidentiality in all aspects of treatment	**42 CFR 494.70 (a)(3)** **25 TAC 117.42 (2)**
4. privacy and confidentiality in personal medical records	**42 CFR 494.70 (a)(4)** **25 TAC 117.42 (2)**
5. be informed about and participate, if desired, in all aspects of your care, and be informed of the right to refuse treatment, to discontinue treatment, and to refuse to participate in experimental research	**42 CFR 494.70 (a)(5)** **25 TAC 117.42 (7)**
6. be informed about your right to execute advance directives, and the facility's policy regarding advance directives	**42 CFR 494.70 (a)(6)** **25 TAC 117.42 (15)**
7. be informed about all treatment modalities and settings, including but not limited to, transplantation, home dialysis modalities (home hemodialysis, intermittent peritoneal dialysis, continuous ambulatory peritoneal dialysis, continuous cycling peritoneal dialysis), and in-facility hemodialysis. You have the right to receive resource information for dialysis modalities not offered by the facility, including information about alternative scheduling options for working patients	**42 CFR 494.70 (a)(7)** **25 TAC 117.42 (6)**
8. be informed of facility policies regarding patient care, including, but not limited to, isolation of patients	**42 CFR 494.70 (a)(8)**
9. be informed of facility policies regarding the reuse of dialysis supplies, including hemodialyzers	**42 CFR 494.70 (a)(9)** **25 TAC 117.42 (9)**
10. be informed by the physician, nurse practitioner, clinical nurse specialist, or physician's assistant treating you for ESRD of your own medical status as documented in your medical record, unless the medical record contains a documented contraindication	**42 CFR 494.70 (a)(10)** **25 TAC 117.42 (5)**
11. be informed of services available in the facility and charges for services not covered under Medicare	**42 CFR 494.70 (a)(11)** **25 TAC 117.42 (8)**
12. receive the necessary services outlined in your plan of care described in § 494.90	**42 CFR 494.70 (a)(12)** **25 TAC 117.42 (18)**

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RIGHT	CITATION(S)
13. be informed of the rules and expectations of the facility regarding patient conduct and responsibilities	**42 CFR 494.70 (a)(13)** **25 TAC 117.42 (17)**
14. be informed of the facility's internal grievance process	**42 CFR 494.70 (a)(14)** **25 TAC 117.42 (16)**
15. be informed of external grievance mechanisms and processes, including how to contact the ESRD Network and the State survey agency	**42 CFR 494.70 (a)(15)** **25 TAC 117.42 (16)**
16. be informed of your right to file internal grievances or external grievances or both without reprisal or denial of services	**42 CFR 494.70 (a)(16)** **25 TAC 117.42 (16)**
17. be informed that you may file internal or external grievances, personally, anonymously or through a representative of the patient's choosing	**42 CFR 494.70 (a)(17)**
18. be informed of the facility's policies for transfer, routine or involuntary discharge, and discontinuation of services to patients	**42 CFR 494.70 (b)(1)** **25 TAC 117.42 (12)**
19. to receive written notice 30 days in advance of an involuntary discharge, after the facility follows the involuntary discharge procedures described in § 494.180(f)(4). In the case of immediate threats to the health and safety of others, an abbreviated discharge procedure may be allowed.	**42 CFR 494.70 (b)(2)** **25 TAC 117.42 (12)**
20. be given an opportunity and assistance to improve problematic behavior prior to dismissal from the facility.	**25 TAC 117.42 (13)**
21. to receive a written copy of the patient's rights and responsibilities upon admission, and have a copy of the patient's rights prominently displayed in the facility with the license certificate, including the current State agency and ESRD network mailing addresses and telephone complaint numbers, where it can be easily seen and read by patients.	**42 CFR 494.70 (c)** **25 TAC 114.42 (17)**
22. be provided a safe, sanitary, and comfortable treatment environment;	**25 TAC 117.42 (3)**
23. be assured of a reasonable response by the facility to the patient's requests and needs for treatment or service, within the facility's capacity, the facility's stated mission, and applicable law and regulation;	**25 TAC 117.42 (10)**
24. be provided hours of dialysis that are scheduled for patient convenience whenever feasible or possible. Consideration shall be given to a patient's work or school schedule;	**25 TAC 117.42 (11)**
25. be provided protection from abuse, neglect, or exploitation as defined in 25 TAC §1.204	**25 TAC 117.42 (14)**

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Patients are given many rights at the clinic but in return they have certain responsibilities that they must adhere to in order for the staff to deliver a high standard of quality care at the facility. Consequences to not adhering to these responsibilities could lead to physical side effects, loss of privileges and temporary or permanent dismissal from the facility.

