Parkland

HOMES
Agenda

Agenda for the ***Board of Managers HOMES*** meeting of the Dallas County Hospital District is scheduled for ***Wednesday, April 26, 2023, at 12:30 PM*** at 5200 Harry Hines Blvd (WISH Building) Dallas, TX 75235, Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) A quorum will be physically present at the location of the meeting. 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: 2622 770 5225; 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.	**Declare a Quorum Present/Call to Order/Mission Statement** ***Advance Wellness | Relieve Suffering | Develop and Educate***			Chair
	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*			
II.	**Consent Agenda**		1	
A.	Approve Minutes 2023-03-29 HOMES	2		Chair
B.	Approve Minutes 2023-04-10 HOMES Advisory Board	6		
III.	**Reports Requiring Deliberation(s) or Approval(s)**			
A.	Operations Update	13	2	Kyla Rankin
B.	Management and Finance Update	14	2	
C.	Governance Update	15	2	
D.	HRSA Compliance Manual Requirements: The Big 20	16	2	
E.	HRSA Compliance Manual Requirements: Chapter 14 Collaborative Relationships	20	2	
F.	2023 State of Homelessness Address	22	2	
G.	HRSA Update	24	2	
H.	Approve Legislative Mandates in Grant Management Policy	27	2	
IV.	**Action Items**			
A.	Board May Take Action on Any Agenda Item(s) Above			Chair
V.	**Adjourn**			
A.	Closing Remarks			
B.	Call to Adjourn			

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Approve Minutes 2023-03-29 HOMES

Parkland

MINUTES

Dallas County Hospital District Board of Managers

HOMES
March 29, 2023

Minutes of the Board of Managers HOMES meeting of the Dallas County Hospital District, held Wednesday, March 29, 2023, scheduled for 12:30 p.m. 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 12:30 p.m.

Board Member attendees included: Chair Marjorie Petty, JD; Eric G. Bing, MD, PhD; Todd Furniss, JD; Reina Gonzalez, JD; Ramon Miguez, PE; Farida Minner, RN; Don O'Bannon, Esq; Elizabeth Palacios, MD; and Lisa Sutter John Proctor attended via Webex.

Board member Jeff Tillotson, JD, was not present.

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

Donna Richardson, EVP & Chief Nursing Executive (in-person)
Edmundo Castañeda, EVP & Chief Operating Officer (in-person)
Felicia Miller, EVP & Chief Talent Officer (in-person)
Forrest Stovall, Governance Program Manager (in-person)
Fred Cerise, President & Chief Executive Officer (in-person)
Kellee Boardingham, Executive Assistant (in-person)
Kyla Rankin, HOMES Project Director (in-person)
Melanie Roberts, SVP Chief Compliance & Ethics Officer
Pam Bryant, SVP Chief Supply Chain Officer
Rick Humphrey, EVP & Chief Financial Officer
Roberto de la Cruz, EVP & Chief Clinical Officer (in-person)
Saul Cordero, VP & Chief Governance Officer (in-person)
Steven Roth, EVP & Chief Legal Officer (in-person)
Vic Summers, SVP & Chief Audit 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. Approve Minutes 2023-02-22 HOMES

Todd Furniss, JD, motioned for the approval of the Consent Agenda. Ramon Miguez, PE, 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 Kyla Rankin, HOMES Project Director.

A. Operations Update

Kyla Rankin reported on HOMES' staffing. There is one Nurse position posted and a Peer Navigator was recently hired bringing the total number of peer navigators to three. Kyla also reported on High Reliability Organization (HRO) initiatives within HOMES to include daily huddles and huddle boards. Kyla also mentioned that HOMES has focus opportunities which include pap clinics, telehealth, and implementation of social determinants of health.

B. Management and Finance Update

HOMES has seen 2,146 unduplicated patients to date. The annual goal is 9,675. Kyla is working with her leadership team to consider reducing the unduplicated patient goal with HRSA. For the month of February, Kyla is under budget but for the year, she remains slightly over budget. Kyla will continue to monitor the areas that cause her to be over budget which include salaries, supplies, and pharmacy costs.

C. Governance Update

The next HOMES Advisory Board meeting is April 10, 2023, at Noon. A hybrid attendance option (in-person and virtual) will remain in place.

D. HRSA Compliance Manual Requirements: The Big 20

Kyla Rankin reviewed The Big 20 manual.

E. HRSA Compliance Manual Requirements - Chapter 7: Coverage for Medical Emergencies During and After Hours

Kyla Rankin reviewed Chapter 7: Coverage for Medical Emergencies During and After Hours. She reported on the HRSA requirements and how HOMES demonstrates compliance with the HRSA requirements.

F. HRSA Update

Kyla Rankin confirmed the Annual UDS Report was submitted in February and the necessary follow-up responses were submitted by March 6th. Kyla also reported on additional supplemental funding from HRSA she plans to apply for. The additional funding is specific to HIV services.

G. 2023 State of Homelessness Address
Kyla Rankin shared the details of the 2023 State of Homeless Address to be held on April 13, 2023.

H. Awards & Recognition
Kyla announced the HOMES Advanced Practice Provider team received the 2022 APP Team of the Year Award for Parkland.

