



A Regular Meeting of the Board of Trustees of Metrocare Services will be held on Thursday, April 25, 2024, at approximately 1:30 p.m. Prior to the regular session, a Board Training session will begin at 1:00 pm. The meeting will take place at 1345 River Bend Dr., Dallas, TX 75247 in the Mustangs Conference Rm.

If you need additional assistance to effectively participate in or observe this meeting, please notify the Administrative Office: 214.743.1201, at least 72 hours prior to this meeting so that reasonable accommodation can be made to assist you.

A portion of the meeting may be closed for purposes permitted by the Texas Open Meetings Act, Texas Government Code, Section 551.001 et seq., including but not limited to the following sections and purposes:

- Tex. Gov't Code § 551.071 – Consultation with attorney to seek advice on legal matters.
- Tex. Gov't Code § 551.072 – Discussion purchase, exchange, lease, or value of real property.
- Tex. Gov't Code § 551.073 – Deliberations regarding gifts and donations.
- Tex. Gov't Code § 551.074 – Deliberations regarding the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of a public officer or employee.
- Tex. Gov't Code § 551.076 – Deliberations regarding security devices or security audits.

Kenneth R. Bernstein, Chairman  
Metrocare Board of Trustees

Anthony Farmer, Vice Chair  
Metrocare Board of Trustees

John W. Burruss, M.D.  
Chief Executive Officer

**BOARD OF TRUSTEES**

Kenneth R. Bernstein  
*Chairman*

Anthony Farmer  
*Vice Chairman*

Dave Hogan  
*Secretary*

Noel O. Santini, M.D.

Stacy Cantú

Jaime Walkowiak

Vickie Rice

Dr. Sam Yang

Sonnia R. Ortega

# Agenda

1345 River Bend Dr.  
Dallas, TX 75247  
(Mustangs Conf Rm.)

Thursday, April 25, 2024

**Board Training - 1:00 PM**

“W-T Presentation LK/SNOP Progress”  
Brent Schoolfield

**REGULAR BOARD MEETING**

**1:30 pm**

**Special Representative**

Linda Secrest

	<b>Pg. Number</b>
Mr. Bernstein	<b>Call Meeting to Order &amp; Declaration of Quorum:</b>
	<b>Public Comment:</b> Limited to three minutes <i>(only those registered)</i>
	<b>Chairman Updates:</b>
	<ul style="list-style-type: none"> <li>• FY24 Board Attendance</li> <li>• Annual Election of Officers</li> <li>• Next Board meeting: May 23, 2024</li> </ul>
Mr. Bernstein	<b>Board Liaison Reports:</b>
	<ul style="list-style-type: none"> <li>• Intellectual and Developmental Disability Planning Advisory Committee: Ms. Lasso</li> <li>• Mental Health Advisory Committee: Ms. Wadsworth</li> <li>• Ad hoc Committee to Review the Center’s Board Policies and Bylaws: Mr. Farmer</li> </ul>
Mr. Bernstein	<b>Consent Agenda: February 2024 Reports</b>
	<i>All consent agenda items are considered to be routine by the Board and will be enacted with one motion. There will be no separate discussion of items unless a Board Member so requests, in which event, the item will be removed from consideration as an item of consent business and considered in its normal sequence with the other action items listed below in which case full discussion of the item may occur as necessary.</i>
	<ol style="list-style-type: none"> <li>1. Acceptance of the Chief Executive Officer Report</li> <li>2. Acceptance of the Human Resources Report</li> <li>3. Acceptance of the Facilities Division Report</li> <li>4. Acceptance of the Information Technology Report</li> <li>5. Acceptance of the Clinical Services Division Report</li> </ol>

	6. Acceptance of the Mental Health Services Division Report	149163
	7. Acceptance of the Housing Division Report	149166
	8. Acceptance of the Quality Management and Compliance Report	149168
	9. Acceptance of the Local Intellectual and Developmental Disability Report	149171
	10. Acceptance of the Strategic Initiatives Report	149175
	<b>Consent Agenda: March 2024 Reports</b>	149190
	11. Acceptance of the February 22, 2024, Regular Board Meeting Minutes	149191
	12. Proposed Revision and Approval of Board Policies:	
	• 1.03 Policy on Board of Trustees Training	149197
	• 1.13 Policy on Board Meeting Minutes and Protocol	149204
	• 1.14 Policy on Administration and General Management of the Center	149209
	• 2.01 Policy on Client Services Delivery	149211
	• 2.06 Policy on Medical – Psychiatric Services	149215
	• 8.04 Policy on Contingency Plan	149219
	13. Acceptance of the Human Resources Report	149223
	14. Acceptance of the Information Technology Report	149227
	15. Acceptance of the Clinical Services Division Report	149233
	16. Acceptance of the Mental Health Services Division Report	149236
	17. Acceptance of the Quality Management and Compliance Report	149239
	18. Acceptance of the Local Intellectual and Developmental Disability Report	149241
Dr. Burruss	<b>Chief Executive Officer - Service Presentation:</b>	
	Aging and Disability Resource Center- Sherry Chantharaj, ADRC Director	
Mr. Bernstein	<b>Action Agenda:</b>	149246
Dr. Burruss	Acceptance of the Chief Executive Officer Report for the FY24 Key Performance Indicator Progress through March 2024	149247
	The Chief Executive Officer will present an overview of the performance of the center and specific key highlights from the preceding month.	
	<b>Finance and Administration Reports</b>	
Mr. Wilson	Acceptance of the Financial Report for February 2024 (unaudited)	149251
	The Chief Financial Officer will review the statement of net position, the statement of activities and the statement of cash flow for the month of February and discuss plans to address deficiencies therein relative to departmental plans.	
Mr. Wilson	Acceptance of the Financial Report for March 2024 (unaudited)	149259
	The Chief Financial Officer will review the statement of net position, the statement of activities and the statement of cash flow for the month of March and discuss plans to address deficiencies therein relative to departmental plans.	
Mr. Wilson/ Mr. Boyd	Acceptance of the Facilities Division Report for March 2024	149267

The Chief Financial Officer will present a report on the status of current and future major projects for the facilities department relative to departmental plans.

**Provider Services Report**

Mr. Mogbo Acceptance of the Housing Services Division Report 149270

The chief housing officer will present a report on the performance of the Housing Division for the prior month and update on progress relative to the strategic plan.

**Strategic Initiatives Report**

Ms. Ringer Acceptance of the Strategic Initiatives Report 149272

The Chief Strategy Officer will present a report on the performance of the department regarding development, community education, grant funding and community and stakeholder education activities during the preceding month and oversight of grant funding, including management plans to address deficiencies relative to departmental plans.

Mr. **Executive Session: (Closed to the Public)** 149289

Bernstein Announcement of Closed Session in Accordance with Subchapter D., Texas Government Code:

- § 551.072 – Deliberation Regarding Real Property

Mr. **Return to Open Session:** 149290

Bernstein

**Action Taken as a Result of Executive Session:** 149291

- Consideration of Approval of the Purchase Contract for Real Property Discussed in Executive Session.

Mr. **Adjourn:** 149292

Bernstein

# CHAIRMAN UPDATES

# **CONSENT AGENDA**

## **February 2024 Reports**

1. Acceptance of the Chief Executive Officer Report
2. Acceptance of the Human Resources Report
3. Acceptance of the Facilities Division Report
4. Acceptance of the Information Technology Report
5. Acceptance of the Clinical Services Division Report
6. Acceptance of the Mental Health Division Report
7. Acceptance of the Housing Division Report
8. Acceptance of the Quality Management and Compliance Services Report
9. Acceptance of the Local Intellectual and Developmental Disability Report
10. Acceptance of the Strategic Initiatives Report



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Progress on the FY24 Key Performance Indicators	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> John W. Burruss, M.D.; CEO	<b>DATE PREPARED</b> March 20, 2024

### Notable since last board meeting:

- Cliff Boyd (Current Dallas College trustee and former Parkland Board Chair) and the Duncanville Rotary hosted me for a luncheon presentation of “The Proud Legacy and Future of Metrocare in Dallas County” on March 12.
- Metrocare is extending partnerships with Jewish Family Services - through their new primary care clinic in NE Dallas near Skillman - and with The UTD Center for Brain Health – to incorporate Brain Healthy practices into clinical programs.

### Items for ongoing attention:

- KAI Architectural has provided initial conceptual renderings for the Lancaster-Keist (LK) campus re-imagining. The existing clinic building will be renovated and revitalized while the SNOP building will be razed and rebuilt, likely in a new location nearer to Lancaster Blvd. This may allow for alternate uses of the remaining land.
- Metrocare’s strategic vision includes the expansion of housing for individuals and families experiencing homelessness in Dallas County, particularly those in need of Permanent Supported Housing. Attention has turned to completing the three new DDP groups homes.
- Metrocare has identified the need for a Children & Family Center in southeast Dallas County. The medical office building at 9209 Elam Road has been purchased to further this end. The property includes a substantial, undeveloped, residential lot which could be used for further housing expansion.
- Dallas College has entered into an agreement with Metrocare that will result in satellite locations at each of their seven campuses within 2-3 years. Parameters are in place to meter the expansion as awareness and demand grow. The first location on the Richland Campus opened during early February. The College would like Metrocare to enter an accelerated timeline to open sites at all of the campuses, but we will need to ensure that the sites are viable before moving too quickly.

## PROGRESS ON FY24 KEY PERFORMANCE INDICATORS

2. Employee Turnover (trailing 12 months)	25% or less	1.19%	19.00%	ahead
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### Quality Care

10. LIDDA Type A Contacts per fiscal year (3,000 per month)	36,000	2753	15661	behind
11. LIDDA DID evaluations per month	40	41	33.16	behind
5. Alcohol misuse intervention for those who screen positive for unhealthy usage	83% or greater	85.40%	100%%	goal met
7. Reported hospital discharges receive f/up appointment	52% or greater	59.50%	55.10%	ahead
13. Housing stability through increased median length of stay by 10% year over year. Baseline 2,328 days	2,561 days	2435	-9	behind
9. Clinical productivity benchmark	93%	95.2%	91.7%	behind

### Thriving Agency

1. Individuals served per month	20,500	20,070	38,043	behind
4. Diagnostic interviews within 7 days of intake	91%	92.40%	91.70%	ahead
8. Increase individuals served in MH year over year	41,684	2,086	31,391	on track
14. A/R over 60 days old	25% or less	50.81%	49.13%	behind
15. Maintain a 94% Net Collection Rate	94% or greater	76.00%	85.00%	behind
12. Increase individuals housed year over year by 20%. Baseline 436	523	453	-26	behind
3. Hillside Capital Campaign	\$5M	\$0	\$1,013,846	on track

### Innovative Collaborator

6. Workforce Development - ACER Training	290	217	74.80%	on track
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## BOARD COMMUNICATION

**AGENDA ITEM**

Human Resources Report

**BOARD MEETING DATE**

NA

**PREPARED BY**

Ariana Rosado, Chief Human Resources Officer

**DATE PREPARED**

March 6, 2023

**Agency KPI: To ensure a stable and fulfilled workforce, Metrocare will maintain a 25% or less employee turnover rate.**

Current Month (turnover for February) – 1.19%

Rolling 12-month Performance: 19%

Goal: 25.0%

Baseline: 21.0%

Measurement Tool: Paycom Report (Trailing 12 months)

Pillar: Engaged Employees

Objective: Fulfilled Workforce

**Departmental Goals:****1. To ensure a trained and competent workforce that adheres to regulatory expectations, Metrocare will maintain a 95% or greater completion rate of Texas Administrative Code Training/Testing Requirements.**

Monthly Performance: 95%

Goal: 95.0%

Baseline: 96%

Measurement Tool: HR reporting system

Pillar: Engaged Employees

Aligned Objective: Professional Development

**2. Metrocare will decrease departmental turnover by 2% over baseline YOY.****Division Turnover**

<b>March 2023 Through February 2024</b>	
<b>Division</b>	<b>Turnover % by Division</b>
<b>ACER</b>	0%
<b>Admin</b>	12%
<b>DDP</b>	20%
<b>Homeless/Housing</b>	14%
<b>LIDDA</b>	20%
<b>MH</b>	26%
<b>*Average turnover All Divisions</b>	<b>16%</b>

**149148**

Current Workforce			
Total Employees	Full-time Employees	PRN	Part-time
1095	1041	40	14

Recruiting Comments		
Current Open Positions	Replacements	New Positions
131	73	58

New Hires and Separations		
	New Hires	Separations
Current Month	24	13
Rolling 12 Months	338	226

Voluntary and Involuntary Separations		
	Voluntary Separations	Involuntary Separations
Current Month	10	3
Rolling 12 Months	179	47



Time to Fill - average	
Current Month – Total Agency	86 days
LIDDA	140 days
MH	71 days
ECI-DDP	68 days
Qualified Mental Health Professional	45 days
Service Coordinator	140 days

Bilingual Case Management Staff	
Current Month	17%

**Employees Participating in Medical Plan**

Participation % of FT	
Current Month	82%

**Employees Participating in Retirement Plan**

Participation %	
Current Month	79%

**Monthly Service Anniversaries**

Employee Name	Department	Position	# Years
VICKI WHITE	100-CHIEF EXECUTIVE OFFICER [100]	MANAGER ACCOUNTING	5
COURTNEY R. KELLY	422-HEALTHY TRANSITIONS [422]	CASE MANAGER CLINICAL DUAL	5
CELINA RIZO	544-LIFENET REGIONAL SPT [544]	SUPPORT BUSINESS II	5
MELISSA RAMIREZ	739-HCS - SUP HM LVNG [739]	SPECIALIST COMMUNITY LIVING II DDP PRN	5
LINSEY M. MARTIN	682-ECI SERVICES [682]	THERAPIST PHYSICAL PRN	10
MAYRA RIVERA	722-LIDDA - SVC COORD - THL [722]	COORDINATOR TEAM LEADER CUSTOMER SERVICE GENERAL REVENUE	10
MARY EVANS	741-DD - ELIGIBILITY DETERM UN [741]	SPECIALIST INTAKE	10
SHATISHA K. FLETCHER	280-RG ADMIN - SOUTH [280]	SUPPORT BUSINESS II	15
ALICIA E. ODENIRAN	339-SNOP - TCOOMMI [339]	QMHP LIAISON TCOOMMI	15
LATASHA L. HIGH	339-SNOP - TCOOMMI [339]	QMHP LIAISON TCOOMMI	15

Respectfully Submitted,

Ariana Rosado

[Ariana.Rosado@metrocareservices.org](mailto:Ariana.Rosado@metrocareservices.org)

**149150**



**BOARD COMMUNICATION**

<b>AGENDA ITEM</b> Facilities Planning & Construction Updates	<b>BOARD MEETING DATE</b> No March Meeting
<b>PREPARED BY</b> Kevin J. Boyd – Chief Facilities Planning & Construction Officer	<b>DATE PREPARED</b> March 19, 2024

**Capital Projects**

Hillside Campus

- Site utilities – site utilities are complete.
- Foundations – Client Services and Clinic foundations are complete. The foundation for the Conference building has not yet started.
- Building Services – rough in work continues for plumbing, electrical, and gas.
- Retaining wall – Work on the wall continues. Currently, the wall is 90% complete.
- Parking Garage – Parking decks for Levels 1, 2, and 2.5 are complete. The parking deck for Level 3 is 25% complete. Columns for Levels 1, 2, and 3 are complete.
- Westmoreland Improvements – work began on the hooded left turn.
- MWBE/SBE Contracting – Please see included report.

LK-SNOP Campus

- Design Phase – KAI continues working on the LK-SNOP design. The current schedule has design wrapping up September 20, 2024.
- General Contractor - We are currently seeking qualifications for a general contractor, with construction expected to start November 2024 and estimated to be complete December 2025.

**Facility Operations**

All other operations continued as planned.

Respectfully submitted,

Kevin J. Boyd  
[Kevin.boyd@metrocareservices.org](mailto:Kevin.boyd@metrocareservices.org)

Monthly Activity Report

Instructions: The Dallas County Hospital District has minimum goals of 25% for M/WBE participation in Goods and Services and 30% in Construction work at Metrocare Services. This report is to record your subcontractors/vendors performance on this contract. The report shall be completed for goal commitment and monthly reporting throughout the term of the contract. This form is to include BOTH minority and non-minority subcontractors.  
**(A) EXCLUSION ITEMS:** Major Medical Supplies, Major Medical Medical Equipment, Government Entities, Legal Services, Insurance, Memberships and Education.

**Prime Vendor:** Whiting-Turner Contracting Co.  
**Metrocare Project:** 019455  
**Project Name:** Metrocare Hillside

**Reporting Month:** February-2024  
**Metrocare Contract No:**  
**Metrocare PO No:**

PRIME				
Original Contract/PO Amount	Baseline		Current	
	Original M/WBE Commitment	% of M/WBE Participation	Approved Change Order Value Through C/O: 001	Current Contract/PO Amount
\$89,306,836.00	\$ 26,792,050.80	30%	\$ 2,133,498.14	\$ 91,440,334.14

Current M/WBE Amount	Current M/WBE Commitment	% M/WBE Participation with Change Orders	M/WBE Commitment change due to Change Orders
\$ 91,440,334.14	\$ 91,440,334.14	2%	\$ 2,133,498.14

Prime Billed/Invoiced to Date	
Current Month	Life to Date
\$ 2,887,499.09	\$ 20,741,085.39

Subcontractor Monthly Reporting (Supported by Accounts Payable Report)

Contractor	Vendor Name	Ethnicity	Gender	Certifying Agency (if applicable)	Current Contract/PO Value	Billed to Date		
						Current Month	Life to Date	
Contractor	The Whiting-Turner Contracting Co. (GRs, GCs, & Soft Costs)	White	Male	Not Certified	\$ 16,090,554.75	\$ 154,933.60	\$ 2,751,489.38	
Subconsultants	Source Building Group - 1st Tier	African American	Male	NMSDC; National Minority Supplier Development Council	\$ 2,037,801.84	\$ 63,139.54	\$ 332,482.34	
Subconsultants	Butler & Butler - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 1,236,462.58	\$ -	\$ -	
Subconsultants	Alamo Steel - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 5,354,251.00	\$ -	\$ 1,270,940.00	
Subconsultants	The Door Co. - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 827,320.35	\$ -	\$ -	
Subconsultants	Johnson Equipment - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 178,200.00	\$ -	\$ -	
Subconsultants	Shahan & Son - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 543,184.00	\$ -	\$ -	
Subconsultants	Mcmahan Floors - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 645,551.00	\$ -	\$ -	
Subconsultants	Mezquite Flooring - 2nd Tier (SBG)	Hispanic	Female	NMSDC; National Minority Supplier Development Council	\$ 421,587.00	\$ -	\$ -	
Subconsultants	Sealed Concrete - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ -	\$ -	\$ -	
Subconsultants	Triangle Plaster - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 500,645.00	\$ -	\$ -	
Subconsultants	Specialties - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ -	\$ -	\$ -	
Subconsultants	Signage and Graphics - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ -	\$ -	\$ -	
Subconsultants	USA Shade - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 286,600.00	\$ -	\$ -	
Subconsultants	Sky Climber - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 123,857.00	\$ -	\$ -	
Subconsultants	Kitchen Equipment - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ -	\$ -	\$ -	
Subconsultants	FMG - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 2,549,982.00	\$ -	\$ -	
Subconsultants	Axium Solar - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 859,748.00	\$ -	\$ -	
Subconsultants	American Landscape - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 2,684,595.00	\$ -	\$ -	
Subconsultants	Anchor Fence - 2nd Tier (SBG)	White	Male	NMSDC; National Minority Supplier Development Council	\$ 199,378.00	\$ -	\$ -	
Subconsultants	Lewis Crane - 1st Tier	White	Male	Not Certified	\$ 462,980.00	\$ 34,628.00	\$ 227,588.96	
Subconsultants	Site Preparation				\$ -	\$ -	\$ -	
Subconsultants	Lithko Contracting - 1st Tier	White	Male	Not Certified	\$ 9,958,768.00	\$ 1,060,514.64	\$ 9,793,398.25	
Subconsultants	Cow Town Redi Mi - 2nd Tier (Lithko)	Woman-Owned	Female	NCTRCA; North	\$ 2,348,359.00	\$ 425,233.50	\$ 1,390,308.50	
Subconsultants	Ricochet Fuels - 2nd Tier (Lithko)	Woman-Owned	Female	WBENC; Women Business Enterprise National Council	\$ 50,000.00	\$ 6,775.86	\$ 25,666.25	
Subconsultants	SteConCo - 1st Tier	White	Male	Not Certified	\$ 178,064.76	\$ -	\$ 178,064.76	
Subconsultants	WallCo - 1st Tier	White	Male	Not Certified	\$ 633,594.00	\$ 308,804.00	\$ 382,102.00	
Subconsultants	Viva Railings - 1st Tier	White	Male	Not Certified	\$ 89,385.00	\$ -	\$ -	
Subconsultants	Signature Millwork - 1st Tier				\$ -	\$ -	\$ -	
Subconsultants	George D. Alan - 1st Tier	White	Male	Not Certified	\$ 550,982.00	\$ 15,646.00	\$ 68,026.28	
Subconsultants	Hallmark-Farrell Roofing - 2nd Tier	Woman-Owned	Female	WBC-SW; Women's Business Council - Southwest	\$ 490,436.00	\$ -	\$ 47,618.72	
Subconsultants	Marek - 1st Tier	White	Male	Not Certified	\$ 1,618,462.00	\$ -	\$ -	
Subconsultants	Supreme Roofing - 1st Tier	White	Male	Not Certified	\$ 1,871,501.00	\$ -	\$ -	
Subconsultants	Alpha Insulation - 1st Tier				\$ -	\$ -	\$ -	
Subconsultants	Baker - 1st Tier				\$ -	\$ -	\$ -	
Subconsultants	LMV Construction - 1st Tier	Woman-Owned	Female	Not Certified	\$ 1,401,734.00	\$ -	\$ -	
Subconsultants	Terrell Glass - 1st Tier	White	Male	NCTRCA; North	\$ 4,332,155.00	\$ -	\$ -	
Subconsultants	Envelope Consultant				\$ -	\$ -	\$ -	
Subconsultants	Trinity Drywall & Framing - 1st Tier	White	Male	Not Certified	\$ 4,613,392.86	\$ -	\$ 52,513.00	
Subconsultants	Structureflex - 1st Tier	White	Male	Not Certified	\$ 993,362.00	\$ 50,467.00	\$ 50,467.00	
Subconsultants	Window Coverings				\$ -	\$ -	\$ -	
Subconsultants	Kone - 1st Tier	White	Male	Not certified	\$ 558,885.00	\$ 166,500.00	\$ 166,500.00	
Subconsultants	Caruth - 1st Tier	White	Male	Not Certified	\$ 1,267,853.00	\$ 108,756.95	\$ 108,756.95	
Subconsultants	Way Mechanical - 1st Tier	White	Male	Not Certified	\$ 3,472,279.00	\$ 250,846.00	\$ 1,362,768.00	
Subconsultants	Berger Engineering - 1st Tier	African American	Male	DFWMSDC; DFW Minority Supplier Development Council	\$ 9,759,557.00	\$ -	\$ 155,060.00	
Subconsultants	BMS				\$ -	\$ -	\$ -	
Subconsultants	Gentzler Electric - 1st Tier	White	Male	Not Certified	\$ 6,616,315.60	\$ 147,949.87	\$ 571,304.20	
Subconsultants	JML Distribution - 2nd Tier (Gentzler)	Woman-Owned	Female	NCTRCA; North	\$ 804,109.00	\$ 28,277.13	\$ 106,540.26	
Subconsultants	IQ Supply Solutions - 2nd Tier (Gentzler)	Woman-Owned	Female	WBENC; Women Business Enterprise National Council	\$ 1,942,649.40	\$ -	\$ 1,378.54	
Subconsultants	Security and Safety				\$ -	\$ -	\$ -	
Subconsultants	The Holbrook Company - 1st Tier	White	Male	Not Certified	\$ 662,327.00	\$ -	\$ 541,062.00	
Subconsultants	Earth Retention System				\$ -	\$ -	\$ -	
Subconsultants	Texoma Pest Control - 1st Tier	White	Male	Not Certified	\$ 4,100.00	\$ -	\$ 4,100.00	
Subconsultants	FX Concrete LLC - 1st Tier	Hispanic	Male	NMSDC; National Minority Supplier Development Council	\$ 1,027,558.00	\$ -	\$ -	
Subconsultants	Pavement Markings				\$ -	\$ -	\$ -	
Subconsultants	Dagger Contracting - 1st Tier	White	Male	Not Certified	\$ 726,808.00	\$ 25,672.16	\$ 724,936.60	
Subconsultants	Industry Junction - 2nd Tier (Dagger)	Hispanic	Male	NMSDC; National Minority Supplier Development Council	\$ 415,000.00	\$ 39,354.84	\$ 417,156.27	
Subconsultants	LB Transportation - 2nd Tier (Dagger)	Woman-Owned	Female	NCTRCA; North	\$ 50,000.00	\$ -	\$ 10,857.13	
					<b>Totals</b>	\$ 91,440,334.14	\$ 2,887,499.09	\$ 20,741,085.39
					<b>% of Participation - Billed/Invoiced</b>		3%	23%

An M/WBE Owned business is a concern that at 51% owned by one or more minority individuals or, in the case of publicly owned concern, in which at least 51% of the stock is owned by one or more minority individuals, whose management of daily

Commitment Reporting

Classification:	Woman-Owned	Asian	African America	Hispanic	Native American	White	Not Certified
Current Month	\$ 460,286.49	\$ -	\$ 63,139.54	\$ 39,354.84	\$ -	\$ 2,324,718.22	\$ -
Life To Date	\$ 1,582,369.40	\$ -	\$ 487,542.34	\$ 417,156.27	\$ -	\$ 18,254,017.38	\$ -
						<b>Current Month</b>	<b>Life to Date</b>
M/WBE	\$ 562,780.87	\$ -	\$ -	\$ -	\$ -	\$ 562,780.87	\$ 2,487,068.01
Non M/WBE	\$ 2,324,718.22	\$ -	\$ -	\$ -	\$ -	\$ 2,324,718.22	\$ 18,254,017.38
<b>Totals</b>	\$ 2,887,499.09	\$ -	\$ -	\$ -	\$ -	\$ 2,887,499.09	\$ 20,741,085.39

Prime Representative Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

Metrocare Representative: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_



**Subcontracting Commitments with Approved Change Orders to Date**

Instructions: The Dallas County Hospital District has minimum goals of 25% for M/WBE participation in Goods and Services and 30% in Construction work at Metrocare Services. This report is to record your subcontractors/vendors performance on this contract. The report shall be completed for goal commitment and monthly reporting throughout the term of the contract. This form is to include BOTH minority and non-minority subcontractors.  
**(A) EXCLUSION ITEMS:** Major Medical Supplies, Major Medical Medical Equipment, Government Entities, Legal Services, Insurance, Memberships and Education.

