

**DALLAS METROCARE SERVICES**

**BOARD OF TRUSTEES  
MEETING MINUTES OF**

**April 28, 2005**

# DALLAS METROCARE SERVICES

## REGULAR MONTHLY MEETING of the BOARD OF TRUSTEES

### MINUTES OF April 28, 2005

A Regular Meeting of the Board of Trustees of Dallas Metrocare Services convened at 1:40 p.m. in the Board Room on April 28, 2005 at 1360 River Bend Drive, Dallas, Texas.

#### **I. Call To Order/Roll Call**

Mr. Cooper called the meeting to order at 1:40 pm, a quorum was present.

The following Trustees were present:

Mr. Cooper  
Mr. Driver  
Ms. Green  
Mr. Martinez  
Mr. Migl  
Dr. Nace  
Mr. Orr  
Mr. Poffenbarger

The following Trustee(s) were absent: Mr. Garza

**Staff Present:** Dr. James Baker, Linda Thompson, Kyle Munson, José Evans, Dr. Greg Graves, Bob Hosea, and other DMS staff.

**II. INVOCATION:** Mr. Charles Mitchell, present employee of Dallas Metrocare Services, gave the invocation.

**III. CITIZENS' COMMENTS:** The procedure for Public Comments was available at the meeting for those interested. No public comment was received.

#### **IV. ISSUES TO BE CONSIDERED:**

**1. Approval of the meeting Minutes of March 24, 2005 – Regular Board Meeting:**

Mr. Cooper called for any comments or corrections to the meeting Minutes of March 24, 2005. There were no comments or corrections presented. Ms. Green made motion to approve. The Minutes were approved as written.

**2. Chairman's Report** – Mr. Cooper reported that he has been to a couple of meetings where County Commissioners were present, and that he hopes that they will continue their support towards DMS.

**3. Chief Executive Officer's Report:** Dr. Baker introduced Ms. Julianne Pyle

Ms. Pyle gave a brief presentation of her duties as a Psychiatric Liaison to the Dallas County Juvenile Department Center. Ms. Pyle said she receives referrals from several sources. She then compiles and coordinates the information to be used in a psychiatric evaluation performed by the psychiatrist. There are over 400 young adults being served at the Henry Wade Juvenile Department with 365 adolescents detained at the Juvenile Department, 54 in the Shelter, and 50 in the Start Program. The age range for this population is 10-17 years of age. The major reasons for detention are probation violations, (not abiding by the rules of their probation). The underlying disorder is physical aggression usually in a school setting and mostly for the boys. The girls normally get picked up because of thefts committed by boyfriends for which they take the blame. There are Fellows from UT Southwestern Medical Center that provide twelve hours of service a week with supervision provided by one of the DMS psychiatrists. .

- **Diversity Presentation:** Mr. José Perez is a co-student working for the HR Department and a senior at the School for the Talented and Gifted Town View Magnet Center School of Business and Management. Mr. Perez is graduating 21<sup>st</sup> in a class of 129 and carries a gpa of 3.3. As a student he has participated in several clubs that include the National Honor Society, The Business Professionals of America and the League of United Latin American Citizens (LULAC). He plans to attend the University of Texas in Arlington in the fall to follow a career in accounting. Mr. Perez has been playing soccer for the last fourteen years and has been captain of his team the last four. He has been playing with the Coca Cola Classic League at a very compatible level and plans to participate in the Texas State Cup Tournament in May. Mr. Perez was voted one of the top scorers in the Dallas ISD, District-5 Boys Soccer Varsity Teams.
  
- **Centerwide Benchmarks:** Dr. Baker said that for the month of March there were two new measures that missed goal. One was a financial goal (MR Authority net income), attributed to underperformance of staff during the reorganization phase; and, a quality indicator (patient-to-staff ratio in mental health). Dr. Baker said that they have purposely not hired for any vacant positions in mental health services as a way of adjusting to the new ValueOptions (V/O) contract. New measures will be made to reflect the new goals in the relationship with V/O in terms of outcomes on quality measures going forth. Notification of a sanction was received for the last quarter of FY 04 on the quality of documentation in MR Services. DMS had not received any documentation sanctions during FY05. Dr. Baker said that DMS has come to an agreement with V/O and signed an amendment to the V/O contract. There were no questions posed for this item. (Please refer to the April 28, 2005 Board packet for a detailed account).

## **BUSINESS AND FINANCE COMMITTEE**

**Chair Reports:** Mr. Orr, Chairperson of the Business and Finance Committee, said that the Committee met last week and reviewed the items on this agenda. He asked that Mr. Munson briefly summarized his financial report(s).

### **❖ RECOMMENDATION(s) FOR APPROVAL:**

After discussion and upon motion duly made the following item(s) were approved: Items number 4 and 5.