As a patient, you have the **responsibility** to:

Responsibility	Citation
1. It is the responsibility of the patient to arrive on time for a scheduled visit and if the patient is going to be late the facility must be given as much advance notice as possible.	**42 CFR §494.70(a)(13)**
2. It is the responsibility of the patient to adhere to all aspects of their peritoneal dialysis prescription that includes diet, medications, and procedures for care between treatments.	**42 CFR §494.70(a)(13)**
3. The patient is responsible for treating other patients, visitors and staff with consideration and respect.	**42 CFR §494.70(a)(13)**
4. The patient is responsible to attend all required training sessions. If the assistance of a caregiver is required, he/she will also attend all required training sessions.	**42 CFR §494.70(a)(13)**
5. The patient will attend all follow-up appointments necessary to monitor the quality of home dialysis treatments.	**42 CFR §494.70(a)(13)**
6. The patient will complete and maintain all necessary documentation as required by state and Federal regulations and the training facility.	**42 CFR §494.70(a)(13)**
7. The patient will bring his/her treatment record(s) to each clinic visits, unless otherwise not specified by the facility staff.	**42 CFR §494.70(a)(13)**
8. The patient will complete and maintain accurate supply inventories as required by the training facility. The patient will order his/her supplies within the appropriate time frames.	**42 CFR §494.70(a)(13)**
9. The patient is responsible for keeping the social worker updated with changes in insurance or financial status, advanced medical directives, and any other changes in family/support systems that may affect your healthcare.	**42 CFR §494.70(a)(13)**
10. The patient has the responsibility to participate in his/her plan of care.	**42 CFR §494.70(a)(13)**
11. It is the responsibility of the patient to inform the staff of any changes in healthcare status or problems that have occurred since the last treatment.	**42 CFR §494.70(a)(13)**
12. It is the responsibility of the patient to inform the PD nurse of any new medications that have been prescribed by another physician, other than the patient's nephrologist. The patient is to participate in a home medication reconciliation monthly, conducted by the dialysis staff.	**42 CFR §494.70(a)(13)**
13. The patient is responsible for the consequences of missing treatments.	**42 CFR §494.70(a)(13)**

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Responsibility	Citation
14. The patient is responsible for becoming informed about kidney disease and to inquire about any part of the treatment that s/he does not understand.	**42 CFR §494.70(a)(13)**
15. It is the responsibility of the patient to comply with all the rules and regulations of the facility and to question any of these that are not understood.	**42 CFR §494.70(a)(13)**

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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 20th of June, 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 System Update

Questions & Discussion Related to CEO System Update

FY25 Operating Plan

FY25 Operating Plan Q&A

Review FY25 Parkland Health Budget Assumptions

Parkland Health FY25 Budget Assumptions Presentation

Preliminary Draft - Subject to Change & Board Approval

Parkland

Board of Managers

FY2025 Budget Review

June 20, 2024

Parkland

Preliminary Draft - Subject to Change & Board Approval

Revenue Comparison of Significant Changes

Net Patient Revenue

- Reductions in CHIRP payments limit patient revenue growth
- Small increases in commercial reimbursement
- Combined with volume increases, net patient revenue expected to slightly increase

Tax revenues

- Planned 5% increase

FEMA funds

- Several types of costs removed by FEMA, based on research
- FEMA is working to complete the COVID project by the end of this calendar year, with moderate payments expected in FY25

Governmental Revenue
Comparison of Significant Changes

Amounts in millions

	FY24 Forecast	FY 25 Budget	Variance
Cost Report Allowances	23,234	12,062	(11,172)
Government Subsidies	531,477	566,678	35,201
Tax Revenue	819,909	860,905	40,996
FEMA Funds	1,908	8,399	6,491
Variance	1,376,528	1,448,044	71,516

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Governmental Revenue
Comparison of Significant Changes