Prime Vendor: **Whiting-Turner Contracting Co.**  
 Metrocare Project No: **019455**  
 Project Name: **Metrocare Hillside**

Reporting Month: **February 2024**  
 Metrocare Contract No: **0**  
 Metrocare PO No: **0**

	Vendor Name	Ethnicity	Gender	Certifying Agency (if applicable)	Original Contract/PO Value	Sum of Previous Change Orders	Current Contract/PO Value
Contractor	The Whiting-Turner Contracting Co. (SRL), LLC, &	White	Male	Not Certified	\$ 15,026,498.47	\$ 164,256.28	\$ 16,090,554.75
Subconsultants	Osborn Building Group - 1st Tier	African American	Male	NMISC, National Minority Supplier Development Council	\$ 2,037,801.84	\$ -	\$ 2,037,801.84
Subconsultants	Buller & Butler - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 1,236,462.58	\$ -	\$ 1,236,462.58
Subconsultants	Womo Steel - 2nd Tier (SRL)	White	Male	Development Council	\$ 5,354,251.00	\$ -	\$ 5,354,251.00
Subconsultants	The Door Co. - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 827,320.35	\$ -	\$ 827,320.35
Subconsultants	Johnson Equipment - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 178,200.00	\$ -	\$ 178,200.00
Subconsultants	Duhamel & Son - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 543,184.00	\$ -	\$ 543,184.00
Subconsultants	Thompson Pavers - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 645,551.00	\$ -	\$ 645,551.00
Subconsultants	Masonite Flooring - 2nd Tier (SRL)	Hispanic	Female	NMISC, National Minority Supplier Development Council	\$ 421,587.00	\$ -	\$ 421,587.00
Subconsultants	Sealed Concrete - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ -	\$ -	\$ -
Subconsultants	Triangle Plaster - 2nd Tier (SRL)	White	Male	Development Council	\$ 500,645.00	\$ -	\$ 500,645.00
Subconsultants	Decoratives - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ -	\$ -	\$ -
Subconsultants	signage and Graphics - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ -	\$ -	\$ -
Subconsultants	USA Shade - 2nd Tier (SRL)	White	Male	Development Council	\$ 286,600.00	\$ -	\$ 286,600.00
Subconsultants	City Climber - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 123,857.00	\$ -	\$ 123,857.00
Subconsultants	Edchen Equipment - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ -	\$ -	\$ -
Subconsultants	INS - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 2,549,982.00	\$ -	\$ 2,549,982.00
Subconsultants	Johnson Sales - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 859,748.00	\$ -	\$ 859,748.00
Subconsultants	American Limestone - 2nd Tier (SRL)	White	Male	NMISC, National Minority Supplier Development Council	\$ 2,684,595.00	\$ -	\$ 2,684,595.00
Subconsultants	Anchor Fence - 2nd Tier (SRL)	White	Male	Development Council	\$ 199,378.00	\$ -	\$ 199,378.00
Subconsultants	Levin Crane - 1st Tier	White	Male	Not Certified	\$ 462,580.00	\$ -	\$ 462,580.00
Subconsultants	Oil Preparation				\$ -	\$ -	\$ -
Subconsultants	Wilko Contracting - 1st Tier	White	Male	Not Certified	\$ 8,321,238.00	\$ 1,637,540.00	\$ 9,958,778.00
Subconsultants	Cost-Tech Contracting - 2nd Tier (Utility)	Woman-Owned	Female	NETRCA, North	\$ 2,348,335.00	\$ -	\$ 2,348,335.00
Subconsultants	Respectful Earth - 2nd Tier (Utility)	Woman-Owned	Female	WBENC, Woman Business Enterprise	\$ 50,000.00	\$ -	\$ 50,000.00
Subconsultants	DeConCo - 1st Tier	White	Male	Not Certified	\$ 178,064.76	\$ -	\$ 178,064.76
Subconsultants	Waltco - 1st Tier	White	Male	Not Certified	\$ 633,594.00	\$ 15,500.00	\$ 649,094.00
Subconsultants	Alfa Railings - 1st Tier	White	Male	Not Certified	\$ 89,385.00	\$ -	\$ 89,385.00
Subconsultants	Equipeck Millwork - 1st Tier	White	Male	Not Certified	\$ -	\$ -	\$ -
Subconsultants	George D. Alan - 1st Tier	White	Male	Not Certified	\$ 550,982.00	\$ -	\$ 550,982.00
Subconsultants	Colman's-Farnell Roofing - 2nd Tier	Woman-Owned	Female	WBC-SW, Woman Business Enterprise-Southwest	\$ 490,436.00	\$ -	\$ 490,436.00
Subconsultants	Marks - 1st Tier	White	Male	Not Certified	\$ 1,618,462.00	\$ -	\$ 1,618,462.00
Subconsultants	Equipeck Roofing - 1st Tier	White	Male	Not Certified	\$ 1,871,501.00	\$ -	\$ 1,871,501.00
Subconsultants	Equipeck Insulation - 1st Tier	White	Male	Not Certified	\$ -	\$ -	\$ -
Subconsultants	Buller - 1st Tier				\$ -	\$ -	\$ -
Subconsultants	DMP Construction - 1st Tier	Woman-Owned	Female	Not Certified	\$ 1,401,374.00	\$ -	\$ 1,401,374.00
Subconsultants	Equipeck Glass - 1st Tier	White	Male	NETRCA, North	\$ 4,332,155.00	\$ -	\$ 4,332,155.00
Subconsultants	Equipeck Consultant				\$ -	\$ -	\$ -
Subconsultants	Trinity Driveway & Framing - 1st Tier	White	Male	Not Certified	\$ 4,607,143.00	\$ 6,251.86	\$ 4,613,394.86
Subconsultants	Equipeck Glass - 1st Tier	White	Male	Not Certified	\$ 993,342.00	\$ -	\$ 993,342.00
Subconsultants	Equipeck Coverings				\$ -	\$ -	\$ -
Subconsultants	Alma - 1st Tier	White	Male	Not Certified	\$ 558,885.00	\$ -	\$ 558,885.00
Subconsultants	Carroll - 1st Tier	White	Male	Not Certified	\$ 1,287,885.00	\$ -	\$ 1,287,885.00
Subconsultants	Willy Mechanical - 1st Tier	White	Male	Not Certified	\$ 1,061,749.00	\$ 410,530.00	\$ 1,472,279.00
Subconsultants	Dagger Engineering - 1st Tier	African American	Male	DPW/MISC, DPW Minority Supplier Development Council	\$ 9,759,557.00	\$ -	\$ 9,759,557.00
Subconsultants	BAK				\$ -	\$ -	\$ -
Subconsultants	Demeter Electric - 1st Tier	White	Male	Not Certified	\$ 6,636,345.00	\$ -	\$ 6,636,345.00
Subconsultants	NETRCA Distribution - 2nd Tier (Generator)	Woman-Owned	Female	NETRCA, North	\$ 804,309.00	\$ -	\$ 804,309.00
Subconsultants	Equipeck Generators - 2nd Tier (Generator)	Woman-Owned	Female	National Council	\$ 1,942,649.40	\$ -	\$ 1,942,649.40
Subconsultants	Security and Safety				\$ -	\$ -	\$ -
Subconsultants	The Notebook Company - 1st Tier	White	Male	Not Certified	\$ 762,807.00	\$ (100,580.00)	\$ 662,227.00
Subconsultants	Earth Restoration System				\$ -	\$ -	\$ -
Subconsultants	Equipeck Peak Control - 1st Tier	White	Male	Not Certified	\$ 4,100.00	\$ -	\$ 4,100.00
Subconsultants	TS Concrete LLC - 1st Tier	Hispanic	Male	NMISC, National Minority Supplier Development Council	\$ 1,027,558.00	\$ -	\$ 1,027,558.00
Subconsultants	Equipment Markings				\$ -	\$ -	\$ -
Subconsultants	Dagger Contracting - 1st Tier	White	Male	Not Certified	\$ 726,808.00	\$ -	\$ 726,808.00
Subconsultants	Industry Junction - 2nd Tier (Dagger)	Hispanic	Male	NMISC, National Minority Supplier Development Council	\$ 415,000.00	\$ -	\$ 415,000.00
Subconsultants	BA Transportation - 2nd Tier (Dagger)	Woman-Owned	Female	NETRCA, North	\$ 50,000.00	\$ -	\$ 50,000.00
				<b>Total:</b>	<b>\$ 89,306,836.00</b>	<b>\$ 2,133,498.14</b>	<b>\$ 91,440,334.14</b>

An M/WBE Owned business is a concern that is 51% owned by one or more minority individuals or, in the case of publicly owned concerns, in which at least 51% of the stock is owned by one or more minority individuals, whose management of daily operations is controlled by one or more minority individuals who own it, and in which minority individuals are U.S. Citizens or resident aliens.

Classification	Woman-Owned	Asian	African American	Hispanic	Native American	White	Not Certified
Original Commitment:	\$ 7,087,287.40	\$ -	\$ 11,797,358.84	\$ 1,864,145.00	\$ -	\$ 68,558,044.76	\$ -
Current Commitment:	\$ 7,087,287.40	\$ -	\$ 11,797,358.84	\$ 1,864,145.00	\$ -	\$ 70,691,542.90	\$ -
Percent Commitment:	8%	0%	13%	2%	0%	79%	42%
						<b>Total Classification %</b>	<b>100%</b>
						<b>M/WBE Classification %</b>	<b>23%</b>
						<b>Non M/WBE Classification%</b>	<b>79%</b>

Prime Representative Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

Metrocare Representative: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_





## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Information Technology Updates	<b>BOARD MEETING DATE</b> No Meeting
<b>PREPARED BY</b> Russ Abercrombie, CIO	<b>DATE PREPARED</b> March 19, 2024

### Measures Reports/Internal Development (Casie Sheffield):

<b>MIPS Measures</b>	The six MIPS Year 7 measures are on-track ahead of the upcoming submission date (April 2024). <u>MIPS 6.1 is under Operation's final review as of this week, while all others have been approved.</u> The necessary XML and .json file format requirements are implemented and tested for readiness for all 6 measures' results to be submitted.
<b>CCBHC-SAMHSA Measures</b>	20+ Measures have been identified by Ops for build-out prior to the July 2024 submission deadline. The first measure's (CCBHC 3.3) technical requirements were reviewed with IT Dev and <u>report development is expected to move into the initial Quality Assurance phase this week.</u> This measure captures Depression Remission Rates at 6 months and includes all affected consumers' future appointment details for targeted and timely clinical follow-ups.
<b>Reports Centralization + Improvements Project</b>	The aim of this initiative is to ensure all reports are centrally located, accessible, and refined to provide exactly what each department prefers/needs to successfully manage their business units. Internally created How to Guides, live training sessions, and recorded videos to help all report users better navigate and utilize Metrocare's various report functionalities is also within this initiative's framework. An internal BI launch page is created and the rounds of customization per Division and Department has begun. <u>MH Division, Strategic Initiatives, and Finance departments are next in queue to receive their preferred reports and launch-page structuring for build out. Commitment of increased PowerBI license counts and the Reports Centralization sharepoint page architecture is set for April 1, 2024.</u>
<b>Automated Bonus Approvals Platform</b>	<u>Q1 FY24 Team, Individual, and Med Units Bonuses per Division were successfully approved via all Managers and Directors within the newly created shared platform.</u> This has eliminated multiple Excel report routings via email per bonus quarter. Live and recorded trainings plus "How To – Quick Reference Guide" resources were provided to all Managers and Directors.



**Analysis of Relias to Paycom Values**

Ongoing analysis support supplied to Quality Management, HR, and Ops stakeholders for the multi-phase synchronization of Relias to Paycom system values per Employee.

**Data Management & Strategies (Debbie Frazer):****IT Data/Dev Team Projects - February Report**

<b>Category</b>	<b>Project</b>	<b>Status</b>	<b>Notes</b>
<b>Server Decommissions</b>	NAS, Sandbox2	Complete	All documents from the old App Extender applications have been exported allowing shut down of the NAS Server. All legacy database backups have been moved allowing shut down of Sandbox2
<b>System Integrations</b>	Dr. Connect	Complete	Changes requested for 2 separate data feeds (MH and Med Services) have been completed Initial controlled test completed
<b>Measures Reporting</b>	MIPS submission	50% complete	3 XML file submissions completed 2 JSON file submissions in work this month
<b>Reports</b>	Automated Bonus Approval	Complete	This will streamline the manager approval process for Employee productivity bonuses Complete and used for bonus reporting for FY24 Q1
	Patient Notes in Draft Report	Complete	Reports on patient notes currently in Draft Status - daily report PLUS an additional report with morning and mid-day updates
	Partner Data Sharing Report	Complete	Re-work of a MyAvatar report in our data warehouse environment for efficiency and added functionality
	CCBHC Cost Report	Complete	New report to track CCBHC costs includes daily data refreshes going forward

	Facilities Cost Report	50% Complete	New report to help Facilities track actual to budget data
	QSUP Reporting	Complete	Updated and automated the QSUP form upload process and data reporting
<b>Forms</b>	Banking Information Change Request	Complete	Allows employees to input bank account updates requests for expense reimbursement. Included implementation of SSL encryption for this and numerous other forms
	CFO Survey - board position nominations	Complete	Survey complete and sent out
	Automated forms request	Complete	Form to allow departments to submit requests for new automated forms development

#### **Network/Infrastructure Details (Tim Kitchen):**

<b>Okta implementations wrap up</b>	We finished the Okta project with the Okta professional services team. Okta is now fully functional and working as intended. We will continue to on-board applications into our single sign on security platform.
<b>Microsoft 365 password attacks</b>	As a result of implementing Okta, we were able to see attacks targeting users' passwords. We worked to disable protocols the bad actors were using to try to gain access. This stopped 90% of the attacks. We have one more fix to implement but there is more research/testing needed to validate the wanted outcomes.
<b>Microsoft licensing renewal</b>	Working with SHI to deploy a tool that will aid in better reporting on our Microsoft licensing usage before our renewal comes due in late April. This should help us save money at renewal time.
<b>2008 Server decommission</b>	We have built the virtual server environment to host these servers within Metrocare. We successfully imported the copied servers from Netsmart and verified functionality was intact. This environment was designed/built in a secure manner and only powered on when needed for data access.

#### **Information Security (Long Lam):**

<b>Netwrix File Scan Software</b>	Completed implementation. Application training is on Friday for vendor to go over functions. Scans are actively running in the environment to provide permission errors for Metrocare to fix in the first pass.
<b>CASO project</b>	Completed. Notified Netsmart this server can decommission. CASO is a legacy clinical documentation system.
<b>Zscaler (end point security)</b>	Configuration completed to work with OKTA authentication
<b>Microsoft Active Directory Security</b>	Reviewed and approved list of terminated employees older than 6 years for deletion from Active Directory.

**EMR Operations (Sarah Nagle):**

<b>Product</b>	
<b>Doctor Connect</b>	<p><u>Functionality:</u> Appointment reminder platform that sends text &amp; email reminders (if consent on file) and voice reminders of upcoming appointments and reminders to reschedule for no-show appointments):</p> <p><u>Status:</u> On-going – completed customization and set up for MH / Medical in February. Testing occurs in March. Starting set up for Housing &amp; Homeless as well as LIDDA in March.</p>
<b>EMR Optimization (NX, myAvatar)</b>	<p><u>Functionality:</u> looking at existing or new products that can help us optimize our system and streamline workflows</p> <p><u>Status:</u> On-going</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Care Quality - documents from external providers: (ex. discharge information from Parkland inpatient)</li> <li>• Care Connect - secure referral sending and receiving with external providers) <ul style="list-style-type: none"> <li>○ meeting weekly with Carrie Parks and Jennifer Wadsworth on best practices, set up and usage.</li> </ul> </li> <li>• Practitioner Enrollment – clean-up project w/ Ops and Netsmart to correct credentials in myAvatar that affects billing and audits.</li> <li>• Texas User Group Summit – 2-day meeting in Frisco for all Texas Centers who use myAvatar NX – got some great ideas from other</li> </ul>

	Centers on how they are optimizing their system we brought back and are actively investigating.
<b>Managed Service Requests for EMR (NX, myAvatar)</b>	<p><u>Functionality:</u> Directors / Managers submit requests for editing existing or creation of new reports, forms, reports, widgets (anything living inside myAvatar NX). Can be requested as result of an audit, HHS changes to a form, streamlining a workflow, or remove a manual process to become automated. Work in conjunction with the IT Dev and Data / Analytics teams to coordinate reporting efforts.</p> <p><u>Status:</u> <b>12 requests completed</b> and rolled out in February for Medical Records, MH, IDD &amp; LIDDA departments</p>



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Clinical Services Division Report	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> Judith Hunter, M.D., Chief Medical Officer	<b>DATE PREPARED</b> March 20, 2024

### **Report for Clinical Services Division February 2024**

#### **Medical Staff Services**

- One Child and Adolescent Psychiatrist Medical Director vacancy  
One additional fully remote Child and Adolescent Psychiatrist position—interviews in process
- Psychiatric evaluations completed within 14 days of authorization: 93.5%
- Same day psychiatric evaluations: 87%

#### **Developmental Disability Provider (DDP):**

- ECI: 547 children received comprehensive services
- Developmental Disability Provider (DDP): 460 unique individuals served
- Total unique individuals served in the division: 1007

#### **Stephen A. Cohen Military Family Clinic at Metrocare**

- FY #8 started May 1, 2023. 588 new episodes of care year-to-date
- One vacant clinical staff position: new staff to be in NEO in March

#### **Altshuler Center for Education and Research**

- Fiscal YTD unique trainees through ACER: 217
- YTD trainee count includes Dr. Sherwood Brown's research trainees

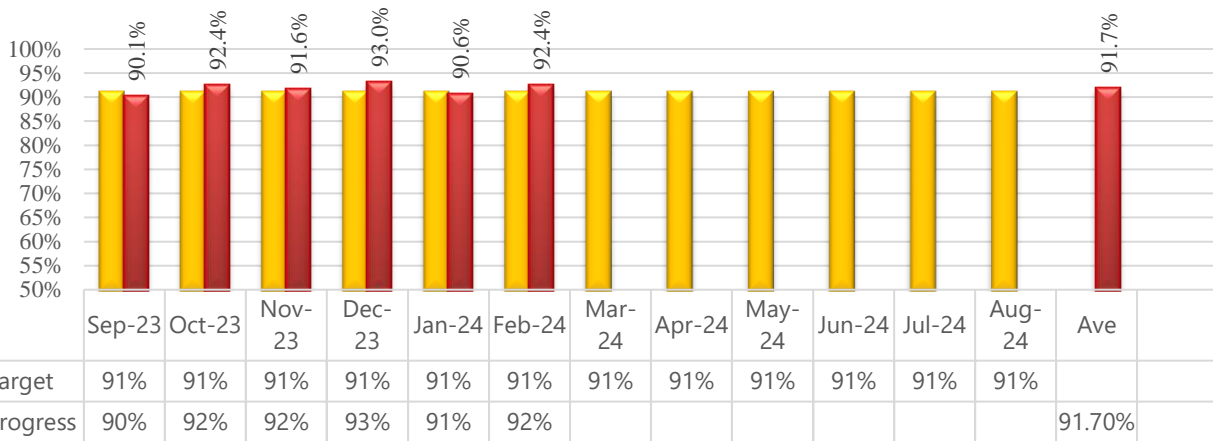
## FY 2024 KEY PERFORMANCE INDICATORS February 2024

**KPI 4:** To grow the mission of the Center and to ensure timely access to services, the Metrocare mental health division will complete 91% of diagnostic interviews with medication services within seven days of intake.

**Goal:** 91.0%

**Progress:** 92.4% (Average YTD 91.7%)

**Psychiatric Evaluations Completed Within 7 days of Intake**

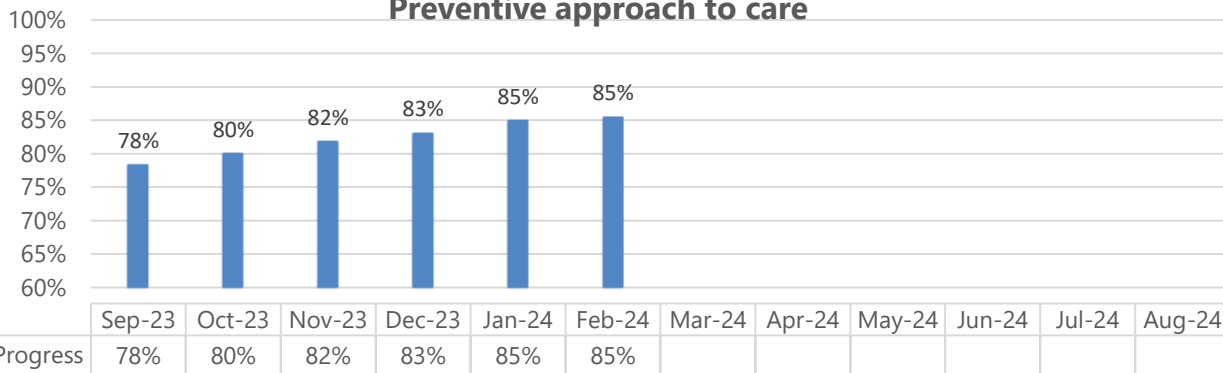


**KPI 5:** To further Metrocare’s preventive approach to care, 83% of adult individuals in service who screen positive for unhealthy alcohol use will receive a brief intervention by a licensed clinician.

**Goal:** 83.0%

**Progress:** 85.4%

**Preventive approach to care**

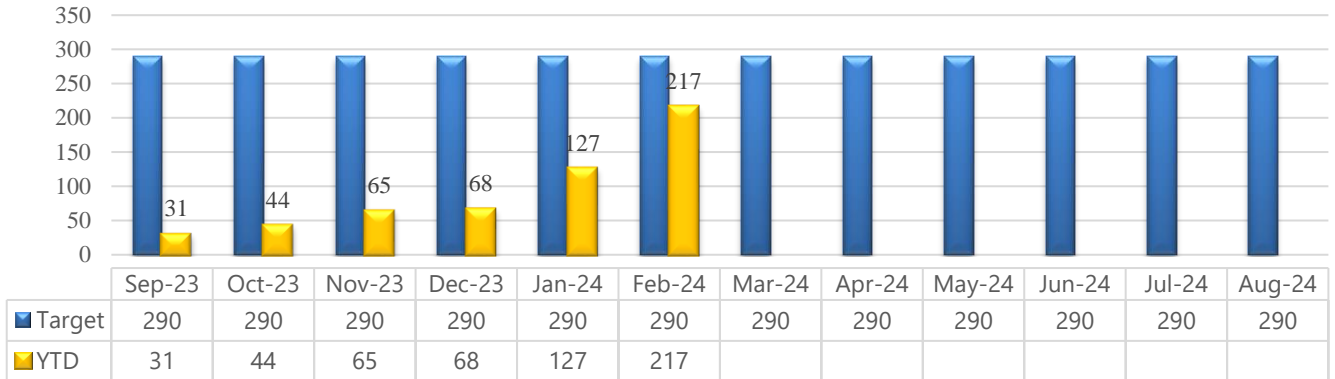


KPI 6: To support workforce development in Community Mental Health, Metrocare will train 290 clinicians through the ACER Training Program per year.

Goal: 290

Progress: 217

**Altshuler Center for Education Total Annual Trainees**



Respectfully submitted,

Judith Hunter, MD

[Judith.hunter@metrocareservices.org](mailto:Judith.hunter@metrocareservices.org)



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Mental Health Division Report	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> Jennifer Wadsworth, Chief Clinical Officer	<b>DATE PREPARED</b> March 20, 2024

### Report for Mental Health Division

#### **Engaged Employees:**

- MH Leadership Program – MH has the first graduating class of the MH Leadership program. The program is a 15-week program consisting of reading materials and shadowing of various leaders in the MH Division. The program is generating ideas by staff and creating leadership at all levels within the MH Division.
  - Staff feedback:

#### MH Leadership Training Survey Staff Feedback:

1. Participation in the MH Leadership Cohort was valuable to me. 5 out of 5
2. The managers I shadowed were enthusiastic and provided helpful information. 4.75 out of 5
3. I grew as a leader as a result of participating in the MH Leadership Cohort. 5 out of 5
4. What was your biggest personal takeaway from participating in this leadership cohort?
  - “That anyone can be a leader and that I am already a leader in my role, in many ways.”
5. What was the most interesting thing you learned?
  - “The most interesting thing I learned was: 1. When establishing goals for a team it is best for everyone to know so that they can have buy-in. 2. “when tough times hit you are more teachable.”
6. What would you tell other Metrocare staff who are considering applying for a future leadership cohort?
  - “DO IT! This will be the best opportunity to learn, develop, grow, and ASK QUESTIONS that you'll probably ever have!”

#### **Innovative Collaborators:**

- Marie Troye Sampson and Andrew Ahles will be presenting at 2024 Peer Fest.

Respectfully submitted,

Jennifer Wadsworth

[jennifer.wadsworth@metrocareservices.org](mailto:jennifer.wadsworth@metrocareservices.org)



## FY 2024 KEY PERFORMANCE INDICATORS

**KPI 7: To ensure continuity of care, at least 52% of reported hospital discharges (ER and in-patient behavioral health) will receive a follow up appointment from Metrocare clinical staff within 30 days of the discharge.**

Rolling 12 Month Performance – 55.1%

Goal: 52.0%

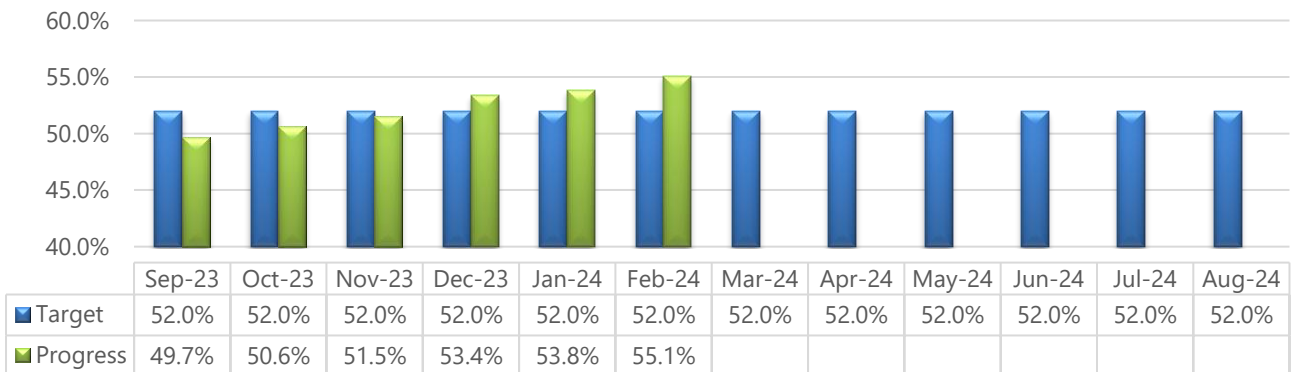
Baseline: 49.0%

Measurement Tool: 30-day Hospital Report

**Pillar: Quality of Care**

*Aligned Objective: Client Improvement*

**Reported Hospital Discharge 30 Day Follow up**



**KPI 8: To meet community need, Metrocare will increase the number of unique individuals receiving mental health services by 1% year over year.**

Progress: 31,391

Goal: 41,684

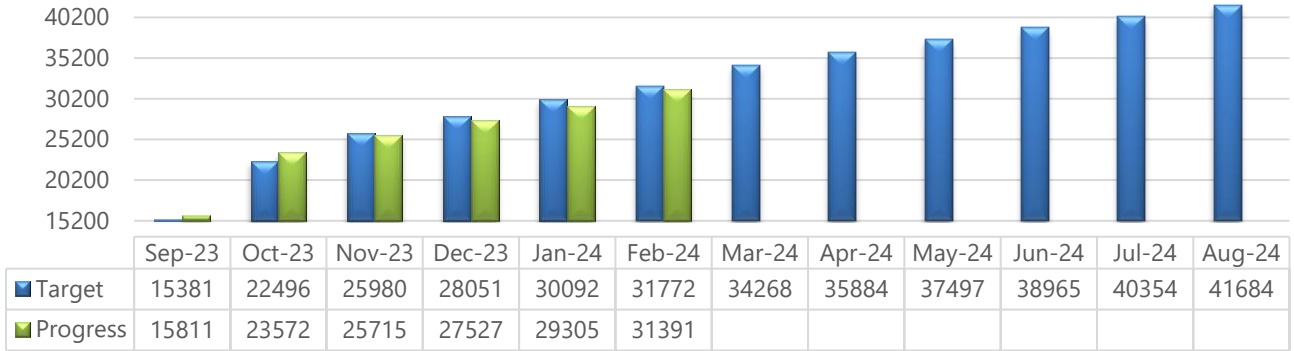
Baseline: 41,271

Measurement Tool: MARS

**Pillar: Thriving Agency**

*Aligned Objective: Meeting Community Need*

**Number of Unique Individuals receiving MH Services**



**KPI 9: To ensure Metrocare’s effective utilization of clinical staff in the service of client’s progress, the mental health division will meet and/or exceed a 93% clinical productivity benchmark.**

Monthly Progress: 95.2%

Goal: 93.0%

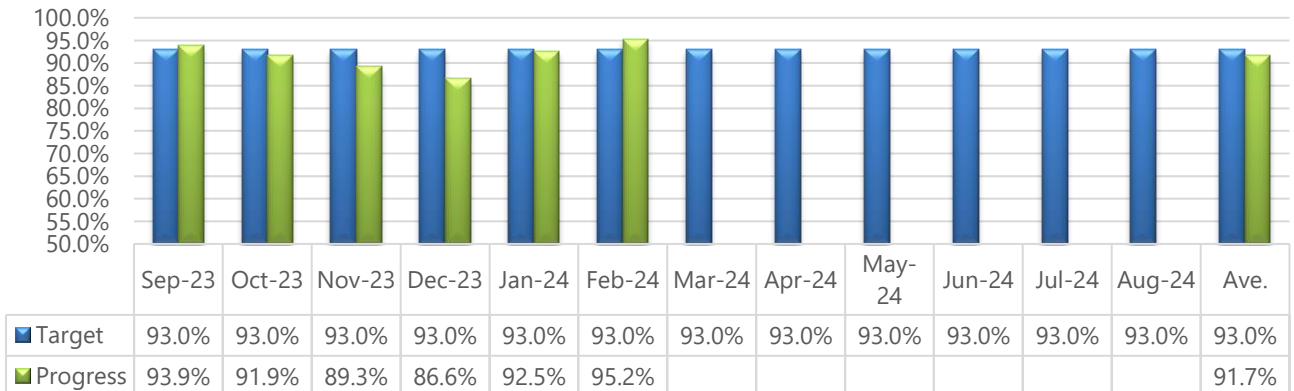
Baseline: 93%

Measurement Tool: Productivity Report

**Pillar: Quality Care**

*Aligned Objective: Client Improvement*

**MH Division Clinical Productivity Rate**





## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Housing and Homeless Services Report	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> Ikenna Mogbo, Chief Housing Officer	<b>DATE PREPARED</b> March 22, 2024

### **Report for Housing & Homeless Services Division – February 2024**

#### **Homeless Services:**

- The Projects for Assistance in Transition from Homelessness (PATH) team has been awarded funding by Housing Forward for two (2) more street outreach case managers.

