Minutes of the Quality of Care and Patient Safety Committee meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, December 17th, 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, noted that a quorum was physically present and called the meeting to order at 10:00 a.m. Committee members and Farida Minner, RN, and Byron Cryer, MD, attended in person.

Board Member attendees included: Marjorie Petty, JD, Ramon Miguez, PE, Reina Gonzalez, JD, and Vincent Hall.

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

Brad Nitschke, Interim EVP Legal Affairs
Brett Moran, Chief Health Officer
Carmen Bowling, SVP Nursing
David Alexander, SVP Nursing
Dawn Marchetto, SVP Nursing
Donna Richardson, EVP & Chief Nursing Officer
Edmundo Castañeda, EVP & Chief Operating Officer
Fred Cerise, President & CEO
Gretchen Blake, VP Quality & Clinical Effectiveness
James Griffin, President of the Medical Executive Committee
Judy Herrington, SVP Nursing
Karen Garvey, VP Safety & Clinical Risk Management
Kareem AbdelFattah, VP & ACMO
Kathleen Doherty, VP Nursing Surgical Services
Maggie Palmer, VP/Medical Staff Professional Services
Marlin Suell, Chief of Police
Michael Lane, SVP & Chief Quality and Safety Officer
Michelle Ng, Administrative Resident
Morgan Simmons, Governance Program Coordinator
Saul Cordero, SVP & Chief Governance & Strategy Officer
Sobha Fuller, SVP Nursing
Ryan Mauck, MD – Service Chief, Urology; Pres-Elect – Med Staff

Attendees via Webex:

Mallory Cash, MD – Associate Chief, Psychiatric Emergency Services
Stephen Figueroa, MD – Neurocritical Care Medical Director
Barry-Lewis Harris II, MD, CCHP – Medical Director and Chief, Correction Health Services
Regina Williams, DNP, RN, NEA-BC,CCHP - Senior Director of Nursing

Pooja Koolwal, MD – Medical Director, Peritoneal Dialysis
Michelle Kuchta, MSN, RN - Director of Nursing, Ambulatory Specialty Clinics

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.

Executive Session: Quality & Patient Safety Operations (QSO)
Tex. Health & Safety Code §§161.032 & 161.0315 and Tex. Occupations. Code §160.007

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. **Update and Report Regarding Safety Center, Serious Safety Events, and Cause Analysis Trends**
Annual report on activities and trends reported through Safety Center

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

1. Dallas County Hospital District Police Annual Report
Annual report related to quality and safety

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

a. Correctional Health Dallas County

b. Peritoneal Dialysis PIC

Possible Deliberation Regarding the Following

A. Executive Summaries
Overview of QSO departmental reports

B. Hospital Clinical Excellence Operating Review Update
Monthly update of quality key performance indicators (KPIs) for Inpatient Care

C. Population Health Clinical Excellence Operating Review Update
Monthly update of quality key performance indicators (KPIs) for Population Health

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

E. Texas Department of State Health Services (DSHS) Preventable Adverse Events (PAEs) Update
Biannual Report on preventable adverse events

F. Cause Analysis Cumulative Falls Report
Quarterly report for patient falls

G. Nursing Staffing Effectiveness Committee Report, CY2025
Annual report on Nursing staffing

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

James D. Griffin received recognition of excellence and appreciation as this will be his last meeting as the Director of the Medical Executive Committee.

James D. Griffin, MD, President of the Medical Executive Committee, discussed the items posted on the agenda starting at 11:24 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. Oral and Maxillofacial Surgery (OMFS) DoP

ii. Internal Medicine DoP

iii. Endocrinology DoP
iv. Gastroenterology DoP
v. Infectious Disease DoP

VII. Executive Session: Discussion regarding report and/or information provided by the Chief Quality Safety Officer and related items on this agenda.

The Committee did not conduct 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 MEC Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers
   1. Credentialing Report
   2. Delineation of Privileges (DoPs)
      a. Oral and Maxillofacial Surgery (OMFS) DoP
      b. Internal Medicine DoP
      c. Endocrinology DoP
      d. Gastroenterology DoP
      e. Infectious Disease DoP

Upon deliberation the Board motioned to remove the two items regarding waivers of qualifications for K. Khurana, MD and C. S. Pavelka, MD bring them back for further consideration.

Todd Furniss motioned to approve the Medical Executive Committee Recommendations, Credentialing Report, Bylaws and Maternal Levels of Care Program Resolution apart from the two waivers. Ramon Miguez 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 12:15 pm.

SO RECORDED:

Elizabeth Palacios, MD
Elizabeth Palacios, MD (Feb 10, 2026 19:56:00 CST)
Elizabeth Palacios, MD
Committee Chair

Brad Nitschke
Brad Nitschke (Feb 5, 2026 12:49:39 CST)
Brad Nitschke, JD
Interim Secretary