Cost report allowances

- Though less than prior years, Parkland continues to be underpaid on DSH-UC claims payments because of a shift in Medicare patients from traditional to managed Medicare programs
- True-up will be included on the cost report

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Significant Supplemental Variances

Medicaid DSH

- Significant changes to the Medicaid DSH program have resulted in much smaller payments
- These changes began in FY24, resulting in a large budget variance
- Only minimal variances expected between FY24 and FY25

Hospital Augmented Reimb Program (HARP)

- Moderate decrease anticipated for FY25

Texas Incentives for Physicians and Professional Services (TIPPS)

- Slight increase anticipated in FY25

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Significant Supplemental Variances

Comprehensive Hospital Increase Reimbursement Program (CHIRP)

- Extensive program changes with a new quality component, the Alternate Participating Hospital Reimbursement for Improving Quality Award (APHRIQA), instituted for FY25
- While gross amounts will increase, claims payments will be reduced
- The new APHRIQA component will be paid through a biannual distribution
- An unexpected reconciliation has reduced IGT requirements in FY24, but a return to historical amounts are expected for FY25
- Overall, a moderate net revenue reduction is expected

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FY2025 Expense Assumptions

Expense Assumptions

- FTE/Staffing correlated to new benchmarked standards
- Salaries & Benefits
  - 2.0% market adjustment
  - 3.0% merit increase
  - 5.0% Benefits increase
- Medical/Surgical Supplies
  - 5.5% increase for inflation
- Drugs
  - 7.0% increase

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FY2025 Expense Assumptions

Expense Assumptions - Continued

- Fees
  - 5.5% increase overall
- Insurance Premiums
  - 10% increase
- Purchased Medical Services
  - 4% increase

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FTE Approach

Variable Departments

- Start with the 50th percentile of actual worked hours per unit of service for the past 26 pay periods (12 months)
  - i.e. 50% of the time the department has performed better and 50% has performed worse
  - Worked hours per unit of service will be standardized for like-departments based on best performers within the group (e.g. COPCs, Inpatient units, etc.)
- Adjust based on non-productive time
  - Avg. non-productive hours specific for the department will be added back
- Adjust proposed target based on benchmarks and/or staffing grids (if available)

Fixed Departments

- Start with current filled positions
- Adjust based on vacancy rate and non-productive time
  - Old or persistent vacancies will be excluded unless there is a strong rationale
  - Avg. non-productive hours will be added back
- FSAM and PRC approved positions will be added back
- Validate proposed target based on benchmarks (if available)