VII. Adjourn

With no further business to discuss, Chair Marjorie Petty, JD, adjourned the meeting at 12:40 p.m.

SO RECORDED:

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

Parkland

Approve Minutes 2023-04-10 HOMES Advisory Board

HOMES ADVISORY BOARD
MEETING MINUTES

Date: 4/10/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitators: Kyla Rankin

Attendees							
x	Kyla Rankin	x	Benita Grant	x	Farida Minner	x	Wanda Wonzer
x	Sara Galvez		Margie Roberts	x	Michael Gilot		Dennis Thomas
	Dolores Diaz		W.R. Cunningham		Pink Elke		Queen Jeffery
x	Donna Persaud		Marjorie Petty		Trudy Hernandez	x	Forrest Stovall
Guests							

	Agenda Item/ Presenter	Discussion	Action items
	Approval of February Minutes	-Motion to approve minutes. Approved by Michael Gilot, seconded by Farida Minner.	
	Staffing	- Currently there are 2 open positions, 1 FTE RN & 1 FTE Dental Assistant - Leadership is currently interviewing for these positions. - Peer Navigator position has been accepted with a tentative start date of May 1st.	
	Operations	- Started screening for Social Determinates of Health (SDOH) at medical visits. This is a Parkland wide initiative to screen for 11 social domains including but not limited to depression, access to food, housing, etc. SDOH is a nurse driven effort, based on screenings-appropriate referrals are made to social worker, peers, behavioral health. Three domains are already included in current workflow (depression, tobacco use and domestic violence), others are incorporated into a questionnaire patients fill out prior to their visit. A Dashboard in Epic helps track progress of SDOH. - Dental Updates: Mobile Dental Unit (MDU) currently runs 3 days per week to Nexus, Austin Street, Creuzot, and Salvation Army. Dental team is not fully staffed and has had challenges hiring Dental assistants. The plan is to expand the MDU once fully staffed. The Dental team has recently encountered challenges with instruments missing or damaged. Leadership has had regular meetings with sterile processing department to problem solve. Sterile processing came to Stewpot Clinic for a site visit and provided operational recommendations regarding packaging to prevent damage and missing items. Dental team plans to visit sterile processing to observe their operations too. - Deflection Center (DC): continues to run Mon-Sun 10am to 8pm. Bimonthly meetings are held between Parkland, Homeward Bound and North Texas Behavioral Health (NTBHA) as a touch point/check-in. These meetings will soon include frontline staff. Safety at Deflection Center: Looking into ways to make sure everyone is staff and get needed support. Panic buttons and radio have been requested by staff. - Facilities: Temporary shed location on Butler. HOMES leadership is working with facilities on some necessary updates which include a new sewage tank, installing an additional rolling gate and lighting. There have also been challenges with cars parked	

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HOMES ADVISORY BOARD
MEETING MINUTES

Date: 4/10/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitators: Kyla Rankin

		on Butler St. which make it difficult for MMUs to turn in. PDC is working with the City to place "no parking" signage. Phase 2 of the shed update will include additional fencing to make room for more units and staff parking. - MMU: Sara discussed several maintenance issues with mobile units and provided an update on the newer unit that was damaged in September and is still in the repair shop; Frank, HOMES Supervisor, maintains ongoing communication with body shop. - Parkland is working toward being a high reliability organization (HRO), which include components of safety and transparency. HOMES leadership has encouraged staff to report safety events. Leadership is working with Workforce safety as issues arise. - Telehealth: Sprinter is being used at Expanding COVID Vaccination (ECV) outreach events. Nursing and providers were trained on telehealth equipment at March staff meeting. A trial run for telehealth is planned at Homeward Bound; to work through logistics. HOMES team is meeting with Housing Forward regarding coordinated street outreach to get additional ideas for potential telehealth expansion. - Staffing is a concern with telehealth go live. Farida- asked when we anticipate telehealth being operational: Kyla stated that there will be trial runs in April. HOMES has also been working with a Grand Prairie outreach coordinator. These patient visits have been inside Grand Prairie COPC and the goal is to move these visits to the sprinter & utilize telehealth. - Another option for the Sprinter is for utilization when a mobile unit breaks down. - Ultimate Kronos Group-Advisory board was informed about a Parkland wide new platform for employee scheduling.	
	Finance & Budget	- We are at 25% of our unduplicated patient goal. About 270 ahead of last year. Kyla informed the advisory board that during the February winter storm, HOMES was closed 4 days due to inclement weather. This closure impacted visits. HOMES also has 1 provider on FMLA and although a float provider has been requested, this will not provide 100% coverage for the provider on FMLA. - Competitive grant is due in August/September 2023. During that time, HOMES can request a decrease of unduplicated patient goal. We can decrease our goal to approximately 9100 without losing funding. Kyla reports this is a consideration since the team has not met the unduplicated goal for the past 3 years. - Finance: Most months HOMES is on Budget. Supplies, Salaries and Pharmacy are typically the things that make us go over budget in any given month.	
	Quality	- Dr. Persaud reviewed the safety scorecard. Safety posts have increased. Not because there have been more safety events but because staff have been encouraged to report. Within Parkland as a whole, there have been an increase in patient driven events; violence/physical altercations with staff	