#### **Supportive Housing:**

- The Unsheltered Housing grant has received 5 referrals from Housing Forward. We believe the referral volume will increase exponentially now that Housing Forward has ironed out their operational process.
- The Safe Haven grant is entering the final month of operations. We anticipate spending all the allocated money.

#### **Housing Development/Acquisition:**

- The Rawlins Chateau property continues to make progress on renovation of the formerly occupied units. The month ended with 18 units completed, 7 units at various stages of renovation, 6 units vacant and pending, and 3 still occupied.
- At the Bowser property we are in the process of awarding the property management contract to Perry Guest.

Respectfully submitted,

Ikenna Mogbo

[Ikenna.Mogbo@metrocareservices.org](mailto:Ikenna.Mogbo@metrocareservices.org)

**FY 2024 KEY PERFORMANCE INDICATORS**  
**February 2024**

**KPI 13: To grow the mission of the Center and to meet community need, Metrocare will increase the total number of unsheltered individuals placed into housing by 20% year over year.**

Monthly Performance: 453 individuals

Goal: 523 individuals

Baseline: 436 individuals

Measurement Tool: Housing Report

Pillar: Thriving Agency

*Aligned Objective: Grow the Mission*

**KPI 6: To grow the mission of the Center and meet community need, Metrocare will increase the agency program participants housing stability rate by increasing the median length of stay for individuals in supportive housing before transitioning to other housing options or exiting the program by 10% year over year.**

Monthly Performance: 2435 days

Goal: 2561 days

Baseline: 2328 days

Measurement Tool: Housing Report

Pillar: Quality Care

*Aligned Objective: Client Improvement*



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Quality Management and Compliance Report	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> Kelli Laos, Chief Operating Officer	<b>DATE PREPARED</b> March 19, 2024

### **Quality Management**

Mental Health clinical documentation audit for Q4 2023 – **Q1 2024 in process**

Progress Notes – 91.1%

Assessment and Diagnosis – 87.9%

Recovery Plan – 72.0%

Intellectual and Developmental Diversity clinical documentation audit February 2024

GR – 75.3%

HCS – 79.0%

PASRR – 94.1%

TxHML – 84.5%

CFC – 55.6%

Substance Use clinical documentation audit

February 2024 – 87.5%

Child and Adult Strengths and Needs Assessment certification compliance – 98%

### **Compliance**

#### **FY 2024 Work Plan Initiatives**

##### **A. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT -PRIVACY**

###### **i. Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 2 of 4

###### **ii. Incidents**

Total Reviewed Cases: 6

Status: 6 – Open

##### **B. REGULATORY COMPLIANCE**

###### **i. Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 2 of 4

**149168**

ii. **Incidents**

Total Reviewed Cases: 3

Status: 2 – Open, 1 – Closed

C. **ETHICS HOTLINE**

i. **Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 2 of 4

ii. **Incidents**

Total Reviewed Cases: 5

Status: 0 – Open

D. **CLIENT RIGHTS INCIDENT MANAGEMENT**

i. **Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 2 of 4

ii. **Complaints**

Total Reviewed Cases: 7

Status: 1 – Closed, 6 – Open

iii. **Incidents**

Total Reviewed Cases: 51

Status: 37 - Closed, 14 - Open

E. **CONTRACT ADMINISTRATION**

**Executed Contracts** – (30) in February

1. 16 - new contracts
2. 1 - amendment
3. 13 - renewals

F. **POLICY ADMINISTRATION**

**Revision – (1)**

- i. AP 5.10.01 Employee Compensation

## Client Deaths

Mental Health – 6

Intellectual and Developmental Disability - 7

## Medical Records Quarter 2 Update:

Board Policy requires regular updates to records management. Below is the Medical Records Q2 Audit and total requests for the quarter:

	Target	WM	ECI	Samuell	WSFC	CCAM	CR	CR	GP	Ste. 300	Skillman	LK	Cottages
Sample Selected Between: 12.1.23-2.29.24		4	4	4	4	4	4	4	4	4	4	4	4
Audit Performed: March 2024		Shirley M	Nikita	Rebecca	Angela M	Janeeka	Loretta	Shontae	Vickie	Debra	Marian	Nanetta	Shelita
1 Individual does not have a duplicate MRN.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
2 All scanned documents belong to this individual.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
3 There are no duplicate copies of scanned documents or blank copies found in the record	100%	100%	100%	100%	50%	100%	100%	100%	75%	100%	100%	100%	100%
4 The effective date for the reviewed scanned document is correct and provided on the scanned document.	100%	75%	100%	100%	100%	100%	100%	100%	75%	100%	100%	100%	100%
5 The documents are scanned under the correct document type, episode, and descriptions are appropriate.	100%	75%	100%	100%	25%	75%	100%	100%	100%	75%	100%	100%	100%
6 Consent for Services. Staff is using the most current form that is completed, signed & dated; within the last 12 months.	100%	100%	100%	100%	100%	100%	75%	75%	100%	100%	75%	100%	100%
7 The Financial Statement is current. Statement signed within the last 12 months.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	75%	100%	N/A
8 Verification of Receipt of Rights: Is current form revision completed correctly and in its entirety for the person receiving services as to specific rights applicable on the form, signed, and dated; within the last 12 months.	100%	100%	100%	100%	100%	75%	100%	75%	100%	100%	75%	100%	100%
9 All IDs, BC & highlighted documents are legible and scanned in 24-bit color if needed.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
10 Forms used are the latest versions, clean copies (no lines), and scanned in the right direction and paper size.	100%	100%	100%	100%	100%	100%	100%	100%	100%	25%	100%	100%	0%
<b>TOTAL SCORE</b>	<b>100%</b>	<b>95%</b>	<b>100%</b>	<b>100%</b>	<b>88%</b>	<b>95%</b>	<b>98%</b>	<b>95%</b>	<b>95%</b>	<b>90%</b>	<b>93%</b>	<b>100%</b>	<b>89%</b>
<b>TOTAL SUBPOENAS (In-House)</b>	<b>26</b>												
<b>HMG TOTALS (DEC-FEB)</b>													
Patient Requests	403												
Healthcare Requests	1905												
Insurance Requests	37												
Attorney Requests	219												
Subpoenas	9												
DDS	1431												
All Other (Chart Audits)	144												
<b>Total</b>	<b>4148</b>												

Respectfully Submitted,

Kelli Laos

[Kelli.Laos@metrocareservices.org](mailto:Kelli.Laos@metrocareservices.org)

149170



**BOARD COMMUNICATION**

<b>AGENDA ITEM</b> Local Intellectual and Developmental Disability (LIDDA)/Aging & Disability Resource Center (ADRC) Report	<b>BOARD MEETING DATE</b> N/A
<b>PREPARED BY</b> Carolina Lasso, Chief Authority Officer	<b>DATE PREPARED</b> March 20, 2024

**LIDDA February 2024 Summary:**

Health and Human Services (HHS) was directed by the 88<sup>th</sup> Legislature to enroll a total of 1,144 individuals in the Home and Community Based waiver program and 305 in the Texas Home Living (TxHmL) waiver program interest list during the 2024-2025 biennium. Based on HHS’s projection for FY 24 Metrocare LIDDA anticipates a projected total of **106** slot releases for HCS and **262** for TxHmL programs.

For the HHS has released the following slot for waivers:

- **HCS IL Reduction**            **10**                            **Total slots as of February 38**
- **TxHmL IL Reduction**       **37**                            **Total slots as of February 65**

The following Attrition slots were also released for the month to address specific target groups listed in the HCS waiver that did not receive a specific funding allocation during the legislative session:

- **Nursing Facility Diversion**            **1**
- **Nursing Facility Transitions**        **1**
- **CPS Aging Out**                            **1**
- **Crisis Diversion**                         **3**

**ADRC February 2024 Summary:**

Outreach Activities Conducted: **10**

- MLK JR Library Outreach-2 visits
- Grand Prairie Library Outreach
- Prairie Creek Library Outreach
- Kinwest Medical Clinic at Irving Bible Church-2 visits
- Social Media Posts on Facebook & Instagram
- Jewish Family Services of Greater Dallas
- Advance Health & Rehab Center
- Hillcrest North Dallas Nursing Facility



Advocacy for Affordable & Accessible Housing:

Support Letters for LIHTC 9% Applications: **6**

- The Heights at Park Lane, TDHCA #24135 – 9330 N Central EXPWY, Dallas, TX 75231
- Support Letter for 2024 9% Applications – TDHCA #24023 930 Military Parkway Living, Mesquite, Texas, 75149
- Support Letter for 2024 9% Applications – TDHCA #24030 2910 Motley Senior Living, Mesquite, Texas, 75150
- Support Letter for 2024 9% Applications – TDHCA #24036 Northwest Drive Senior Living, Mesquite, Texas, 75150
- Support Letter for 2024 9% Applications – TDHCA #24038 3606 S Cockrell Hill Road Senior Living, Dallas, Texas, 75236
- Support Letter for 2024 9% Applications – TDHCA #24040 8000 Walton Irving Living, Irving, Texas, 75063

Public Comment:

- Irving City Hall in support of TDHCA #24040 8000 Walton Irving Living, Irving, Dallas County, Texas, 75063

Total Number of Calls Queued to the Call Center: 1,437

- Calls directed from HHSC Toll-Free Number: **NA**—*HHSC has not provided a report at this time (3/5/2024)*
- Types of Calls based on Queue Selected:

Queue Name	Total Queued
Benefits	365
Caregiver Assistance	223
Housing	117
Local Contact Agency	12
Long-Term Services & Supports	393
Email	50
Voicemail	277

ADRC Noted Caller Priority Needs:

- Medicaid Unwinding—there continues to be an ongoing surge of calls made to the ADRC. As individuals continue to be impacted by the unwinding and loss of Medicaid coverage, calls are being misdirected to the ADRC for assistance for application status updates, requests for in-home assessments, requests for expedited assistance for reinstatement of services- the ADRC cannot assist with these calls and have to redirect back to 211 (HHSC), the Ombudsman (HHSC), and/or the Program Support Unit (HHSC).

Respectfully submitted,

Carolina Lasso

[carolina.lasso@metrocareservices.org](mailto:carolina.lasso@metrocareservices.org)

**KPI 4: To ensure timely access to clinically indicated services, Metrocare will complete 40 DID (Determination of Intellectual Disability) evaluations per month.**

Monthly Performance: 41

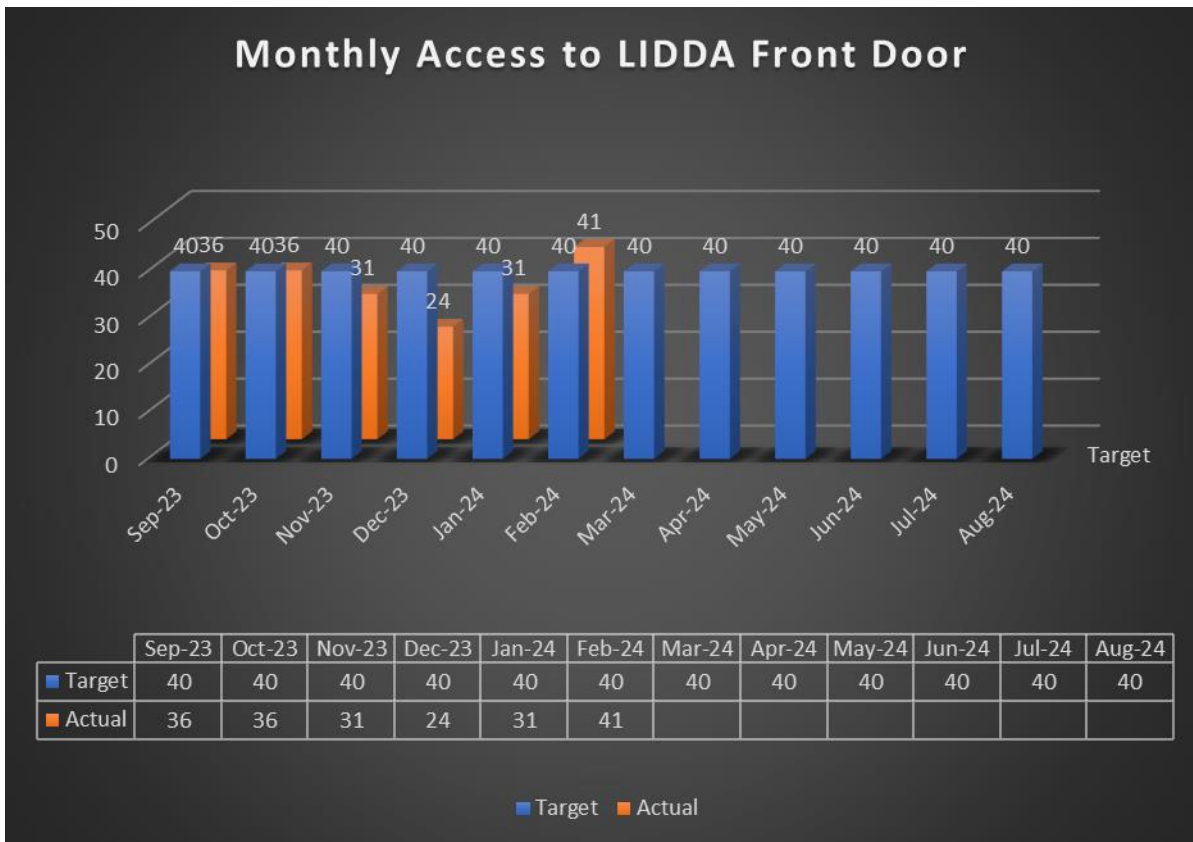
Goal: 40

Baseline: 31.75

Measurement Tool: EDU Report

Pillar: Quality Care

Aligned Objective: Access to Services



Total number of evaluations **scheduled** between 2/01/24 and 2/29/2024: **64**

- Includes cancellations, no shows, reschedules, and completed appointments

**KPI 5: To advance the Center’s commitment to providing a robust service delivery model, Metrocare will complete 36,000 type A (face to face) Encounters per fiscal year for individuals served by the Local Intellectual and Developmental Disability Authority.**

Monthly Performance: 2,753A

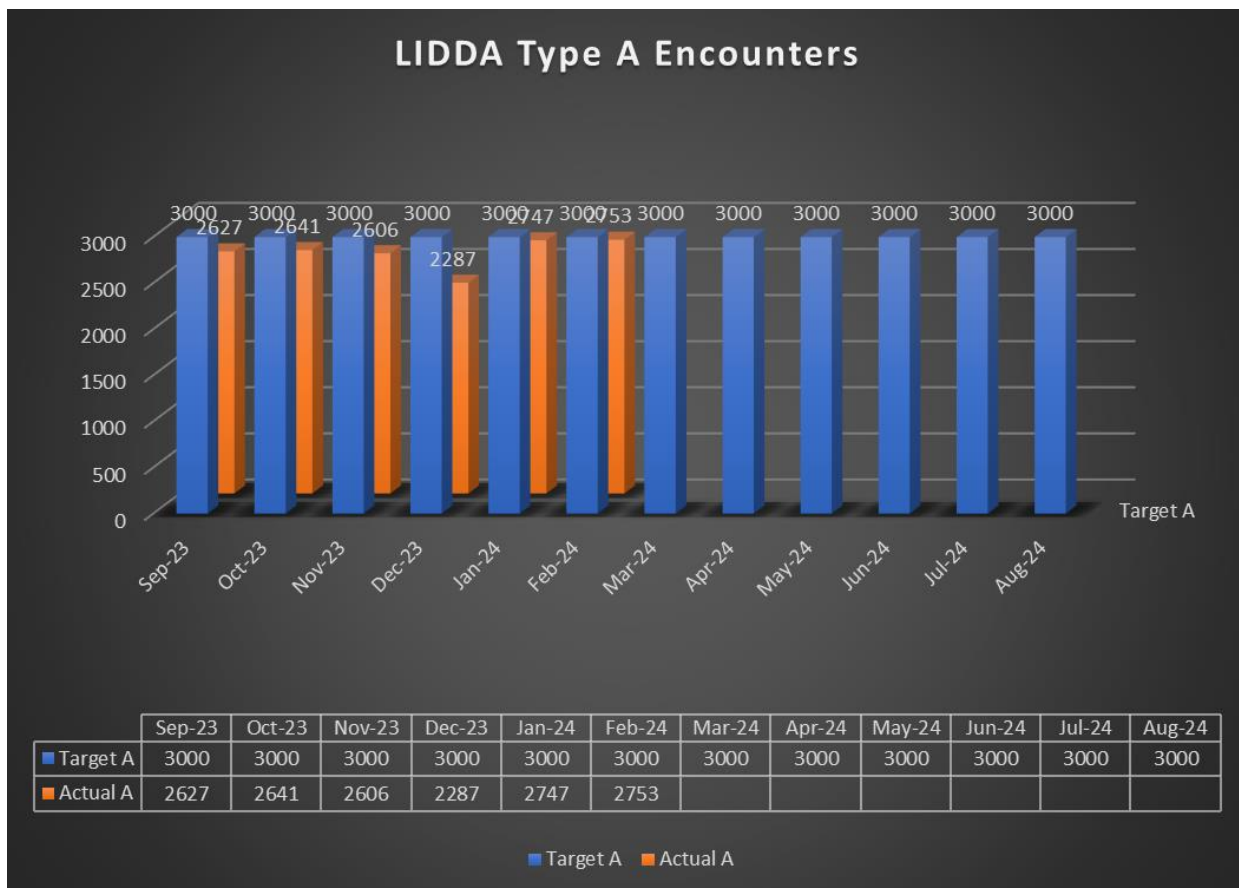
Goal: 36,000 A

Baseline: 29,519 A

Measurement Tool: Encounter Tool

Pillar: Quality Care

Aligned Objective: Client Improvement





## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Strategic Initiatives Report	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> Tate Ringer, Chief Strategy Officer	<b>DATE PREPARED</b> March 20, 2024

***Strategic Initiatives' vision is to create a grounded and thriving organization; to drive effective organizational strategy; to generate sustainable revenue; to support a culture of caring, responsive employees through clear, consistent communication; and ultimately, to build Metrocare as a community change maker.***

**KPIs: Innovative Collaborator:** To ensure best in class facilities while sustaining the Center's strong financial position, Metrocare will receive \$5M commitment for the Hillside Capital Campaign in FY24.  
**Status: \$1,028,585.57 (unchanged)**

### **FY24 Benchmarks**

- Increase donations by 20% (\$285,484) Year-to-Year. Baseline: \$215,404. **Status: \$62,554**
- Educate and drive awareness of Metrocare throughout the community at 175 events reaching 10,000 people. **Status: 91 Events reaching 5104 people (+34 events from this time last year)**

### **Strategic Initiatives Departmental Activities for the month of February**

**CULTURE CHAMPIONS:** February was Black History Month

- Metrocare co-sponsored "Social Inequities and Mental Wellbeing in the Black Community" with City of Dallas' Office of Equity & Inclusion and Dallas County's Racial Equity Task Force. Tameka Cass served on the expert panel.
- Culture Champions and Marketing/Communications created extensive, month-long campaign: "How We Celebrate Black History at Metrocare." Activities included:
  - Video and content series featuring inspiring messages from some of our dynamic Metrocare staff.
  - Acknowledgements about and by Blacks who have contributed to the profession.
  - Food distribution at Metrocare's Lancaster/Kiest Mental Health Center, in partnership with Empowering the Masses – a nonprofit focused on food insecurity in marginalized communities.

**PHILANTHROPY:**

- Met with Lindsay Billingsley, a member of the newly formed Hillside Campaign Cabinet to discuss a campaign donor engagement event scheduled for April 16<sup>th</sup> at her home.
- **Awarded**
  - **\$320,109 from Housing Forward** to expand Coordinated Outreach for Homeless Services.
  - **\$20,000 from Pathward** to support financial inclusion for veteran's served at the Cohen Military Family Clinic.
- **Submitted**
  - **\$2,292,380 to Health & Human Services Commission's (HHSC) Community Mental Health Grant Program. If awarded, funds will be used to implement Metrocare's** North Texas

Community Colocation Partnership (NTCCP) to facilitate collaborative mental health care delivery by co-locating services from various community organizations, including Metrocare.

- **\$1,874,999 to Substance Abuse Mental Health Administration's (SAMHSA) Strategic Prevention Framework-Partnerships for Success for Communities.** If awarded, Metrocare's Community Prevention Program will spearhead collaborative efforts within Dallas County to prevent and reduce the prevalence of substance misuse and mental illness among youth ages 12-17, parents of these youth, and young adults ages 18-24.
- **\$40,000 to Texas Women's Foundation** to support Flourishing Families Program.
- **\$100,000 to Esping Family Foundation** to support the EMPOWER Program.

#### Hillside

- **Submitted \$5 million proposal** to Communities Foundation of Texas.
- **Crystal Charity Ball pledge** to support the Hillside Project:  
**Awarded** the following: \$25,000 from Hattie Mae Lesley Foundation (at Bank of America)

#### COMMUNITY AND PARTNERSHIP MEETINGS

##### Posted position for Dallas Heals Bi-lingual Outreach and Advocacy position

##### February: 7 Events reaching 476 people, including but not limited to:

- Antioch Christian Church
- Dallas West Church of Christ
- College Park Baptist Church
- State of The Black Man Event @ Franklin D. Roosevelt High
- Mackey Elementary School Black History Month Celebration

#### LEGISLATION, MARKETING and COMMUNICATIONS

- Co-produced five-part video series on Cultural Humility for IDiversity funded by Texas Council on Developmental Disabilities
- Published request for bids for and selected Annual Report designer. Planned and implemented production timeline to ensure delivery for Capital Campaign Donor Event.
- Continued specialized marketing production for mental health satellite clinics and Flourishing Family.
- Produced 36 pieces of collateral in January & February.



#### Upcoming Icon Days – April

National Autism Awareness Month  
National Counseling Awareness Month  
National Minority Health Month  
World Autism Day – April 2  
World Health Day – April 7

Respectfully submitted,

Tate Ringer

[Tate.ringer@metrocareservices.org](mailto:Tate.ringer@metrocareservices.org)

## Mental Health First Aid Training

A Free, Cohen Clinic Workshop

### Blended Workshops in 2024

April 18th  
June 25th

August 29th  
November 7th



The Steven A. Cohen  
Military Family Clinic  
at Metrocare

Email to Register: [Tanya.Mac@Metrocareservices.org](mailto:Tanya.Mac@Metrocareservices.org)

**149176**

Philanthropy Grant Report as of February 29, 2024



metrocare.							
FY24 Award Total			\$ 16,543,008.20				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
1	HHSC - ACER PRSP (Psychiatric Residents Stipend Program) - RU 500	Program Support: <b>ACER</b>	\$ 300,000	Year 1 of 1	Jamaica Chapple	79%	
Summary of Grant			Notations - Changes Since Last Report				
<p>The educational purpose of this program is to provide psychiatric residents with the instruction and experience necessary to acquire skills and proficiency in the evaluation and care of patients with chronic and persistent mental illness who are receiving services in a community mental health setting. Resident skill development encompasses learned methods in assessment, diagnostic evaluation, treatment planning, and quality psychiatric care. This is a one-year reimbursement grant totaling \$300,000. <b>Grant term: 9/1/2023 – 8/31/2024</b></p>			<p>As of February 29, 2024, the grant program has supported 27 psychiatric residents. Grant activities for the month of February included:</p> <ol style="list-style-type: none"> <li>1) assessing patients for possible admission to the state hospitals;</li> <li>2) performing psychiatric interviews and diagnostic evaluation;</li> <li>3) collaborating with other mental health professionals in a multidisciplinary setting;</li> <li>4) developing appropriate treatment plans in conjunction with the clinical team;</li> <li>5) providing psychiatric care to patients;</li> <li>6) and treating serious co-morbid medical conditions in patients in the community mental health setting.</li> </ol>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
2	UnitedHealthcare - RU 676	Program Support: <b>C&amp;A</b>	\$ 65,000	Year 2 of 2	Regina Walker	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>This grant supports one full-time Clinical Case Manager to implement its EMPOWER (Educating Minds to Promote Ownership and Wellness in Everyday Routines) program at Nova Academy. The EMPOWER program at Metrocare aims to educate youth and teachers at Nova Academy to gain ownership in mental health wellness with access to school-based intervention and resources. This is a two-year award totaling \$129,045. <b>Grant term: 1/1/2023 - 12/31/2024</b></p>			<p>As of February 29th, 50 students are enrolled and/or in the assessment phase of the EMPOWER program using a three-tiered approach of risk behaviors and needs for mental health services. The EMPOWER program launched on January 17, 2024, at two elementary school campuses (Hastings Elementary/Merrifield Elementary) and the alternative school campus (Summit Education Center) with Duncanville ISD. EMPOWER launched on January 8, 2024, at one elementary school campus (Audelia Creek) and one middle school campus (Liberty) with Ricardson ISD. EMPOWER program anticipates launching at Lancaster ISD on March 18, 2024.</p>				

Philanthropy Grant Report as of February 29, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
3	SAMHSA - Children's Mental Health Initiative - RU 422	Program Support: <b>C&amp;A</b>	\$ 999,324	Year 1 of 4	Justin Bayles	12%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Healthy Transitions Program is a System of Care that focuses on preparing Dallas County transitional age youth (ages 15-21) with or at risk of Serious Emotional Disturbances (SED) and/or Serious Mental Illness (SMI) for a healthy transition to adulthood. This is a four-year award totaling \$3,374,569. <b>Grant term: 9/30/2023 - 9/29/2027</b></p>			<p><b>Grant Management:</b> We reviewed staffing progress and discussed preparation for onset of services with Grant Program Officer. They confirmed that the program was on track and that nothing further was needed at this point. The continuation application is pending approval.  <b>Reporting:</b> There is currently no data to report on as no services were provided in February. The Project Director and Clinical Manager finalized desk procedures for client-facing personnel, including procedures for tracking goals and updates needed to report on.  <b>Personnel:</b> In February, three dual clinical case managers and an employment/education specialist were hired. An internal candidate for project evaluator has been selected, and HR is facilitating the transition to their new role. We met with two psychiatrists interested in joining the program upon completion of their fellowship. Two positions are vacant and interviewing (psychiatrist and LPHA), and two dual clinical case manager roles are vacant and being held until the program begins gaining clientele.  <b>Budget Utilization:</b> The program is 33% through the year and has unobligated 30% funds due to position vacancies. If funds continue to be unobligated, the program will request carryover into year 2.  <b>Services:</b> We are on track to provide our first service no later than March 1, 2024.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
4	Metro Dallas Homeless Alliance, Dallas' R.E.A.L Time Rapid Rehousing Initiative - RU 343	Program Support: <b>Care Coordination</b>	\$ 500,000	Year 2 of 2	Elda Hudson	95%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding supports the development of a Community Integration Pilot in conjunction with Housing Forward. This two-year award totals \$1,000,000. <b>Grant term: 7/15/2022 - 9/30/2024</b></p>			<p>For month of February, 27 new clients were served bringing total census to 456. Grant remains fully staffed. The primary care measure has decreased due to clients being due for 1 year follow-up with their primary care doctors. Staff are currently focused in getting clients scheduled and seen by primary care physicians.</p>				

Philanthropy Grant Report as of February 29, 2024



metrocare.							
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
5	United Way of Metro Dallas - Care Coordination - RU 353	Program Support: <b>Care Coordination</b>	\$ 185,000	Year 2 of 3	Elda Hudson	105%	
Summary of Grant			Notations - Changes Since Last Report				
Three-year award totaling \$550,000 (\$185,000 annually) to support care coordination. <b>Grant term: 7/1/2022 - 6/30/2025</b>			In the month of February, the program received three new referrals from Housing Forward bringing total census to 88. The program manager performed outreach to educate partners on this program to increase referrals. Outreach was completed to CitySquare, Catholic Charities and Under1roof. All positions are filled. Increasing referrals for clients willing to engage will allow for staff to perform services in the community which in turn will increase mileage reimbursement increasing utilization of funds.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
6	Cohen Veterans Network - RU 590	Operational Support: <b>Cohen Clinic</b>	\$ 2,816,812	Year 8 of 9	Chelsea Fiduccia	93%	
Summary of Grant			Notations - Changes Since Last Report				
For the Steven A. Cohen Military Family Clinic at Metrocare to provide mental health services to post-9/11 veterans, active-duty service members, and their family members. This is a \$12.4 million commitment. <b>Grant term: 5/1/2016 - 4/30/2025</b>			In February, the clinic served 262 unique individuals. Through February (month 10), the clinic initiated 588 episodes of care (88% on pace toward goal of 800) and 5,304 clinical hours (80% on pace toward goal of 8,000). We will fill our last clinical vacancy in mid-March, and we anticipate a fulltime unlicensed clinician starting in mid-April. We have already seen access gains and expect these to continue with these upcoming additions. In-person clinical services comprised 17% of total services.				