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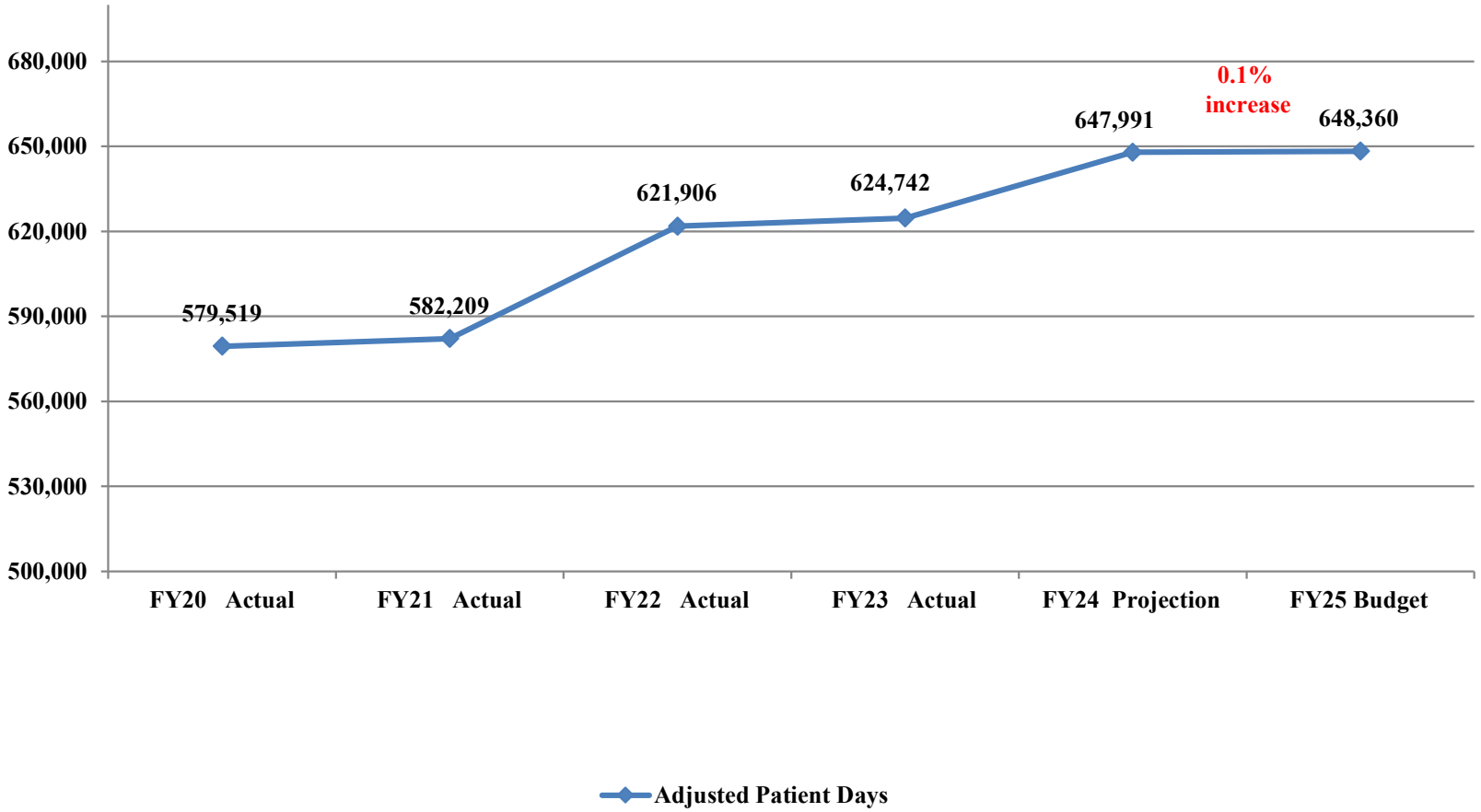
FY 2025 Volume Trends

Adjusted Patient Days



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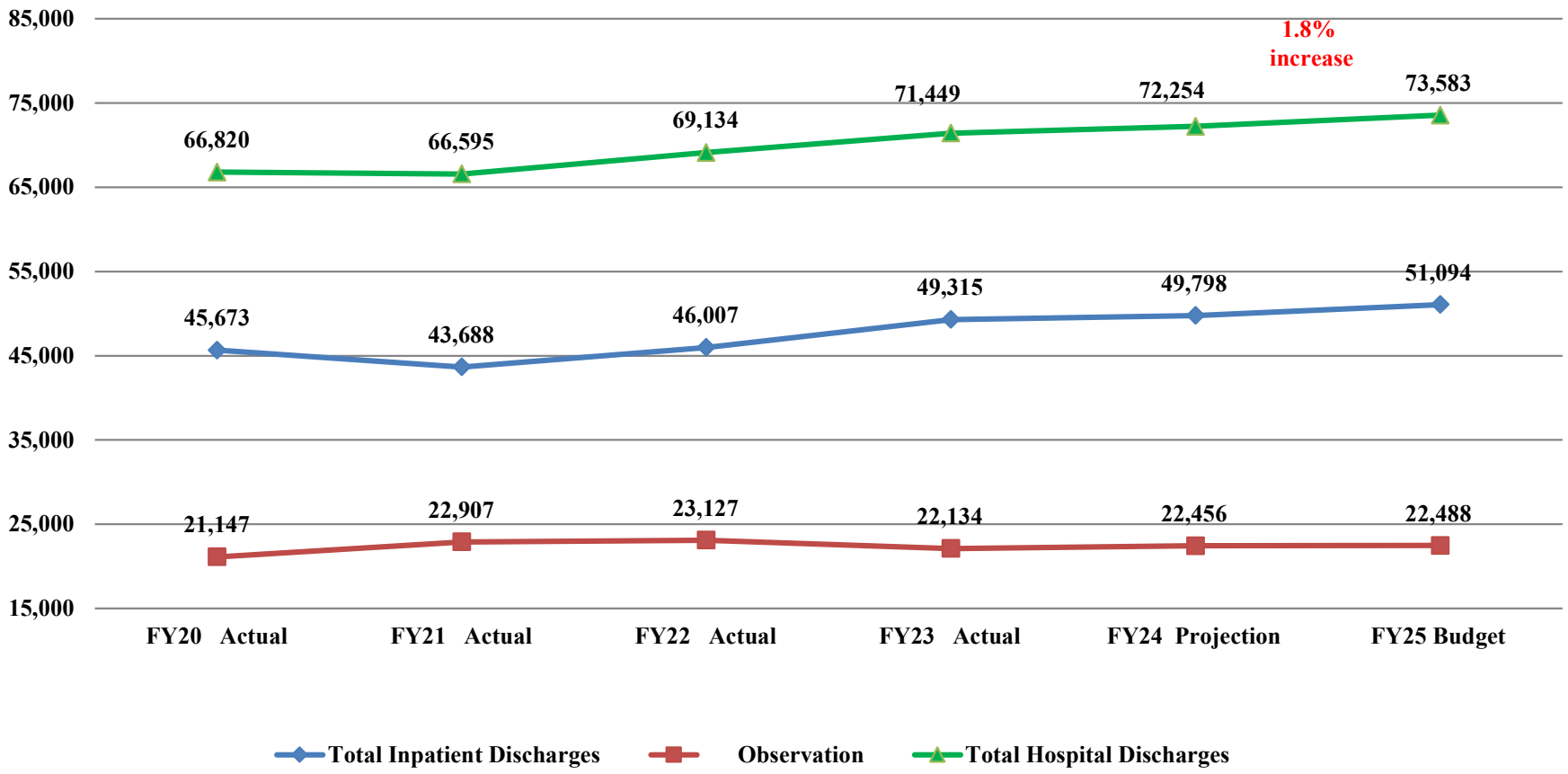
FY 2025 Volume Trends

