Parkland

HOMES
Homeless Outreach Medical Services
Agenda

Agenda for the ***Board of Managers HOMES*** meeting of the Dallas County Hospital District is scheduled for ***Wednesday, March 19, 2025, at 12:30 PM*** at 5151 Mapel Avenue (Moody Outpatient Building) Dallas, TX 75235, Conference Room 01-1116/01-1118. 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: 2302 122 6011; meeting password: 1234) to join the meeting. The ***Board of Managers HOMES*** 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 HOMES*** 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.	**Determine the Presence of a Quorum /Call to Order/Mission Statement** ***Advance Wellness | Relieve Suffering | Develop and Educate*** **I CARE** **I**ntegrity **C**ompassion and Collaboration **A**ccountability **R**espect **E**quity **Public Comments Regarding Agenda Items** *See public comment registration information and rules at https://www.parklandhospital.com/board-of-managers* The agenda has been developed by the Chief Governance Officer in consultation with the Board Chair and reviewed and affirmed by Counsel.			Chair
II.	**Consent Agenda**			
A.	Appropriate Action Regarding Minutes 2025-02-26 HOMES	2	1	Chair
III.	**Reports Requiring Deliberation(s) and/or or Possible Action**			
A.	Operations Update (day-to-day operations including but not limited to-staffing/operational challenges/partner site activity)	9	3	Kyla Rankin
B.	Management and Finance Update (volume, revenue, expenses, overtime)	10	3	
C.	Governance Update: Organization of HOMES meetings, Upcoming Meetings (HOMES advisory board which meets the 2nd Monday of every other month)	11	3	
D.	Quarterly Quality Data Review for HOMES (HRSA metrics, scorecard-safety posts, patient surveys)	12	5	Dr. Persaud

		PAGE	TIME (MIN)	PRESENTER(S)
E.	Review and discuss provisions of the Health Resources and Services Administration (HRSA) Compliance Manual Requirements	22	3	
F.	Discussion Regarding HRSA Manual Requirement Chapter 15: Financial Management and Accounting Systems	23	3	
G.	HRSA Update regarding Universal Data Submission (UDS) Submission and Additional Reviewer Questions	25	3	

IV. Action Items

A. Board May Take Action on Any Agenda Item(s) Above — Chair

V. Adjourn

A. Closing Remarks

B. Call to Adjourn

Appropriate Action Regarding Minutes 2025-02-26 HOMES

Parkland

MINUTES

Dallas County Hospital District Board of Managers

HOMES
February 26, 2025

Minutes of the Board of Managers HOMES meeting of the Dallas County Hospital District, held Wednesday, February 26th, 2025, scheduled for 12:30 pm, or directly following the Quality and Safety 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 12:35 pm.

Board Member attendees included: Vincent Hall; Elizabeth Palacios, MD; Farida Minner, RN, Todd Furniss, JD, Yasmin Simon, JD, Byron Cryer, MD, Lisa Sutter and Eric G. Bing, MD.

Board members Ramon Miguez and Reina Gonzalez were not present.

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

Brett Moran, Chief Health Officer
Donna Richardson, EVP & CNE
Edmundo Castañeda, EVP & Chief Operating Officer
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & Chief Executive Officer
Forrest Stovall, Strategy Program Manager
Francesco Mainetti, Interim SVP Operations Admin
James Perez, VP Clinic Operations – COPC Admin
James Orrison, Administrative Resident
Jessica Hernandez, Chief Health Equity Officer
Joseph Chang, SVP & CMO (via Webex)
Morgan Simmons, Governance Program Coordinator
Melanie Roberts, SVP/ Chief Compliance & Ethics Officer
Michale Lane, SVP & Chief Quality Officer
Rick Humphrey, EVP & Chief Financial Officer (via Webex)
Saul Cordero, SVP & Chief Governance & Strategy Officer
Steven Roth, EVP & Chief Legal Officer

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. Consent Agenda

A. Appropriate Action Regarding Minutes 2025-01-29 HOMES
B. Appropriate Action Regarding Minutes 2025-02-10 HOMES Advisory Board

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 James Perez, VP Clinic Operations, in Kyla Rankin's absence this month.

Marjorie Petty reminded the Board prior to James beginning his presentation that the HRSA review is now complete, and she thanked Vincent, Farida, and Reina for their participation in the exit survey. Marjorie recognized Kyla's hard work during the survey period and thanked management for aiding in a smooth process.