Philanthropy Grant Report as of February 29, 2024



metrocare.							
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
7	HHSC TV+FA North Texas Collaborative - RU 597	Operational Support: <b>Cohen Clinic</b>	\$ 1,190,881	Year 1 of 2	John Montoya	74%	
Summary of Grant			Notations - Changes Since Last Report				
Supports the Phase VI of the North Texas Veterans & Families Collaborative program. This is a collaborative effort comprised of the Cohen Clinic, Equest, The Headstrong Project, The Brave Fight, and Meadows Mental Health Policy Institute. This is a two-year reimbursement award totaling \$4,763,524 (state award and match). <b>Grant term: 9/1/2023 - 8/31/2025</b>			For the first quarter of grant fiscal year 2024 (Sept 2023 to Nov 2023), the collaborative served 506 unduplicated participants (230% of the quarterly goal of 220). Of those who completed treatment, 58% experienced improvement in depression symptoms, 17% experienced improvement in Post-traumatic Stress Disorder (PTSD) symptoms, and 64% experienced improvement in anxiety symptoms. Expenditures are tracking well for all external partners. The Cohen Clinic has experienced vacancies which have led to under expending grant funds. A plan is in place to fill vacancies and increase expenditures.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
8	Town of Addison - RU 590	Program Support: <b>Cohen Clinic</b>	\$ 2,500	Year 1 of 1	Chelsea Fiduccia	100%	
Summary of Grant			Notations - Changes Since Last Report				
The Cohen Clinic was granted our fourth award from the Town of Addison to expand Mental Health First Aid (MHFA) training. The total award amount is \$2,500 over a 1-year term and is paid in semiannual installments. <b>Grant term: 10/2022 - 9/2023</b>			Through February (month 5), we have trained 24 people in Mental Health First Aid (MHFA) and finalized details for our second annual Children's Gala. The Gala will be held at 1345 River Bend on April 27th, open to all community members. We have begun seeking sponsorships and have developed a marketing strategy. Additionally, we have several additional MHFA and Applied Suicide Intervention Skills Training (ASIST) offerings within the grant period. Our February ASIST class was rescheduled to March due to low enrollment, and we have increased marketing efforts.				

Philanthropy Grant Report as of February 29, 2024



metrocare.							
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
9	United Way of Tarrant County - Mission United - RU 598	Program Support: <b>Cohen Clinic</b>	\$ 88,000	Year 1 of 1	Chelsea Fiduccia	100%	
Summary of Grant			Notations - Changes Since Last Report				
The Cohen Clinic was awarded \$88,000 from United Way of Tarrant County's Mission United Fund to serve 90 veterans and their families who reside in Tarrant County, with matching funds provided by CVN. <b>Grant term: 7/2023-6/2024</b>			In February, 21 individuals were served. Through February (month 8), the clinic initiated 95 episodes of care (158% on pace toward goal of 90). Including individuals who initiated care in the prior grant period, 90 individuals completed their episode of care (150% on pace toward goal of 90).				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
10	UT-Dallas (Dept of Defense) - RU 593	Program Support: <b>Cohen Clinic</b>	\$ 116,436	Year 5 of 5	Chelsea Fiduccia	46%	
Summary of Grant			Notations - Changes Since Last Report				
Supports the study of CPT-rTMS for PTSD investigating the treatment effects of Cognitive Processing Therapy (CPT) and Repetitive Transcranial Magnetic Stimulation (rTMS) on PTSD. Goal: to successfully recruit 105 post 9/11 combat veterans for enrollment. UT-Dallas CPT-rTMS for PTSD Study resumed in September 2020 after a pause during the pandemic. <b>Grant runs 10/2020 to 7/2024 (Dates are estimates)</b>			Out of 40 people recruited and referred to UTD for assessment, 21 were denied/withdrawn before enrolling, 0 are doing initial assessments to determine eligibility for enrolling, 3 are mid-treatment, 3 dropped out mid-treatment, and 13 have finished treatment.				

Philanthropy Grant Report as of February 29, 2024



metrocare.							
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
11	DSHS (Department of State Health Services) - CSC (Coordinated Specialty Care) - RU 502 & 503	Program Support: ePep	\$ 2,040,000	Year 5 of 5	Jasmine Brown	100%	
Summary of Grant			Notations - Changes Since Last Report				
For our Enhanced Program for Early Psychosis provides holistic Coordinated Specialty Care for First Episode Psychosis through a multidisciplinary team that includes a psychiatrist, licensed therapist, certified family partner, certified peer support specialist, and supportive employment and education specialists. This is a one-year award totaling \$2,040,000. <b>Grant term: 09/1/2023 – 8/31/2024</b>			In February, 78 individuals were served. We have successfully hired a new Clinical manager that will be starting new employee orientation in March. The team leads have been fully trained and taking on cases for therapy and clinical oversight. We are in process of filling remaining vacancies due to recent resignations within the program.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
12	United Way - Dallas - HOPES - RU 779	Program Support: <b>Flourishing Family (IDD)</b>	\$ 175,855	Year 1 of 1	Selena Milles	63%	
Summary of Grant			Notations - Changes Since Last Report				
Funding to implement Flourishing Family, a home visitation program for new mothers and newborns including providing resources, abuse prevention, and assessing for medical needs. This is a one-year award totaling \$260,022. This is the second year we've received funding through the UW HOPES grant. <b>Grant term: 9/1/2023 – 8/31/2024</b>			In February, 4 families were served. The program is working with United Way of Metropolitan Dallas to send the Flourishing Family team to train-the-trainer certification courses for Parent Cafes. The Flourishing Family team will be the first provider certified in Dallas County. Once completed this will allow the Flourishing Family team to train other providers in the Parent Cafe model.				

Philanthropy Grant Report as of February 29, 2024



metrocare.							
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
13	United Way - Dallas: Texas Home Visiting Program - RU 779	Program Support: <b>Flourishing Family (IDD)</b>	\$ 183,271	Year 1 of 1	Selena Milles	63%	
Summary of Grant			Notations - Changes Since Last Report				
Funding from United Way of Metropolitan of Dallas from the Texas Home Visiting Program (THVP) to Flourishing Family supports home visits to new mothers and newborns including providing resources, abuse prevention and assessing for medical needs. This is a one-year award totaling \$150,089. <b>Grant term: 9/1/2023 – 8/31/2024</b>			In February, 3 families were served. The program was able to find a strong candidate for our Home Visitor vacancy and they begin training in March.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
14	HHSC PATH GRANT (Projects for Assistance in Transitioning from Homelessness) - RU 310	Program Support: <b>Housing</b>	\$ 475,176	Year 5 of 5	Hope Stedman	100%	
Summary of Grant			Notations - Changes Since Last Report				
Supports outreach and assistance for individuals transitioning from homelessness. This is a five-year award totaling. <b>Grant term: 9/1/2023 - 8/31/2024</b>			The PATH team contacted 29 individuals during the month of February. Of those 29 individuals, 5 were new and became enrolled in the program. Since September 1, 2023, there have been a total of 141 individuals contacted by the program, either at a shelter/day services center or on the streets, with 71 of those enrolling in the program. We are on track to spend all funds this fiscal year. We have 1 vacancy in street outreach and will have a new employee starting new employee orientation in March on the clinic team.				

Philanthropy Grant Report as of February 29, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
15	Charles Schwab Bank - RU 314	Program Support: <b>Housing</b>	\$ 20,000	Year 1 of 1	Ikenna Mogbo	100%	NEW
Summary of Grant			Notations - Changes Since Last Report				
Provides assistance with cost of living increases and basic necessities for individuals in housing programs with severe and persistent mental illness. This is a one-year award totaling \$20,000. <b>Grant term: 1/1/2024 – 12/31/2024</b>			This is a recent award. Expenditures will commence soon. No updates have been provided for February by the grant manager.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
16	HUD - Safe Haven - RU 314	Program Support: <b>Housing</b>	\$ 404,065	Year 1 of 1	Ikenna Mogbo	100%	
Summary of Grant			Notations - Changes Since Last Report				
Provides intensive homeless services for individuals with severe and persistent mental illness. This is a one-year award totaling \$404,065. <b>Grant term: 6/28/2023 – 6/27/2024</b>			No updates have been provided for February by the grant manager.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
17	HUD Leasing - RU 554	Program Support: <b>Housing</b>	\$ 4,113,870	Year 1 of 1	Ikenna Mogbo	100%	
Summary of Grant			Notations - Changes Since Last Report				
Funding to provide permanent supportive housing for individuals who are chronically homeless. This is a one-year award totaling \$4,113,870. <b>Grant term: 11/27/2022 – 11/26/2023</b>			No updates have been provided for February by the grant manager.				

Philanthropy Grant Report as of February 29, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
18	Texas Council for Developmental Disabilities - 843	Program Support: <b>IDD</b>	\$ 120,314	Year 1 of 5	Carrie Parks	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding to provide Metrocare's Disability Cultural Humility Training for Elected Officials. The project is designed to review current gaps in the training available to elected officials through literature reviews and focus meetings with advisory groups and to fill those gaps through the creation of more robust training. This is a five-year award totaling \$720,314.  <b>Grant term: 3/1/2023 – 2/29/2028</b></p>			<p>All videos are complete and are now available on YouTube for viewing. The Strategic Initiatives team is branding all of the handouts for the training into one package so that the project team may begin training officials and others this month.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
19	City of Dallas - UpSkilling Dallas - RU 760	Program Support: <b>IDD</b>	\$ 125,000	Year 1 of 2	Carrie Parks	75%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding has been provided by the City of Dallas' Small Business Center to develop a workforce development campaign for low-and-moderate income Dallas residents. Metrocare's Center for Children with Autism and Altshuler Center for Education and Research have developed a six-week Registered Behavioral Technician training program and will be training 54 qualifying Dallas residents over two years; the goal is to empower participants to earn a living wage by obtaining a certification in a high-demand field. This is a two-year award totaling \$250,000. <b>Grant term: 5/18/2023 – 5/17/2025</b></p>			<p>The project started another cohort of 4 interns in February and one intern from the last cohort passed the Registered Behavior Technician exam. She will be seeking employment this summer once her contract as a teacher's aide expires.</p>				

Philanthropy Grant Report as of February 29, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
20	SAMHSA - Integrative Treatment of Complex Trauma Program - RU 351	Operational Support: <b>Mental Health</b>	\$ 351,869	Year 3 of 5	Justin Bayles	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding from the Substance Abuse and Mental Health Services Administration supports the implementation of evidence-based treatment for complex trauma in children and adolescents. The total award amount is \$1,777,050 over a 5-year term. <b>Grant term: 9/30/2020 – 9/29/2025</b></p>			<p><b>Grant Management:</b> The Project Director and the SAMHSA Grant Director meet weekly to review progress with goals, objectives and tracking metrics. The Project Director and SAMHSA Grant Director will meet the SAMHSA Grant Program Officer on March 21, 2024, for a quarterly meeting.</p> <p><b>Reporting:</b> The Director of SAMHSA Grants and Project Director uploaded Continuation Application and Budget Narrative for Year 2024 to eRCommons Federal Grant Reporting System in January and in February are awaiting the final approval of the continuation application and budget narrative from SAMHSA.</p> <p><b>Personnel:</b> All allocated positions are filled.</p> <p><b>Budget Utilization:</b> The program is 33% through the year and has utilized 37% of the budget. The program is on track to utilize the budget at 100%.</p> <p><b>Services:</b> 55 clients are currently enrolled in Integrated Treatment for Complex Trauma (ITCT) and were served during the month February 2024.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
21	SAMHSA - Metrocare's Medication-Assisted Treatment Program - RU 352	Operational Support: <b>Mental Health</b>	\$ 524,084	Year 3 of 5	Justin Bayles	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>For expanding substance use disorder services for Opioid Use Disorder (OUD) to allow Dallas County residents to receive medication-assisted treatment outside of ambulatory detox for a longer-term basis. The total award amount is \$2,620,420 over a 5-year term. <b>Grant term: 9/30/2021 – 9/29/2026</b></p>			<p><b>Grant Management:</b> No update has been received on the Continuation application.</p> <p><b>Reporting:</b> No report is due currently. Next report is due 12/28/2024.</p> <p><b>Personnel:</b> There is one vacancy for LCDC. The position is scheduled to be filled on 3/18/2024.</p> <p><b>Budget Utilization:</b> The program is 33% through the year and has utilized 29% of the budget. The program is on track to utilize the budget at 100%.</p> <p><b>Services:</b> The MAT program has reached a coverage rate of 109% with an overall census of 106 unique individuals (31 individuals enrolled in Year 3)</p> <p><b>Success Stories:</b> Individual has been in the program since last January. He has had some relapses but has been able to pull himself together and maintain sobriety for the last three months. He is still waiting on his disability to be approved, but he is taking care of his grandmother and has improved his family connections tremendously.</p>				

Philanthropy Grant Report as of February 29, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
22	SAMHSA - Certified Community Behavioral Health Clinic - Improvement and Advancement - RU 354	Operational Support: <b>Mental Health</b>	\$ 1,345,745	Year 2 of 4	Justin Bayles	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Supports the creation of an After-Hours Clinic. Total funding will be \$3,984,485 over 4 years. The After-Hours Clinic will operate Monday through Friday from 5:00 p.m. to 10:00 p.m., as well as offer services on Saturday and Sunday. The flexible service hours will expand access to individuals, families, and the community. <b>Grant term: 9/30/2022 – 9/29/2026</b></p>			<p><b>Grant Management:</b> In February, the Project Director met with the Grant Program Officer for status update on the grant programmatic narrative revisions.</p> <p><b>Reporting:</b> The Project Director submitted the revised programmatic narrative on 02/27/24, via eRA Commons. The status is pending. The quarterly Infrastructure Development, Prevention, and Mental Health Promotion (IPP) reporting is due on 03/26/2024.</p> <p><b>Personnel:</b> The program is 89% staffed and has 2 vacancies (one Peer Support Specialist and one Licensed Professional of the Healing Arts). The After-Hours Clinic is expanding to include additional Qualified Mental Health Professionals.</p> <p><b>Budget Utilization:</b> The program is 33% through the year and has utilized 31% of the budget. The program is on track to utilize the budget at 100%.</p> <p><b>Services:</b> In February, the program served 346 unique individuals.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
23	McKesson Foundation - RU 451	Community Engagement: <b>Pharmacy Services</b>	\$ 199,806	Year 1 of 2	Min Seo Cheon Kim	30%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Metrocare's Pharmacy Community Engagement Program (MPCEP) will provide outreach, information, education, and referral opportunities to the community based on the four foundational principles: 1) Improve access to care by conducting free health screenings at locations throughout the community; 2) Foster community partnerships with organizations &amp; institutions; 3) Respond to both patient and community needs; 4) Promote patient-centered, trauma-informed, culturally and linguistically appropriate care and population health. Total funding is \$399,612 over 2 years. <b>Grant term: 09/1/2023-08/31/2025</b></p>			<p>In February 2024, our Community Outreach Pharmacy Program excelled in engaging 1,164 individuals, embodying our commitment to four foundational principles that actively address healthcare disparities: conducting free health screenings, fostering key community partnerships, responding to patient and community needs, and promoting patient-centered, trauma-informed care. Our responsive approach, both to individual patient concerns and broader community needs, contributed to a more patient-centric and inclusive healthcare experience.</p>				



Philanthropy Grant Report as of February 29, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
24	City of Dallas - DALLAS HEALS - RU 107	Education and Outreach: <b>Strategic Initiatives</b>	\$ 200,000	Year 1 of 2	Tate Ringer	0%	
	Summary of Grant		Notations - Changes Since Last Report				
	City of Dallas, Office of Community Care awarded \$400,000 over two years for the DALLAS HEALS campaign. Metrocare's Strategic Initiatives developed the DALLAS HEALS campaign—a mental health education and outreach campaign designed to serve the most stressed and most vulnerable populations in Dallas: low-income communities, historically underserved communities, Qualified Census Tracts, and communities of color. <b>Grant term: 11/3/2023-5/9/2025</b>		The primary position funded by this grant has been posted. We have screened 12 applicants. We have highlighted the position on the job boards and shared widely on social media to increase the candidate pool. Our outreach coordinator will be taking Mental Health First Aid (MHFA) training in March to be a certified trainer and expand our training of the public in MHFA as per grant application. The City understands we are behind in drawing the funds because of their delay in contracting. They are expecting us to submit a budget revision in May.				

<u>UTILIZATION KEY</u>	
OPERATING AHEAD OF SCHEDULE	
ON TRACK or NEW PHILANTHROPIC GRANT	
TRACKING BEHIND BUDGET BEING MONITORED CLOSELY	
POTENTIAL CONCERN	

Funder		Award Amount	Pledge/Fully Funded/Partially Funded	Grant Term	Funding Notes
Hillside Capital Campaign Funding - pledges and gifts received as of February 29, 2024					
1	Bette Rathjen for Emotional Well-Being Foundation	\$3,000,000.00	Fully Funded	Year 1 of 1	
2	McDermott Foundation	\$1,500,000.00	Fully Funded	Year 2 of 2	Original \$1M gift dated received on 8/30/21; addtl gift of \$500,000 received 8/22/23.
3	Lyda Hill Philanthropies	\$1,000,000.00	Fully funded	Year 1 of 1	
4	Simmons Sisters Fund	\$1,000,000.00	Fully Funded	Year 3 of 3	
5	Hillcrest Foundation	\$1,000,000.00	Fully Funded	Year 2 of 2	
6	Rees-Jones Foundation	\$1,000,000.00	Fully Funded	Year 1 of 1	Paid in full
7	Deedie Rose	\$1,000,000.00	Pledged	Year 1 of 3	\$400K received to date. (\$200k 10/2022; \$100k 7/2023; \$100k 10/2023)
8	Crystal Charity Ball	\$ 912,881.00	Fully Funded	Year 1 of 1	Pledged; 2023 Beneficiary for Child & Adolescent Mental Health Clinic. Full funding to be rec'd by March 2024. Payments towards pledge include: (Crowley-Carter Foundation - \$25k; Bank of America Fdn - \$25k; Roy & Gene Sturgis Fdn - \$25k; Kennington Family Fdn - \$12.5k; Aileen & Jack Pratt Fdn - \$3,571; Vizient - \$15k; Texas Bar Fdn - \$10k; Katherine C. Carmody Charitable Trust - \$25k; The Mark Fdn - \$20k; Moody - \$350k; Hattie Mae Lesley - \$25k; Crystal Charity Ball - \$376,810
9	Addy Foundation	\$ 500,000.00	Fully Funded	Year 2 of 2	
10	Meadows Foundation	\$ 500,000.00	Fully Funded	Year 1 of 1	Full amount considered grant.
11	Hoblitzelle Foundation	\$ 500,000.00	Fully Funded	Complete	
12	PKW Fund at The Dallas Foundation	\$ 400,000.00	Partially funded	Year 1 of 3	Second installment of \$100K received - \$200,000 rec'd to date; \$200K outstanding)
13	Dr. Bob & Jean Smith Foundation	\$ 350,000.00	Fully Funded	Year 1 of 3	
14	The Constantin Foundation	\$ 300,000.00	Fully Funded	Year 1 of 1	
15	Beasley Foundation	\$ 250,000.00	Fully Funded	Year 1 of 3	Final Installment \$100,000 received December '23
16	Hamon Family Foundation	\$ 200,000.00	Fully Funded	Year 1 of 2	
17	UMB Bank	\$ 200,000.00	Fully Funded	Year 1 of 1	Paid in full
18	Mike & Mary Terry Foundation	\$ 150,000.00	Fully funded	Year 3 of 3	Final installment of \$50,000 received.
19	Clara Miller Estate	\$ 108,828.02	Ongoing		Royalties from bequest
20	Amplify Energy, LLC	\$ 69,869.89	Ongoing		Royalties from bequest
21	The Dallas Foundation's Women In Philanthropy Institute	\$ 40,000.00	Fully Funded	Year 1 of 1	
22	Board Commitments	\$ 44,300.00	Partially Funded	Year 1 of 1	Remaining Installments - \$1,400
23	William T. & Gay F. Solomon Advised Fund at The Dallas Foundation	\$ 25,000.00	Fully Funded	Year 1 of 1	
24	Anonymous Donor	\$ 25,000.00	Fully Funded	Year 1 of 1	
25	UMB Charitable Foundation	\$ 25,000.00	Fully Funded	Year 1 of 1	
26	Sheppard/Mullin	\$ 15,000.00	Pledged	TBD	
27	Anonymous Donor	\$ 10,500.00	Fully Funded	Year 1 of 1	
28	Solender/Hall	\$ 35,000.00	Fully Funded		
29	McDonnough Family Fund	\$ 7,500.00	Fully Funded	Year 1 of 1	Received additional \$5,000 December '23
30	Individual Donors	\$ 4,100.00	Partially Funded	Year 1 of 5	
31	Karen Coder	\$ 2,500.00	Fully Funded	Year 1 of 1	
32	Energy Royalties	\$ 687.43	Ongoing		
<b>Total Request Awarded</b>		<b>\$ 14,176,166</b>			
<b>Pending Hillside Capital Campaign Requests</b>		<b>\$ 5,600,000.00</b>			Pending requests to support the Hillside Capital Campaign. (CFT - \$5M; Thomas E Bentley - \$50k; John R McCune Charitable Trust - \$50k; Meadows Fdn - \$500k)

# CONSENT AGENDA

## March 2024 Reports

1. Acceptance of the February 22, 2024, Regular Board Meeting Minutes
2. Proposed Revision and Approval of Board Policies:
  - 1.03 Policy on Board of Trustees Training
  - 1.13 Policy on Board Meeting Minutes and Protocol
  - 1.14 Policy on Administration and General Management of the Center
  - 2.01 Policy on Client Services Delivery
  - 2.06 Policy on Medical – Psychiatric Services
  - 8.04 Policy on Contingency Plan
3. Acceptance of the Human Resources Report
4. Acceptance of the Information Technology Report
5. Acceptance of the Clinical Services Division Report
6. Acceptance of the Mental Health Division Report
7. Acceptance of the Quality Management and Compliance Services Report
8. Acceptance of the Local Intellectual and Developmental Disability Report



## **REGULAR BOARD MINUTES**

February 22, 2024

**METROCARE**  
**Board Meeting Minutes**  
**February 22, 2024**

A Regular Meeting of the Board of Trustees of Metrocare convened on Thursday, February 22, 2024. The meeting was held at 1345 River Bend Drive, Dallas, TX 75247 (Mustangs Conference Rm.)

**CALL TO ORDER:**

Mr. Bernstein, Chair, called the meeting to order at 1:34 pm and confirmed the presence of a quorum.

**Trustees Present:**

Kenneth Bernstein, Anthony Farmer, Dave Hogan, Noel Santini, M.D., Stacy G. Cantu, Dr. Sam Yang and Sonnia R. Ortega.

**Virtual Meeting Participation:** Ms. Jaime Walkowiak and Ms. Vickie Rice participated via zoom.

**Public Comment:**

No public comment was received.

**Staff present:**

John W. Burruss, M.D., Kelli Laos, Lucas Wilson, Judith Hunter, M.D., Ikenna Mogbo, Jennifer Wadsworth, Carolina Lasso and Tate Ringer.

**Guest present:**

Gary Keep, LCBH Chairman, Joel Geary, Legal Counsel, Linda Secrest, Crystal Ball Special Representative and other Metrocare staff.

**CHAIRMAN UPDATES:**

**Lifenet Community Behavioral Health Check presentation:**

Dr. Burruss introduced Mr. Gary Keep, Board Chair for Lifenet Community Behavioral Health (LCBH) saying that they are a Complex Partnership in the Housing Realm called the CHDO or Community Housing Development Organization where Metrocare is a minority, but important partner. Every year Metrocare benefits from the results of this partnership with a financial commitment to support Metrocares' housing program.

Dr. Burruss thanked Mr. Keep for being here today and for his presentation of this year's commitment. Mr. Keep gave a brief history of how Lifenet and Metrocare became partners and presented Dr. Burruss with a check in the amount of \$230,000 thousand dollars to continue their support of our housing program. The board members joined Dr. Burruss in his acknowledgement and thanked Mr. Keep and LCBH for their continued support.

**Board Re-Appointments:** Mr. Bernstein referred to a Court Order re-appointing our four joint appointees to another term on our board: Mr. Farmer, Dr. Santini, Ms. Cantu and Ms. Ortega.

**Board Attendance, Committee Assignments and Election of Board Officers:**

Mr. Bernstein referred to the board attendance form and reminded everyone that we will not hold a board meeting during the month of March, but a combined March/April meeting will be held in April at which time they will do the committee assignments and the election of board officers.

**BOARD LIAISON REPORTS:**

**Ad hoc Committee to Review the Center’s Board Policies and Bylaws:**

Mr. Farmer referred to Ms. Cantu. Ms. Cantu said the Ad hoc committee has been addressing all the board policies since a couple of years back to ensure that all the policies are reviewed every three years. The committee will continue to visit the board policy list to address those policies that are coming up for review. The committee met on January 13<sup>th</sup> and reviewed the board policies that are under the Consent Agenda today for board discussion and approval. Mr. Bernstein said that this also helps us to stay compliant with new laws and regulations. Ms. Cantu thanked Ms. Rice for joining her and Mr. Farmer on this committee and bringing her knowledge and skills.

**CONSENT AGENDA ITEM(s): January 2024 Reports**

*All consent agenda items are considered to be routine by the Board and will be enacted with one motion. There will be no separate discussion of items unless a Board Member so requests, in which event, the item will be removed from consideration as an item of consent business and considered in its normal sequence with the other action items listed below in which case full discussion of the item may occur as necessary.*

1. Acceptance of the January 25, 2024, Regular Board Meeting Minutes
2. Proposed Revision and Approval of Board Policies:
  - 1.02 Policy on Establishment and Implementation of Board Policy
  - 1.11 Policy on Authority Functions
  - 1.12 Policy on Board Membership and Terms of Membership
  - 2.02 Policy on Consumer Privacy and PHI
  - 2.03 Policy on Abuse, Neglect, and Exploitation
3. Acceptance of the Human Resources Report
4. Acceptance of the Information Technology Report
5. Acceptance of the Clinical Services Division Report
6. Acceptance of the Mental Health Services Division Report
7. Acceptance of the Quality Management and Compliance Report

Dr. Santini posed a question for BP 1.11 on Authority Function as did Mr. Bernstein. Ms. Cantu provided information on the reason why the Ad hoc Committee opted to change the Planning and Network Advisory Committees Bylaws to Charter stating that a committee should really have a Charter and not Bylaws that could be misinterpreted with the Bylaws of the Center. Ms. Cantu fielded questions from Dr. Santini. This item was discussed and tabled pending additional information.

**Motion:** Dr. Santini moved to Accept the Consent agenda for January 2024 with the changes recommended and Mr. Hogan second. The motion carried unanimously.

### **Chief Executive Officer – Service Presentation:**

Videos and Training for Elected Officials: Carrie Parks, Director of Provider Services.

## **ACTION AGENDA**

### **CHIEF EXECUTIVE OFFICER REPORT:**

#### **Acceptance of the Chief Executive Officer Report for the FY24 Key Performance Indicator Progress through January 2024:**

Carrie Parks introduced a video describing the history and evolution of the State Supported Living Centers. Dr. Burruss then pointed out the opening of the extension site at the Dallas College Richland campus and expanded on the agency KPIs and progress to date.

**Motion:** Mr. Farmer moved Acceptance of the January 2024 Chief Executive Officer Report and Dr. Santini seconded. The motion carried unanimously.

## **FINANCE AND ADMINISTRATION REPORTS**

### **Acceptance of the Center's Financial Statements for January 2024 (unaudited):**

Mr. Wilson discussed the revenue & expense variances compared to budget for the month of January as well as year to date. He indicated that both Fee for Service & Directed Payment Program revenues are coming in higher than budget compared to Pharmacy revenues which are currently lower than budget. Salary expenses year to date are below budget while Benefits expenses are higher than budget primarily due to the claims run out from the end of calendar year 2023. Mr. Wilson indicated that based on the forecast for fiscal year 2024 is expected to be more favorable than budget due to increases in Fee For Service, Directed Payment Program & Charity Care Program revenues all performing better than budget.

**Motion:** Mr. Hogan moved Acceptance of the Financial Statements for January 2024 and Mr. Farmer seconded. The motion carried unanimously.

### **Acceptance of the Facilities Division Report for January 2024:**

Mr. Kevin Boyd, Chief Facilities Planning & Construction Officer provided the board with an update on the construction progress of the Hillside project. Once the update was concluded, Dr. Burruss commented that the scale of the project is hard to imagine until visiting the site in person and encouraged the board to stop by the project to see it for themselves. Dr. Burruss then asked Mr. Boyd for an update of the LK/SNOP redevelopment project. Mr. Boyd relayed that design work is progressing as planned and a general contractor for the project will be selected soon.

