IV. Conflicts of Interest

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

V. Consent Agenda

A. Appropriate Action Regarding Minutes 2024-10-30 HOMES

Vincent Hall motioned for the approval of the Consent Agenda. Todd Furniss seconded the motion. The motion passed unanimously.

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

The Board received information for the following updates presented by Kyla Rankin, HOMES Project Director.

A. Operations Update (day-to-day) operations including but not limited to – staffing/operational challenges/partner site activity)

Kyla mentioned there are still four vacancies for a registered nurse, a dental assistant, a medical practice assistant, and a peer navigator. Kyla mentioned her team is optimistic as they work with the Office of Talent Management to get these filled. Kyla reviewed the employee engagement scores for this year and mentioned her team continues to work on trust and staff safety at fixed sites and mobile units. Kyla recapped some of the November outreach events the HOMES team attended along with upcoming community events in December to give out flu and Covid vaccinations.

The Board asked questions and received additional information related to the Operations Update.

B. Management and Finance Update – volume, revenue, expenses, and overtime

Kyla presented on the October HOMES metrics. Kyla mentioned HOMES saw 7,873 unduplicated patients YTD which is 85% of the annual goal of 9,192 unduplicated patients leaving HOMES at 83% complete to the yearly goal. Kyla reported, HOMES will likely not meet the unduplicated patient count for 2024. Kyla mentioned the development of site reports once published should aid in the unduplicated count as it will show where the highest volume of unduplicated patients are based. Kyla updated the Board on the overtime variances in the budget which she expects to increase as there are several vacant positions that still need to be filled.

The Board asked questions and received additional information related to the Management and Finance Update.

C. Governance Update: Upcoming Meetings
Kyla mentioned there will not be a HOMES Advisory Board meeting for December. The next advisory meeting will occur on February 10th, 2025. Kyla also mentioned Board Members will be invited to the Holiday-joint community advisory board celebration in December which will occur on Friday December 6th from 12-1PM. Lastly, Kyla presented the HRSA Big 20 overview. The HRSA compliance manual has 21 chapters.

D. Quarterly Review of HOMES Quality Improvement Data
Dr. Persaud presented the Parkland COPC metrics balance score cards for patient care and safety in 2024. Dr. Persaud mentioned the metrics across the board are all positive measures and above 90% regarding the goal for the months. Dr. Persaud presented on the recent safety posts by event type and drew attention to the highest volume which was three events under the behavior category. Dr. Persaud presented the patient satisfactory data from March, June and September which is collected via surveys to the HOMES patients. Next, Dr. Persaud presented the HRSA quality measures at or above goal for YTD and reviewed the HIV linkage to care, tobacco intervention, diabetes, and low birth weight metrics. Dr. Persaud also presented the screening performance data in regard to breast cancer, HIV and childhood immunizations as compared to the 2023 data. Dr. Persaud also mentioned area of quality improvement that HOMES will continue to work on.

E. HRSA (Health Resources and Services Administration) Compliance Manual Requirements: The Big 20
Kyla mentioned the HRSA Big 20 manual which has 21 chapters that cover 19 requirements in four service areas. Kyla has developed a calendar to continue to review these chapters and service needs with the Board.

F. HRSA (Health Resources and Services Administration) Compliance Manual Requirements: Chapter 10: Quality Improvement Assurance Plan
Kyla reviewed chapter 10: quality assurance improvement planning, with the Board. Kyla reviewed demonstrating compliance with board-approved policies that establish the quality assurance program along with who is the designated individual to oversee the program along with operational procedures.

G. HRSA (Health Resources and Services Administration) Update on OSV (Operational Site Visit)
Kyla reminded the Board that the HRSA Operational Site Visit is scheduled for January 14th-16th 2025, Kyla provided the OSV agenda at-a-glance to prepare the Board for the site visit and what to expect.

VII. Adjourn

With no further business to discuss, Marjorie Petty, JD, adjourned the meeting at 2:11pm.

SO RECORDED:

Marjorie D Petty
Marjorie D Petty (Jan 5, 2025 19:06 CST)

Marjorie D. Petty, JD
Chair

Steven J Roth
Steven J Roth (Jan 3, 2025 15:48 CST)

Steven Roth, JD, MPH
Assistant Secretary