Parkland

HOMES
Homeless Outreach Medical Services
Agenda

The agenda for the Board of Managers HOMES meeting of the Dallas County Hospital District is scheduled for **Wednesday, November 18, 2026, at 12:30 PM *(or directly following the Quality and Patient Safety Meeting)*** at 5200 Harry Hines Blvd, Dallas, Texas, 75235 WISH Building Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) 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: 2300 981 7884; 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.	**Opening/Call to Order/Determine the Presence of 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 **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 2026-10-28 HOMES	3	1	Chair
III.	**Reports Requiring Deliberation(s) and/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	Kyla Rankin
C.	Governance Update: Organization of HOMES meetings, Upcoming Meetings (HOMES advisory board which meets the 2nd Monday of every other month)	11	3	Kyla Rankin
D.	Quarterly Quality Data Review for HOMES (HRSA metrics, scorecard-safety posts, patient surveys)	12		Kyla Rankin

	PAGE	TIME (MIN)	PRESENTER(S)
E. HOMES Unit Based Council	23	3	Kyla Rankin
IV. Executive Session			
A. Performance Appraisal of HOMES Project Director: Kyla Rankin *Tex. Gov't Code §551.074*		15	Chair
V. Closing Remarks			
A. Call to Adjourn			

Appropriate Action Regarding Minutes 2026-10-28 HOMES

Parkland

MINUTES

Dallas County Hospital District Board of Managers

HOMES
October 28, 2026

Minutes of the Board of Managers HOMES meeting of the Dallas County Hospital District, held Wednesday, October 28, 2026, scheduled for 12:50 pm or directly following the Quality and Patient Safety Meeting, in the WISH 02-175 Executive Conference Room at Parkland Health and via Webex. These minutes do not constitute a certified agenda for the meeting.

I. Attendance and Call to Order

Chair Vincent Hall noted that a quorum was physically present and called the meeting to order at 12:26 pm.

Board Member attendees included: Eric G. Bing, MD, PhD, Byron Cryer, MD, Farida Minner, RN, Reina Gonzalez, JD, Ramon Miguez, PE, Marjorie Petty, JD, Miriam Sharma, RN and Yasmin Simon, JD.

Board Members not present: Jeff Tillotson, JD and Todd Furniss, JD.

Staff Present (via Webex and in-person) included:
Brad Nitschke, Chief Legal Officer
Brett Moran, Chief Health Officer
Donna Richardson, EVP & Chief Nursing Officer
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & Chief Executive Officer
Edmundo Castaneda, EVP & Chief Operating Officer
James Perez, VP Clinic Operations
Joseph Chang, Chief Medical Officer
Kareem AbdelFattah, VP & Assoc. Chief Medical Officer
Keri Disney-Story, VP Clinical Finance
Kyla Rankin, HOMES Project Director
Michael Lane, SVP Chief Quality & Safety Officer
Morgan Simmons, Governance Program Manager
Natalie Vasquez, Administrative Resident
Saul Cordero, SVP & Chief Governance & Strategy Officer
Travis Smith, Chief Financial Officer

Additional Attendees: None

II. Mission Statement

The 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 reviewing the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Consent Agenda

A. Appropriate Action Regarding Minutes 2026-09-23 HOMES

B. Appropriate Action Regarding Minutes 2026-10-12 HOMES Advisory Board

Marjorie Petty motioned for the approval of the Consent Agenda. Ramon Miguez seconded the motion. The motion passed unanimously.

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

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

Kyla Rankin provided an operational update on staffing, fixed sites, mobile units, outreach, and employee engagement. She reported that a Dental Assistant started October 26 and a Medical Practice Assistant is scheduled to transfer into HOMES on November 25, reducing current vacancies. Construction at the Stewpot is expected to begin November 30, with operations anticipated between March and May 2027, while the Salvation Army site remains on track for October 2027. Starlink installation on mobile units has improved connectivity at remote sites. Kyla mentioned that the flu outreach initiative concluded after more than 20 events at which 274 vaccinations were administered. Employee engagement results remained generally at or above organizational averages, with leadership planning follow-up efforts to improve future scores.

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

Kyla Rankin presented the September financial update, reporting 2,770 visits, 8.7% below budget, with year-to-date visits 3.1% below budget. Expenses remained favorable to budget by 9.8% for the month and 9.9% year to date. Overtime was also below budget for both periods. Charges totaled approximately $33.1 million year to date which was 28.5% above budget.