PHHS Total Hospital Discharges
Including Observation



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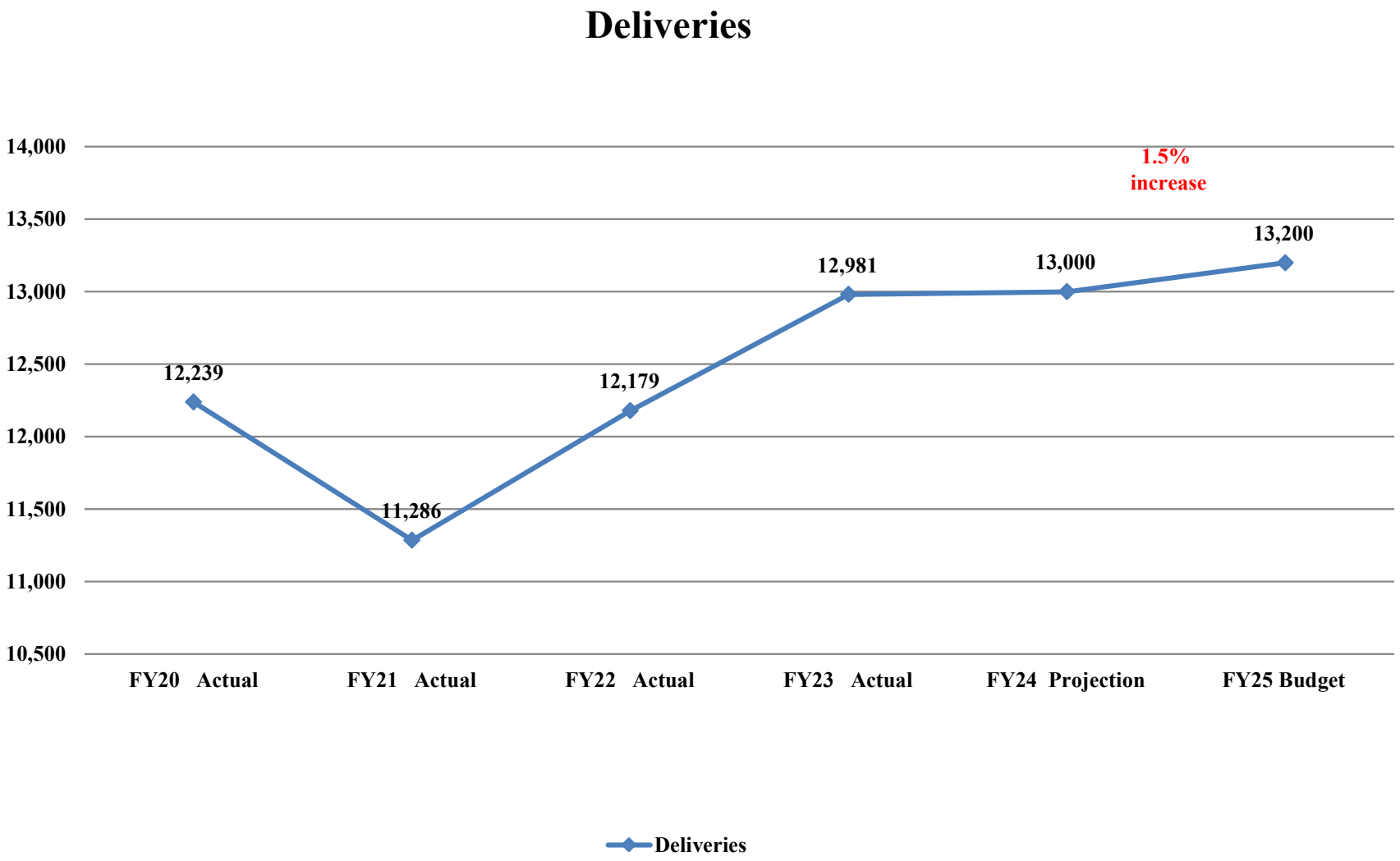
FY 2025 Volume Trends