A. Operations Update (day-to-day) operations including but not limited to – staffing/operational challenges/partner site activity)
James Perez presented an overview of the HOMES agenda today and began by reviewing the staffing update for the month of February. In February there are five FTE positions vacant with four out of the five offers accepted for the dental assistant position, medical mobile unit driver, medical practice assistant and the peer navigator. HOMES will continue to search for one FTE registered nurse through the residency program. James mentioned regarding the Stewpot location, there is a transition from where they are located currently to the old CitySquare location. This will impact HOMES because the old Stewpot location will now be deactivated, and a new contract will be established. James mentioned the inclement weather shelters were provided with mobile medical care via HOMES throughout January and February and served 160 patients during this time. There are currently six HOMES mobile units. Four out of six are mobile.
HOMES will collaborate with the community health needs assessment over the next few months to contribute to the overall report.

B. Management and Finance Update – volume, revenue, expenses, and overtime
James reviewed the management and finances for HOMES in the month of January which runs per the calendar year (January 2025 – December 2025). There were 1,432 unduplicated patients for the month of January which is average and expected for the beginning of the year. HOMES annual goal for 2025 will be 9,192 unduplicated patients.

James mentioned HOMES has 59 FTEs and is on target for overtime regarding what was budgeted for the month of January.

Todd Furniss mentioned the 5% under budget for visits and the 37.5% under budget for charges seemed odd. James reassured Todd that there is a team working on aligning the budget better and looking into any discrepancies.

C. Governance Update: Organization of HOMES meetings, Upcoming Meetings (HOMES advisory board which meets the 2nd Monday of every other month)
James presented the date and times for the next HOMES Advisory Board Meeting which will be held on April 14th, 2025, at 11:30 AM. The previous Advisory Board Meeting from February had two community members attend.

D. Review and discuss provisions of the Health Resources and Services Administration (HRSA) Compliance Manual Requirements
James reviewed the HRSA Compliance Manual which has 21 chapters covering 19 requirements in the following four areas:

- Need
- Services
- Management & Finance
- Governance
- Annual Training was added as the 20th requirement

James reminded the Board of the annual uniform data system (UDS) reporting which was due February 15th and has been submitted. HRSA will review this and provide corrections from mid-February into mid-March 2025.

Marjorie Petty reminded the Board the reason we do monthly HOMES updates and reports is to remain compliant with the HRSA requirements. Marjorie also mentioned how interesting was to see the HRSA group come to Parkland and assess the HOMES department since it is a mobile FQHC basically.

E. Quarterly Update and Report Regarding HOMES Program Operational Compliance
Melanie Roberts presented on the elements of an effective compliance program which revolves around monitoring, preventing detecting, correcting and reporting on a continuous basis. Melanie mentioned that all the compliance efforts for HOMES must be reported to the HOMES Board. Melanie presented on the seven elements and program evaluation guide from HRSA which reviews policies and procedures, oversight, education, communication, standards, risk assessment, and initiatives under the compliance program. These elements align with the Department of Justice guidance for prosecutors. Moving forward, Melanie mentioned, the compliance report will be coming from her or her team providing another layer of affirmation that operations is doing

compliant work according to HRSA recommendations. Melanie next presented on the risk assessment and regulatory monitoring which focuses on a gap analysis for all program locations and the program refinements and policy enhancements. Melanie updated the Board on the auditing, monitoring and corrective action work plan item which was certified by the CMS in January 2023 as a federally qualified healthcare center and participating HRSA recognized Health Center. This item launched in April of 2024 to correct certain technological submission errors and charging errors.

Elizabeth Palacios asked about the error rate of 37% pertaining to the audit and Melanie discussed the issue with using a smaller population size leading to a larger error rate.

VII. Adjourn

With no further business to discuss, Marjorie Petty, JD, adjourned the meeting at 12:55pm.

SO RECORDED:

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

Parkland

Homeless Outreach Medical Services Program Monthly Update Report – March 2025

Kyla Rankin, Project Director

Agenda

Operational Updates

- Operations
- Management and Finance

Governance

Clinical Quality Update

Compliance Manual Requirements

HRSA Update

Operations Updates

Staffing

1.0 FTE Dental Assistant (DA)

2.0 FTE Medical Practice Assistance (MPA)

1.0 FTE Peer Navigator

1.0 FTE RN (nurse residency)

Site review

- Stewpot
- New collaborations

Mobile Medical Unit Updates

State of Homelessness

Management & Finances – February

Unduplicated	GY to Date	Annual Goal	% to Goal	% Year Complete
Patients	2292	9192	25%	16%