C. Governance Update: Organization of HOMES meetings, Upcoming Meetings (HOMES advisory board)

Kyla mentioned the next HOMES Advisory Board meeting will be held on Friday, December 4th, 2026, at 11:30 AM with a hybrid option available.

D. Review and Discuss Provisions of the Health Resources and Services Administration (HRSA) Regarding the Compliance Manual Requirements: Chapter 17 – Budget Requirements

Kyla Rankin reviewed and discussed the provisions of the HRSA compliance manual chapter 17 regarding budget requirements.

E. HOMES CY2027 HRSA Budget Approval

Kyla Rankin reviewed the HRSA CY2027 budget, noting that it meets applicable HRSA Health Center Program requirements. The budget includes approximately $3.675 million in federal HRSA funding, supplemented by Parkland funding. Approximately 86% of the federal grant supports salaries and fringe benefits, with remaining funds covering supplies, contracts, travel, and indirect costs. She explained that HRSA and Parkland operate on different fiscal cycles and that only HRSA-eligible expenses are reflected in the federal grant amount. Approximately 40% of overall funding is provided by HRSA and 60% is provided by Parkland.

Vincent Hall requested a motion to approve the HOMES CY2027 HRSA Budget. Byron Cryer motioned to approve. Marjorie Petty seconded the motion. The motion passed unanimously.

II. Action Items

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

VII. Adjourn

With no further business to discuss, Vincent Hall adjourned the meeting at 12:34 pm.

SO RECORDED:

Vincent Hall Chair	Brad Nitschke, JD Assistant Secretary

Parkland

Homeless Outreach Medical Services Program Monthly Update Report-November 2026

Kyla Rankin, Project Director

Agenda

- Operational Updates
  - Operations
  - Management and Finance
- Governance
- HOMES Quality (quarterly review)
- Unit Based Council
- HOMES Project Director Performance Evaluation

Operational Updates

- Staffing
  - 1.0 FTE Mental Health Counselor (LPC)
  - 1.0 FTE Mobile Medical Unit Driver
  - 1.0 FTE Dentist
  - 1.0 FTE Medical Director
- Fixed Site Updates
  - The Stewpot
  - The Salvation Army
- Mobile Unit Updates
- Outreach
- Workforce Safety





Management & Finances – October

	Month				Year to Date			
Metric	**Actual**	**Budget**	**Variance**	**% Var**	**Actual**	**Budget**	**Variance**	**% Var**
Visits	3226	3489	(263)	(7.5%)	3226	3489	(263)	(7.5%)
Expenses	$758,239	$847,373	$89,134	10.5%	$758,239	$847,373	$89,134	10.5%
Charges	$2,812,297	$3,235,204	($422,907)	(13.1%)	$2,812,297	$3,235,204	($422,907)	(13.1%)
Revenue	$68,514				$68,514			
Commercial	$2290				$2290			
Medicaid	$43,014				$43,014			
Medicare	$23,210				$23,210			
FTE	60.04				60.04			
FTE - OT	1.57	1.15	(0.42)	-36.4%	1.57	1.15	(0.42)	-36.4%

3

- HRSA grant year: January 1, 2026 to December 31, 2026
- HRSA recommendation is claims billed in less than 30 days.

Governance

- HOMES Advisory Board Meeting
  - Next meeting

    Parkland Joint CAB-December 4th
  - Next regular scheduled meeting
    - February 15, 2027