**Motion:** Dr. Santini moved Acceptance of the Facilities Division Report for January 2024 and Ms. Cantu seconded. The motion carried unanimously.

### **PROVIDER SERVICES REPORTS**

#### **Acceptance of the Housing Services Division Report for January 2024:**

Ikenna Mogbo, Chief Housing Officer, stated that we have applied for an expansion of our street outreach team through a Request for Proposal (RFP) from Housing Forward and expects to receive the results of this RFP by the 26<sup>th</sup> of this month. He went on to say that HUD has awarded \$500,000 plus to our large Leasing grant beginning in FY2025. Most of this new funding will address the increased cost of living in our community associated with rent. Charles Schwab has continued their support of our Safe Haven program with another unrestricted donation of \$20,000.

Mr. Mogbo spoke about the continued deficit in KPI 13. He explained that the slow ramp up of the Unsheltered HUD grant has affected our overall numbers. Due to the unanticipated challenges of a new, innovative program it has taken longer to work out the logistics of onboarding in partnership with Housing Forward and the local housing authorities. Mr. Mogbo said that he anticipates that by the end of Fiscal Year 2024 the numbers will be positive because most of those challenges will have been resolved.

**Motion:** Dr. Santini moved Acceptance of the Housing Services Division Report for January 2024 and Ms. Cantu seconded. The motion carried unanimously.

### **LOCAL INTELLECTUAL AND DEVELOPMENTAL DISABILITY REPORTS**

#### **Acceptance of the Local Intellectual and Development Disability Reports for January 2024:**

Carolina Lasso, Chief Authority Officer presented the LIDDA and Aging and Disability Resource Center (ADRC) Reports for the month of January 2024. Ms. Lasso provided highlights of the Medicaid Interest List Slots released by Health and Human Services (HHS). She also discussed the ADRC and outreach activities for the month of January, which included calls received for Dallas County members needing assistance with Medicaid benefits and other types of financial assistance.



Dr. Santini inquired about KPI 4 and the Eligibility Determination Unit (EDU) ability to meet the expected goal by the end of the fiscal year. Ms. Lasso said that while she anticipates improvements in the next few months, LIDDA will not be able to meet or exceed the KPI by year end, and discussed measures that are currently in place to try and increase the number of Determination of Intellectual Disability evaluations (DID) for the month, such as over booking and waitlist for cancellations.

**Motion:** Ms. Cantu moved Acceptance of the Quality Management and Compliance Services Division Reports for January 2024 and Ms. Walkowiak seconded. The motion carried unanimously.

### **STRATEGIC INITIATIVES REPORT:**

#### **Acceptance of the Strategic Initiative Report for January 2024:**

Ms. Ringer referenced her report in the board packet. Additionally, she updated the Board on a diversity panel that Ms. Tameka Cass will serve on Tuesday night, February 27 with co-sponsorship with the City of Dallas and Dallas County to be hosted at the African American Museum. She also updated the board on pending applications for funding for the hillside project. A hillside campaign cabinet is being formed by Dallas philanthropists to close out the campaign; an event announcing the cabinet and the campaign will be held at the home of Lindsey and George Billingsly one of the first two weeks in April.

**Meeting Adjournment:** There being no further business to come before the Board, Mr. Bernstein adjourned the meeting at 3:37 p.m.

Minutes approved by:

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Dave Hogan, Secretary

**METROCARE SERVICES  
POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Board Governance

**Subject:** Policy on Board of Trustees Training 1.03

**Effective Date:** 08/25/1981

**Amended:** ~~04/23/2020~~

**Deleted:** 04/23/2020

**Purpose:**

To implement the statutory requirements for initial and annual training, assessment of performance, effectiveness, and the establishment of an advisory committee to develop training guidelines for ~~Metrocare's Board of Trustees.~~

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Metrocare's Center's Board of Trustees. ¶

**Relationship to Mission/Goals/Values:**

The ongoing education of the Board of Trustees will enhance the quality of the Board's decisions, insights, and policy-making ability. ~~This will enable~~ the Board to provide the leadership necessary to achieve the mission, goals, vision and objectives of ~~Metrocare.~~

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**Statutory Reference:**

- Health and Safety Code – Section 534.006
- Government Code – Section 551.005
- ~~Government Code – Section 552.012~~

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**Commented [AF1]:** Discusses public information and open records training; also referenced in 534.006 along with sec. 551

**Policy:**

- I. Prior to assuming office, each member of the Board of Trustees shall attend a training session administered by the ~~Metrocare's~~ professional staff in order to receive information on:
  - A. the enabling legislation that created ~~Metrocare;~~
  - B. the programs operated by ~~Metrocare;~~
  - C. ~~Metrocare's~~ budget for that program year;
  - D. the results of the most recent audit for ~~Metrocare;~~
  - E. the requirements of the ~~law regarding~~ open meetings ~~and public information;~~
  - F. the requirements of the conflict of interest laws and other laws relating to public officials;
  - G. the ethics policies for Board members.
- II. The Board of Trustees shall provide an annual training program for all Board members, administered by the ~~Metrocare's~~ professional staff, including the ~~Metrocare's~~ legal counsel.
- III. The Board of Trustees shall use the IDD Network and Planning Advisory Committee and the Mental Health Advisory Committee to assist with developing guidelines for Board training.
- IV. The Board of Trustees shall complete training in ~~accordance with~~ Texas ~~law regarding~~ open ~~meetings and public information.~~ Certificates of course completion shall be maintained by ~~Metrocare,~~ and made available for public inspection.

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**Commented [AF2]:** Govt Code §552 discusses public information

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V. The Board of Trustees as a whole shall continuously assess its performance in an effort to determine its effectiveness in governing Metrocare.

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**Indicators of Quality:**¶  
Completion of new and annual Trustee training.¶  
Completion of Texas Open government training.¶  
Annual Board Assessment¶  
Annual Individual Self-Assessment of the Board¶  
¶  
¶

1.03

**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Board Governance

**Subject:** Policy on Board of Trustees Training 1.03

**Effective Date:** 08/25/1981

**Amended:** 04/25/2024

**Purpose:**

To implement the statutory requirements for initial and annual training, assessment of performance, effectiveness, and the establishment of an advisory committee to develop training guidelines for Metrocare's Board of Trustees.

**Relationship to Mission/Goals/Values:**

The ongoing education of the Board of Trustees will enhance the quality of the Board's decisions, insights, and policy-making ability. This will enable the Board to provide the leadership necessary to achieve the mission, goals, vision, and objectives of Metrocare.

**Statutory Reference:**

- Health and Safety Code – Section 534.006
- Government Code – Section 551.005
- Government Code – Section 552.012

**Policy:**

- I. Prior to assuming office, each member of the Board of Trustees shall attend a training session administered by the Metrocare's professional staff in order to receive information on:
  - A. the enabling legislation that created Metrocare;
  - B. the programs operated by Metrocare;
  - C. Metrocare's budget for that program year;
  - D. the results of the most recent audit for Metrocare;
  - E. the requirements of the law regarding open meetings and public information;
  - F. the requirements of the conflict of interest laws and other laws relating to public officials;
  - G. the ethics policies for Board members.
- II. The Board of Trustees shall provide an annual training program for all Board members, administered by the Metrocare's professional staff, including the Metrocare's legal counsel.
- III. The Board of Trustees shall use the IDD Network and Planning Advisory Committee and the Mental Health Advisory Committee to assist with developing guidelines for Board training.
- IV. The Board of Trustees shall complete training in accordance with Texas law regarding open meetings and public information. Certificates of course completion shall be maintained by Metrocare and made available for public inspection.

- V. The Board of Trustees as a whole shall continuously assess its performance in an effort to determine its effectiveness in governing Metrocare.

1.03

**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Board Governance  
**Subject:** Policy on Board Meetings, Minutes and Protocol 1.13  
**Effective Date:** 10/24/2002  
**Amended:** 04/25/2024

**Deleted:** 05/28/2020

**Purpose:**

To assure that all Metrocare Services Board of Trustees (“the Metrocare Board”) meetings and minutes comply with the Texas Open Meetings Act and the Texas Open Records Act, and to assure that all Metrocare Board meetings and documentation are handled in the most efficient manner possible.

**Relationship to Mission/ Goals/ Values:**

The Metrocare Board is committed to the principles of open government. In order to better serve and inform individuals living with the challenges of mental illness and intellectual and developmental disabilities, the Metrocare Board meetings and minutes will be open to the public to the extent required by and in accordance with the laws of Texas.

**References:**

- Texas Health and Safety Code, Chapter 534, Subchapter A, Section 534.009.
- Government Code Section 551.001 et seq.
- Texas Government Code Section 552.002 et seq.
- Robert's Rules of Order

**Definitions:**

**Deliberation:** A verbal exchange during a meeting between a quorum of a governmental body, or between a quorum of a governmental body and another person, concerning an issue within the jurisdiction of the governmental body or any public business.

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**Meeting:** A deliberation between a quorum of a governmental body, or between a quorum of a governmental body and another person, during which public business or public policy over which the governmental body has supervision or control is discussed or considered or during which the governmental body takes formal action.

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**Quorum:** A majority of members appointed to the board as a whole if used in context of a board meeting. A majority of members appointed to a committee as a whole if used in the context of a board committee meeting.

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**Resolution:** A formal expression of opinion or will, or intent voted by the Metrocare Board or board committee.

**Meetings:**

Every regular, special, or called meeting of the Metrocare Board shall be open to the public to the extent required by and in accordance with Chapter 551, Government Code, except for executive sessions as permitted by statute.

Each appointed member of the Board of Trustees shall complete a course of training of at least one hour regarding its responsibilities regarding open meetings under Chapter 551, Government Code within 90 days of appointment to the Board.

**Notice:**

Notice of regular, special and called meetings of the Metrocare Board shall be filed with the Dallas County Clerk's Office. The meetings shall also be posted in a public place in the Dallas County Courthouse as well as Metrocare's administrative office.

Notices shall be posted 72 hours before the time of the meeting.

Postings shall include the date, hour, place, and subject of each meeting, and all topics scheduled for discussion and/or action at the meeting.

**Executive Sessions:**

An Executive Session may be a part of a regularly called meeting, and may also be a part of a special or called meeting. An Executive Session may be held only for the purpose of discussing specific topics listed in the Open Meetings Act, sections 551.071-551.074, i.e., consulting with attorney, deliberations about real property, and deliberations about personnel matters.

The Metrocare Board will convene in Open Session before going into Executive Session and the Metrocare Board will reconvene in Open Session following the Executive Session to take action on the item discussed in Executive Session or to announce to the public that no action will be taken on the item. No action will be taken in Executive Session and a certified agenda or tape recording of all Executive Sessions will be maintained by Metrocare.

**Meeting Quorum:**

A Metrocare Board meeting cannot be convened without a quorum. If a quorum is not assembled within the time announced, the meeting shall be cancelled and a meeting posted before the Metrocare Board meets again.

If, at the time for which a meeting is posted, there is no quorum a delay may be announced. The delay cannot be for more than one hour. The delay must be announced publicly, explaining the reason for the delay, how long the delay will be, and whether or not the Metrocare Board will meet as a committee-of-the-whole in the interim, without any action taken.

**Minutes:**

All Metrocare Board meetings will be documented with minutes in accordance with Section 534.009 of the Texas Health and Safety Code and Chapter 551 of the Government Code. The minutes shall be approved by the Metrocare Board, and signed by the Metrocare Board Chair and/or Metrocare Board Secretary.

A copy of the minutes shall be mailed to the Dallas County Commissioners Court and to the Texas Health and Human Services Commission (HHSC).

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Minutes are not complete unless they indicate each vote, decision, or other action taken. All Metrocare Board documents (documents submitted for approval) and other attachments (as necessary) are included. All Metrocare Board documents are maintained by one or more Metrocare personnel designated by the Chief Executive Officer.

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**Resolutions:**

It is Metrocare Board practice to fully document a motion and the vote in the minutes.

Resolutions may be used to augment the minutes but are not necessary to document every action item.

Resolutions may be used when:

- A. The Metrocare Board needs to send one action item to a third party. The Resolution can stand alone to document the action, and it is not necessary to send the entire copy of the minutes to the third party.
- B. A third party needs the exact language of the Metrocare Board action, e.g., for legal purposes.
- C. Documentation of the action is needed immediately, or at least before the minutes are approved and certified at the next meeting. The Resolution language can be prepared ahead of time, discussed, and revised during the meeting, and signatures acquired before the Metrocare Board adjourns.

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**Protocol:**

To the extent possible, the Metrocare Board shall use Robert's Rules of Order as a guide for conducting its meetings.

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**Deleted: Indicators of Quality:**¶  
Ongoing monitoring by legal counsel.¶  
Annual review of Metrocare Board documentation.¶



## METROCARE SERVICES

### POLICY OF THE BOARD OF TRUSTEES

**Policy Area:** Board Governance

**Subject:** Policy on Board Meetings, Minutes and Protocol 1.13

**Effective Date:** 10/24/2002

**Amended:** 04/25/2024

**Purpose:**

To assure that all Metrocare Services Board of Trustees (“the Metrocare Board”) meetings and minutes comply with the Texas Open Meetings Act and the Texas Open Records Act, and to assure that all Metrocare Board meetings and documentation are handled in the most efficient manner possible.

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**Protocol:**

To the extent possible, the Metrocare Board shall use Robert's Rules of Order as a guide for conducting its meetings.

**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Board Governance

**Subject:** Policy on Administration and General Management of Metrocare 1.14

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**Effective Date:** 03/21/1977

**Amended:** 04/25/2024

**Deleted:** 05/28/2020

**Purpose:**

To state the general policies which will govern the administration and management of Metrocare,

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**Relationship to Mission/Goals/Values:**

To achieve the provision of quality support, treatment, and assistance for people who live with the challenges of mental illness and intellectual/developmental disabilities, This requires clear and concise policies for governing the administration and management of Metrocare.

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**Statutory References:**

- Health and Safety Code-Section 534.008: the Board of Trustees is responsible for the effective administration of the community center.
- Health and Safety Code – Section 534.010 (a) (b): the Board shall appoint a Chief Executive Officer. The Board shall also adopt a written policy governing the powers that may be delegated to the Chief Executive Officer and annually report to each local agency that appoints the members the executive director's total compensation and benefits.

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**Policy:**

- I. Metrocare is managed according to a formal written management structure with defined responsibilities and authorities. The structure meets the requirements of all Federal, State, and Local governmental operating rules and regulations.
- II. The Board exercises its responsibility for the Administration of Metrocare through the adoption of policy statements that are applicable across Metrocare and are implemented by the Chief Executive Officer.
- III. Metrocare is managed with the intent to achieve the mission, vision and values statement adopted by the Board (see attached).

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**Indicators of Quality:**¶

¶ Staff knowledge of their job responsibilities and authority.¶  
Positive outcomes of management audits¶  
Achievement of the Mission, Vision and Values of the Center.¶



### OUR MISSION

To serve our neighbors with developmental or mental health challenges by helping them find lives that are meaningful and satisfying.

### OUR VISION

Regardless of challenges faced, the people we serve are able to find the meaning and satisfaction that they choose for their lives.

### OUR VALUES

**Integrity-** We are accountable to those whom we serve, and to those from whom we receive support.

**Quality-** We pursue quality of life for those whom we serve, and therefore require quality of services from our staff.

**Diversity-** We seek diverse and inclusive workplace in which to fulfill our mission.

**Perseverance-** As advocates: when we lose, we don't give up; and when we win, we raise the bar.



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Metrocare  
SERVICES

## METROCARE SERVICES

### POLICY OF THE BOARD OF TRUSTEES

**Policy Area:** Board Governance

**Subject:** Policy on Administration and General Management of Metrocare 1.14

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**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Service Delivery

**Subject:** BP 2.01 Policy on Client Services Delivery

**Effective Date:** 6/23/81

**Amended:** 04/25/2024

**Deleted:** 09/28/2023

**Purpose:**

To state the Board's philosophy, guidelines, and values governing delivery of services to individuals.

**Relationship to Mission/Goals/Values:**

Our service delivery system is the foremost expression of Metrocare's mission, vision, and values.

**References:**

- Texas Health and Safety Code-Section 534.001-534.002: Legislation establishing the Community MH/IDD Center system.
- 25TAC-Title 25 Part 1 Department of State Health Services-Chapters 414 and 415: Governs Community Mental Health.
- Service Contracts Governing the Continuity of Mental Health Services, specifically including, but not limited to, Metrocare's Managed Care Organizations and North Texas Behavioral Health Authority Contract(s).
- 40TAC-Title 40 Part 1 Department of Aging and Disability Services-Chapters 2, 4 and 5: Governs Intellectual and Developmental Disability Services.
- 25TAC-Title 25 Part 1 Department of State Health Services-Chapters 448: Client Transportation
- Contracts with payers.

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**Commented [JB1]:** Added to reference the TAC code

**Policy:**

The service system will reflect Metrocare's mission, vision and values. Service processes will be service recipient driven. Services will be of the highest quality possible within available resources.

- A. Services shall be easy to access.



B. Treatment plans and/or habilitation plans will be developed according to personal preferences and individual need, assessed in accordance with current clinical standards of care.

C. Service quality assessment and improvement will be ongoing.

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D. Continuity of services between Metrocare and other providers will be ensured.

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E. Services will be delivered on the basis of client need and without regard to race, creed, color, national origin, age, sex, or physical handicap.

F. The design of service programs will reflect both short-term acute needs and lifelong rehabilitative and/or developmental needs.

G. For persons with intellectual and developmental disabilities, the system will provide or coordinate the type, intensity, and level of service indicated by the person's needs and life circumstances.

H. For persons with mental illness, the system will offer an array of services to meet each individual's needs and accommodate their life circumstances.

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I. Substance Use Disorder (SUD) program staff will not provide direct transportation services in compliance with TAC code §448.510.

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J. Restraint and seclusion will not be utilized in Outpatient Mental Health, Substance Use Programs, and the Local Authority programs. Restraint may be used in the following Intellectual and Developmental Disability Programs in accordance with the guidelines included herein:

- Crisis Intervention
- Crisis Respite
- Behavioral Treatment Center

Commented [JB2]: Information added from approved P&P. I included the words "outpatient" however all other verbiage is directly from approved policies.

All services and processes will be accommodating for all individuals, families, and caregivers.

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Deleted: <#>Substance Use Employees will remain in compliance with TAC code §448.510 which¶ states that "Any vehicle used to transport a client must have appropriate insurance¶ coverage for business use with a current safety inspection sticker and license". Therefore, Substance Use employees will refrain from providing direct transportation services.¶

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**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Service Delivery

**Subject:** BP 2.01 Policy on Client Services Delivery

**Effective Date:** 6/23/81

**Amended:** 04/25/2024

**Purpose:**

To state the Board's philosophy, guidelines, and values governing delivery of services to individuals.

**Relationship to Mission/Goals/Values:**

Our service delivery system is the foremost expression of Metrocare's mission, vision, and values.

**References:**

- Texas Health and Safety Code-Section 534.001-534.002: Legislation establishing the Community MH/IDD Center system.
- 25TAC-Title 25 Part 1 Department of State Health Services-Chapters 414 and 415: Governs Community Mental Health.
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**Policy:**

The service system will reflect Metrocare's mission, vision and values. Service processes will be service recipient driven. Services will be of the highest quality possible within available resources.

- A. Services shall be easy to access.

- B. Treatment plans and/or habilitation plans will be developed according to personal preferences and individual need, assessed in accordance with current clinical standards of care.
- C. Service quality assessment and improvement will be ongoing.
- D. Continuity of services between Metrocare and other providers will be ensured.
- E. Services will be delivered on the basis of client need and without regard to race, creed, color, national origin, age, sex, or physical handicap.
- F. The design of service programs will reflect both short-term acute needs and lifelong rehabilitative and/or developmental needs.
- G. For persons with intellectual and developmental disabilities, the system will provide or coordinate the type, intensity, and level of service indicated by the person's needs and life circumstances.
- H. For persons with mental illness, the system will offer an array of services to meet each individual's needs and accommodate their life circumstances.
- I. Substance Use Disorder (SUD) program staff will not provide direct transportation services in compliance with TAC code §448.510
- J. Restraint and seclusion will not be utilized in Outpatient Mental Health, Substance Use Programs, and the Local Authority programs. Restraint may be used in the following Intellectual and Developmental Disability Programs in accordance with the guidelines included herein:
  - Crisis Intervention
  - Crisis Respite
  - Behavioral Treatment Center

All services and processes will be accommodating for all individuals, families, and caregivers.

**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Service Delivery  
**Subject:** Policy on Medical / Psychiatric Services 2.06  
**Effective Date:** 06/26/1996  
**Amended:** 04/25/2024

**Purpose:**

To ensure high quality medical/psychiatric services by licensed, competent and ethical physicians, advanced nurse practitioners, physician assistants and other appropriate medical personnel.

**Relationship to Mission/ Goals/ Values:**

Serving our neighbors with developmental or mental health challenges by helping them find lives that are meaningful and satisfying with the assistance of high quality, efficient, and accessible medical/psychiatric services. These services will be provided in accordance with professional standards; and in compliance with all applicable federal, state and local statutes and regulations.

**Statutory Reference:**

- Texas Administrative Code – Title 25, Part I, Chapter 404: Rights of Persons Receiving Mental Health Services
- Texas Administrative Code- Title 25, Part I, Chapter 405: Patient Care-Mental Health Services
- Texas Administrative Code-Title 25, Part I, Chapter 414: Rights and Protections of Persons receiving Mental Health Services
- Texas Administrative Code-Title 25, Part I, Chapter 415: Provider Clinical Responsibilities-Mental Health
- Texas Administrative Code – Title 40, Part I, Chapter 4: Rights and Protections of Individuals Receiving Intellectual and Developmental Disability (IDD) Services
- Texas Administrative Code- Title 40, Part I, Chapter 5: Provider Clinical Responsibilities-IDD Services
- Texas Occupations Code – Physicians, Chapters 151
- Texas Occupations Code – Physician Assistants, Chapter 204
- Texas Occupations Code – Advanced Practice Registered Nurses, Chapter 305
- Texas Occupations Code – Nurses, Chapter 301
- Texas Medical Board Rules and Regulations
- Texas Board of Nurse Examiners Rules and Regulations

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**Policy:**

All medical/psychiatric services shall be delivered or supervised by physicians licensed to practice medicine in the State of Texas. The Chief Medical Officer and the Regional Medical Directors shall provide clinical supervision of all medical/psychiatric services in Metrocare.

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A. Chief Medical Officer

1. The Chief Medical Officer shall report to the Chief Executive Officer.
2. The Chief Medical Officer provides supervisory oversight of all medical/psychiatric services delivered by Metrocare, delivered in Metrocare facilities, or under contract to Metrocare.

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B. The Chief Medical Officer, in collaboration with the Chief Operating Officer, and other appropriate Metrocare staff, shall develop and recommend to the Chief Executive Officer, operational policies, procedures and measures which guide the nature, delivery, and monitoring of medical services delivered by Metrocare.

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1. The Chief Medical Officer shall ensure medical input, direction, and review of all clinical operations, policies, procedures and measures by working cooperatively with Quality Management, Quality Council, Utilization Review, Regional Medical Directors, Professional Review Committee, Human Rights Committee, and other Metrocare staff and Committees, as indicated.
2. The Chief Medical Officer, in consultation with the Chief Executive Officer and the Chief Operating Officer, shall be responsible for the establishment of procedures and measures pursuant to this policy. Such procedures and measures shall apply, as appropriate, to all employees, consultants, volunteers, contracting agencies, and other affiliates of Metrocare. All such procedures shall comply with appropriate statutes, rules, regulations, and other legal requirements.
3. The Chief Medical Officer shall develop "Medical Staff Bylaws", in consultation with the Regional Medical Directors, to provide an organizational framework for medical/psychiatric services permitting the medical staff to discharge their legal responsibilities and fulfill the mission of Metrocare Services.

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C. The Chief Medical Officer shall ensure medical staff members (physicians, physician assistants, and advanced practice nurses) participate in functional treatment teams responsible for the development and implementation of individualized, person-centered treatment plans for individuals served by Metrocare.

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D. The Chief Medical Officer shall oversee and enhance the professional environment for physicians and other medical/psychiatric personnel in order to advance the quality of care for individuals served.

E. The Chief Executive Officer will request that the Chief Medical Officer provide periodic reports to the Board on clinical services delivered and contracted by Metrocare, and other clinical issues, as needed.

**Deleted:** <#>Restraint and seclusion will not be utilized in Outpatient Mental Health, Substance Use Programs, and the Local Authority programs. Restraint may be used in the following Intellectual and Developmental Disability Programs in accordance with the guidelines included herein: ¶  
• Crisis Intervention ¶  
• Crisis Respite ¶  
• Behavioral Treatment Center¶

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**Indicators of Quality:**¶  
Center clinical service measures; goals; and outcomes reaching targets.¶  
Services are delivered consistently in conjunction with the Center's Board Policy 2.01 Policy on Services Delivery to Individuals Served.¶  
Quality Assurance activities are accomplished as outlined in the "Medical Staff Bylaws" and the Center's Board Policy 6.01 Policy on Quality Management.¶  
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**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

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- Texas Occupations Code – Advanced Practice Registered Nurses, Chapter 305
- Texas Occupations Code – Nurses, Chapter 301
- Texas Medical Board Rules and Regulations
- Texas Board of Nurse Examiners Rules and Regulations

**Policy:**

All medical/psychiatric services shall be delivered or supervised by physicians licensed to practice medicine in the State of Texas. The Chief Medical Officer and the Regional Medical Directors shall provide clinical supervision of all medical/psychiatric services in Metrocare.

A. Chief Medical Officer

1. The Chief Medical Officer shall report to the Chief Executive Officer.
2. The Chief Medical Officer provides supervisory oversight of all medical/psychiatric services delivered by Metrocare, delivered in Metrocare facilities, or under contract to Metrocare.

B. The Chief Medical Officer, in collaboration with the Chief Operating Officer, and other appropriate Metrocare staff, shall develop and recommend to the Chief Executive Officer, operational policies, procedures and measures which guide the nature, delivery, and monitoring of medical services delivered by Metrocare.

1. The Chief Medical Officer shall ensure medical input, direction, and review of all clinical operations, policies, procedures and measures by working cooperatively with Quality Management, Quality Council, Utilization Review, Regional Medical Directors, Professional Review Committee, Human Rights Committee, and other Metrocare staff and Committees, as indicated.
2. The Chief Medical Officer, in consultation with the Chief Executive Officer and the Chief Operating Officer, shall be responsible for the establishment of procedures and measures pursuant to this policy. Such procedures and measure shall apply, as appropriate, to all employees, consultants, volunteers, contracting agencies, and other affiliates of Metrocare. All such procedures shall comply with appropriate statutes, rules, regulations, and other legal requirements.
3. The Chief Medical Officer shall develop “Medical Staff Bylaws”, in consultation with the Regional Medical Directors, to provide an organizational framework for medical/psychiatric services permitting the medical staff to discharge their legal responsibilities and fulfill the mission of Metrocare Services.

C. The Chief Medical Officer shall ensure medical staff members (physicians, physician assistants, and advanced practice nurses) participate in functional treatment teams responsible for the development and implementation of individualized, person-centered treatment plans for individuals served by Metrocare.

D. The Chief Medical Officer shall oversee and enhance the professional environment for physicians and other medical/psychiatric personnel in order to advance the quality of care for individuals served.

E. The Chief Executive Officer will request that the Chief Medical Officer provide periodic reports to the Board on clinical services delivered and contracted by Metrocare, and other clinical issues, as needed.

**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

**Policy Area:** Information Systems  
**Subject:** Board Policy on Contingency Planning 8.04  
**Effective Date:** 01/23/1981  
**Amended:** ~~04/25/2024~~

**Deleted:** 4//2024

**Purpose:**

To establish and implement contingency plan(s) for Metrocare Services (“Metrocare”) to ensure Metrocare’s business operations can continue following any type of business interruption Metrocare may experience from a disaster or adverse event.

**Relationship to Mission/Goals/Values:**

Metrocare’s mission is to serve our neighbors with developmental or mental health challenges by helping them find lives that are meaningful and satisfying. In order for Metrocare to continue carrying out its mission, Metrocare must develop and have available appropriate contingency plans to address any types of adverse events or incidents or disasters that result in any interruption of Metrocare’s business operations to ensure the delivery of services continues for individuals served by Metrocare.