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HOMES ADVISORY BOARD
MEETING MINUTES

Date: 4/10/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitators: Kyla Rankin

		- Leadership is looking at staff competencies and trainings regarding de-escalation and self-protection. Support systems are in place. Workplace violence safety officer is dedicated to monitor violent/physical altercation posts and the officer also, manages communication with patients. There is an ability for patients to be discharged after multiple safety events. Parkland Police, Workforce safety officer and Christina Mintner, SVP of Population Health/HOMES, attended the March staff meeting to speak with staff and address safety concerns. - Wanda asked what happens when violent patients show up to appointments. What happens with them? Do they have some many times that they are violent towards staff before they are kicked out? Is there a probationary period? Dr. Persaud said yes to all of the above, at various levels but it depends on the individual case. Cases are reviewed by the central multiple disciplinary committees. Patient are given formal communications and in person communication. Legal may be involved. Patient discharge can be a long process as it used as a last resort. If a patient is discharged from Parkland, they may still visit the Emergency room but not COPC clinics. Dr. Persaud's name/number is in all HOMES clinics and mobile units for patients to utilize if they have staff concerns. - Another safety concern that has come up is drivers bringing in units around 8/830pm when it is dark. Parkland Police have increased patrols around the shed location. - Dr. Persaud discussed 2 patient ID errors being done through audits. - Patient satisfaction Surveys: HOMES has moved to collecting surveys quarterly. The month-long push is done 1x quarter. The goal was 250 surveys and staff went above goal and collected 550 surveys for March. June will be the next month-long push.	
	HRSA Update	- Initial UDS reporting is completed. Final review is generally closed out end of April. - ECV Funding (Jan-May): received funding for outreach and education, community engagement and coordinated partner events. 24 events have been completed/130 vaccines given. HRSA has given notification that this funding may be extended from 1-3 months per grantee request.	
	UBC and Employee Engagement	- HOMES Unit Based Council has 13 members. - Benita, HOMES Community Development Specialist reported, UBC started employee of the quarter. This is voted on by anonymous survey. The 3rd Winner was Domingo Davila (behavioral health staff) - UBC also takes on Staff appreciation by discipline-each discipline has their own month. UBC provides breakfast and a goody bag of snacks to members of that discipline.	
	Miscellaneous	- HOMES APP team won Parkland 2022 APP of the Year Team award. There were 26 nominees	

HOMES ADVISORY BOARD
MEETING MINUTES

		- 2022 Dallas County Community Health needs assessment; Tuesday April 11, 2023. 10-11:30am at Goodwill. - 2023 State of the Homelessness Address; Thursday, April 13th 10-11:30am. This will be held virtually and provide 2022 PIT count numbers.	
	Advisory Board Membership	- Kyla reports she is still looking for new members to add to the advisory board - We've reached out to current partners for potential members.	
	Looking Ahead	- Competitive Grant year: HOMES leadership will meet with HRSA project officer in April. - New mobile unit May/June 2023	
	Next Meeting	Next meeting-June 12, 2023.	

The minutes, records and improvement activities operate under HB 4495b and the Texas Health & Safety Code, Sec. 161.031 & 161.032 affording protection from disclosure or discovery. Records of these committees are not public and are not subject to court subpoena. Records may be made available to persons who have a right to review the records and who are required to keep the information confidential.

Parkland

Homeless Outreach Medical Services Program Monthly Update Report – April 2023

Kyla Rankin, Project Director

Agenda

- Operational Updates
  - Operations
  - Management and Finance
- Governance
- HRSA Compliance Manual Requirements: The Big 20
- State of Homelessness Address at-a-glance
- HRSA HOMES data at-a-glance
- Policy approval

Operations

- Staffing-Posted Positions
  - 1.0 FTE Registered Nurse
  - 1.0 FTE Mobile Medical Unit Driver
  - 1.0 FTE Dental Assistant
  - 1.0 FTE MPA
- Dallas Deflection Center (Homeward Bound)
- Telehealth

Management & Finances – March

Unduplicated	GY to Date	Annual Goal	% to Goal	% Year Complete
Patients	2970	9,675	30%	25%

FY	Month				Year to Date			
Metrics	Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
Visits	3682	2816	866	30.7%	20,240	14,426	5814	40.3%
Expenses	$600,499	$629,745	$29,246	4.6%	$3,604,798	$3,607,752	$2955	0.1%
Charges	$2,360,964	$2,421,652	($60,687)	-2.5%	$13,296,549	$12,404,543	$892,006	7.2%
Revenue	$59,252				$344,932			
Commercial	$80				$3771			
Medicaid	$41,062				$238,565			
Medicare	$18,110				$102,596			
FTE	59.44				58.85			
FTE - OT	1.12	1.05	(0.06)	-5.9%	.88	1.31	.43	32.6

- HRSA recommendation is claims billed in less than 30 days.
- HRSA grant year: January 1, 2023 to December 31, 2023

Governance

- Meeting: April 10, 2023
  - Approval of HOMES Advisory Board meeting minutes
- Next Meeting: June 12, 2023