Mr. Munson referred to page 8520 and reported that for the month of March the Center had a positive Net Income of \$18K. For the year to date there has been a net loss of \$1,319,000. Expenses are on target, and variances are due to decrease in revenues. On April 13<sup>th</sup> DMS

and V/O signed an agreement to the original contract. (Please refer to the April 28, 2005 Board packet for a detailed account).

**Consideration of Approval of Financial Reports for March 2005 (Unaudited):**

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby approves the **March 2005 Financial Statements (Unaudited)**

There were no questions posed for these item(s). This was a Committee recommendation. All were in favor, motion carried.

- 5. Consideration of Approval of Mid-Year Budget Adjustment:** Mr. Munson presented a written report and said that this budget amendment takes into consideration staffing changes as a result of V/O's new funding model. This budget includes merit increases for staff, as well as staffing adjustments primarily in mental health services, a few in mental retardation services and some changes in administration. One area that has to be worked through is the indirect to direct ratio. This is anticipated to be at 11% for this year, the target is 10%. Ms. Thompson and the MR Authority staff have been working diligently in decreasing GR dollars not yet spent, which will get the administrative costs down to goal. Mr. Munson said that the desired goal is to end this year breaking even. (Please refer to the April 28, 2005, Board packet for a detailed account).

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby approves the **Mid-Year Budget Adjustment**

Mr. Orr commended the staff at DMS for coming up with this plan. He said that the Business and Finance Committee had asked this Center to come up with a plan to address the huge losses incurred a couple of months ago. He said that this plan remedies some of those losses.

There were no questions posed for this item. This was a Committee recommendation. All were in favor, motion carried.

- 6. Human Resources Management Report:** Mr. Evans reported that (under Recruiting and Retention) HR has been focusing on filling in some of the key positions, these being the Child Psychiatrists, registered nurses, LVN's, and speech therapists. There have been no new QMHP's hired to let attrition take its course in order to be in line with the new contract with V/O. At the end of March credentialing of clinical staff was at 82%. As of April twenty-first 97% of the licenses were current. Turnover was slightly up during the month of March. This has been linked with all the changes taking place at the Center. Under Safety, there were two accidents reported this month. Open worker's compensation claims fell from 20 to 12. Under the key metrics report, these are all on the positive except for the staff turnover. There were no questions posed for this item. (Please refer to the April 28, 2005, Board packet for a detailed account).

note that 82% was not an acceptable standard and that today's report updates that to 91%.

❖ **RECOMMENDATION(s) FOR APPROVAL:**

After discussion and upon motion duly made the following item(s) were approved.

**7. Recommendation of Approval of Individual Salary and Aggregate Salary Adjustments in Excess of \$25,000 and report of Individual Salary Adjustments in excess of \$5,000**

—

Mr. Evans presented a written report with the percentage of increases being given out in excess of \$5,000 dollars effective May 1, 2005. There are certain individuals that because they have taken additional responsibilities will be given a greater than average increase. The total aggregate cost will be \$450,000. (Please refer to the April 28, 2005, Board packet for a detailed account).

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby **Approves the Individual Salary and Aggregate Salary Adjustments in Excess of \$25,000 and report of Individual Salary Adjustments in excess of \$5,000**

There were no questions posed for this item. This was a Committee recommendation. All were in favor, motion carried.

**SERVICE AND PROGRAM COMMITTEE**

**Chair Reports:** Dr. Nace, Chairperson of the Service and Program, said that the Committee met last week and reviewed the items on this agenda. He asked Ms. Thompson to present her report.

**8. Authority Services Monthly Report:** Ms. Thompson said that the Authority report stands as presented by Dr. Baker last week. She said that the MR Authority staff is aggressively working on the waiting list and in addition to the numbers reflected on her report an additional 100 people were removed from the wait list. Respite and community services are being offered to the families. Staff is working on processing those requests. There were no questions posed for this item. (Please refer to April 28, 2005, Board packet for a detailed account).

**9. Quality Management Report:** Ms. Thompson said that this month's numbers are generally unchanged from last month's. The committee had requested additional information on the number of deaths for the month of March. Ms. Thompson said that the two suicides reported were both individuals attending the Altshuler clinic. One individual had an extensive history of hospitalizations, refused to take prescribed medications or to participate in services. The second individual suffered from depression, refused to take medications and indicated to staff that he only wanted to participate in therapy services. There were no questions posed for this item. (Please refer to the April 28, 2005, Board packet for a detailed account).