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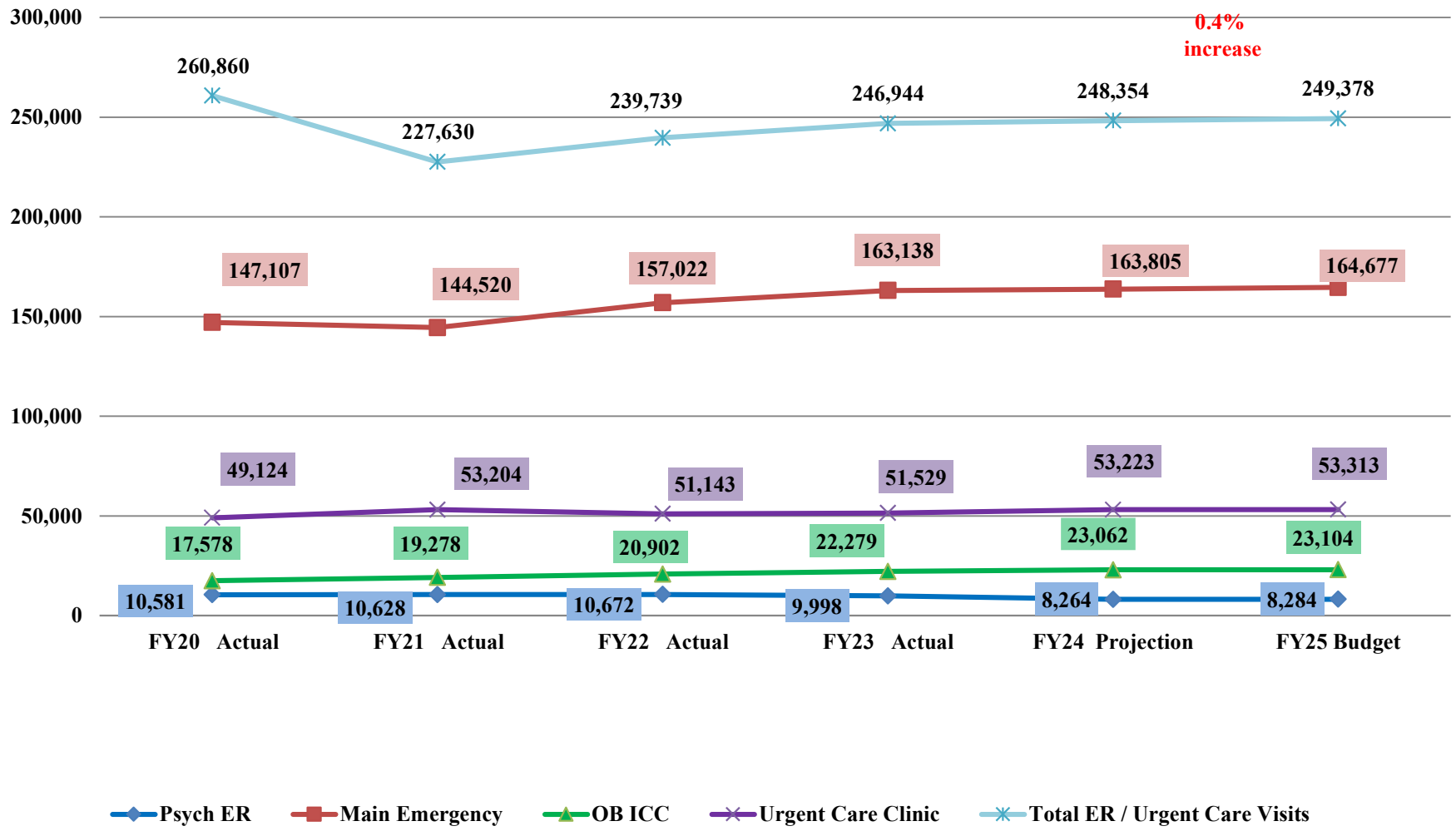
FY 2025 Volume Trends