The Big 20

The HRSA Compliance Manual has 21 chapters which cover 19 requirements in the four (4) areas:

1. Need
2. Services
3. Management & Finance
4. Governance
5. Annual training was added as a 20th requirement

HRSA Health Center Program Compliance Requirements Summary for Board of Managers

HRSA Requirement	Description	Board Month
1. Needs Assessment (Ch. 3)	Demonstrates and documents the needs of its target population, updating its service area, when appropriate. Community Needs Assessment	September Every 3 years (2019)
2. Required & Additional Services (Ch. 4)	Provides all required primary, preventive, enabling health services and additional health services as appropriate and necessary, either directly or through established written arrangements and referrals.	August
3. Staffing (Ch. 5)	Maintains a core staff as necessary to carry out all required health services either directly or through arrangements and referrals. Staff must be appropriately licensed, credentialed, and privileged.	August
4. Accessible Hours of Operation / Locations (Ch. 6)	Provides services at times and locations that assure accessibility and meet the needs of the population.	August
5. Coverage for Medical Emergencies During & After Hours (Ch. 7)	Provides professional coverage for medical emergencies during regularly scheduled hours and when the center is closed.	March
6. Hospital Admitting Privileges & Continuum of Care (Ch. 8)	Physicians have admitting privileges at one or more referral hospitals, or other such arrangement to ensure continuity of care. In cases where hospital arrangements (including admitting privileges and membership) are not possible, health center must firmly establish arrangements for hospitalization, discharge planning, and patient tracking.	August and update as needed

HRSA Health Center Program Compliance Requirements Summary for Board of Managers

7. Sliding Fee Discounts (Ch. 9)	A system is in place to determine eligibility for patient discounts adjusted on the basis of the patient's ability to pay. • This system must provide a full discount to individuals and families with annual incomes at or below 100% of the Federal poverty guidelines (only nominal fees may be charged) and for those with incomes between 100% and 200% of poverty, fees must be charged in accordance with a sliding discount policy based on family size and income. • No discounts may be provided to patients with incomes over 200 % of the Federal poverty guidelines. • No patient will be denied health care services due to an individual's inability to pay for such services by the health center, assuring that any fees or payments required by the center for such services will be reduced or waived.	Annually to align with Federal Poverty Guidelines
8. Quality Improvement/ Assurance Plan (Ch. 10)	A Quality Improvement/Quality Assurance (QI/QA) program is in place which includes clinical services and management, and confidentiality of patient records. The QI/QA program must include: • A clinical director whose focus of responsibility is to support the quality improvement/assurance program and the provision of high-quality patient care; • periodic assessment of the appropriateness of the utilization of services, quality of services provided or proposed to be provided to individuals served by the health center; assessments shall: – be conducted by physicians or by other licensed health professionals under the supervision of physicians; – be based on the systematic collection and evaluation of patient records; and – identify and document the necessity for change in the provision of services by the health center where indicated.	Quarterly Metric Review: February or approval of annual UDS report August November December QAPI Policy: October
9. Key Management Staff (Ch. 11)	Maintains a fully staffed team as appropriate for the size and needs of the center. Prior approval by HRSA of a change in the Project Director/Executive Director/CEO position is required.	September and update as needed
10. Contractual/Affiliation Agreements (Ch. 12)	Exercises appropriate oversight and authority over all contracted services, including assuring that any subrecipient(s) meets Health Center program requirements.	October and ongoing
11. Collaborative Relationships (Ch. 14)	Makes effort to establish and maintain collaborative relationships with other health care providers, and health centers, in the service area of the center. The health center secures letter(s) of support from existing health centers in the service area or provides an explanation for why such letter(s) of support cannot be obtained.	March and ongoing
12. Financial Management and Control Policies (Ch. 15)	Maintains accounting and internal control systems appropriate to the size and complexity of the organization reflecting Generally Accepted Accounting Principles (GAAP) and separates functions appropriate to organizational size to safeguard assets and maintain financial stability. An annual independent financial audit is performed in accordance with Federal audit requirements, including submission of a corrective action plan addressing all findings, questioned costs, reportable conditions, and material weaknesses cited in the Audit Report.	July