**References:**

- Code of Federal Regulations, Title 45, Section 164.308(a)(7) – HIPAA Security Rule – Contingency Plan
- National Institute of Standards and Technology (“NIST”), Special Publication 800-34, Revision 1
- Texas Health and Human Services Commission (“HHSC”) Performance Contracts
- Commission on Accreditation of Rehabilitation Facilities (“CARF”), Section 1.J. Technology

**Policy:**

It is the policy of Metrocare to establish, maintain, and implement appropriate contingency plans to address any business interruptions or adverse impacts on Metrocare’s business operations that may arise from any disasters (natural or man-made), information security incidents, and any other unforeseeable or unanticipated events. Metrocare should have at least the following contingency plans in place:

- Business Continuity Plan
- Disaster Recovery Plan
- Emergency Mode Operation Plan
- Information Security Incident Response Plan

**Commented [SC1]:** Is there a financial backup plan of some sorts? Days of Cash minimum; something to weather the storm if reimbursements stop for any reason? IE that is why I mentioned Change Health

**Commented [SC2]:** Do we need to add anything about public health or financial (ie Change Healthcare/billing)?



- Data Backup Plan

Metrocare’s Chief Operating Officer and Chief Compliance Officer shall have oversight of the creation, evaluation, testing, and updating of the various contingency plans that fall under this policy. The contingency plans shall be reviewed by Metrocare’s Quality and Authority Council at least quarterly and tested by the Metrocare agency at least annually or upon request of state or federal regulatory bodies.

**Commented [SC3]:** Is this in existence? If so, ok.

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8.04

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Indicators of Quality:¶

Indicators of Quality:¶

¶

Business operations restoration and recovery time¶

Data restoration and recovery time¶

Event/Incident notification and response time¶

Outcomes of quarterly review and annual testing¶

Outcomes of internal and external audits and review by regulatory and accrediting bodies.

**METROCARE SERVICES**  
**POLICY OF THE BOARD OF TRUSTEES**

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8.04



## BOARD COMMUNICATION

### AGENDA ITEM

Human Resources Report

### BOARD MEETING DATE

April 25, 2024

### PREPARED BY

Ariana Rosado, Chief Human Resources Officer

### DATE PREPARED

April 3, 2024

### Agency KPI: To ensure a stable and fulfilled workforce, Metrocare will maintain a 25% or less employee turnover rate.

Current Month (turnover for March) – 1.57%

Rolling 12-month Performance: 19%

Goal: 25.0%

Baseline: 21.0%

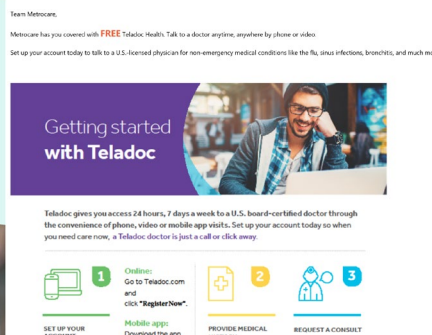
Measurement Tool: Paycom Report (Trailing 12 months)

Pillar: Engaged Employees

Objective: Fulfilled Workforce

### Human Resources Highlights – The HR Department has focused on increasing agency communication and education regarding benefits this year. Here are some highlights of their efforts to date -

1. Collaborating with the ISC Group to provide webinars for staff about budgeting for financial success, understanding social security benefits and principles of retirement planning. More webinars are planned for the remainder of the year!
2. Consistent and engaging communication regarding our employer funded benefits including Teledoc and Talkspace.



### 3. Reminders regarding critical deadlines such as Student Loan Assistance Programs.

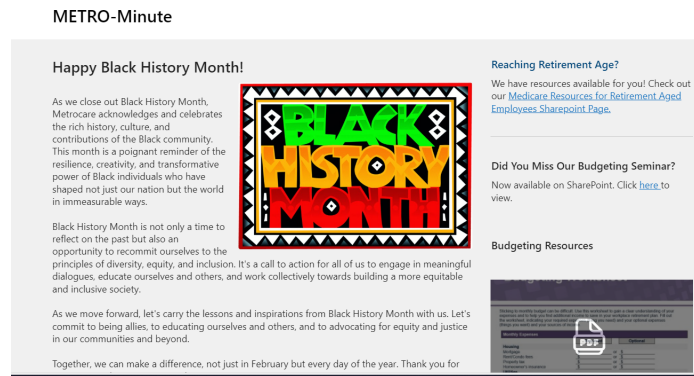
This is the final reminder regarding the loan consolidation **application deadline on April 30, 2024**. If you have not yet explored this opportunity, we strongly encourage you to do so immediately.

The consolidation and one-time adjustment offer could have profound implications for your loan status, potentially erasing significant debt. However, this chance will not be available after the deadline, as the program will revert to its standard parameters.

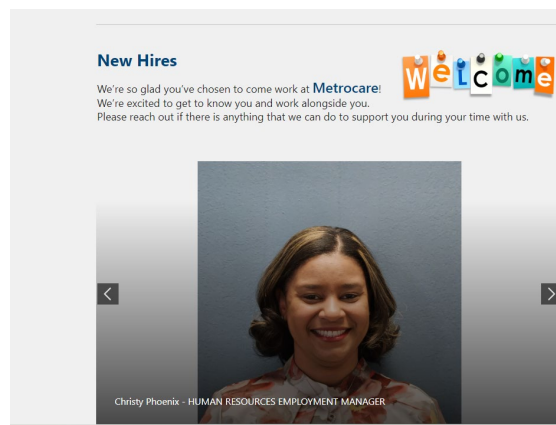
Please take a moment to review the essential information at:

[Student Loan Consolidation | Federal Student Aid](#)  
[Payment Count Adjustments Toward Income-Driven Repayment and Public Service Loan Forgiveness Programs | Federal Student Aid](#)

4. Implementation of an HR monthly newsletter – The METRO-Minute – which provides meaningful information to staff and is easily accessible through our SharePoint site.



It also highlights new hires and staff celebrating employment anniversaries!

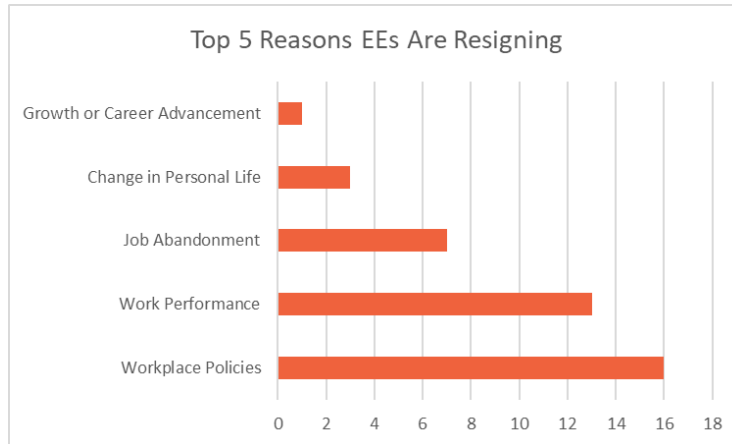


<b>Current Workforce</b>			
<b>Total Employees</b>	<b>Full-time Employees</b>	<b>PRN</b>	<b>Part-time</b>
1077	1023	40	14

<b>Recruiting Comments</b>		
<b>Current Open Positions</b>	<b>Replacements</b>	<b>New Positions</b>
139	72	67

<b>New Hires and Separations</b>		
	<b>New Hires</b>	<b>Separations</b>
Current Month	22	17
Rolling 12 Months	300	229

<b>Voluntary and Involuntary Separations</b>		
	<b>Voluntary Separations</b>	<b>Involuntary Separations</b>
Current Month	11	6
Rolling 12 Months	181	48



<b>Time to Fill - average</b>	
Current Month – Total Agency	65 days
LIDDA	98 days
MH	39 days
Pharmacy	12 days
Housing	149 days
COHEN	14 days
Medical	88 days

<b>Bilingual Case Management Staff</b>	
Current Month	17%

<b>Employees Participating in Medical Plan</b>	
	<b>Participation % of FT</b>
Current Month	83%

<b>Employees Participating in Retirement Plan</b>	
	<b>Participation %</b>
Current Month	82%

<b>Monthly Service Anniversaries</b>			
<b>Employee Name</b>	<b>Department</b>	<b>Position</b>	<b># Years</b>
DAPHNE TURNER	674-WRAP [674]	FAMILY ADVOCATE	5
JOSE CAPUCHINO	720-LIDDA-COORDINATION HCS [720]	LEAD CUSTOMER SERVICE COORDINATOR	5
ARNETTE KINION	454-L/K TEAM [454]	ADULT OUTPATIENT QMHP	10
EULALIO DELGADILLO	602-REGION ADMIN - HILLSIDE IN [602]	BUSINESS SUPPORT II	10
ROSALINDA BAZALDUA	682-ECI SERVICES [682]	LEAD EARLY INTERVENTION SPECIALIST	10
STORMY HOLIFIELD	674-WRAP [674]	FAMILY ADVOCATE	15

Respectfully Submitted,

Ariana Rosado  
 Chief Human Resources Officer  
[Ariana.Rosado@metrocareservices.org](mailto:Ariana.Rosado@metrocareservices.org)

Kelli Laos  
 Chief Operating Officer  
[Kelli.Laos@metrocareservices.org](mailto:Kelli.Laos@metrocareservices.org)



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Information Technology Updates	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Russ Abercrombie, CIO	<b>DATE PREPARED</b> April 16, 2024

### Measures Reports/Internal Development (Casie Sheffield): April 2024

- **MIPS Measures** – The six MIPS Year-7 measures were finalized, approved, and submitted prior to the 4/15 deadline.
- **CCBHC-SAMHSA Measures** – Update: Now 8 Measures have been identified by Ops for build-out prior to a September 2024 submission deadline. The first measure's (CCBHC 3.6) technical requirements were reviewed with IT Dev and initial report development is complete. Now under review with Ops for their approval.
- **Reports Centralization + Improvements Project** – The aim of this initiative is to ensure all reports are centrally located, accessible, and refined to provide exactly what each department prefers/needs to successfully manage their business units. Internally created How To Guides, live training sessions, and recorded videos to help all report users better navigate and utilize Metrocare's various report functionalities is also within this initiative's framework. An internal BI launch page is created and the rounds of customization per Division and Department has begun. 40+ MH Managements personnel now have access to this page and the reporting platform. We held two training sessions last week; providing walk-throughs of basic navigation and How To Guides.

PROGRAM/REPORT NAME	MEASURE DETAIL/STATUS	STATUS
HR/Agency Positions Pipeline	Dashboard identifies FY2023 + 2024 Budgeted and Existing Positions/Salaries via 9 report pages	READY FOR HR USAGE
QSUP Hours Compliance Tracking	Final records clean-up + Supervisor Name field additions	COMPLETE
CCBHC 3.6 Measure	Initial report development is complete	AWAITING OPS APPROVAL
DPP BHS – Measure 6.1 CO	Initial report dev complete	AWAITING OPS APPROVAL
FLOURISHING FAMILY	Final updates on current 15 report views in IT QA process	AWAITING OPS APPROVAL or MODS

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10.9 Master Hospital Discharge Measure	Initial dev completed and QA tested, awaiting Ops' approval	AWAITING OPS APPROVAL
Automated Bonus Approval	Current Phase: HR requested platform modifications and a proposed process change with Ops. Awaiting party approvals and next Q2 bonus run cycle to implement on changed platform structure.	Phase 2: IN PROCESS
LPC/LPHA Bonus Report	With Ops for UAT/ Final Approval	ON HOLD – per OPS
Holmusk Data Project	Ongoing support of third-party research	IN PROCESS
Late Charting Report	Routine modifications to synchronize with myAvatar version of the report. Final Ops Request in process	IN PROCESS on Ops Mod
Paycom to Relias Variances	3rd round of Analysis provided, ongoing Action Planning sessions held with HR/IT/Ops/QM – an automated IT developed version of this Analysis is under way.	IN PROCESS
Facilities Cost Report	Next phase: Relayed outputs to Kevin Boyd for further modifications	AWAITING FACILITIES RESPONSE
Concur Mileage Reporting	MRN field implementation under way	IN PROCESS
Partner Data Sharing Report	2 <sup>nd</sup> round of Ops mod requests developed into the report pages and relayed to Ops on 4/12	AWAITING OPS APPROVAL or MODS
Recovery Plan Tracking Report	For MH Division – Overviewed w/ Ops on 4/3	AWAITING OPS APPROVAL or MODS

**Data Management & Development Team (Debbie Frazer):**

<b>IT Data Management/Dev Team Marrch 24 Report</b>			
<b>Category</b>	<b>Project</b>	<b>Status</b>	<b>Notes</b>
<b>Server Decommissions</b>	PsychLive64, MunisLive, Sandbox2	Complete	Data from these older servers has been migrated and they are ready for decommissioning
<b>System Integrations</b>	Dr. Connect	Ongoing	We have supported an initial internal test and a pilot test with only Lancaster Keist. All requested updates are in place, and we are ready to support the next candidate site.
	Netwrix	Complete	We have supported the database creation, configuration, and performance tuning efforts related to the Netwrix application launch
<b>Measures Reporting</b>	MIPS submission	Complete	Completed submission of 6 MIPS reports.
	CCBHC reports	Ongoing	The first of 8 CCBHC reports has been created and is in UAT testing. This will lay the groundwork for the remaining reports due by the end of September.
<b>Reports</b>			
	CCBHC Cost Report	Complete	Created new CCBHC Cost Report for use by Finance
	Late Charting Report	Complete	Created an internal Power BI report to replace the Netsmart report with improved functionality and better performance
	Bonus Approval Automation	Complete	Implemented a Shared Sharepoint solution to automate the Quarterly Bonus Approval process
	Annual Report FY24 updates	Complete	Completed updates to the configuration for new programs and services
	Facilities Cost Report	Dev Complete	Created new Facility Cost Report - currently in UAT Testing

	Partner Data Sharing	Complete	Created an internal Power BI report to replace the Netsmart report with improved functionality and better performance
<b>Data Warehouse</b>	Active Directory data	Complete	Started bringing Active Directory data into our data warehouse database. Goal is to use this data to help keep Paycom and Active Directory data in sync
<b>Forms</b>	Emp Asset Return Form	Complete	Created an electronic form to allow multiple departments to coordinate asset return tracking on employee termination
	Asset Inventory Report	Complete	Created a SSRS report to view all employee asset assignments
	Job Request Form	Dev Complete	Created an electronic form for HR - in UAT testing
	Emergency Drill Response Form	Dev Complete	Created an electronic form - in UAT testing
	Crisis Response Form	Dev Complete	Created an electronic form - in UAT testing

### Network/Infrastructure Details (Tim Kitchen):

<b>Okta Single Sign-on Operation Activities</b>	<p>Bad actors were using a brute force attack on passwords to attempt to gain access through a weakness in a legacy protocol used for email (Simple Mail Transport Protocol Authentication SMTP) This attack was causing account lockouts and disrupting employees' workflow. This attack was stopped by disabling SMTP Auth protocol.</p> <p>Set Windows minimum version – only allowing new versions of windows operating system to connect to Okta.</p> <p>Changed to network zone policies in Okta – security measures to block vpn's and proxies from getting to Okta</p> <p>Training Netsmart help desk in Okta – this training was to allow Netsmart's help desk to handle level 1 issues that come up in day-to-day support.</p>
<b>Microsoft licensing renewal</b>	<p>Microsoft licensing – deployed a licensing optimization tool to look at our currently deployed licenses to clean up any unused licenses. This way we can reconcile licenses between employees and contractors.</p>
<b>2008 Server decommission</b>	<p>Continue to decommission the last 2008 servers.</p>

### Information Security (Long Lam):

<b>Netwrix File Scan Software</b>	<p>Netwrix Data Classification feature is currently scanning the Metrocare file environment for labeling of sensitive information.</p>
<b>Wireless Phone Security</b>	<p>Updated company iPhones operating system to iOS 17.4.1.</p>
<b>Okta Security Addition</b>	<p>Configured an extra security feature called ThreatInsight in Okta to block suspicious internet addresses with high-risk threat scores.</p>
<b>Software Licensing Inventory</b>	<p>License auditing for IT security applications due to company growth in employee size. Increases will be added to next year's fiscal budget.</p>
<b>Security Incident</b>	<p>Prevented email bank fraud scam with the vendor Whiting-Turner. Whiting-Turner was not aware their system was compromised until we had informed them with our incident findings.</p>

**EMR Operations (Sarah Nagle):**

<b>Product</b>	
<b>Doctor Connect</b>	<p><u>Functionality:</u> Appointment reminder platform that sends text &amp; email reminders (if consent on file) and voice reminders of upcoming appointments and reminders to reschedule for no-show appointments):</p> <p><u>Status:</u> On-going</p> <ul style="list-style-type: none"><li>• LIVE pilot with LK clinic to start week of 4/8</li><li>• Testing to start with Housing / Homeless / EDU between week of 4/15 to week of 4/22 (at their request).</li><li>• Discovery call with ECI week of 4/22.</li></ul>
<b>EMR Optimization (NX, myAvatar)</b>	<p><u>Functionality:</u> looking at existing or new products that can help us optimize our system and streamline workflows</p> <p><u>Status:</u> On-going</p> <p>Examples:</p> <ul style="list-style-type: none"><li>• Care Quality / Care Connect – completed 2<sup>nd</sup> mtg w/ Netsmart product owner and Carrie P / Jennifer W</li><li>• Practitioner Enrollment – Cleanup of credentials in myAvatar and Paycom completed 3/27 for licensed clinicians (MD, APN, LPC, etc.). Clean up in progress for non-licensed staff (EIS / QMHP)</li><li>• Clinical Excellence for Scheduling Calendar – 3/19 met with MH Ops to review optimization options for scheduling calendar and agreed to proceed with creating teams</li><li>• Medical Records Optimization – tested updates to clinical document viewer &amp; began additional clean-up of access to forms / reports</li></ul>
<b>Managed Service Requests for EMR (NX, myAvatar)</b>	<p><u>Functionality:</u> Directors / Managers submit requests for editing existing or creation of new reports, forms, reports, widgets (anything living inside myAvatar NX). Can be requested as result of an audit, HHS changes to a form, streamlining a workflow, or remove a manual process to become automated. Work in conjunction with the IT Dev and Data / Analytics teams to coordinate reporting efforts.</p> <p><u>Status:</u> <b>15 requests completed</b> and for March for Medical Records, MH, IDD &amp; LIDDA departments</p>

Respectfully submitted,

Russ Abercrombie, Chief Information Officer



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Clinical Services Division Report	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Judith Hunter, M.D., Chief Medical Officer	<b>DATE PREPARED</b> April 17, 2024

### Report for Clinical Services Division March 2024

#### Medical Staff Services

- One Child and Adolescent Psychiatrist Medical Director position remains vacant. Fully remote Child and Adolescent Psychiatrist position: Our offer to a bilingual candidate has been accepted, with anticipated start date of July 15, 2024. This candidate will be completing the Child and Adolescent Psychiatry program at Baylor College of Medicine in July.
- Psychiatric evaluations completed within 14 days of authorization: 91.4%
- Same day psychiatric evaluations: 85.5%

#### Developmental Disability Provider (DDP):

- ECI: 555 children received comprehensive services
- Developmental Disability Provider (DDP): 495 unique individuals served
- Total unique individuals served in the division: 1050

#### Stephen A. Cohen Military Family Clinic at Metrocare

- FY #8 started May 1, 2023. 652 new episodes of care year-to-date. 302 unique individuals received services in March.
- All clinical positions at the Cohen clinic are filled.

#### Altshuler Center for Education and Research

- Fiscal YTD unique trainees through ACER: 235
- Dr. Ikechukwu Ofomata, Medical Director at Westmoreland Clinic, received high praise from UTSW 2<sup>nd</sup> Year Psychiatry residents who completed a required rotation on the Assertive Community Treatment team (ACT) at Westmoreland. Dr. Ofomata was described as always maintaining a calm demeanor and treating all patients with dignity and respect, no matter how severe their symptomatology. His rapport with patients and his dedication to serving a population that is often overlooked and treated poorly was highlighted in resident feedback.

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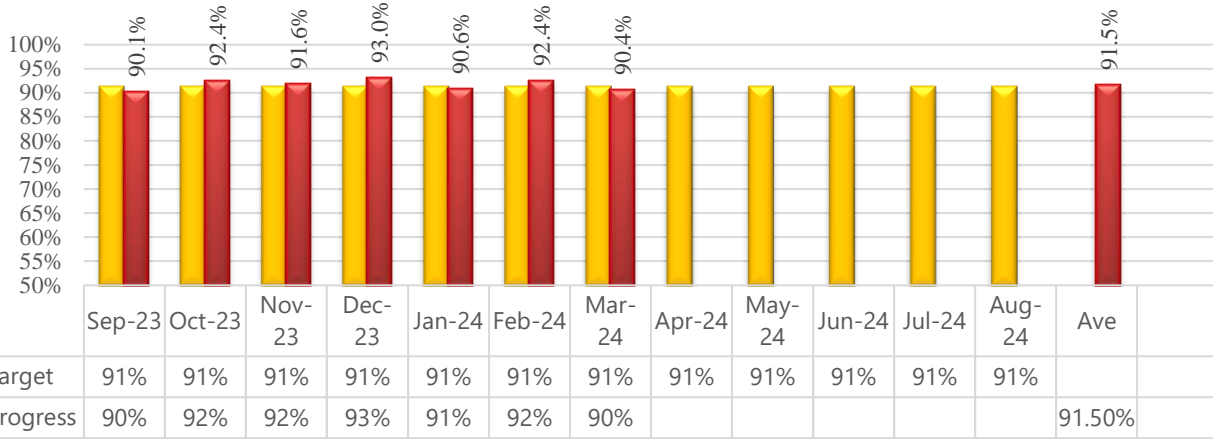
## FY 2024 KEY PERFORMANCE INDICATORS March 2024

**KPI 4:** To grow the mission of the Center and to ensure timely access to services, the Metrocare mental health division will complete 91% of diagnostic interviews with medication services within seven days of intake.

**Goal:** 91.0%

**Progress:** 90.4% (Average YTD 91.5%)

**Psychiatric Evaluations Completed Within 7 days of Intake**

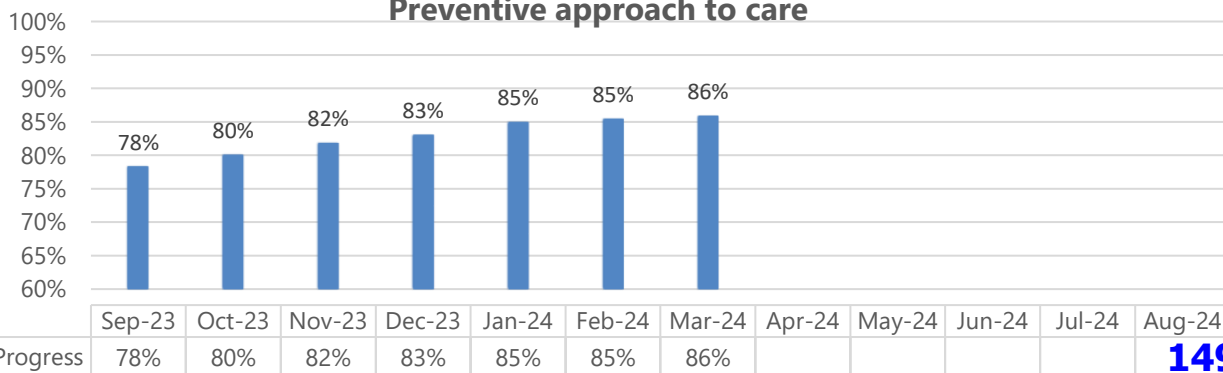


**KPI 5:** To further Metrocare’s preventive approach to care, 83% of adult individuals in service who screen positive for unhealthy alcohol use will receive a brief intervention by a licensed clinician.

**Goal:** 83.0%

**Progress:** 85.8%

**Preventive approach to care**

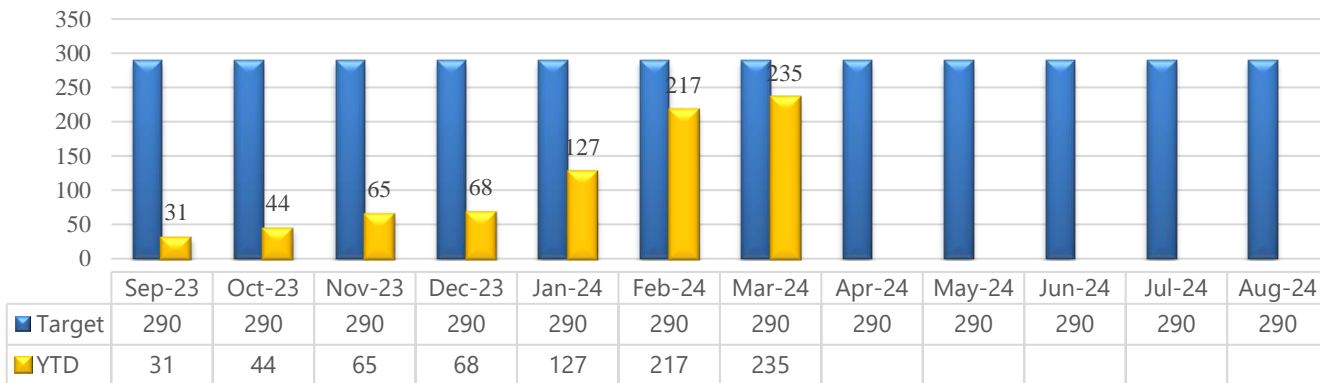


KPI 6: To support workforce development in Community Mental Health, Metrocare will train 290 clinicians through the ACER Training Program per year.

Goal: 290

Progress: 235

**Altshuler Center for Education Total Annual Trainees**



Respectfully submitted,

Judith Hunter, MD

[Judith.hunter@metrocareservices.org](mailto:Judith.hunter@metrocareservices.org)





## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Mental Health Division Report	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Jennifer Wadsworth, Chief Clinical Officer	<b>DATE PREPARED</b> April 17, 2024

### **Engaged Employees:**

- March 1 was Employee Appreciation Day – Team building and coloring contest.
- MH Leadership Program second graduating class

### **Quality Care:**

- Juveniles Unplugging Mental Problems (JUMP): new groups offered for teens, primarily for justice involved individuals.