ER / Urgent Care Visits



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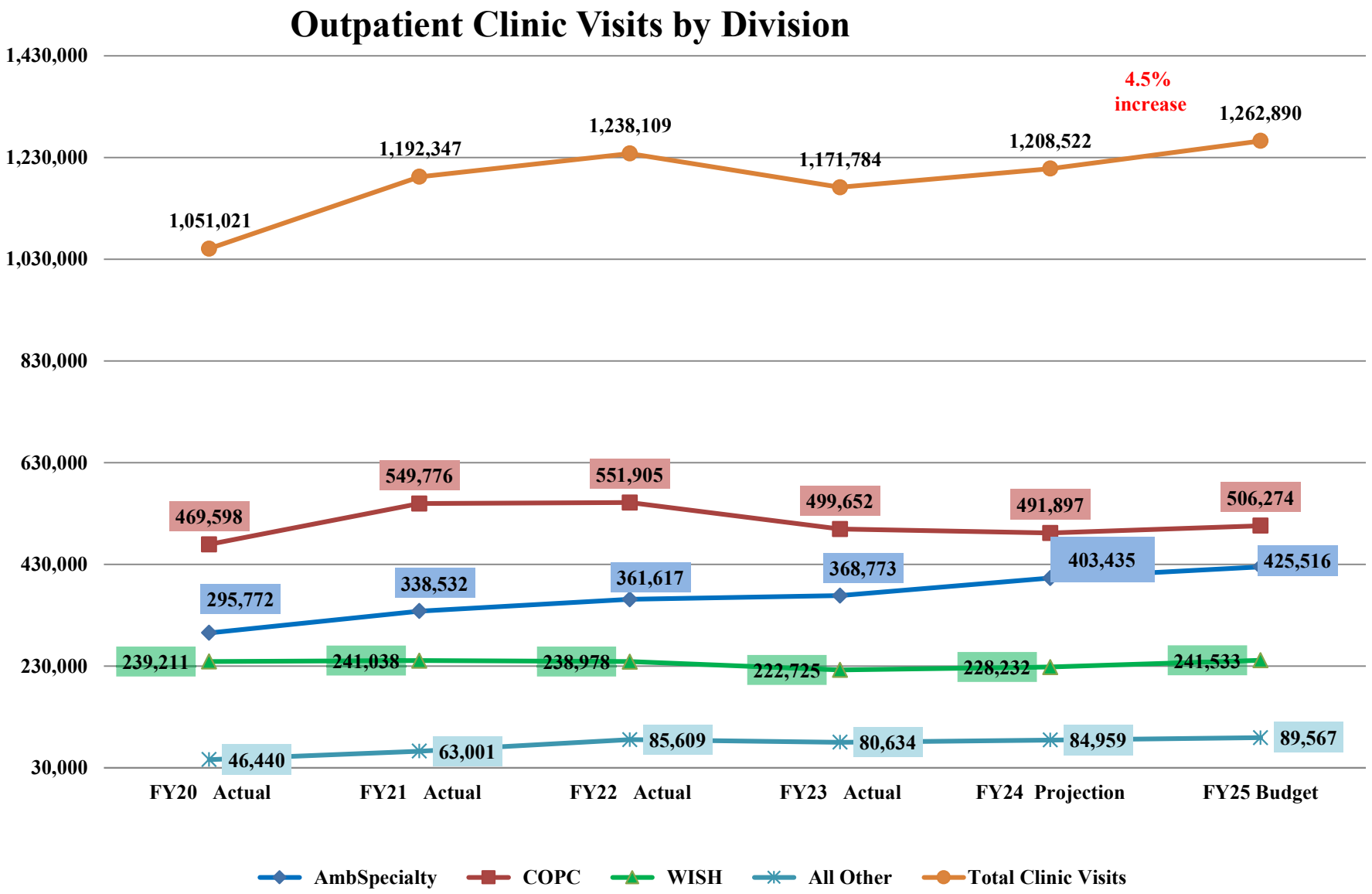
FY 2025 Volume Trends