HRSA Health Center Program Compliance Requirements Summary for Board of Managers

13. Billing and Collections (Ch. 16)	Systems in place to maximize collections and reimbursement for its costs in providing health services, including written billing, credit and collection policies and procedures.	November
14. Budget (Ch. 17)	Develops a budget that reflects the costs of operations, expenses, and revenues necessary to accomplish the service delivery plan, including the number of patients to be served.	HRSA approval
15. Program Monitoring & Data Reporting Systems (Ch. 18)	Have systems in place to accurately collect and organize data for program reporting and support management decision making.	March
16. Scope of Project	Maintains its funded scope of project (sites, services, service area, target population, and providers); including any increases based on recent grant awards.	Award notification & update as needed
17. Board Authority (Ch. 19)	Governing board maintains appropriate authority to oversee the operations of the center, including: • holding monthly meetings; • approval of the health center grant application and budget; • selection/dismissal and performance evaluation of the health center CEO; • selection of services to be provided and the health center hours of operations; • measure and evaluate the organization's progress in meeting its annual and long-term programmatic and financial goals and develop future plans for the organization by engaging in strategic planning, ongoing review of the organization's mission and bylaws, evaluating patient satisfaction, and monitoring organizational assets and performance; and establish policies for the health center.	December
18. Board Composition (Ch. 20)	Governing board is composed of individuals, a majority of whom are being served by the center and, this majority as a group represents the individuals being served by the center in terms of demographic factors such as race, ethnicity, and sex. Specifically: • Governing board has at least 9 but no more than 25 members, as appropriate for the complexity of the organization. • The remaining non-consumer members of the board shall be representative of the community in which the center's service area is located and shall be selected for their expertise in community affairs, local government, finance and banking, legal affairs, trade unions, and other commercial and industrial concerns, or social service agencies within the community. • No more than one half (50%) of the non-consumer board members may derive more than 10% of their annual income from the health care industry.	December
19. Conflict of Interest Policy (Ch. 13)	Bylaws or written corporate board approved policy include provisions that prohibit conflict of interest by board members, employees, consultants and those who furnish goods or services to the health center. No board member shall be an employee of the health center or an immediate family member of an employee. The Chief Executive may serve only as a non-voting ex-officio member of the board.	December
20. Annual Board Training	Annual training of governing board. New governing board members will be trained during board orientation.	December

For additional information on these requirements, please review:

- Health Center Program Statute: Section 330 of the Public Health Service Act (42 U.S.C. §254b)
- Program Regulations: 42 CFR Part 51c and 42 CFR Parts 56.201-56.604
- Grants Regulations: 45 CFR Part 74

HRSA Health Center Program Compliance Requirements – Chapter 14 Collaborative Relationships

Requirements

- Establish and maintain collaborative relationships with other health care providers in the area, to provide access to services not available through the health center and to reduce the non-urgent use of hospital emergency departments.

- Coordinate and integrate project activities with the activities of other federally-funded, as well as State and local, health services delivery projects and programs serving the same population.

HRSA Health Center Program Compliance Requirements – Chapter 14 Collaborative Relationships

- **Service Sites**
  - **Fixed Sites:** The Bridge, Stewpot & Homeward Bound (Deflection center)
  - **Mobile Sites:** Austin Street Shelter, City Square, Dallas 24 Hour Club, Dallas Life Foundation, Dallas Transitional Center, Golden Gate Ministry, Good Samaritans of Garland, Homeward Bound, Nexus Recovery Center, Our Calling, Gateway Foundation (Cruezot), Promise House/Wesley Inn, Salvation Army, Salvation Army-ARC, Soul's Harbor, Turtle Creek Manor, Union Gospel Mission, Vogel Alcove
  - **Domestic Violence Sites:** Family Place, Genesis Women's Shelter & Support, & Mosaic Family Services

State of Homelessness Address 2023 at-a-glance

Point-in-Time (PIT) count, our annual census of our unhoused neighbors, a requirement under Federal Law, helps communities understand the extent of homelessness, changing trends, and the measure of their success.

4244

Individuals Experiencing Homelessness on a Single Night in 2023

28%	72%
Unsheltered	Sheltered

4% Decrease in Homelessness Overall

14% Decrease in Unsheltered Homelessness

Homeless Services System Performance in FY 2022

Rare

18%

Increase in People Exiting to Permanent Housing

Brief

95 Days

Average # of Days People Experience Homelessness

Non-recurring

92%

Remained Housed After 12 Months

Community Trends

This year, we saw a significant decrease in the number of neighbors experiencing chronic and unsheltered homelessness, which can be attributed to our community's investment in additional rehousing resources. This underscores the importance of continuing to prioritize housing interventions that aim to end a neighbor's homelessness, rather than temporary solutions. Increases in the number of people staying in temporary housing and crisis-based environments drove an overall increase in the count among Veterans, individuals in families, and youth. This sends a clear signal that when individuals and families seek assistance from the homeless response system, we must be equipped to offer immediate housing solutions.