Quarterly Quality Review

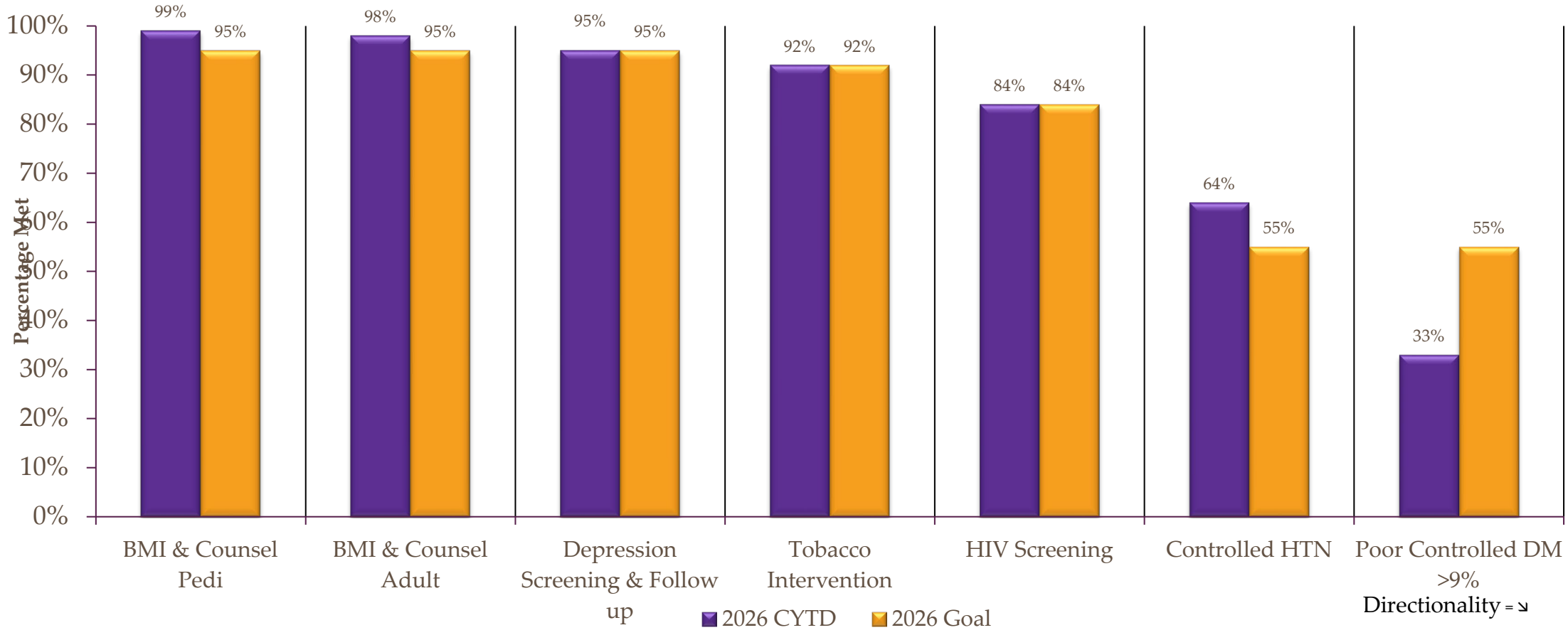
Parkland | Care. Compassion. Community.

COPC Metric Balance Score Cards Patient Care & Safety Audits 2026

Measures	Feb	March	April	May	June	July	August	Sept	October	Nov	Goal
Staff Safety Post	8	3	4	1	1	14	9	9	NA	NA	Information Only
Complaints	0	0	1	0	0	1	0	0	NA	NA	Information Only
Grievances	0	0	0	0	0	0	0	0	NA	NA	Information Only
2 PT ID ERROR	100%	100%	100%	100%	100%	100%	100%	100%	NA	NA	100%
Specimen Labeling	100%	100%	100%	100%	100%	100%	100%	100%	NA	NA	100%
Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	NA	NA	95%
Medication Reconciliation (provider review)	98%	98%	98%	97%	97%	97%	99%	99%	NA	NA	90%
Environment of care	100%	97%	100%	100%	91%	91%	91%	100%	NA	NA	90%
Patient messages 1-5-7	82%	95%	98%	91%	96%	93%	97%	95%	NA	NA	90%

- Workplace Violence
- Equipment /Facilities
- Cleanliness of clinic (mobile units)
- Patient ID error
- Lab/ Specimen Events
- Safety Security
- Medication/ Fluid Event
- Skin Tissue event