FY	Month				Year to Date			
Metrics	Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
Visits	3222	3187	35	1.1%	15,724	16,190	(466)	-2.9%
Expenses	$634,996	$697,568	$62,572	9.0%	$3,531,763	$3,809,911	$278,148	7.3%
Charges	$1,662,509	$2,496,391	($833,882)	-33.4%	$10,134,492	$12,681,667	($2,547,175)	-20.1%
Revenue	36,009				$184,298			
Commercial	$375				$3189			
Medicaid	$24,606				$112,628			
Medicare	$11,028				$68,481			
FTE	54.26				50.59			
FTE - OT	1.38	1.11	(0.27)	-24.1%	1.07	1.11	0.04	3.9%

- HRSA recommendation is claims billed in less than 30 days.
- HRSA grant year: January 1, 2025 to December 31, 2025

Governance

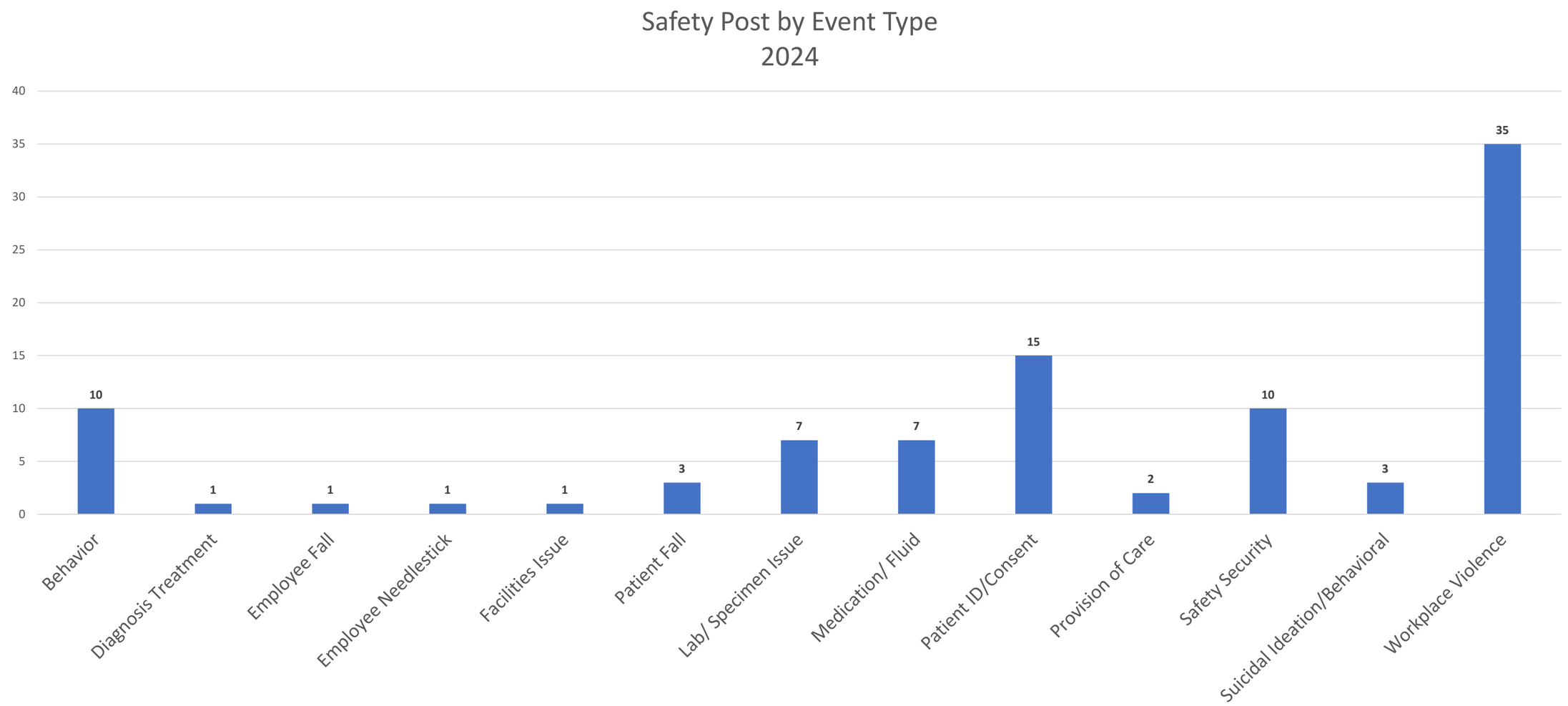
- HOMES Advisory Board Meeting
- Next HOMES Advisory Board Meeting:
    - April 14, 2025-11:30 am
    - Hybrid option available

