

DALLAS METROCARE SERVICES

**BOARD OF TRUSTEES
MEETING MINUTES OF**

August 4, 2005

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REGULAR MONTHLY MEETING of the BOARD OF TRUSTEES

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A Regular Meeting of the Board of Trustees of Dallas Metrocare Services convened at 1:40 p.m. in the Board Room on August 4, 2005 at 1360 River Bend Drive, Dallas, Texas.

I. Call To Order/Roll Call

Mr. Cooper called the meeting to order at 1:35 pm, a quorum was present.

The following Trustees were present:

Mr. Cooper
Mr. Driver
Mr. Garza
Ms. Green
Mr. Martinez
Mr. Orr

The following Trustee(s) were absent: Mr. Migl, Dr. Nace and Mr. Poffenbarger.

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

II. INVOCATION: Mr. John Luna, 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 May 26, 2005 – Regular Board Meeting:

Mr. Cooper called for any comments or corrections to the meeting Minutes of May 26, 2005. There were no comments or corrections presented. Ms. Green made motion to approve. The Minutes were approved as written.

Approval of the meeting Minutes of June 23, 2005, - Regular Board Meeting:

Mr. Cooper called for any comments or corrections to the meeting Minutes of June 23, 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 said how pleased the Board was to welcome Mr. Garza back. For the record, Mr. Cooper said that Board policy 1.05 reads that any member that

misses four consecutive meetings is “considered to have resigned.” Mr. Garza was unable to attend the last four meetings, but Commissioner’s Court has reaffirmed Mr. Garza’s appointment in correspondence with the Mr. Cooper and Dr. Baker.

- **CEO’s Contract:** Mr. Cooper tabled today’s action item referencing the CEO’s contract. Mr. Cooper said that this month they would be completing the CEO’s performance evaluation. This performance evaluation was distributed to senior management and stakeholders. Mr. Cooper asked that all evaluations be forwarded to the Center’s attorney, Mr. Doug Barnes. This action item will be moved to the September Board meeting.
- **Meetings Schedule:** Mr. Cooper said that there are no committee meetings scheduled for the month of August. Packets will be prepared and mailed out at the end of next week. All committee’s will resume at their regular scheduled time in September. All three committees will meet on Thursday, September 15th. The full Board meeting is scheduled for Thursday, September 22nd.
- Mr. Cooper asked all the Board members to please sign the affidavits placed in their folders and to leave them with Martha.
- Mr. Cooper said that if anyone was interested in obtaining a copy of Ms. Green’s book, “East Texas Daughter,” to please contact Ms. Green, she can obtain a copy of this cheaper than on-line.

3. Chief Executive Officer’s Report: Dr. Baker asked Ms. Graham to do the introductions.

- **Success Story:** Ms. Diane Graham introduced today’s speakers, Mr. Ron and Terry Selman. Ms. Graham said that this couple has been providing adult foster care to several of our consumers for the past two years. Prior to Mrs. Selman becoming a provider she had been on staff with Dallas Metrocare Services for ten years. Mrs. Selman has eighteen years experience in the mental retardation field and Mr. Selman has approximately ten years of experience in this same field. Presently this couple has 3 consumers living with them. Mrs. Selman said that she really enjoys this program and that she has always enjoyed working with this population. These 3 consumers have come a long way since becoming part of their household. Mr. Selman took a minute to say that he enjoys working with this population and he appreciates that Ms. Graham is always there to help come up with solutions to any questions they might have. Mr. Selman said he enjoys the rewards he gets from seeing these clients under his wife’s and his care flourish and grow. All three of the consumers under their care are now involved in Church activities. There were no questions posed for this item.
- **In the Spirit of Diversity:** Mr. Evans said that he was asked to speak because of his background in the military, since this is armed forces month. Mr. Evans said that he has twenty-eight years in combined services with the reserves, National Guard, and active duty. During that time he had the privilege to work with many people of diverse backgrounds, including people of different races, ethnic backgrounds, religion and other walks of life. These people were from all over the United States and other countries. This was diversity put into practice by the military. The military was one of the forerunners in the idea of equal opportunity. They were the pioneers in diversification when President Truman desegregated the military. The military strongly believes in fairness, treating people as individuals and promoting based upon merit. Mr. Evans asked that we please keep all of our service men in our prayers as

tribute to our service men and women.

Dr. Baker said that this month the Diversity Council recognized all staff with military background and with family members in the Armed Forces. The Star of the Month was chosen because of his military history. The DMS website recognized all of those staff that have served proudly in our Armed Forces.