Chronic Homelessness: 691

32% Decrease Since 2022

Youth Homelessness: 192

18% Increase Since 2022

Veteran Homelessness: 365

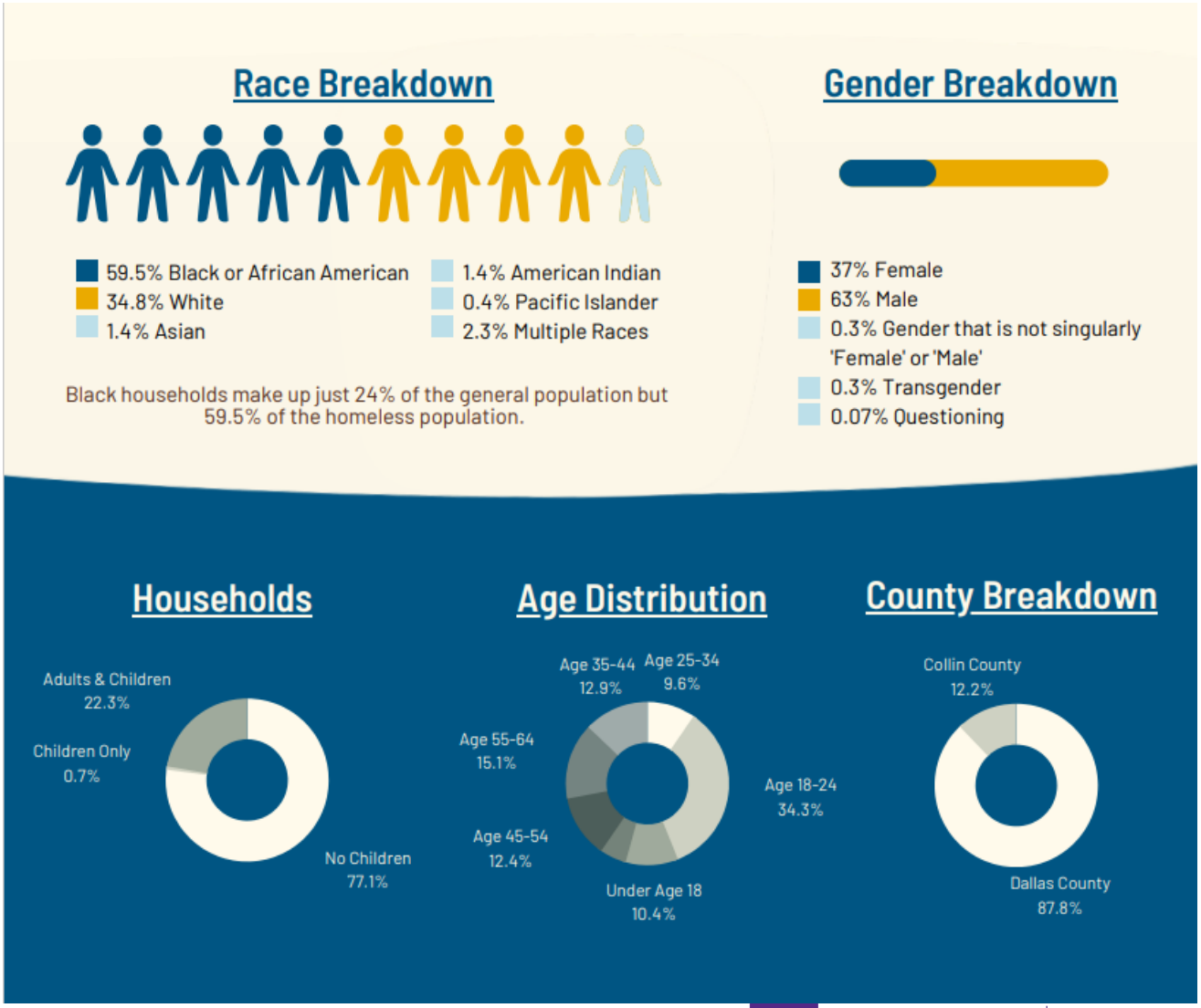
21% Increase Since 2022

Family Homelessness: 822

15% Increase Since 2022

Parkland | *Care. Compassion. Community.*

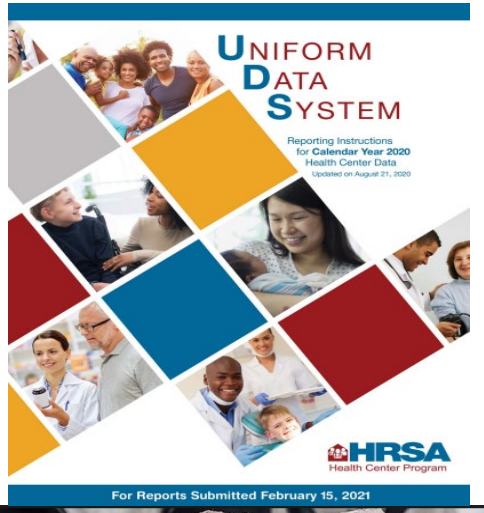
State of Homelessness Address 2023 at-a-glance



Parkland | *Care. Compassion. Community.*

HRSA-UDS-Who are HOMES Patients?

- 61% Male, 35% Female, 2% Transgender/Unknown
- 48% White, 46% African American
- 17% Hispanic, 79% Non-Hispanic
- 95% are 100% and below FPL
- Majority uninsured adults between 25yo to 64yo
- Live in shelters & Transitional Housing
- Top Diagnosis
  - Hypertension
  - Diabetes
  - Overweight & Obesity
  - Other substance related disorders
  - Depression and Other Mood Disorders
  - Tobacco Use



HRSA Update: Legislative Mandates in Grant Management for FY23

- Requirements for organizations that receive HRSA funding
- Legislative Mandate and PHHS policy updated annually
- Policy: 8311-4-03
- Mandates on:
  - Confidentiality agreements
  - Salary Limitation
  - Gun Control
  - Anti-Lobbying
  - Acknowledgment of Federal Funding
  - Restriction on Abortions
  - Exceptions to Restriction on Abortions
  - Ban on Funding Human Embryo Research
  - Limitation on Use of Funds for Promotion of Legalization of Controlled Substances
  - Restriction of Pornography on Computer Networks
  - Restriction on Distribution of Sterile Needles