**10. Study of Impact of Funding Reductions on Group Homes:** Ms. Thompson said that this report has information regarding the impact of staff reductions at the group homes as a result of adjustments to State's requirement that Medicaid or waiver dollars not be supplemented with general revenue. There was no significant impact to the consumers. Ms. Thompson provided a summary of the requirements utilized in finding foster families for those individuals that were moved out of the HCS group homes and into foster care (page 8533). As part of

history check of the individual through the State Registry. DMS staff also provides training on Rights, Abuse and Neglect to those families as an annual requirement. Anyone having knowledge of any abuse or neglect get this reported to the Rights Office. If there are any allegations, the referral goes to the Texas Department of Family and Protective Services and they conduct investigations if they meet criteria. If for some reason the allegation does not meet the States definition of abuse and neglect, this gets referred back internally and the staff here conducts their own investigation. If a confirmation on any allegations is received back and this involves a foster care provider, the relationship with this foster care provider is severed, and if it involves a staff member they are terminated. There are also two visits a month to the homes of the Foster Care Providers. One is a schedule visit and the other is unscheduled. There were no questions posed for this item. (Please refer to the April 28, 2005, Board packet for a detailed account).

**11. Provider Services Monthly Report:** Dr. Graves gave a brief overview of the report he presented at the Service and Program Committee. He said that in all of the MR Programs they have focused on similar areas: monitoring staff productivity trying to standardize this to how it is done in MH Services. In a number of programs they have generated plans to increase referrals where that is appropriate to the program. They continue to look at expense reductions. There has been focus in trying to assure that authorizations for services have been submitted to the MR Authority and follow-through to make sure that those services are provided once they are approved.

In the mental health division, they are reorganizing trying to come in alignment with the new V/O contract. Presentations are being given to all the mental health staff to shift from a fee-for-service model to the new model. Staffing ratios have been adjusted. Up to this point they have tried to accomplish budgetary goals through attrition. They will move into other measures if these goals are not reached by next month. Dr. Graves referred to the indicators provided in his report. He said that as Dr. Baker mentioned they are in the process of developing some new indicators in partnership with V/O. They are now looking at hospitalization rates and they would like to take this into an individual provider level. Because this model has a possibility of increasing risks to the consumers they are concentrating on critical incidents at the individual level. These are being tracked and they are doing some comparisons. There were no questions posed for this item. (Please refer to the April 28, 2005 Board packet for a detailed account).

**Intensive Services Region:** Dr. Graves introduced Mr. Tom Clark. Mr. Clark spoke of the seven specialized programs presently under him that target the most vulnerable populations in the Center, both children and adults: the Assertive Community Teams (ACT), Rapid Assessment and Stabilization Team (RAP), Career Design and Development Center (CDDS), C&A Treatment Foster Care (TFC), C&A Family Preservation Program (FPP), C&A Therapeutic Nursery (TN), C&A Birth to Six Program (B-Six), and the C&A TCOMI Youth and Family Program (Y&FP). Mr. Clark described each of these programs. The Career Design Development Center has finally moved into its new location at the Hillside Campus. This program offers shelter workshop services. At one time this program had just existed, but now with a new Director at its helm things have been begun to change. For one, one of the benches for staff is to try to find jobs for these consumers. They will also integrate some fee for service business approaches.

**Northeast Region Report:** Dr. Graves introduced Yvette Harris and Dr. Mirzatumy from the Northeast (NE) Region. Dr. Mirzatumy presented a written report and said that the NE Region includes the Pathways clinic, which is an adult

diagnosed. DMS has three Child and Adolescent hubs that are located in Grand Prairie, Garland and Richardson. The NE region continues to focus on providing quality of services this Center is committed to and charting quality along with other incentives. Dr. Mirzatury said that their charting quality has improved and it's now at 93%. There were no questions posed for this item. (Please refer to the April 28, 2005 Board packet for a detailed account).

#### **AUDIT COMMITTEE:**

**Chair Reports:** In the absence of the Chairperson of this Committee, Mr. Cooper asked Mr. Munson to present his report. .

#### **12. Report of Correspondence with Inspector General Office Regarding FY 04 Single**

**Audit Desk Review:** Mr. Munson said that the Center received a letter from the Texas Health and Human Services Commission rejecting the Single Audit Desk Review for the year ended August 31, 2004. They thought the Center was not in compliance with the rules. Mr. Munson worked with Mr. Wilcox in Austin and provided an explanation pointing out specifics that they had missed on their desk review. Subsequently the Center received an acceptance letter on April 12, 2005, accepting the Single Audit desk review for the year ended August 31, 2004. There were no questions posed for this item. (Please refer to the April 28, 2005 Board packet for a detailed account).

#### **13. Discussion of Proposed Internal Auditor Projects:**

Mr. Bob Hosea presented a report with a schedule of proposed activities for FY 05. He said that if everything goes according to plan he should be finished with these four projects by June 3<sup>rd</sup>. There were no questions posed for this item. (Please refer to the April 28, 2005 Board packet for a detailed account).

**V. EXECUTIVE SESSION:** There were no issues to discuss

**VI. MEETING ADJOURNMENT:** There being no further business to come before the meeting, on motion duly made, seconded and carried, the meeting adjourned at 2:45 pm.

Minutes approved by:

---

Charles M. Cooper, Chairperson

Minutes recorded, transcribed  
and distributed by:  
Martha L. Toscano  
Assistant to the CEO and  
DMS Board of Trustees