- **Centerwide Benchmarks:** Dr. Baker said that this month's centerwide benchmarks show the same problem measures as in the last several months. Most of these are financial measures. However, fiscally, June was a solid month. Most of the financial measures that are out are due to the deficits incurred in mental health services in the earlier part of the year. The two main problem areas currently are the significant number of MR authority Medicaid billings that were rejected in the earlier part of the year due to software problems that have since been resolved. There is also concern with ongoing problems retaining the market share in HCS, in particular, as well as in all other mental retardation provider programs. The Center is currently working on marketing these programs. Dr. Baker said that the state has recently released approximately 2,800 HCS slots statewide and 160 over the next year. The Center is going to work hard to attract some of the people getting off the wait list towards our services. Dr. Baker shared some new statistics on administrative overhead from across the state that came out during this week. Dr. Baker said that the Center continues to struggle with the quality of the medical records, although improvement continues to be seen month by month. The consumer satisfaction scores remained solid. In the community, DMS continues to advise in a consultation role around the jail behavioral health initiatives. DMS generated a product with recommendations that has been shared with stakeholders in the community. The quarterly report for the Commissioner's Court has been scheduled for August 23rd for anyone that would like to attend. Mr. Orr had a question about the presentation of the financial benchmarks. Dr. Baker said that these are negative figures. There were no other questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

BUSINESS AND FINANCE COMMITTEE

Chair Reports: Mr. Orr, Chairperson of the Business and Finance Committee, asked Mr. Munson to present his financial report(s).

❖ RECOMMENDATION(s) FOR APPROVAL:

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

4. Consideration of Approval of Financial Report for May 2005 (Unaudited):

Mr. Munson said that in May the Center had a loss of approximately \$400,000, and this included an extraordinary loss of almost \$350,000 paid out in employee separation expenses attributable to the reduction in force that took place in May. Mr. Munson indicated that at this time mental health services is where it should be to make budget going forward. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

Consideration of Approval of Financial Reports for May 2005 (Unaudited):

BE IT RESOLVED that the Board of Trustees of Dallas Metrocare

(Unaudited)

Consideration of Approval of Financial Report for June 2005 (Unaudited):

Mr. Munson said that for the month of June the Center was at approximately 95% of expected revenues. The earned revenues were still below target due mainly to the

underperformance of two MR Programs. The Center's overall performance showed a positive \$250,000 during this month. Mr. Munson said that in the month of September they would be presenting the FY 06 Budget.

Dr. Baker said, in response to Mr. Cooper's question, that the Center has not yet received the FY06 state performance contract.

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

5. **Human Resources Management Report:** Mr. Evans reported that staff training was in compliance with the 90% target for the month. Retention is at 98%. Focus continues on filling key medical positions that include RN's, MD's, APN's, psychologists, speech and physical therapists. Hiring for these positions has been an ongoing struggle and the HR Department continues to work on different strategies to remedy this situation. Southwest Airlines did a presentation on their hiring process called "Hiring for Attitude". Voluntary turnover was down from 4% to 2.6% for the month. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

SERVICE AND PROGRAM COMMITTEE

Chair Reports: Mr. Cooper asked Dr. Graves to present his report.

6. **Provider Services Monthly Report:** Dr. Graves very briefly summarized his report. He said that mental health services saw a decrease in voluntary turnover. Overall performance was up with significant improvement in some areas and slight improvement in others. Charting quality showed a slight improvement, but they continue to revise processes to improve on this. There is focus on expanding payor sources, and they are presently looking at different funding streams available to the Center. The revenue in the Behavioral Psychiatric Services Program has been reduced due to the shortage in psychologist staff there. MH Services continues its struggle to attract adult psychiatrists and nursing staff to come aboard. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

Operations Update

- ✓ **Intensive Services: Mr. Tom Clark, Operations Manager:** Mr. Clark said that Intensive Services is a combination of 8 separate distinct programs that target the most vulnerable patients in DMS. All of the programs have shown improvement in all five measures areas. Charting quality was at 88% that is still below target but up from where it was. The greater challenge continues to be the charting timeliness. They would like this to be at less than 5%, but at this time it is showing at 19%. Charting has to be completed within 48 hours of this taking place. Denials were at 1%. Productivity for the whole region is at 98%. All of the programs in intensive services met and exceeded budget with the exception of two. The Career Design Development Program is made up of two programs, MR Vocational and the Training Center. Both of these programs did not make budget, but they did make productivity

both the MR Vocational and the Training Center meet its goals. Some of these strategies are to fill vacant positions, to clarify define performance expectations for clinicians, and to market for more referrals. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