Quality Data-Q1 FY2025

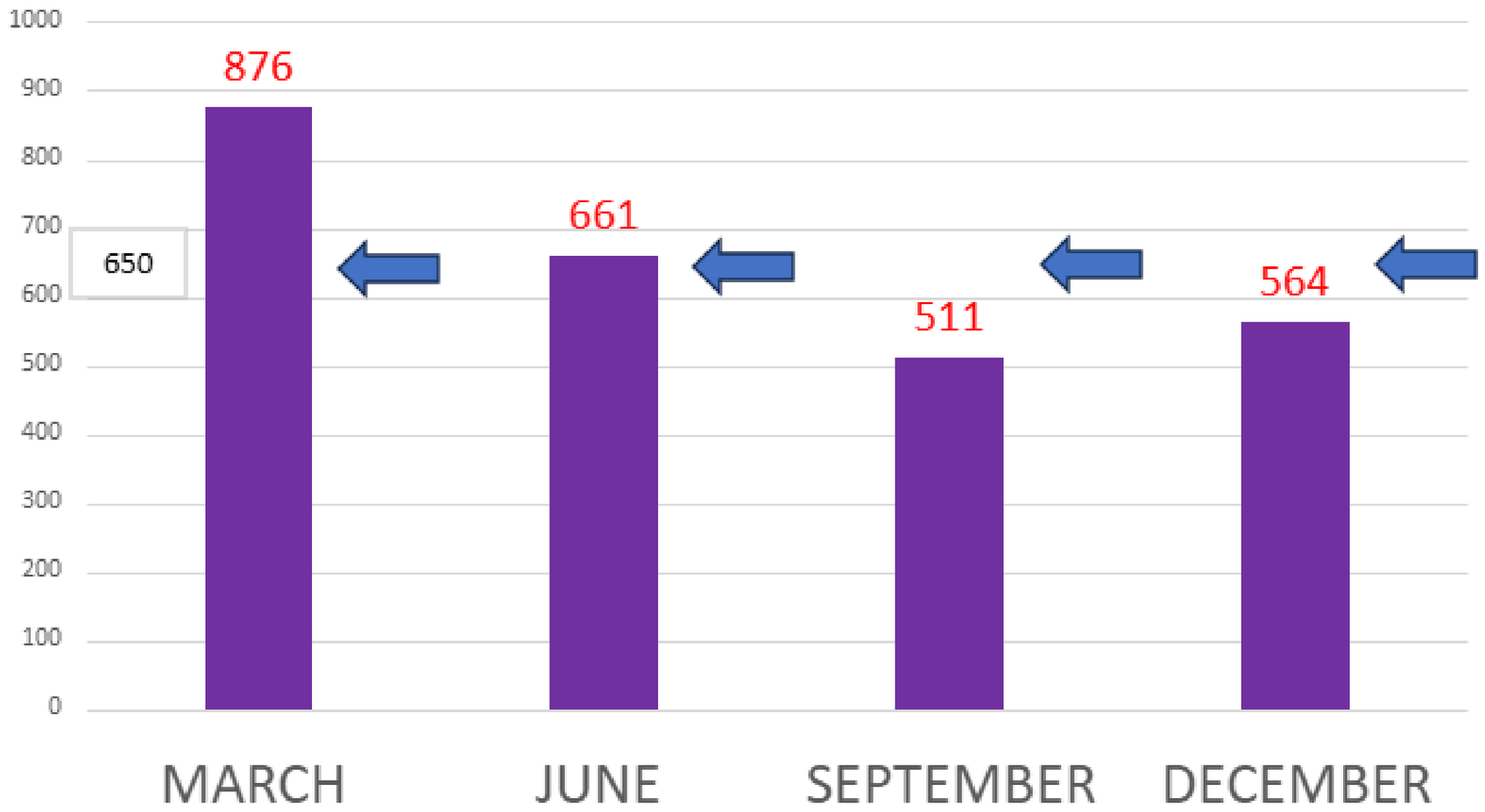
COPC Metric Balance Score Cards Patient Care & Safety Audits 2024

Measures	October 2024	November 2024	December 2024	Goal
Staff Safety Post	10	5	9	Information Only
Complaints	1	1	0	Information Only
Grievances	0	0	0	Information Only
2 Pt ID Error	100%	100%	100%	100.0%
Specimen Labeling	100%	100%	100%	100.0%
Hand Hygiene	100%	100%	100%	95%
Medication Reconciliation (Reviewed percent)	97%	97%	97%	90.0%
Environment of Care	97%	92%	97%	90%
Patient Messages (1-5-7)	94%	94%	95%	90.0%