HRSA Quality Measures at or above Goal
YTD – October 31, 2026

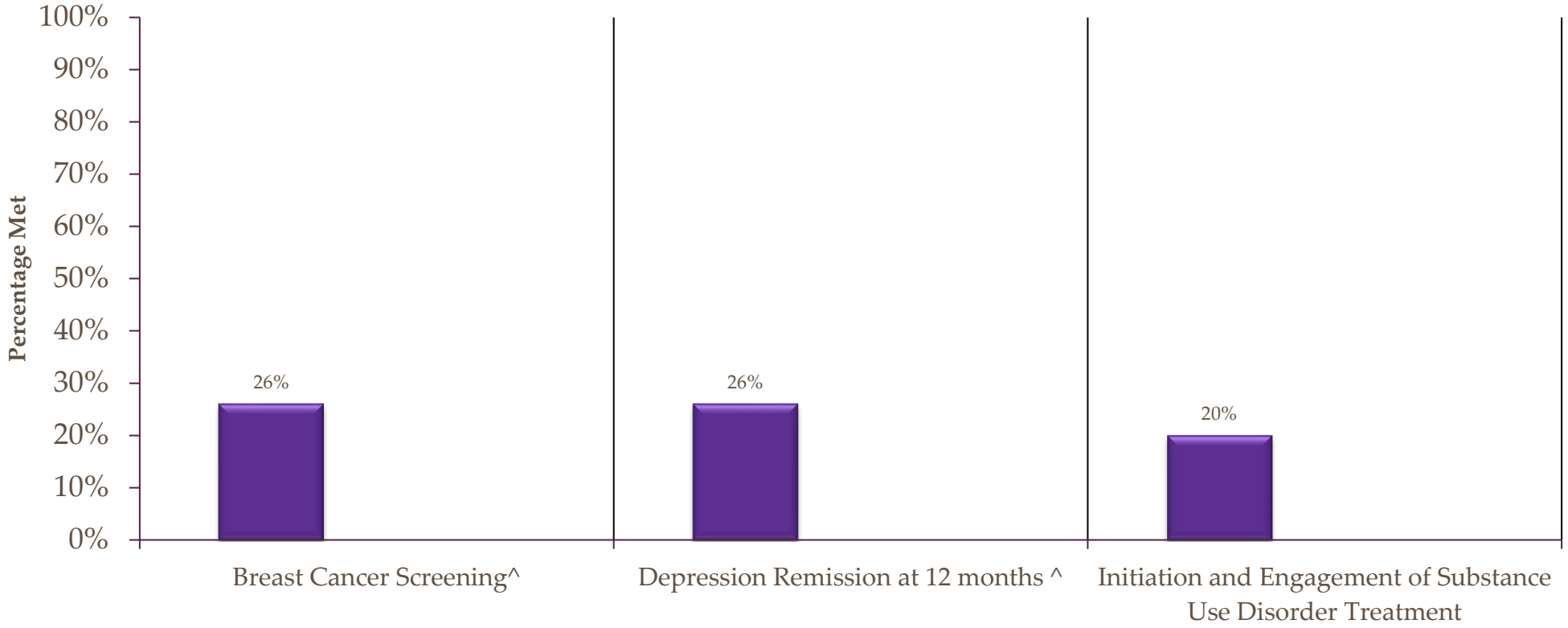


Directionality = ↘

Parkland | *Care. Compassion. Community.*

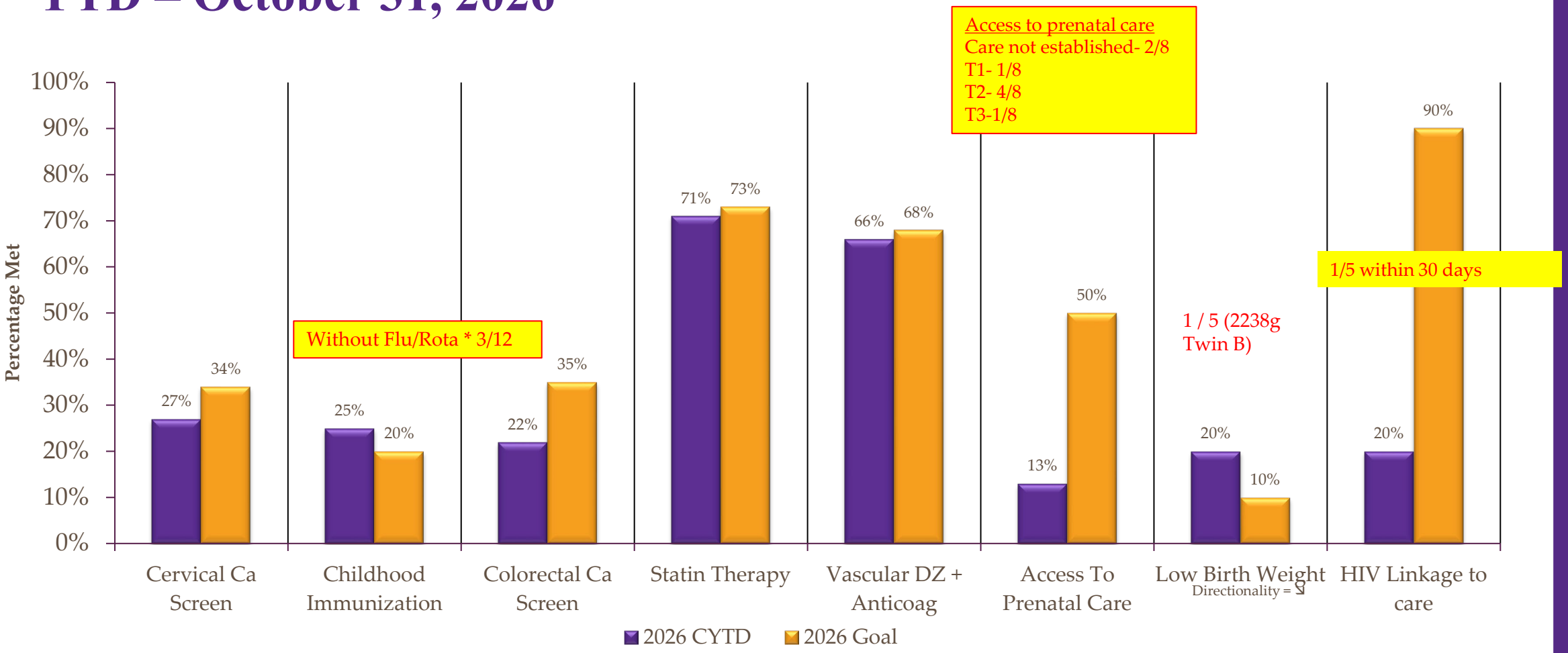
HRSA Quality Measures/ YOY Performance

YTD – October 31, 2026



^ = New Measures 2020 – Goal not yet established
* = Indicates w/o Eligible Patient YTD

HRSA Quality Measures Needing Improvement
YTD – October 31, 2026



NP= No patient