HRSA Update: Legislative Mandates in Grant Management for FY23

- Grants Policy Bulletin: Legislative Mandates in Grant Management for FY23
  - Approval: Legislative Mandates in Grant Management Policy

Parkland

Approve Legislative Mandates in Grant Management Policy

Legislative Mandates in Grants Management	8311403	Published: ~~05/26/22~~04/10/2023
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PURPOSE:

The purpose is to clarify the requirements mandated by the Consolidated Appropriations Act, ~~2022~~ 2023 (Public Law 117-~~103~~328) signed into law on ~~March 15~~December 29, 2022, which provides funding to the Health Resources and Services Administration (HRSA) for the fiscal year ending September 30, ~~2022~~2023. The intent is to provide information on the following statutory provisions that limit the use of funds on HRSA grants and cooperative agreements for FY ~~2022~~2023. Legislative mandates remain in effect until a new appropriation bill is passed setting a new list of requirements. The FY ~~2022~~ 2023 list of legislative mandates for HRSA award recipients is very similar to the FY 2021 list.

SCOPE:

All Parkland Workforce members.~~All Parkland Health ("Parkland") workforce members that work with or under federal grant programs.~~

PROCEDURE:

1. Parkland shall adhere to the Health Resources and Services Administration (HRSA) Grants Policy Bulletin ~~20222~~2023-02~~5~~E legislative mandates as a condition of receiving grant funding.
2. FY ~~2022~~ 2023Legislative Mandates are as follows:
   A. Division E, Title VII
      1) Confidentiality Agreements (Section 742)
         a) Dallas County Hospital District shall not require employees or contractors of such entity seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.

b) The limitation in subsection (a) shall not contravene requirements applicable to Standard Form 312, Form 4414, or any other form issued by a Federal department or agency governing the nondisclosure of classified information.

B. Parkland does not restrict employees or contractors from lawfully reporting fraud, waste, or abuse to any designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.

C. Division H, Title II

1) Salary Limitation (Section 202)

a) None of the funds appropriated in the title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.

b) Evidence is made by review of budgets and financial documents that no HRSA grant funds are used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary is currently set at $~~203,700~~212,100 as of January 2023~~2~~.

c) Grants Management will review budgets and financial documents as they are submitted and revised with grant applications and amendments.

2) Gun Control (Section 210)

a) None of the funds made available in the title may be used, in whole or in part, to advocate or promote gun control.

b) Evidence is made by review of budgets and financial documents that no HRSA grant funds are used to advocate or promote gun control.

D. Division H, Title V

1) Anti-Lobbying (Section 503)

a) No part of any appropriation contained in the Act or transferred pursuant to section 4002 of Public Law 111–148 shall be used, other than for

normal and recognized executive legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

b) No part of any appropriation contained in the Act or transferred pursuant to section 4002 of Public Law 111–148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

c) The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

d) Evidence is made by review of budgets and financial documents that no HRSA grant funds are used for lobbying.

2) Acknowledgment of Federal Funding (Section 505)

a) When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, Dallas County Hospital District shall clearly state

- the percentage of the total costs of the program or project which will be financed with Federal money;
- the dollar amount of Federal funds for the project or program; and
- percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

b) Grants Management shall inform all HRSA funded programs, Corporate Communications, and Supply Chain of the mandate regarding the acknowledgement of federal funding on an annual basis.

c) Corporate Communications and Supply Chain will receive the amounts and percentages from the project managers to include in acknowledgement statement for documents.

3) Restriction on Abortions (Section 506)

a) None of the funds appropriated in the Act, and none of the funds in any trust fund to which funds are appropriated in the Act, shall be expended for any abortion.

b) None of the funds appropriated in the Act, and none of the funds in any trust fund to which funds are appropriated in the Act, shall be expended for health benefits coverage that includes coverage of abortion.

c) The term ‘‘health benefits coverage’’ means the package of services covered by a managed care provider or organization pursuant to a contract or other arrangement.

d) HOMES Health Center Program does not perform abortions and complies with the Hyde Amendment, a legislative provision barring the use of federal funds to pay for abortion except to save the life of the woman, or if the pregnancy arises from incest or rape.

e) HOMES Health Center Program providers are not privileged to provide abortions.

f) Parkland does not perform elective abortions and complies with all state and federal laws and requirements related to the reporting of abortions.

g) Grants Management will verify annually with the Regulatory Department that Parkland does not perform elective abortions.

4) Exceptions to Restriction on Abortions (Section 507)

a) The limitations established in the preceding section shall not apply to an abortion –

- if the pregnancy is the result of an act of rape or incest; or
- in the case where a woman suffers from a physical disorder, physical injury, or physical illness, including a life-endangering physical condition caused by or arising from the pregnancy itself, that would, as certified by a physician, place the woman in danger of death unless an abortion is performed.

b) Nothing in the preceding section shall be construed as prohibiting the expenditure by a State, locality, entity, or private person of State, local, or private funds (other than a State's or locality's contribution of Medicaid matching funds).

c) Nothing in the preceding section shall be construed as restricting the ability of any managed care provider from offering abortion coverage or the ability of a State or locality to contract separately with such a provider for such coverage with State funds (other than a State's or locality's contribution of Medicaid matching funds).