Safety Post by Event type

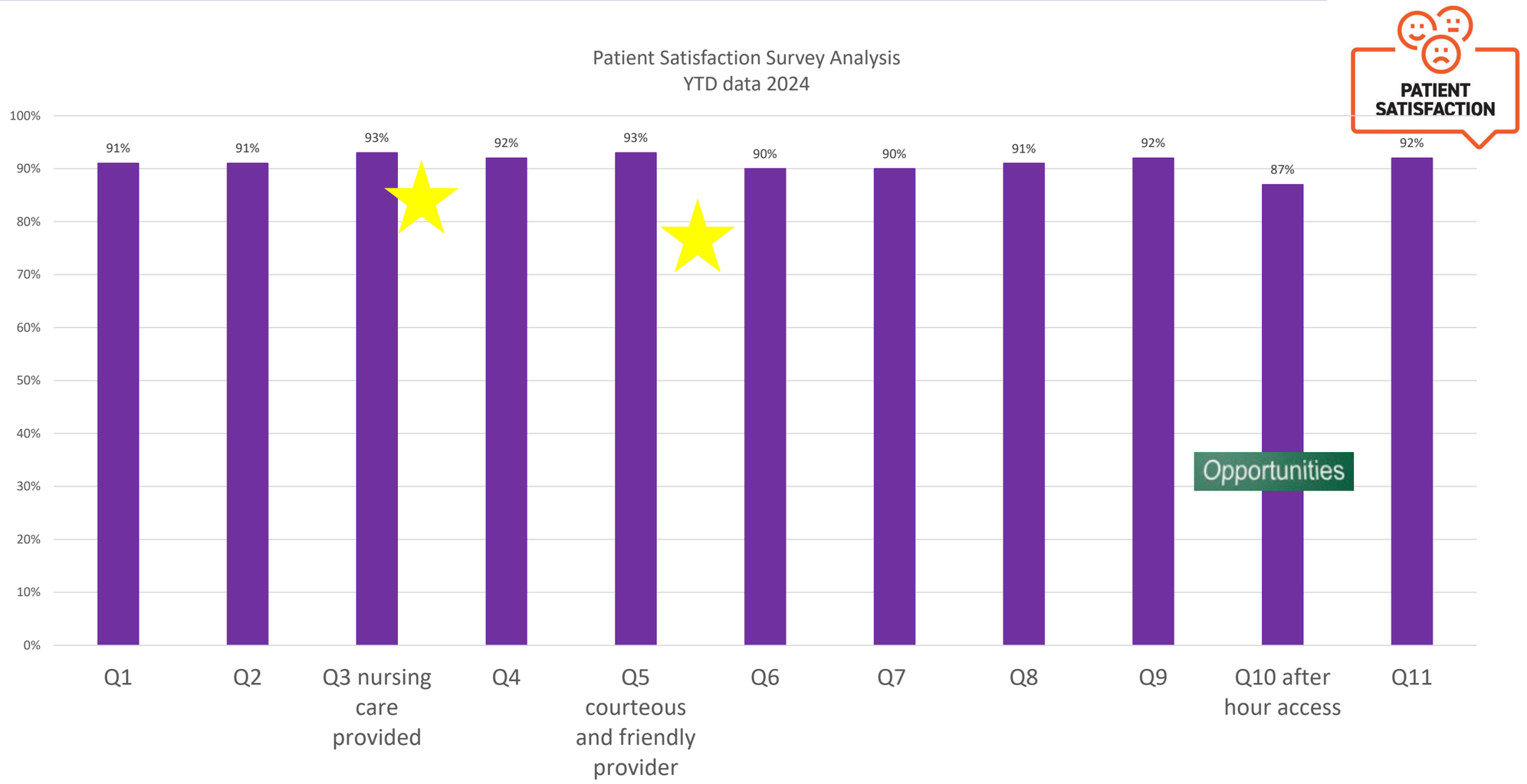


Patient Satisfaction survey collection CY2024

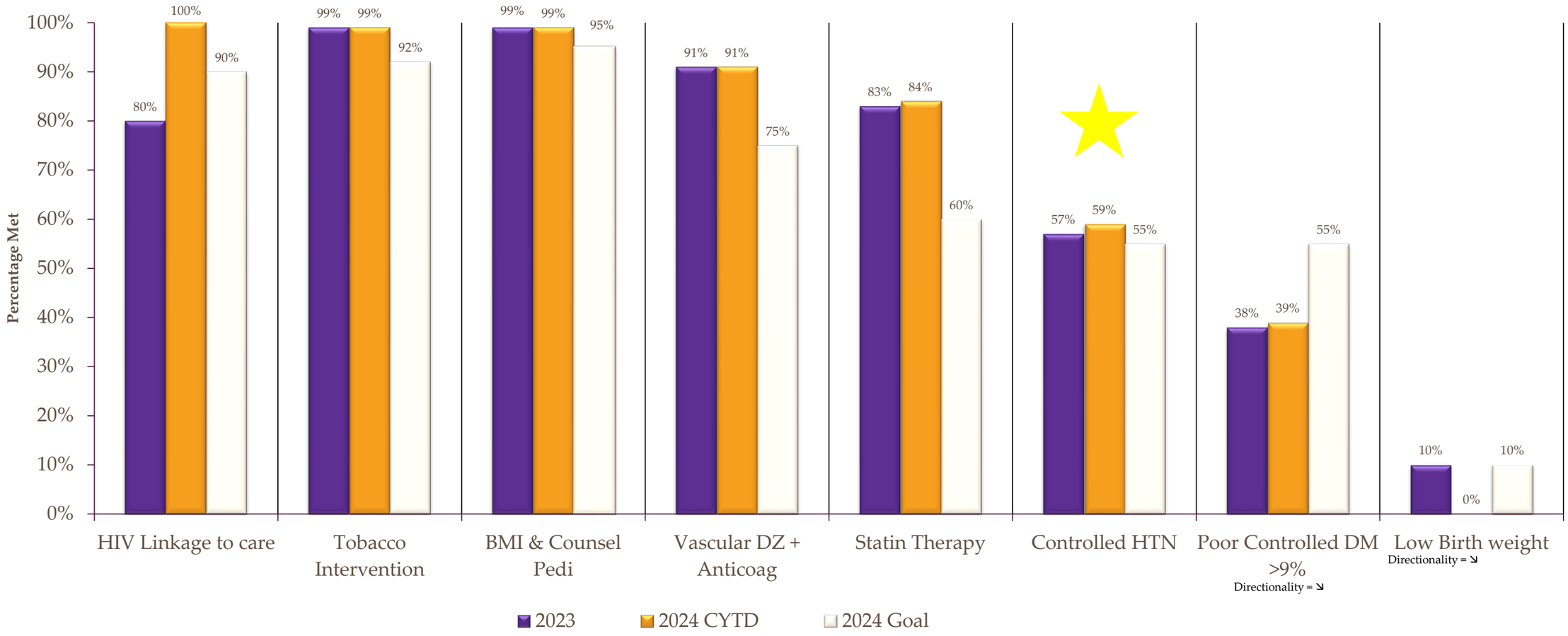