### **Thriving Agency:**

Care Coordination expansion via Satellite Locations - 14

- After8toEducate (Feb 2024)
- Counseling Institute of Texas (Mar 2024)
- Dallas College (Richland Feb 2024, El Centro and Northlake Mar 2024, Eastfield Apr 2024)
- Men of Nehemiah (Nov 2022)
- Metrocrest (Jan 2024)
- Pacifica Apartments (Nov 2023)
- St Jude Park Center (Jan 2023)
- The Cottages (Sep 2023)
- The Family Place (2 secure DV locations) (Nov 2023)
- Therapy Inspired (Dec 2023)

### **New Satellite Locations Coming Soon**

- CityWalk
- Turtle Creek
- Letot
- Inspired Vision Compassion Center
- Dallas International Street Church
- Dallas College (Brookhaven, Mountain View, Cedar Valley)

### **Innovative Collaborators:**

- In collaboration with Dallas County Drug Court, SAMHSA grant submission
- Texas Council Annual Conference Approved Presentations:
  - Jasmine Brown and Kristen Peterson with Parkland will present on Reducing Recidivism
  - Elda Hudson will present on Community Partnerships and Telemedicine
  - Andrew Ahles and Tate Ringer will present on Trauma Informed Care in the Community
- Behavioral Health Consortium Presentation Accepted for July: Jasmine Brown will present on Implementing SUD Services
- Stormi Holifield was selected to participate in the Special Interest Group for Peer/Family Partners
- Big Thought presentation on Suicide Prevention and Resiliency in Children (SPARC)

Respectfully submitted,

Jennifer Wadsworth, LPC-S, MBA

[Jennifer.wadsworth@metrocareservices.org](mailto:Jennifer.wadsworth@metrocareservices.org)

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## FY2024 KEY PERFORMANCE INDICATORS

**KPI 7: To ensure continuity of care, at least 52% of reported hospital discharges (ER and in-patient behavioral health) will receive a follow up appointment from Metrocare clinical staff within 30 days of the discharge.**

Rolling 12 Month Performance – 55.2%

Goal: 52.0%

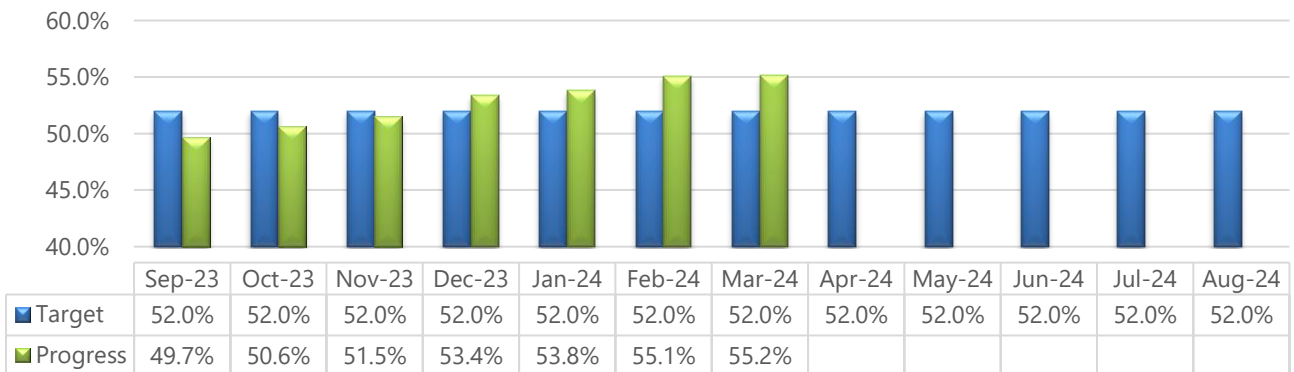
Baseline: 49.0%

Measurement Tool: 30-day Hospital Report

**Pillar: Quality of Care**

*Aligned Objective: Client Improvement*

**Reported Hospital Discharge 30 Day Follow up**



**KPI 8: To meet community need, Metrocare will increase the number of unique individuals receiving mental health services by 1% year over year.**

Progress: 33,228

Goal: 41,684

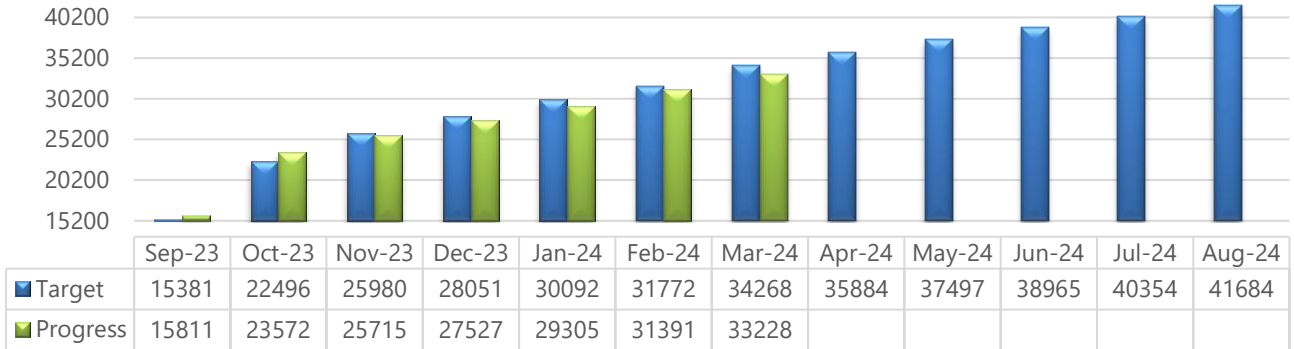
Baseline: 41,271

Measurement Tool: MARS

**Pillar: Thriving Agency**

*Aligned Objective: Meeting Community Need*

### Number of Unique Individuals receiving MH Services



**KPI 9: To ensure Metrocare’s effective utilization of clinical staff in the service of client’s progress, the mental health division will meet and/or exceed a 93% clinical productivity benchmark.**

Monthly Progress: 94.1%

Goal: 93.0%

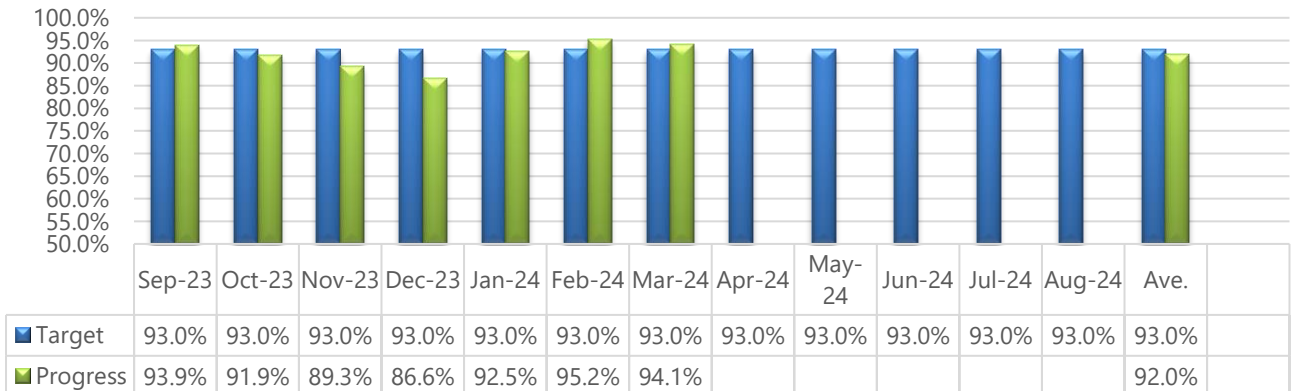
Baseline: 93%

Measurement Tool: Productivity Report

**Pillar: Quality Care**

*Aligned Objective: Client Improvement*

### MH Division Clinical Productivity Rate





## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Quality Management and Compliance Report	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Kelli Laos, Chief Operating Officer	<b>DATE PREPARED</b> April 16, 2024

### **Quality Management**

#### Mental Health Clinical Documentation Audit – Q1 2024

Progress Notes – 95.2%

Assessment and Diagnosis – 88.2%

Recovery Plan – 72.2%

Child and Adult Strengths and Needs Assessment certification compliance – 95.69%

#### Intellectual and Developmental Diversity Clinical Documentation Audit - March 2024

GR – 80.62%

HCS – 78.57%

PASRR – 93.90%

TxHML – 82.79%

CFC – 58.26%

#### Substance Use Clinical Documentation Audit – March 2024

SUD – 95.93%

### **Compliance**

#### **FY 2024 Work Plan Initiatives**

##### **A. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT -PRIVACY**

###### **i. Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 3 of 4

###### **ii. Incidents**

Total Reviewed Cases: 8

Status: 6 – Open, 2 – Closed

##### **B. REGULATORY COMPLIANCE**

###### **i. Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 3 of 4

###### **ii. Incidents**

Total Reviewed Cases:6

Status: 5 – Open, 1 – Closed

C. **ETHICS HOTLINE**

i. **Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 3 of 4

ii. **Incidents**

Total Reviewed Cases: 7

Status: 1 – Open, 6 – Closed

D. **CLIENT RIGHTS INCIDENT MANAGEMENT**

i. **Training**

Goal: Provide one (1) training refresher per quarter (4 quarters total)

Progress: 3 of 4

ii. **Complaints**

Total Reviewed Cases: 16

Status: 11 – Closed, 5 – Open

iii. **Incidents**

Total Reviewed Cases: 59

Status: 52 - Closed, 7 - Open

E. **CONTRACT ADMINISTRATION**

**Executed Contracts** – (34) in March

1. 13 - new contracts
2. 1 - amendment
3. 20 - renewals

F. **POLICY ADMINISTRATION**

**Revision – (1)**

- i. AP 1.02.01 Managing Board Policies

**Reported Deaths of Individuals Served**

MH: 5

IDD: 7

Respectfully Submitted,

Kelli Laos, Chief Operating Officer



## BOARD COMMUNICATION

**AGENDA ITEM**

Local Intellectual and Developmental Disability (LIDDA)/Aging & Disability Resource Center (ADRC) Report

**BOARD MEETING DATE**

April 25, 2024

**PREPARED BY**

Carolina Lasso, Chief Authority Officer

**DATE PREPARED**

April 17, 2024

**LIDDA March 2024 Summary:**

Texas Health and Human Services Commission (HHSC) Contract Accountability and Oversight (CAO) completed the fiscal year 2024 Quality Assurance Authority Review of Metrocare Services on March 11, 2024. Based on the results of the annual Quality Assurance review. The LIDDA qualifies for Formal Monitoring as both elements have been met:

- All four program areas (TxHmL, GR/CFC, HCS, and PASRR) scored 90% or above
- The overall score was 90% or above

Below are LIDDA 2024 scores by program:

Year	HCS	TxHml	GR	PASRR	QA
2019	85.9	80.47	98.7	90.46	90.07
2020	81.1	93.19	81.8	82.99	100
2021	91.8	99.51	81	87.24	98.42
2022	90.3	94.97	82.9	93.64	97.43
2023	89.9	87.72	87.4	93.62	98.52
2024	95.96	91.54	90.72	94.90	98.22

**IDD Planning/Network Advisory Committee**

The IDD PAC met on March 26, 2024 and I provided them with information on Cultural Humility Training Videos, Expectations and Roles of the Committee, Recruitment of PNAC Members and IDD Needs Assessment Review and recommendations for update.

## **ADRC March 2024 Summary:**

### **Outreach Activities Conducted: 9**

- MLK JR Library Outreach-2 visits
- Grand Prairie Library Outreach
- Prairie Creek Library Outreach
- Social Media Posts on Facebook & Instagram
- Accell Rehabilitation Center
- Hillcrest Of North Texas Skilled Nursing Facility
- Willowbend Skilled Nursing Facility
- Grand Prairie ISD Transition Fair

### **Respite Caregiver Assistance:**

The ADRC has teamed up with Metrocare's C&A program to utilize ADRC Respite funds. These funds are intended for caregivers who do not have access to or are ineligible for Respite funding from other sources. This partnership aims to provide \$1,000 to 35 families each, which can be utilized to cover respite services for a period of three months.

- Total allocated to Metrocare C&A: \$35,0000
- Total target caregivers: 35
- Total target hours: 1,855

### **Total Number of Calls Queued to the ADRC Call Center: 1,423**

- Calls directed from HHSC Toll-Free Number: **901**
- Types of Calls based on Queue Selected:

Queue Name	Total Queued
Benefits	361
Caregiver Assistance	265
Housing	71
Local Contact Agency	10
Long-Term Services & Supports	433
Voicemail	283

### **ADRC Noted Caller Priority Needs:**

- Medicaid Unwinding—there continues to be an ongoing surge of calls made to the ADRC. As individuals continue to be impacted by the unwinding and loss of Medicaid coverage, calls are being misdirected to the ADRC for assistance for application status updates, requests for in-home assessments, requests for expedited assistance for reinstatement of services- the ADRC cannot assist with these calls and must redirect back to 211 (HHSC), the Ombudsman (HHSC), and/or the Program Support Unit (HHSC).
- Carolina Lasso, Chief Authority Officer, organized a meeting with the Director of Region 3 to discuss challenges and barriers. However, ADRC questions and concerns remain unanswered. Steve Whiteside, Director of HHSC Region 3, will investigate further and follow up with possible solutions, TBD.

Respectfully submitted,

[carolina.lasso@metrocareservices.org](mailto:carolina.lasso@metrocareservices.org)

**149242**

**KPI 4: To ensure timely access to clinically indicated services, Metrocare will complete 40 DID (Determination of Intellectual Disability) evaluations per month.**

Monthly Performance: 47

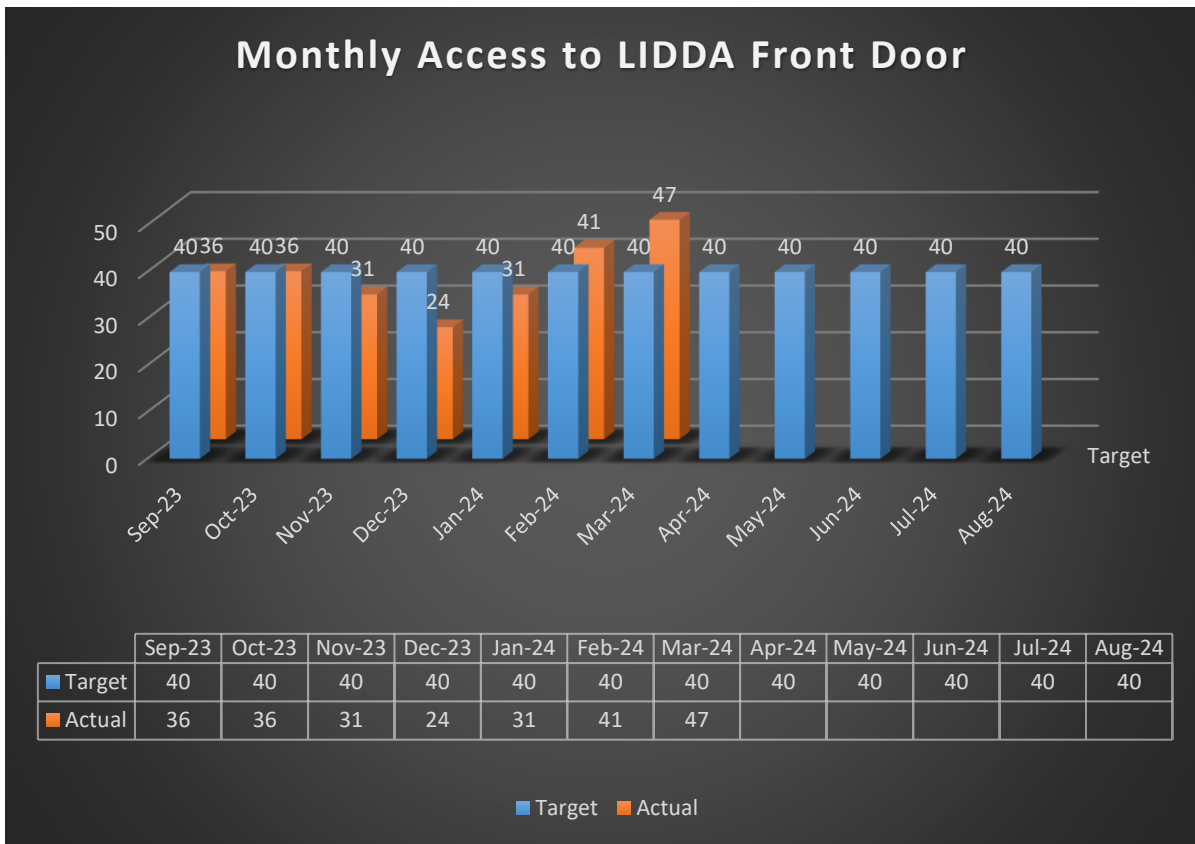
Goal: 40

Baseline: 31.75

Measurement Tool: EDU Report

Pillar: Quality Care

Aligned Objective: Access to Services



- Total number of evaluations **scheduled** between 3/01/24 and 3/30/2024: **70**
  - Includes cancellations, no shows, reschedules, and completed appointments.

**Plan:** The department is currently working with 2.5 FTE clinicians and 1.5 vacancies. EDU is working with HR to fill the positions. Full time clinicians complete 6 DIDs per week and PT 4 and are scheduled for 3-hour increments to capture assessment and psych services (feedback, scoring/interpretation, charting, and report



writing). EDU are also working on implementing a new scheduling system that will allow EDU to send automated emails and text messages, which we hope will help with cancellations and no shows.

**KPI 5: To advance the Center’s commitment to providing a robust service delivery model, Metrocare will complete 36,000 type A (face to face) Encounters per fiscal year for individuals served by the Local Intellectual and Developmental Disability Authority.**

Monthly Performance: 2,745A

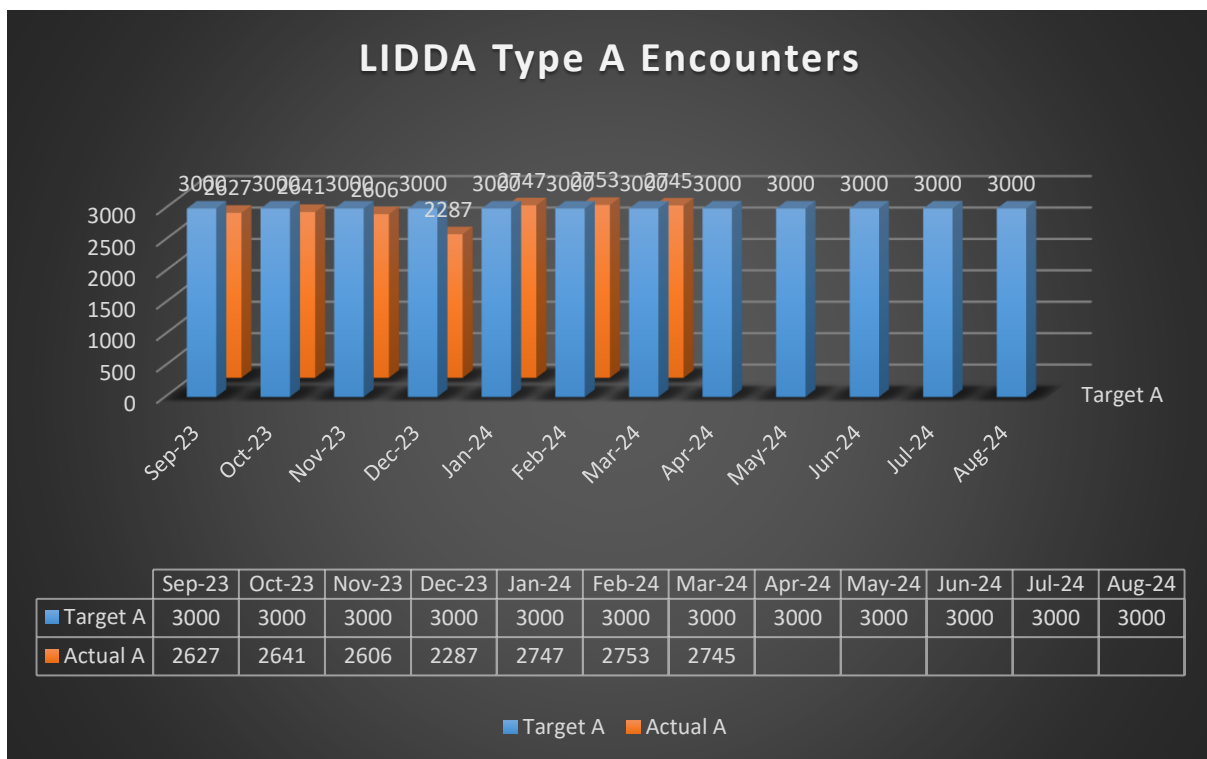
Goal: 36,000 A

Baseline: 29,519 A

Measurement Tool: Encounter Tool

Pillar: Quality Care

Aligned Objective: Client Improvement



**Plan:** LIDDA Program Managers are working with their HR recruiter to hire current vacancies. Service Coordinators who are not meeting performance measures currently have a performance improvement plan to address current issues.

# **CHIEF EXECUTIVE OFFICER REPORT**

## **“Service Presentation”**

**ACTION AGENDA  
MARCH 2024**



**BOARD COMMUNICATION**

<b>AGENDA ITEM</b> Progress on the FY24 Key Performance Indicators	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> John W. Burruss, M.D.; CEO	<b>DATE PREPARED</b> April 17, 2024

Notable since last board meeting:

- Dr. Chelsea Fiduccia, Director of the Cohen Military Family Clinic at Metrocare, was presented the Founders Award at the CVN Annual Meeting in Los Angeles on April 4. The highest award in the network, it is presented annually to the team member who “most faithfully demonstrates integrity, community and excellence.” Dr. Fiduccia has been with the clinic since shortly after its opening and took the leadership role when founding director Dr. Amy Williams moved on. This is a tremendous honor for Dr. Fiduccia and we are all very proud of her work at the Cohen Clinic at Metrocare.

Items for ongoing attention:

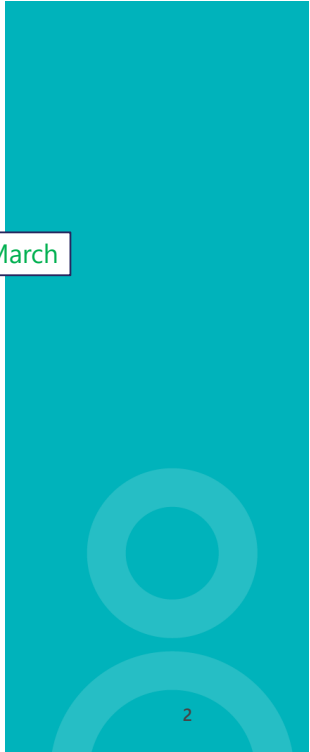
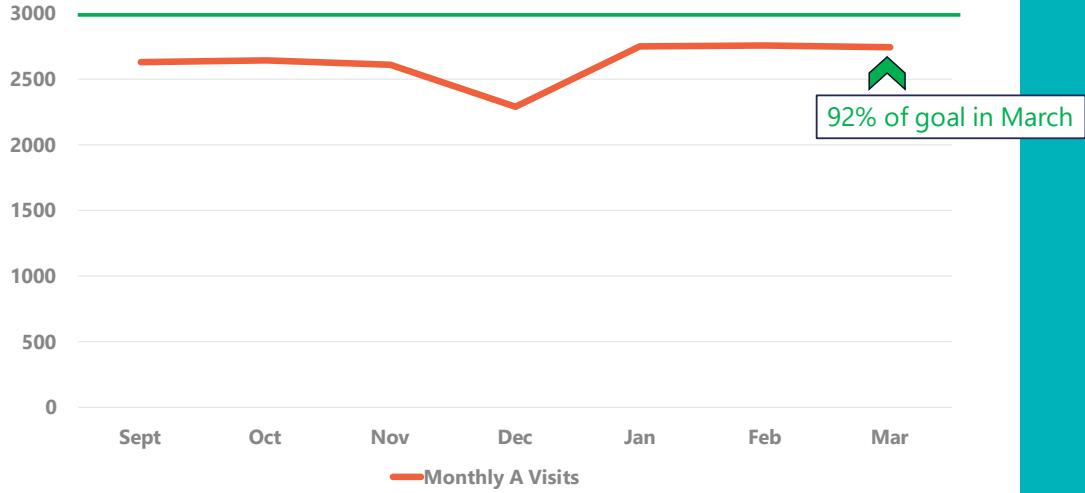
- Lancaster-Kiest (LK) campus re-imagining will proceed with selection of a General Contractor soon. The existing clinic building will be renovated and revitalized while the SNOP building will be razed and rebuilt, likely in a new location nearer to Lancaster Blvd. This may allow for alternate uses of the remaining land. Projected completion date is early 2026.
- Metrocare’s strategic vision includes the expansion of housing for individuals and families experiencing homelessness in Dallas County, particularly those in need of Permanent Supported Housing. Attention has turned to completing the three new DDP groups homes with a possibility of two additional homes supported by the Federal Home Loan Bank. The initial three are expected to be finished by late 2024 or early 2025.
- Metrocare has identified the need for a Children & Family Center in southeast Dallas County. The medical office building at 9209 Elam Road has been purchased to further this end. The property includes a substantial, undeveloped, residential lot which could be used for further housing expansion.
- Dallas College has entered into an agreement with Metrocare that will result in satellite locations at each of their seven campuses within 2-3 years. Parameters are in place to meter the expansion as awareness and demand grow. The first location on the Richland Campus opened during early February. The College would like Metrocare to enter an accelerated timeline to open sites at all campuses, but we will need to ensure that the sites are viable before moving too quickly.

## PROGRESS ON FY24 KEY PERFORMANCE INDICATORS

KPI Report a/o March 2024	Goal	Current Month (Mar - 2024)	YTD Progress	Status: Behind, Ahead, Or On track
2. Employee Turnover (trailing 12 months)	25% or less	1.57	19.00%	ahead
<b>Quality Care</b>				
10. LIDDA Type A Contacts per fiscal year (3,000 per month)	36,000	2745	18406 (88%)	behind
11. LIDDA DID evaluations per month	40	47	35.14 (88%)	behind
5. Alcohol misuse intervention for those who screen positive for unhealthy usage	≥83%	85.8%%	103.4% of goal	ahead
7. Reported hospital discharges receive f/up appointment	≥52%	57.2%%	55.20%	ahead
13. Housing median length of stay increased by 10%. Baseline 2,328 days	2,561 days	2459	2459 (96%)	on track
9. Clinical productivity benchmark	93%	94.1%	92.0%	on track
<b>Thriving Agency</b>				
1. Individuals served per month	20,500	20,026	19,690 (96%)	behind
4. Diagnostic interviews within 7 days of intake	91%	90.4%%	91.5%%	ahead
8. Increase individuals served in MH year over year	41684	1,837	33,228	behind
14. A/R over 60 days old	≤25%	54.00%	49.00%	behind
15. Maintain a 94% Net Collection Rate	≥94%	84.00%	84.00%	behind
12. Increase individuals housed year over year by 20%. Baseline 436	523	460	-27	behind
3. Hillside Capital Campaign	\$5M	0	\$1,013,846	behind
<b>Innovative Collaborator</b>				
6. Workforce Development - ACER Training	290	18	235	ahead

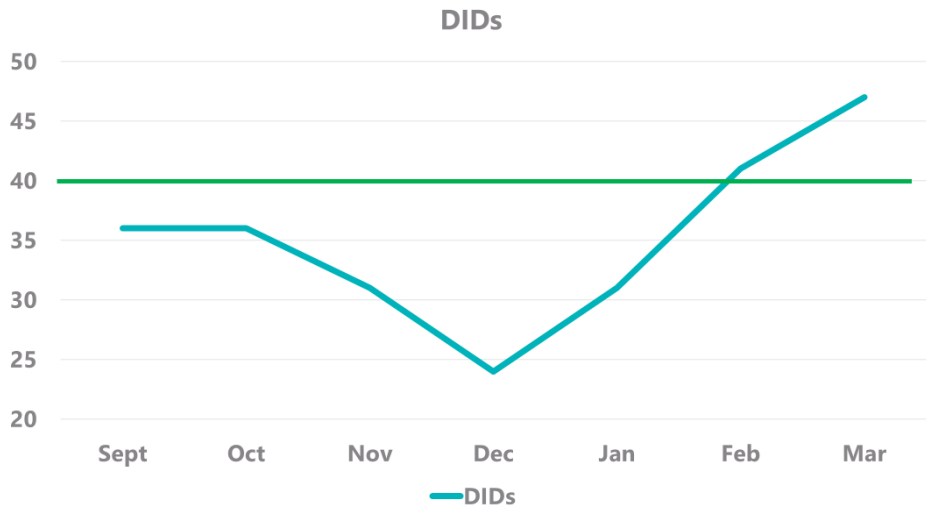
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# 10. LIDDA Type A Contacts FY2024



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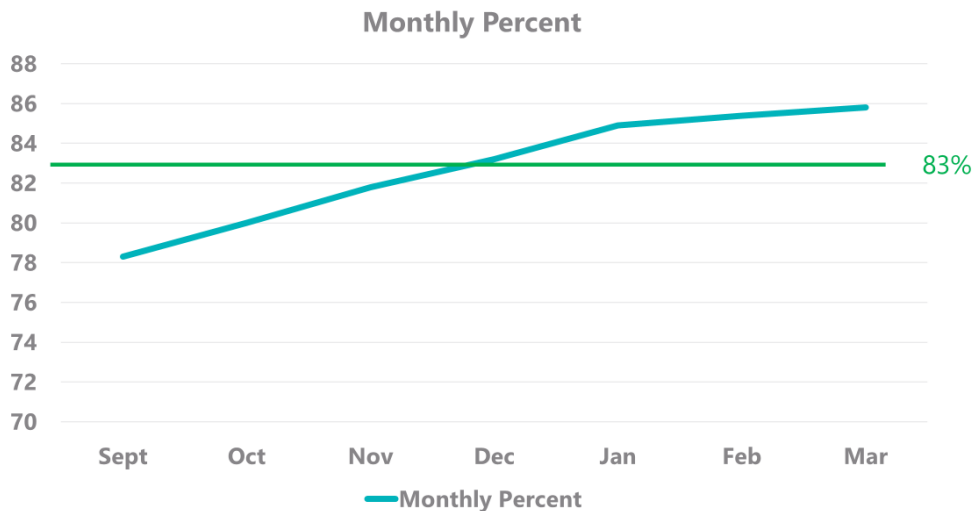
# 11. LIDDA DIDs



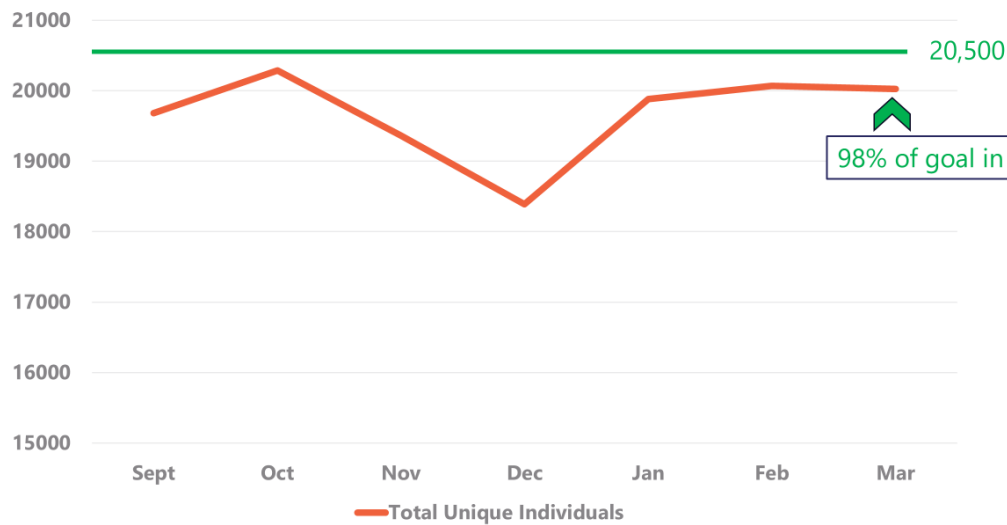
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# 5. Alcohol Misuse Intervention



# 1. Total Clients Seen Per Month



**149250**



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Management Discussion & Analysis (MDA)	<b>BOARD MEETING DATE</b> NA
<b>PREPARED BY</b> Lucas Wilson, Chief Financial Officer	<b>DATE PREPARED</b> March 20, 2024

### **Management Discussion & Analysis (MDA) for the period ended February 29, 2024**

**Please see the Statement of Activities, the Statement of Net Position the Full Year Forecast, Long Term Debt Statement & Investment Statement on the following pages for the Month of January (MTD) which is Year to Date (YTD) financial performance.**

#### **Statement of Activities:**

##### **Revenues:**

- Operating revenues in the month of February were \$22.3 million less than budget due to the timing of Charity Care Program revenues. Metrocare budgeted the funds to be received in the month of February. Metrocare received notification from HHSC that funds are expected to be released & received by April 1, 2024. The funds are just above \$25.0 million.
- Compared to 2023, operating revenues in the month of February decreased by \$491 thousand. Fee for Services and Directed Payment Program revenues were higher by \$945 thousand & \$745 thousand respectively while Contributions were lower by \$1.9 million.
- YTD revenues through February were \$23.8 million lower than expected less than budget due to the timing of Charity Care Program revenues. Fee for Services and Directed Payment Program revenues were higher than budget by \$295 thousand & \$324 thousand respectively. This is a positive trend that Metrocare continues to recognize.