- ✓ **West Region Operations Update:** Dr. Graves presented this report in the absence of Mr. McNorton and said that some of the obstacles the region was running into in accomplishing their budget targets was related to staff reductions, medical leaves, and some transitions related to the changes in the Value Options contract. The three areas in which they continue to have difficulty compared to the rest of the Center are: authorization requests timeliness, charting timeliness and charting quality. Mr. McNorton is working on refining his processes and education to staff to address these areas. Dr. Graves said that this particular area is one of the areas where they are focusing to increase the provision of Geriatric Services. There were no questions for this item. (Please refer to the August 4, 2005 Service and Program packet for a detailed account).

7. Mental Retardation Authority Services Report: Ms. Thompson said that MR Authority Services continues to focus on getting individuals enrolled and off the waiting lists. For the year-to-date, approximately 2.5 million dollars have been spent from the general revenue dollars. Percentage of dollars assigned for the past month was down due primarily to the large number of claims that were denied. The reasons for denial were mainly two: authorization timeframes and/or exhausted units. Contracts for FY 06 are being developed for the provider network. The Eligibility Determination Unit did not meet its goal of 14 waiting days from intake to assessment due to the shortage of one staff. The unit was at 95% goal for the month. They are actively recruiting staff to administer current Determination of Mental Retardation assessments to clients before they are eligible to utilize authorized services. The Service Coordination Unit goal is 60 billable face-to-face contacts per month for each staff. During the month of June staff were at 91% of goal with the average number of billable face-to-face contacts at 53. The Team Leaders continue to work with staff to achieve productivity standards. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

8. Quality Management Report: Ms. Thompson reported that under the Critical Incident Reporting System (CIRS), there have been no confirmations of abuse and neglect incidents. There were two medication complaints reported in June related to the delay in obtaining certain medications not on the V/O formulary. Medications not on the V/O formulary require special authorizations from V/O causing delay in obtaining the medication. There were 6 deaths reported for the month of June. None of these deaths were attributed to services provided by DMS. Two of the deaths were attributed to medical conditions. In two cases the cause of death has not been determined. The Medical Examiners Office is conducting autopsies and toxicology screens before making a ruling on the cause of death. Under Health and Safety, there were no medication errors or serious injuries reported during the month of June. There was a reduction in the number of individuals receiving restraints as part of their behavior plan. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

AUDIT COMMITTEE

Chair Reports: Mr. Garza, Chairperson of the Audit Committee, asked Mr. Munson to present this

❖ **RECOMMENDATION(S) FOR APPROVAL:**

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

- 9. Consideration of Approval of Engagement Letter from the External Audit Firm of Scott, Singleton, Fincher and Company, PC:** Mr. Munson said that as part of the contractual agreement with the Texas Department of Aging and Disabilities (DADS), DMS is required to provide annually an external financial and compliance audit by a Texas Certified Public Accountant licensed by the State of Texas State Board of Public

Accountancy. Additionally, the performance contract requires that DMS must not retain the same firm for more than six consecutive years. For the last three years the External Audit firm of Scott, Singleton, Fincher and Company, PC has been providing this service for DMS. The fees for the external audit will be based on the firm's standard hourly rate plus out-of-pocket costs. Mr. Munson said that the base fee has dropped from their maximum base fee of \$57,000 to \$52,500 from the previous two years, but that they have been charging DMS for actual time spent and DMS has paid less than \$50,000 a year. Mr. Munson referred to the attached letter and said that this is consistent with prior years. There are no changes from standards of previous years. The external auditors will begin their fieldwork during the month of August. In Thanksgiving there will be a general review of their findings and the final report will be presented in January of next year. The report is due to the state in February 2006. There were no questions posed for this item. (Please refer to the August 4, 2005 Board packet for a detailed account).

Consideration of Approval of Engagement Letter from the External Audit Firm of Scott, Singleton, Fincher and Company, PC:

BE IT RESOLVED that the Board of Trustees of Dallas Metrocare Services hereby approves **the Engagement Letter from the External Audit Firm of Scott, Singleton, Fincher and Company, PC**

Mr. Garza moved to approve seconded by Ms. Green. All were in favor, motion carried.

- 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