2025 collection starts March

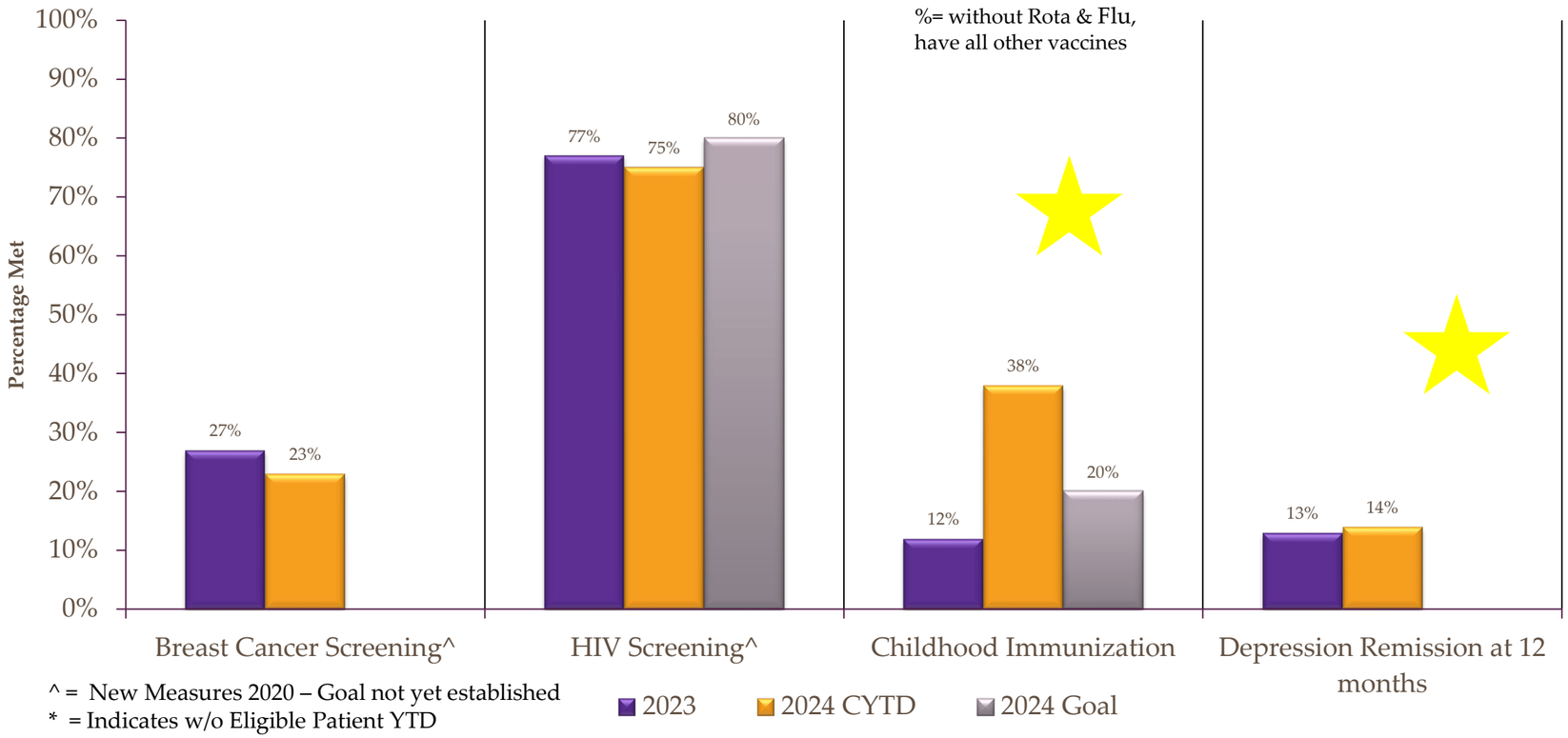
Patient Satisfaction Survey Analysis



HRSA Quality Measures at or above Goal