Parkland | *Care. Compassion. Community.*

New 6B Quality: Fall Risk Screening 65+

Baseline Validation Process

Population

- Patients age 65 years and older.
- At least one qualifying visit during the review period.

Manual Epic Review

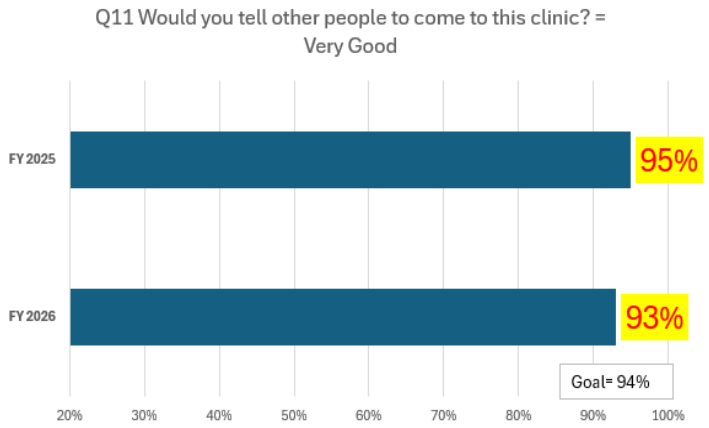
Review a sample of eligible patients and validate:

✅ Patient is 65 years or older
✅ Qualifying encounter occurred
✅ Fall risk screening documented
✅ Screening completed during measurement period