d) None of the funds made available in this Act may be made available to a Federal agency or program, or to a State or local government, if such agency, program, or government subjects any institutional or individual health care entity to discrimination on the basis that the health care entity does not provide, pay for, provide coverage of, or refer for abortions.

e) In this subsection, the term ''health care entity'' includes an individual physician or other health care professional, a hospital, a provider-sponsored organization, a health maintenance organization, a health insurance plan, or any other kind of health care facility, organization, or plan."

f) HOMES Health Center Program does not perform abortions and complies with the Hyde Amendment, a legislative provision barring the use of federal funds to pay for abortion except to save the life of the woman, or if the pregnancy arises from incest or rape.

g) HOMES Health Center Program providers are not privileged to provide abortions.

h) Parkland does not perform elective abortions and complies with all state and federal laws and requirements related to the reporting of abortions.

i) Grants Management will verify annually with the Regulatory Department that Parkland does not perform elective abortions.

5) Ban on Funding Human Embryo Research (Section 508)

a) None of the funds made available in the Act may be used for

- the creation of a human embryo or embryos for research purposes;
- research in which a human embryo or embryos are destroyed, discarded, or knowingly subjected to risk of injury or death greater than that allowed for research on fetuses in utero under 45 CFR 46.204(b) and section 498(b) of the Public Health Service Act (42 U.S.C. 289g(b)).

b) For purposes of this section, the term ‘‘human embryo or embryos’’ includes any organism, not protected as a human subject under 45 CFR 46 as of the date of the enactment of the Act, that is derived by fertilization, parthenogenesis, cloning, or any other means from one or more human gametes or human diploid cells.

c) Parkland does not serve as a Performance Site for Human Embryo Research.

d) Grants management will verify annually with the Department of Research Administration that Parkland does not serve as a Performance Site for Human Embryo Research.

6) Limitation on Use of Funds for Promotion of Legalization of Controlled Substances (Section 509)

   a) None of the funds made available in the Act may be used for any activity that promotes the legalization of any drug or other substance included in schedule I of the schedules of controlled substances established under section 202 of the Controlled Substances Act except for normal and recognized executive-congressional communications.

   b) The limitation in subsection (a) shall not apply when there is significant medical evidence of a therapeutic advantage to the use of such drug or other substance or that federally sponsored clinical trials are being conducted to determine therapeutic advantage.

   c) Evidence is made by review of budgets and financial documents that no HRSA grant funds are used to promote the legalization of controlled substances.

   d) Grants Management will review budgets and financial documents as they are submitted and revised with grant applications and amendments.

7) Restriction of Pornography on Computer Networks (Section 520)

   a) None of the funds made available in the Act may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography.

   b) Nothing in subsection (a) shall limit the use of funds necessary for any federal, state, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.

   c) All firewalls are configured prior to deployment to block any untrusted network for all incoming and outgoing traffic.

   d) Next-Generation Firewalls will always include stateful packet inspection, but also includes additional capabilities such as URL filtering, virus filtering, application monitoring/blocking and geolocation filtering.

8) Restriction on Distribution of Sterile Needles (Section 526)

a) Notwithstanding any other provision of this Act, no funds appropriated in this Act shall be used to purchase sterile needles or syringes for the hypodermic injection of any illegal drug: Provided, t~~T~~hat such limitation does not apply to the use of funds for elements of a program other than making such purchases if the relevant State or local health department, in consultation with the Centers for Disease Control and Prevention, determines that the State or local jurisdiction, as applicable, is experiencing, or is at risk for, a significant increase in hepatitis infections or an HIV outbreak due to injection drug use, and such program is operating in accordance with State and local law.

b) Evidence is made by review of supply orders that no HRSA grant funds are used to carry out any program of purchasing sterile needles or syringes for the hypodermic injection of any illegal drug.

c) The grant program manager or clinic manager will review supply orders for federal grant programs as they are prepared.

3. The Legislative Mandates in Grants Management policy will be reviewed and updated annually, as necessary.
4. The Legislative Mandates in Grants Management policy will be approved by the Health Center Board annually.

EQUIPMENT:

N/A

DEFINITIONS:

Workforce Member: An Officer, board member, employee, volunteer, contractor, vendor, trainee, or other person whose conduct, in the performance of work for Parkland, is under the direct control of Parkland or a Parkland Affiliate, whether or not he or she is paid by Parkland or a Parkland Affiliate. “Workforce member” also includes all physicians, other members of the medical staff, and non-physician clinical providers, whether or not employed by Parkland.~~Workforce member: An Officer, board member,~~

~~employee, volunteer, member of the medical staff, contractor, vendor, trainee or other person whose conduct, in the performance of work for Parkland, is under the direct control of Parkland, whether or not he or she is paid by Parkland.~~

REFERENCES:

"Grants Policy Bulletin: Legislative Mandates in Grants Management for ~~FY2022~~FY2023." Health Resources and Services Administration, ~~14~~ 12 Apr. ~~2022~~2023, ~~www.hrsa.gov/grants/manage-your-grant/policies-regulations-guidance.~~

https://www.hrsa.gov/sites/default/files/hrsa/grants/manage/legislative-mandates-grants-management-2023.pdf

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Questions?