YTD – December 31, 2024



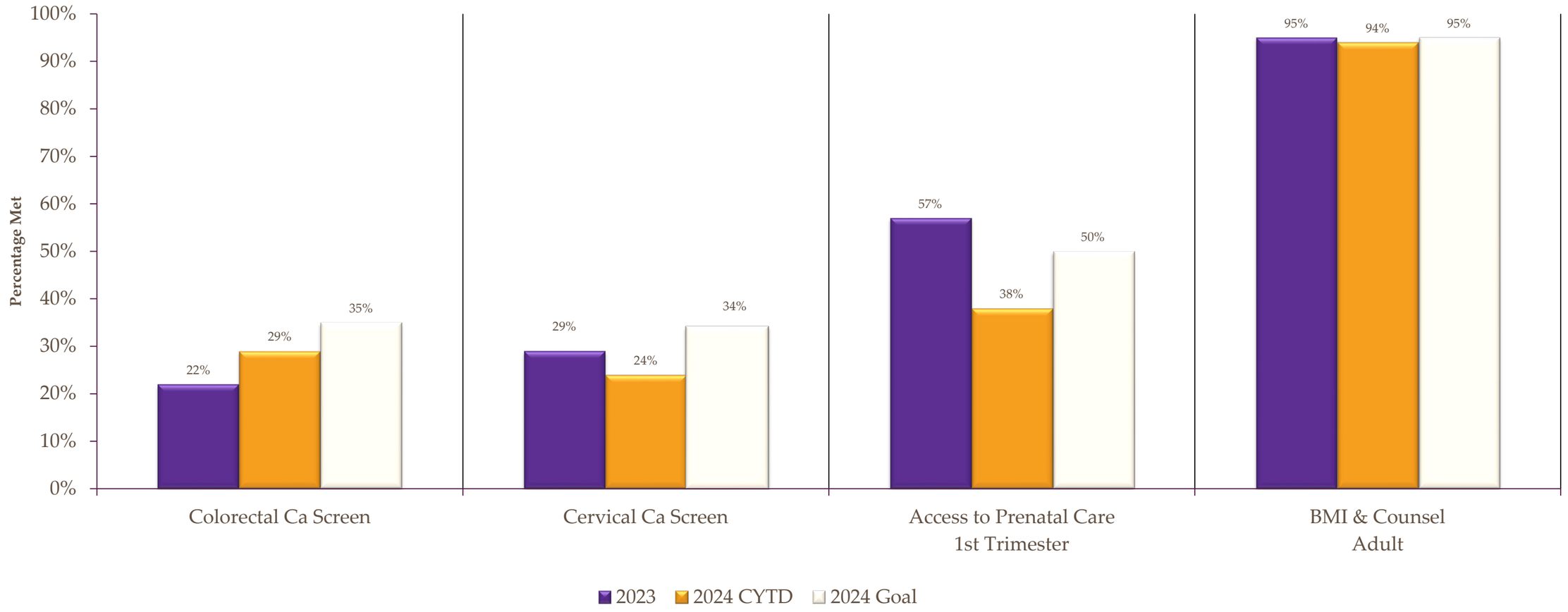
HRSA Quality Measures/ YOY Performance
YTD – December 31, 2024



