Minutes of the Quality of Care and Patient Safety Committee meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, April 23rd , 2025, scheduled for 10:00 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 Elizabeth Palacios, MD, appointed Byron Cryer, MD, as committee chair for this meeting in her absence. Byron Cryer, MD, noted that a quorum was physically present and called the meeting to order at 10:00 am. Committee member Eric G. Bing, MD attended in-person. Ramon Miguez, PE, was appointed for quorum to start the meeting.

Board Member attendees included: Board Chair Marjorie Petty, JD, Vincent Hall, Reina Gonzalez, JD, and Todd Furniss, JD, via Webex.

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 & CEO
Gretchen Blake, VP Quality & Clinical Effectiveness via Webex
James Griffin, President of the Medical Executive Committee
Judy Herrington, SVP Nursing via Webex
Karen Garvey, VP Safety & Clinical Risk Management
Kathleen Doherty, VP Nursing Surgical Services
Kristie Brown, Dir., Nursing -Trauma
Marlin Suell, Chief of Police
Melanie Roberts, SVP/Chief Compliance & Ethics Officer
Michael Wood, Sr. Dir., Facilities Support Services
Michael Lane, SVP & Chief Quality and Safety Officer
Morgan Simmons, Governance Program Coordinator
Nneka Egbuniwe, Deputy General Counsel
Saul Cordero, SVP & Chief Governance & Strategy Officer
Sobha Fuller, SVP Nursing
Stephanie Crank, RN Prof. Dev. Practitioner
Steven Villescas, Dir., Environmental Safety

Attendees via Webex:
Pat Shirey, MS, RN-BC – Vice President, Ambulatory Clinic Operations
Caroline Park, MD - Service Chief, Trauma and Acute Care Services
Navid Sadeghi, MD, Program Chief – Parkland Cancer Program
Umber Dickerson, MPH, Administrative Director – Cancer Program
Jennifer Mosley, MSN, RN-BC, Director of Nursing, – Cancer Program

Jana LeClair, Dir., Med Staff and Professional Services

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 10:02 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.

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

A. **Update and Report by Chief Quality and Safety Officer**
Includes briefing from Executive Quality Committee (EQC)

B. **Review of Safety Event Cause Analysis (CA) Case(s)**
Shared learnings from recent safety event(s) with associated guide

C. **2025 Infection Prevention Risk Assessment and Plan**
Annual report and plan for Infection Prevention department

D. **Update and Report Regarding Quality-Related Key Performance Indicators (KPIs)**
Reports for quality improvement project(s) throughout the enterprise

1. Department Performance Improvement Committee (PIC)/ Clinical Quality Committee (CQC) Annual Presentation(s)
Annual report from service lines related to quality and safety

a. Cancer Program PIC

E. **Update and Report Regarding Environment of Care**
Annual departmental report related to quality and safety

F. **Possible Deliberation Regarding the Following**

A. Executive Summaries

Overview of QSO departmental reports

B. Quality of Care Dashboard
Monthly update of quality key performance indicators (KPIs)

C. Cause Analysis (CA) Log
List of upcoming cause analysis case reviews

D. Update and Report Regarding Environmental Services (EVS)
Annual departmental report

E. Update and Report Regarding Regulatory and Accreditation Affairs
Quarterly report for Regulatory activities, tracers, and auditing

F. CY2025 Infection Prevention Risk Assessment - Hospital

G. CY2025 Infection Prevention Risk Assessment – OP/CH

H. CY2025 Infection Prevention Plan

I. Cancer PIC Supplemental

J. Environment of Care Supplement

~ end of Quality Portion of QBOM Agenda

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 11:13 am.

A. Consideration and Appropriate Action Regarding Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers

1. Medical Staff and Non-Physician Clinical Providers to Parkland Health

a. Credentialing Report

b. Delineation of Privileges (DoPs)

i. Non-Physician Clinical Provider Staff (NPCPS) High Resolution Anoscopy Triage

VII. **Executive Session: Discussion regarding report and/or information provided by the Chief Quality Safety Officer and related items on this agenda.**
The Committee conducted a discussion with the Chief Quality & Safety Officer, SVP, Michael Lane, without other members of management present.

VIII. **Executive Session: Discussion regarding report and/or information provided by the Medical Executive Committee President and related items on this agenda.**
The Committee conducted a discussion with the Medical Executive Committee President, Dr. James Griffin without other members of management present.

Chair adjourned Executive Session and moved into Open Session at 12:15 pm.

IX. **Action Items (Open Session)**

A. Consideration and Appropriate Action Regarding CY2025 Infection Prevention Plan
   1. Consideration and Appropriate Action Regarding MEC Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers
   2. Credentialing Report
      a. Delineation of Privileges (DoPs)
      b. Non-Physician Clinical Provider Staff (NPCPS) High Resolution Anoscopy Triage

Ramon Miguez motioned to approve the Executive Committee Recommendations and Delineation of Privileges. Eric Bing 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 12:16 pm.

SO RECORDED:

Elizabeth Palacios, MD
Elizabeth Palacios, MD (Jun 9, 2025 06:57 CDT)

Elizabeth Palacios, MD
Committee Chair

Steven Roth
Steven Roth (Jun 3, 2025 17:40 CDT)

Steven Roth, JD, MPH
Assistant Secretary