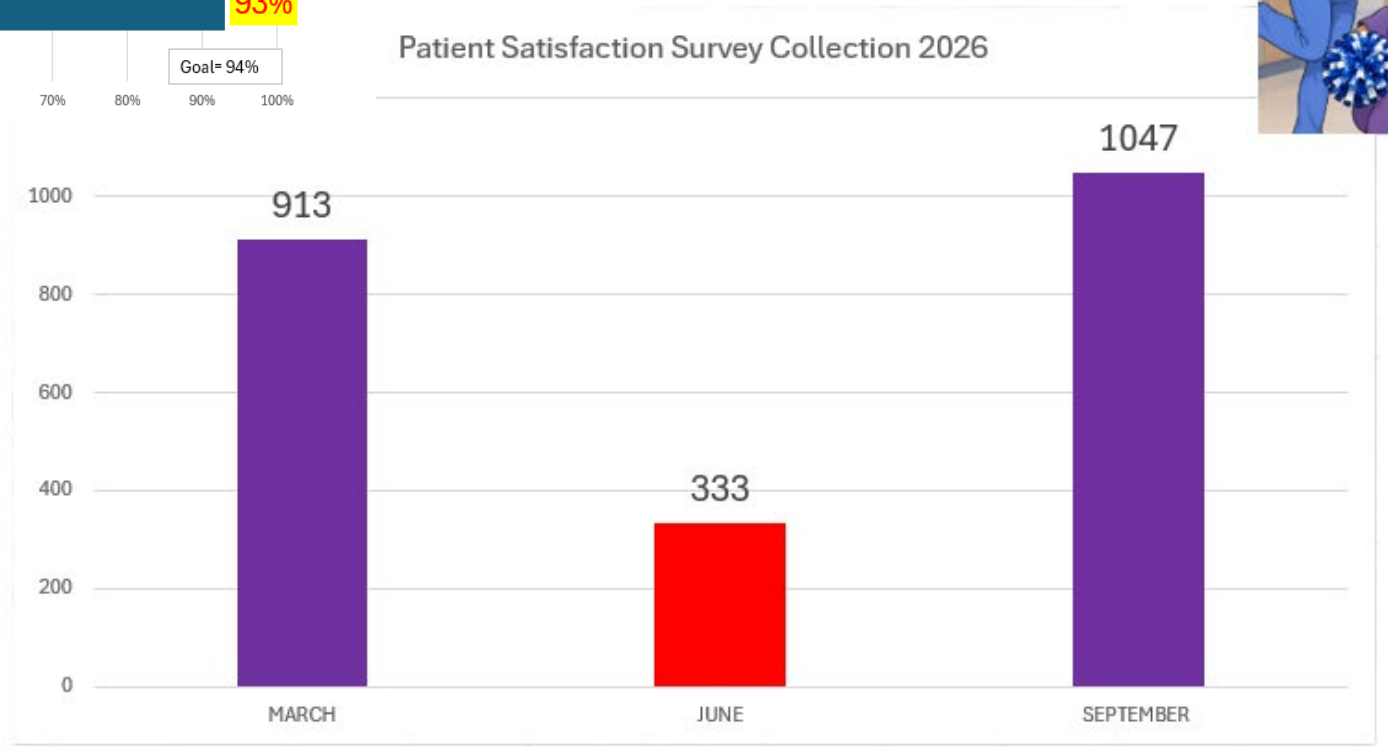
Plan
Conduct manual review of patients age 65+ and identify compliance gaps.
Do
Implement staff reminders and education regarding fall risk screening documentation.
Study
Compare:
Number screened
Number missed
Common documentation issues
Act
Refine workflow and provide targeted education where gaps remain.

MRN	Visit Date	Age	Fall Screen Completed	Location in Epic	Missed Opportunity
			Yes/No	Flowsheet/SmartForm	Yes/No

99/100 Fall risk screened!







Parkland | *Care. Compassion. Community.*

Novel Approach to Project Improvement



4 Multi disciplinary teams working simultaneously on PI projects at the same time



Purpose:

To improve collaboration, quality and efficiency of care

Develop front line team-based competence

Simultaneous groups allowed efficiency and bandwidth for more issues to be addressed

Foster “buy in” from staff







*Practical Modified Best Practice Process Improvement

August Meeting

Formation of teams & group exercises

Create measurable project aim

Examine workflow, plan changes and implementation

Sept Meeting (1 month post implementation)

Each team discuss learnings, issues and predictions on assessment

PI support provided assessment data

Team next steps

Oct Meeting

Reassess

Next Steps



*Development, Oversite & Planning:
Quality Nurse Manager-Vanessa Martinez
Med Dir

September-Project Progress & Next Steps

Team	AIM
One Bridge One Team	**Decrease patient to provider wait times by 10%** for patients at the Bridge by the next HOMES staff meeting in one month. **Progress -Data variable-some experience of improvement** **Next Steps-Refinement and role clarification during visits. Report development on segments of visits.**
Flow on the GO	Improve patient flow by having patients **checked in and on the mobile unit by 8:15 AM at Stewpot at least 50%** of the time. **Progress**-Aug 5/20= **20%** Sept =**29% percentage of visits by 8:15;** **Next Steps-workflow adjustments continue, report development**
The Bite Club	**Decrease the dental clinic no show rate by at least 5%** at The Stewpot Clinic to help improve patient health and productivity by the next HOMES staff meeting. **Progress-adjustments to scheduling , reminders being made** **Next steps-continued process updates and report creation**
Team EPIC	Increase the number of patient satisfaction surveys collected across the HOMES department during the month of **September 2026 by 10% above the goal of 650=over 1K! Progress GOAL EXCEEDED!** **Next steps-development of survey for group visits. Methodology* workflow creation**



Parkland | Care. Compassion. Community.

Questions?

Parkland | Care. Compassion. Community.

Performance Appraisal of HOMES Project Director: Kyla Rankin