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FY2025 Preliminary Tax Revenue

- Preliminary information indicates an estimated increase in taxable valuations of about 5%
- Parkland assumes a tax rate of $0.2195 * for FY2025 of which $0.009369 is for debt service
- Parkland seeks to cap its tax revenue increase at 5% over the prior year budget
- Current year tax collection percentages, net of prior year refunds and adjustments, have fallen to approximately 98%

*Final rate to be determined upon receipt of the certified tax rolls

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Tax Rate Trends

Tax rates are trending downward as property values increase:

Fiscal Year	Tax Rate
2016	$0.2860
2017	$0.2794
2018	$0.2794
2019	$0.2794
2020	$0.2695
2021	$0.2661
2022	$0.2550
2023	$0.2358
2024	$0.2195
2025 *	$0.2195

* Preliminary, subject to certification of values

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FY 2025 Debt Financing Levy

We expect a modest decrease in the debt service tax rate for FY 2025 from the FY 2024 budget assuming a 5% increase in taxable values

Required Debt Service Rate using estimated December 31, 2023 Taxable Values

(Dollars in Millions)

Projected Transactions	FY2024	FY2025
2009 Series Debt Service - Interest	$ 22.6	$ 21.8
2009 Series Debt Service - Principal	15.2	14.8
Normal Federal Subsidy - Build America Bonds	(7.9)	(7.6)
Subsidy Sequestration	0.5	0.4
2019 Series Debt Service - Interest	6.5	6.5
2019 Series Debt Service - Principal	0.7	1.6
Tax Requirement - Debt Service	$ 37.6	$ 37.5
Estimated Tax Base	$380,912	$399,958
Tax Rate per $100 (Dollars)	$0.009736	$0.009369
Voter Approved Debt Service Rates	$0.025000	$0.025000

Parkland

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FY25 Budget Calendar

- July 23rd : First Presentation to Finance Committee
- July 24th : First Presentation to Board of Managers
- August 20th: First Presentation to Commissioners Court
- August 27th : Final Presentation to Finance Committee
- August 28th : Final Presentation to Board of Managers and Vote on Budget & Resolution
- September 3rd : Final Presentation to Commissioners Court and Public Hearing and Vote

Review FY25 Parkland Health Budget Assumptions Q&A

Texas Healthcare Trustee (THT) Conference Update

Discussion of Master Service Agreement for Physician Services Contract

Discussion of Master Service Agreement for Physician Services Contract Q&A

Consultation with Attorney Regarding Contract Dispute and Related Litigation Styled as Construction Cleaning, Inc. v. Dallas County Hospital District d/b/a Parkland Health

Consultation with Attorney Regarding Contract Dispute and Related Litigation Styled as Construction Cleaning, Inc. v. Dallas County Hospital District d/b/a Parkland Health Q&A

Discussion of Legal Obligations Under Texas Open Meetings Act

Discussion of Legal Obligations Under Texas Open Meetings Act Q&A

Medical Executive Committee Credentialing Report

Delineation of Privileges
Urology DoP – Triage

Patient Settlements

Consultation with Attorney Regarding Life Insurance Program

Discussion and possible action regarding the designation of a representative to decide the administrative appeal of Contracting Officer's Decision in the dispute styled as Construction Cleaning, Inc. v. Dallas County Hospital District d/b/a Parkland Health