HIV Screening: Percentage of patients aged 15-65 at the start of the measurement period who were between 15-65 years old when tested for HIV

Depression Remission +/- 12 mos: Due to timing in validation needed, data will be presented at the next BOM presentation.

HRSA Quality Measures Needing Improvement
YTD – December 31, 2024

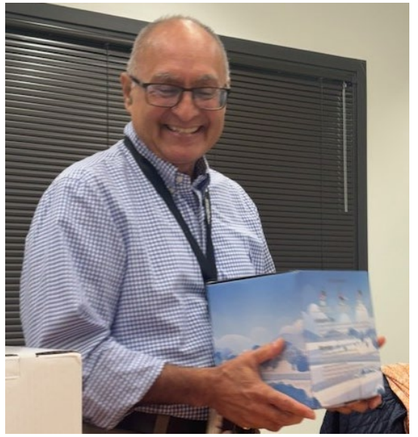


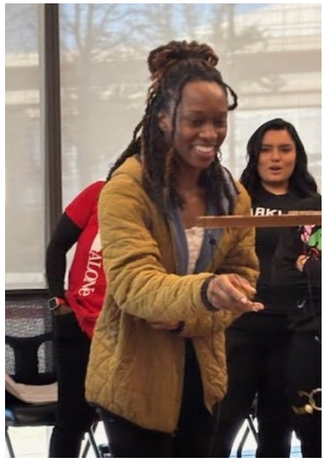
Impact of Socks to the HOMES patients

HOMES to present Thursday February 13th on the “Impact of Socks to the HOMES patients”

Final 2024 Count
7,486

Employee Engagement Holiday edition





One picture is worth a thousand words

— Albert Einstein —

HRSA Compliance Manual

The HRSA Compliance Manual has 21 chapters which cover 19 requirements in three(3) main areas:

1. Clinical
2. Finance
3. Governance
4. Annual training is also a requirement

HRSA Health Center Program Compliance Requirements – Chapter 15 Financial Management & Accounting Systems

Requirements

- Control and accountability of funds, property, and assets
- Written policies and procedures
- Utilize financial management and control systems in accordance with sound financial management procedures
- Financial management systems must specifically identify in its accounts all Federal awards, including the Health Center Program
- If $750,000 or more in Federal awards is expended during the fiscal year, a Single Audit or program specific audit must be conducted
- Non-grant funds may be used for purposes that are not prohibited under the grant program to further the objective of the health center project

HRSA Health Center Program Compliance Requirements – Chapter 15 Financial Management & Accounting Systems

PROCEDURE:

Grants Management utilizes a financial management and internal control system that reflects Generally Accepted Accounting Principles (GAAP) or Government Accounting Standards Board (GASB) principles and that ensures at a minimum:

Expenditures are consistent with the HRSA/grantor approved budget and with any additional applicable HRSA/grantor approvals that have been requested and received;

Effective control over, and accountability for, all funds, property, and other assets associated with the grant projects;

The safeguarding of all assets to assure they are used solely for authorized purposes in accordance with the terms and conditions of the grant program award/designation; and

The capacity to track the financial performance of the health center, including identification of trends or conditions that may warrant action by the organization to maintain financial stability.

HRSA Update

Annual Uniform Data System (UDS) Reporting

Report submitted February 15th

- Patient demographics, services provided, staffing, clinical processes & results, patients' use of services, costs, and revenues

HRSA reviewer feedback received, updates requested by March 14th

Final data-April 2025

Questions