Minutes of the Quality of Care and Patient Safety Committee meeting of the Board of Managers of the Dallas County Hospital District, held Wednesday, January 28th, 2026, 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, and Todd Furniss, JD attended in person.

Board Member attendees included: Marjorie Petty, JD, Ramon Miguez, PE, Yasmin Simon, 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 (via Webex)
Michael Lane, SVP & Chief Quality and Safety Officer
Michelle Ng, Administrative Resident
Morgan Simmons, Governance Program Coordinator
Natalie Garza Vasquez, Administrative Resident
Saul Cordero, SVP & Chief Governance & Strategy Officer
Sobha Fuller, SVP Nursing
Ryan Mauck, MD – Service Chief, Urology; Pres-Elect – Med Staff

Attendees via Webex:

Sonya Manibusan, CCP, LSSYB - Senior Director, Volunteer and Guest Services
Fadwa Ali, MD – Service Chief, Colorectal Surgery
Catherine Chen, MD, MSHI – Critical Care Service Line Chief
Joe B. Lockridge, MD, FAST - Medical Director, Kidney Transplant Program

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 10:01 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 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. Medicine Services

   b. Transplant Services

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

Possible Deliberation Regarding the Following

A. Executive Summaries
Overview of QSO departmental reports

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

C. Update and Report Regarding Patient Relations: Complaints, Grievances and Successes
Biannual report on Activities and trends reported through Safety Center

D. Update and Report Regarding Regulatory & Accreditation Affairs Surveys and Complaints
Quarterly update on various surveys and complaints

E. Supplemental Cause Analysis Case

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

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

Ryan Mauck, MD, President of the Medical Executive Committee, discussed the items posted on the agenda starting at 11:25 am.

1. Medical Staff and Non-Physician Clinical Providers to Parkland Health
    a. Credentialing Report
    b. Delineation of Privileges (DoPs)
        i. Radiology DoP – Addendum
        ii. Non-Physician Clinical Provider Staff DoP – Medicine (Triage)
        iii. Non-Physician Clinical Provider Staff DoP – Women's Health (Triage)
        iv. Geriatric Medicine DoP (Full Review)
        v. Hematology and Medical Oncology DoP (Full Review)
        vi. Pulmonary Medicine DoP (Full Review)
        vii. Rheumatology DoP (Full Review)

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. Ryan Mauck without other members of management present.

Chair adjourned Executive Session and moved into Open Session at 12:17 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. Radiology DoP – Addendum
    b. Non-Physician Clinical Provider Staff DoP – Medicine (Triage)
    c. Non-Physician Clinical Provider Staff DoP – Women's Health (Triage)
    d. Geriatric Medicine DoP (Full Review)
    e. Hematology and Medical Oncology DoP (Full Review)
    f. Pulmonary Medicine DoP (Full Review)
    g. Rheumatology DoP (Full Review)

Byron Cryer motioned to approve the Medical Executive Committee Recommendations, Credentialing Report, and Delineation of Privileges. 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 12:17 pm.

Parkland

MINUTES

Dallas County Hospital District Board of Managers

Quality of Care and Patient Safety
January 28th, 2026

SO RECORDED:

Byron Cryer
Byron Cryer (Mar 16, 2026 10:13:43 CDT)

Byron Cryer, MD
Committee Chair

Brad Nitschke
Brad Nitschke (Mar 4, 2026 12:54:57 CST)

Brad Nitschke, JD
Assistant Secretary

Signature:

Email: byron.cryer@phhs.org