##### **Expenses:**

- Operating expenses in the month of February were \$457 thousand higher than budget due to Benefits being higher than budget by \$491 thousand due to claims costs being higher than expected to close out the calendar year. Claim payments trend up during the 4<sup>th</sup> quarter of the calendar year due to an increase in elective services after deductibles are met. Because the plan is self-funded & based on actual claims, 4<sup>th</sup> quarter claims can pay throughout the first quarter of the calendar year. With the new calendar & plan year started, the savings in administrative fees with Cigna are expected to reflect on the financials in the coming months.
- Compared to 2023, operating expenses in the month of January increased by \$64 thousand. Salary expenses were higher than February 2023 due to an increased total of employees by \$386

**149251**



thousand. Although benefits expenses were higher than budget in February, they were lower than February 2023 by \$113 thousand.

- YTD expenses through February were \$4.5 million higher than expected due to Benefits & Contracted Services expenses being higher than budget by \$3.5 million & 1.03 million respectively.

### **Net Position:**

- Metrocare's net position in February was less favorable than budget by \$22.7 million & the net position is less favorable than budget for FY24 by \$28.4 million. This is due to the timing of Charity Care Program revenues.
- Based on the current forecast, however, Metrocare is expected to have another favorable year with expected increases in Charity Care and DPP revenues expected in the coming months.

### **Statement of Net Position:**

- At the end of January, Metrocare's Cash Assets were \$17.05 million which equates to 41.64 Days Cash on Hand (DCOH). The annual target for DCOH is >50 days. The increase in February primarily due to funds paid by both Dallas County and Parkland. Both partners released funds in the month of February.
- Net Receivables owed to Metrocare from Fee for Service Payors & Pharmacy Claims is \$9.4 million.
- Receivables From Other Governments owed to Metrocare is \$46.7 million made up of Directed Payment Program & Charity Care Program revenues.

### **Long Term Debt Statement:**

- Total outstanding long term is \$31.03 million. To date, a total of \$361 thousand of principal payments have been made. The breakdown of each long-term debt facility is included in the subsequent report.

### **Investment Statement:**

- Metrocare's opened 5 different investment accounts with Texas Capital Bank made up of US Treasury Bill facilities in a laddered investment strategy to maximize returns. The current state of the market favors short term fixed investments so none of the treasury bills are greater than a 12-month commitment. The breakdown of each investment is included in the subsequent report.

## FY24 KEY PERFORMANCE INDICATORS

- KPI 13: To sustain Metrocare's strong financial position, the Center will attain, at minimum, a 94% net collection rate for base claims.
  - Goal: 94% (Maintain goal from FY23)
  - Baseline: 85.00% (through February 2024)
  - Measurement Tool: RCM Report
  - **Pillar: Thriving Agency**
  - Aligned Objective: Exceeding Financial Goals
- KPI 14: To sustain Metrocare's strong financial position, the Center will ensure 60-day past due claims are equal to or less than 25% of the total A/R.
  - Goal: 25% (New Goal for FY24)
  - Baseline: 50.81% (as of January 2024)
  - Measurement Tool: Financial Reporting
  - **Pillar: Thriving Agency**
  - Aligned Objective: Exceeding Financial Goals

Respectfully submitted,

Lucas Wilson  
Chief Financial Officer

**Metrocare Services  
Statement of Activities**

**Year over Year Comparison**

	<b>Monthly Budget</b>	<b>Feb-24</b>	<b>Feb-23</b>	<b>YTD Budget</b>	<b>Fiscal 24</b>	<b>Fiscal 23</b>
<b>Operating Revenues</b>						
Fee for Services	2,990,437	3,469,917	2,524,775	18,202,977	18,498,040	15,149,495
DPP	1,180,359	1,504,540	759,517	7,082,153	7,406,447	3,797,587
Charity Care	23,000,000	-	-	23,000,000	-	-
Pharmacy	2,606,012	2,316,040	2,444,726	15,636,074	14,667,107	15,099,657
NTBHA	1,325,710	1,353,498	1,367,765	8,134,244	8,187,262	8,213,811
Grants	2,155,103	2,383,685	2,439,285	14,076,639	14,011,376	14,603,949
Contributions	113,333	10,292	1,993,408	705,000	201,714	3,402,586
<b>Total operating revenue</b>	<b>33,370,954</b>	<b>11,037,972</b>	<b>11,529,477</b>	<b>86,837,087</b>	<b>62,971,946</b>	<b>60,267,086</b>
<b>Operating Expenses</b>						
Salary	6,324,191	6,148,807	6,535,449	37,797,853	36,995,090	32,690,759
Fringe Benefits	831,456	1,323,221	1,209,845	5,007,894	8,508,993	8,203,573
Pharmaceutical costs	2,254,454	2,100,489	2,087,801	13,526,724	12,915,653	13,014,937
Contracted Services	1,136,533	1,254,244	1,188,170	6,959,261	7,996,707	7,347,939
Depreciation	322,533	206,535	337,973	1,935,195	1,726,302	2,054,186
Other expenses	961,796	1,255,566	865,264	5,795,436	7,457,563	6,171,613
<b>Total operating expenses</b>	<b>11,830,962</b>	<b>12,288,862</b>	<b>12,224,502</b>	<b>71,022,363</b>	<b>75,600,310</b>	<b>69,483,007</b>
<b>Sub-total Operations</b>	<b>21,539,992</b>	<b>(1,250,890)</b>	<b>(695,025)</b>	<b>15,814,724</b>	<b>(12,628,364)</b>	<b>(9,215,921)</b>
<b>Nonoperating Revenues (Expenses)</b>						
Other financing sources	681,838	37,045	5,121,145	4,111,770	6,590,362	5,455,444
Capital Campaign	500,000	367,668	5,200	1,000,000	1,772,903	1,707,091
Interest expenses	(54,167)	(65,362)	(112,270)	(325,000)	(716,174)	(787,339)
<b>Total nonoperating rev (exp)</b>	<b>1,127,671</b>	<b>339,351</b>	<b>5,014,075</b>	<b>4,786,770</b>	<b>7,647,090</b>	<b>6,375,196</b>
<b>Change in net assets</b>	<b>22,667,663</b>	<b>(911,539)</b>	<b>4,319,050</b>	<b>20,601,494</b>	<b>(4,981,274)</b>	<b>(2,840,725)</b>
<i>Contribution Margin less Capital Campaign</i>	<b>66.4%</b>	<b>-11.6%</b>	<b>37.4%</b>	<b>22.6%</b>	<b>-10.7%</b>	<b>-7.5%</b>
<i>Contribution Margin</i>	<b>67.9%</b>	<b>-8.3%</b>	<b>37.5%</b>	<b>23.7%</b>	<b>-7.9%</b>	<b>-4.7%</b>
<i>EBITDA</i>	<b>22,936,029</b>	<b>(770,366)</b>	<b>4,544,753</b>	<b>22,211,689</b>	<b>(3,971,146)</b>	<b>(1,573,877)</b>
<i>EBITDA/Revenue</i>	<b>68.7%</b>	<b>-7.0%</b>	<b>39.4%</b>	<b>25.6%</b>	<b>-6.3%</b>	<b>-2.6%</b>

## Metrocare Services Forecast Statement

	6 Month YTD	12 Month Forecast	12 Month Budget	Prior 12 Months
<b>Operating Revenues</b>				
Fee for Services	18,498,040	37,544,891	37,249,828	35,742,907
DPP	7,406,447	14,488,600	14,164,306	14,121,763
Charity Care	-	23,000,000	23,000,000	24,905,800
Pharmacy	14,667,107	30,303,181	31,272,148	31,767,808
NTBHA	8,187,262	16,465,494	16,412,476	16,514,257
Grants	14,011,376	27,951,401	28,016,664	28,269,552
Contributions	201,714	896,714	1,400,000	1,120,215
<b>Total operating revenue</b>	<b>62,971,946</b>	<b>150,650,280</b>	<b>151,515,422</b>	<b>152,442,302</b>
<b>Operating Expenses</b>				
Salary	36,995,090	77,173,717	77,976,479	70,721,378
Fringe Benefits	8,508,993	13,687,140	10,186,041	17,356,134
Pharmaceutical costs	12,915,653	26,442,377	27,053,448	28,623,097
Contracted Services	7,996,707	14,861,423	13,823,977	14,041,147
Depreciation	1,726,302	3,661,497	3,870,390	5,953,962
Other expenses	7,457,563	13,387,046	11,722,919	11,879,338
<b>Total operating expenses</b>	<b>75,600,310</b>	<b>149,213,201</b>	<b>144,633,254</b>	<b>148,575,056</b>
<b>Subtotal-Operations</b>	<b>(12,628,364)</b>	<b>1,437,079</b>	<b>6,882,167</b>	<b>3,867,246</b>
<b>Nonoperating Revenues (Expenses)</b>				
Nonoperating Revenues (Expenses)	7,647,090	15,513,109	12,652,797	9,947,726
<b>Total nonoperating rev (exp)</b>	<b>7,647,090</b>	<b>15,513,109</b>	<b>12,652,797</b>	<b>9,947,726</b>
<b>Change in net position</b>	<b>(4,981,274)</b>	<b>16,950,188</b>	<b>19,534,964</b>	<b>13,814,972</b>

**Metrocare Services**  
**Statement of Net Position**  
**2/29/2024**

	<b>Government-wide Total</b>	<b>Government-wide Prior Year-End</b>	<b>Change From Prior Year</b>
<b>Assets</b>			
Cash and Investments	123,674	3,901,880	(3,778,207)
Restricted Cash	16,933,634	20,860,608	(3,926,975)
Net Receivables	9,485,370	8,343,674	1,141,696
Receivables from other governments	46,720,394	41,659,194	5,061,199
Inventories	1,456,065	792,055	664,010
Prepaid items	810,228	858,187	(47,959)
Restricted Investments	156,128	156,128	-
Nondepreciable assets	27,199,400	9,773,012	17,426,388
Depreciable assets	31,514,482	30,416,810	1,097,672
Deferred outflows of resources	158,976	158,976	-
<b>Total Assets</b>	<b>134,558,351</b>	<b>116,920,526</b>	<b>17,637,825</b>
<b>Liabilities</b>			
Accounts payable	12,151,781	4,402,884	7,748,897
Accrued payroll, taxes, and benefits	3,186,679	3,132,832	53,846
Other current liabilities	2,534,534	1,154,635	1,379,899
Unearned revenues	4,226,369	1,887,503	2,338,866
Accrued compensated absences	4,472,134	4,472,134	-
Accrued workers compensation	386,988	266,701	120,287
Short Term Loans Payable	5,647,372	5,750,705	(103,333)
Long Term Loans Payable	37,417,181	25,289,872	12,127,309
Capital Leases Payable	11,308,972	12,355,644	(1,046,672)
Deferred inflows of resources	401,883	401,883	-
<b>Total Liabilities</b>	<b>81,733,892</b>	<b>59,114,793</b>	<b>22,619,099</b>
<b>Net Position</b>			
Invested in capital assets, net of related debt	15,649,329	9,149,245	6,500,084
Restricted for debt services	156,128	156,128	-
Restricted	16,933,634	20,860,608	(3,926,975)
Unrestricted	20,085,368	27,639,751	(7,554,383)
<b>Total net position</b>	<b>52,824,459</b>	<b>57,805,733</b>	<b>(4,981,274)</b>

Dallas Metrocare Services Debt Statement									
			Interest Rate	Maturity Date	Payment Frequency	31-Aug-23	Added Principle	Principal Payments	29-Feb-24
UMB Bank	Loan Payable-DPP	Operations related(1)	9.50%	3/31/2025	Annually	5,390,701	4,609,299	-	10,000,000
LISC	Loan Payable-Rawlins	Capital Related (1)	4.50%	7/17/2038	Monthly	6,125,000	-	168,011	5,956,989
Texas Security Bank	Loan Payable-Grand Prairie	Capital Related (2)	3.95%	10/23/2030	Quarterly	2,950,000	-	100,000	2,850,000
UMB Bank	Mortgage Loan-Bowser	Capital Related (3)	5.60%	8/1/2027	Monthly	2,432,000	-	74,667	2,357,333
UMB Bank	UMB Bowser Construction Loan	Capital Related (4)	5.60%	7/3/2027	Monthly	637,113	-	18,667	618,446
Texas Capital Bank	Texas Capital Bank	Capital Related (6)	4.63%	4/1/2030	Monthly/05/01/2026	13,500,000	-	-	13,500,000
						<u>31,034,814</u>	<u>4,609,299</u>	<u>361,345</u>	<u>35,282,768</u>

**INVESTMENT STATEMENT FEB 2024**

Account	Description	Investment Date	Maturity Date	Amount Invested	Current Price	APY	Gain/(Loss)
Board Reserve Account #3344	US TREASURY BILLS OID 07/11/2024 DUE 07/11/2024	10/27/2023	7/11/2024	833,010.75	846,715.19	5.40%	13,704.44
Board Reserve Account #3344	US TREASURY BILLS OID 04/25/2024 DUE 04/25/2024	10/27/2023	4/25/2024	832,888.41	847,108.22	5.40%	14,219.81
Board Reserve Account #3344	US TREASURY BILLS OID 10/31/2024 DUE 10/31/2024	10/27/2023	10/31/2024	842,754.50	844,738.48	4.35%	1,983.98
Board Reserve Account #3344	CASH & CASH ALTERNATIVES	-	-	440.37	440.37	-	-
				<b>2,509,094.03</b>	<b>2,539,002.26</b>	-	<b>29,908.23</b>

Account	Description	Investment Date	Maturity Date	Amount Invested	Current Price	APY	Gain/(Loss)
Housing Account #K995	US TREASURY BILLS OID 04/25/2024 DUE 04/25/2024	10/27/2023	4/25/2024	737,828.50	740,971.71	4.35%	3,143.21
Housing Account #K995	US TREASURY BILLS OID 02/27/2024 DUE 02/27/2024	2/28/2024	5/30/2024	741,000.85	741,176.92	4.35%	176.07
Housing Account #K995	CASH & CASH ALTERNATIVES	-	-	199.66	199.66	-	-
				<b>1,479,029.01</b>	<b>1,482,348.29</b>		<b>3,319.28</b>

Altshuler Center for Education	Communities Foundation of Texas	6/1/2015		100,000.00	159,563.97	5.55%	59,563.97
				<b>4,088,123.04</b>	<b>4,180,914.52</b>	-	<b>92,791.48</b>



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Management Discussion & Analysis (MDA)	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Lucas Wilson, Chief Financial Officer	<b>DATE PREPARED</b> April 17, 2024

### **Management Discussion & Analysis (MDA) for the period ended March 31, 2024**

**Please see the Statement of Activities, the Statement of Net Position the Full Year Forecast, Long Term Debt Statement & Investment Statement on the following pages for the Month of January (MTD) which is Year to Date (YTD) financial performance.**

#### **Statement of Activities:**

##### **Revenues:**

- Operating revenues in the month of March were \$681 thousand lower than budget due to Pharmacy & Grant revenues being lower than expected by \$295 thousand & \$248 thousand respectively.
- Operating revenues year to date through March were \$24.7 million lower than budget due to the timing of Charity Care Pool revenues being received. Metrocare expected to receive the funds in February. The funds were actually deposited on April 1, 2024 so they'll be recognized on the April financials. If the funds had been received in February or March, the year to date operating revenues would be \$283 thousand more than budget.
- Compared to 2023, operating revenues through the month of March were \$15.5 million lower in 2024. Charity Care Pool revenues were received in March in 2023. If the funds had been received in March 2024, the year over year revenues would have been \$9.4 million more than 2023 through the month of March.

##### **Expenses:**

- Operating expenses in the month of March were \$533 thousand lower than budget primarily due to Salary & Contracted Services expenses being lower than budget by \$652 thousand & \$653 thousand respectively. Other expenses were higher than budget by \$351 thousand.
- Operating expenses year to date through March were \$769 thousand lower than budget primarily due to Salary & Contracted Services expenses being lower than budget by \$1.4 million & \$4.0 million respectively, however, Benefits & Other expenses are higher than budget by \$3.7 million & \$2.0 million respectively. Upon review, more employees are participating in both the Metrocare medical plan and retirement plans respectively. Compared to the end of FY23, there

**149259**



are approximately 75 more enrollees in the medical plan equaling an increase of 150 covered lives. Management met with our insurance broker, Gallagher, to strategize cost savings in the upcoming plan year. Additional information will be presented with the FY25 budget in the coming months.

**Net Position:**

- Metrocare's net position in March was less favorable than budget by \$681 thousand & the net position is less favorable than budget for FY24 by \$24.7 million. This is due to the timing of Charity Care Pool revenues. As mentioned previously, the Charity Care Pool revenues were received in April. If these funds had been received in March, the net position for year to date March would have been favorable to budget by \$1.0 million & increased by \$10.3 million compared to year to date March 2023.
- Based on the current forecast, however, Metrocare is expected to have another favorable year with expected increases in Charity Care and DPP revenues expected in the coming months.

**Statement of Net Position:**

- At the end of January, Metrocare's Cash Assets were \$16.4 million which equates to 44.64 Days Cash on Hand (DCOH). The annual target for DCOH is >50 days. The increase in February primarily due to funds paid by both Dallas County and Parkland. Both partners released funds in the month of February.
- Net Receivables owed to Metrocare from Fee for Service Payors & Pharmacy Claims is \$8.5 million.
- Receivables From Other Governments owed to Metrocare is \$46.2 million made up of Directed Payment Program & Charity Care Program revenues.

**Long Term Debt Statement:**

- Total outstanding long term is \$31.03 million. To date, a total of \$361 thousand of principal payments have been made. The breakdown of each long-term debt facility is included in the subsequent report.

**Investment Statement:**

- Metrocare's opened 5 different investment accounts with Texas Capital Bank made up of US Treasury Bill facilities in a ladder investment strategy to maximize returns. The current state of the market favors short term fixed investments so none of the treasury bills are greater than a 12-month commitment. The breakdown of each investment is included in the subsequent report.

## FY24 KEY PERFORMANCE INDICATORS

- KPI 13: To sustain Metrocare's strong financial position, the Center will attain, at minimum, a 94% net collection rate for base claims.
  - Goal: 94% (Maintain goal from FY23)
  - Baseline: 84.86% (through March 2024)
  - Measurement Tool: RCM Report
  - **Pillar: Thriving Agency**
  - Aligned Objective: Exceeding Financial Goals
- KPI 14: To sustain Metrocare's strong financial position, the Center will ensure 60-day past due claims are equal to or less than 25% of the total A/R.
  - Goal: 25% (New Goal for FY24)
  - Baseline: 54% (as of March 2024)
  - Measurement Tool: Financial Reporting
  - **Pillar: Thriving Agency**
  - Aligned Objective: Exceeding Financial Goals

Respectfully submitted,

Lucas Wilson  
Chief Financial Officer

**Metrocare Services  
Statement of Activities**

**Year over Year Comparison**

	<b>Monthly Budget</b>	<b><u>Mar-24</u></b>	<b><u>Mar-23</u></b>	<b>YTD Budget</b>	<b><u>Fiscal 24</u></b>	<b><u>Fiscal 23</u></b>
<b>Operating Revenues</b>						
Fee for Services	3,144,277	3,157,941	3,770,373	21,347,255	21,656,265	18,919,869
DPP	1,180,359	1,180,381	759,517	8,262,512	8,262,670	5,316,622
Charity Care	-	-	17,185,604	23,000,000	-	17,185,604
Pharmacy	2,606,012	2,310,982	3,036,700	18,242,086	16,980,008	18,136,357
NTBHA	1,397,704	1,370,393	1,425,983	9,531,948	9,648,399	9,639,794
Grants	2,615,527	2,367,146	2,344,621	16,692,166	16,436,646	16,189,052
Contributions	123,333	(1,479)	(5,506)	828,333	203,456	3,397,080
<b>Total operating revenue</b>	<b>11,067,212</b>	<b>10,385,364</b>	<b>28,517,292</b>	<b>97,904,300</b>	<b>73,187,444</b>	<b>88,784,378</b>
<b>Operating Expenses</b>						
Salary	6,760,807	6,108,761	5,941,525	44,558,660	43,105,240	38,632,283
Fringe Benefits	867,393	875,677	1,762,061	5,875,287	9,614,478	9,965,634
Pharmaceutical costs	2,254,454	2,101,263	2,620,440	15,781,178	15,016,917	15,635,377
Contracted Services	1,146,648	492,695	2,408,211	8,105,909	4,061,853	9,756,151
Depreciation	322,533	206,275	336,637	2,257,728	1,932,578	2,390,823
Other expenses	994,835	1,346,834	1,033,850	6,790,271	8,868,053	7,205,462
<b>Total operating expenses</b>	<b>12,346,670</b>	<b>11,131,505</b>	<b>14,102,724</b>	<b>83,369,033</b>	<b>82,599,118</b>	<b>83,585,731</b>
<b>Sub-total Operations</b>	<b>(1,279,458)</b>	<b>(746,142)</b>	<b>14,414,568</b>	<b>14,535,267</b>	<b>(9,411,674)</b>	<b>5,198,647</b>
<b>Nonoperating Revenues (Expenses)</b>						
Other financing sources	689,338	(2,286,633)	1,096,295	4,801,108	4,308,068	6,551,738
Capital Campaign	1,000,000	378,499	15,000	2,000,000	2,151,402	1,722,091
Interest expenses	(54,167)	(105,376)	(238,550)	(379,167)	(1,627,563)	(1,025,889)
<b>Total nonoperating rev (exp)</b>	<b>1,635,171</b>	<b>(2,013,510)</b>	<b>872,744</b>	<b>6,421,941</b>	<b>4,831,907</b>	<b>7,247,941</b>
<b>Change in net assets</b>	<b>355,714</b>	<b>(2,759,652)</b>	<b>15,287,312</b>	<b>20,957,208</b>	<b>(4,579,768)</b>	<b>12,446,587</b>
<i>Contribution Margin less Capital Campaign</i>	<i>-5.8%</i>	<i>-30.2%</i>	<i>53.6%</i>	<i>19.4%</i>	<i>-9.2%</i>	<i>12.1%</i>
<i>Contribution Margin</i>	<i>3.2%</i>	<i>-26.6%</i>	<i>53.6%</i>	<i>21.4%</i>	<i>-6.3%</i>	<i>14.0%</i>
<i>EBITDA</i>	<i>624,079</i>	<i>(2,658,753)</i>	<i>15,385,399</i>	<i>22,835,769</i>	<i>(4,274,753)</i>	<i>13,811,521</i>
<i>EBITDA/Revenue</i>	<i>5.6%</i>	<i>-25.6%</i>	<i>54.0%</i>	<i>23.3%</i>	<i>-5.8%</i>	<i>15.6%</i>

## Metrocare Services Forecast Statement

	7 Month YTD	12 Month Forecast	12 Month Budget	Prior 12 Months
<b>Operating Revenues</b>				
Fee for Services	21,656,265	37,559,400	37,249,828	35,742,907
DPP	8,262,670	14,164,464	14,164,306	14,121,763
Charity Care	-	23,000,000	23,000,000	24,905,800
Pharmacy	16,980,008	30,010,096	31,272,148	31,767,808
NTBHA	9,648,399	16,528,927	16,412,476	16,514,257
Grants	16,436,646	27,770,526	28,016,664	28,269,552
Contributions	203,456	775,223	1,400,000	1,120,215
<b>Total operating revenue</b>	<b>73,187,444</b>	<b>149,808,636</b>	<b>151,515,422</b>	<b>152,442,302</b>
<b>Operating Expenses</b>				
Salary	43,105,240	76,544,155	77,976,479	70,721,378
Fringe Benefits	9,614,478	13,904,135	10,186,041	17,356,134
Pharmaceutical costs	15,016,917	26,289,187	27,053,448	28,623,097
Contracted Services	4,061,853	9,779,921	13,823,977	14,041,147
Depreciation	1,932,578	3,545,240	3,870,390	5,953,962
Other expenses	8,868,053	13,813,095	11,722,919	11,879,338
<b>Total operating expenses</b>	<b>82,599,118</b>	<b>143,875,733</b>	<b>144,633,254</b>	<b>148,575,056</b>
<b>Subtotal-Operations</b>	<b>(9,411,674)</b>	<b>5,932,903</b>	<b>6,882,167</b>	<b>3,867,246</b>
<b>Nonoperating Revenues (Expenses)</b>				
Nonoperating Revenues (Expenses)	4,831,907	11,062,763	12,652,797	9,947,726
<b>Total nonoperating rev (exp)</b>	<b>4,831,907</b>	<b>11,062,763</b>	<b>12,652,797</b>	<b>9,947,726</b>
<b>Change in net position</b>	<b>(4,579,768)</b>	<b>16,995,666</b>	<b>19,534,964</b>	<b>13,814,972</b>

**Metrocare Services**  
**Statement of Net Position**  
**3/31/2024**

	<b>Government-wide Total</b>	<b>Government-wide Prior Year-End</b>	<b>Change From Prior Year</b>
<b>Assets</b>			
Cash and Investments	7,751,346	3,901,880	3,849,466
Restricted Cash	8,686,748	20,860,608	(12,173,860)
Net Receivables	8,525,956	8,343,674	182,282
Receivables from other governments	46,292,734	41,659,194	4,633,540
Inventories	2,075,922	792,055	1,283,867
Prepaid items	838,545	858,187	(19,642)
Restricted Investments	156,128	156,128	-
Nondepreciable assets	27,431,123	9,773,012	17,658,112
Depreciable assets	31,308,390	30,416,810	891,579
Deferred outflows of resources	158,976	158,976	-
<b>Total Assets</b>	<b>133,225,869</b>	<b>116,920,526</b>	<b>16,305,343</b>
<b>Liabilities</b>			
Accounts payable	10,344,518	4,402,884	5,941,634
Accrued payroll, taxes, and benefits	3,536,650	3,132,832	403,818
Other current liabilities	2,944,068	1,154,635	1,789,434
Unearned revenues	4,835,418	1,887,503	2,947,915
Accrued compensated absences	4,472,134	4,472,134	-
Accrued workers compensation	410,658	266,701	143,956
Short Term Loans Payable	5,570,705	5,750,705	(180,000)
Long Term Loans Payable	40,763,912	25,289,872	15,474,040
Capital Leases Payable	6,719,959	12,355,644	(5,635,685)
Deferred inflows of resources	401,883	401,883	-
<b>Total Liabilities</b>	<b>79,999,904</b>	<b>59,114,793</b>	<b>20,885,111</b>
<b>Net Position</b>			
Invested in capital assets, net of related debt	12,404,896	9,149,245	3,255,651
Restricted for debt services	156,128	156,128	-
Restricted	8,686,748	20,860,608	(12,173,860)
Unrestricted	31,978,193	27,639,751	4,338,442
<b>Total net position</b>	<b>53,225,965</b>	<b>57,805,733</b>	<b>(4,579,768)</b>

Dallas Metrocare Services Debt Statement									
			Interest Rate	Maturity Date	Payment Frequency	31-Aug-23	Added Principle	Principal Payments	31-Mar-24
UMB Bank	Loan Payable-DPP	Operations related(1)	9.50%	3/31/2025	Annually	5,390,701	4,609,299	10,000,000	-
LISC	Loan Payable-Rawlins	Capital Related (1)	4.50%	7/17/2038	Monthly	6,125,000	-	168,011	5,956,989
Texas Security Bank	Loan Payable-Grand Prairie	Capital Related (2)	3.95%	10/23/2030	Quarterly	2,950,000	-	100,000	2,850,000
UMB Bank	Mortgage Loan-Bowser	Capital Related (3)	5.60%	8/1/2027	Monthly	2,432,000	-	85,333	2,346,667
UMB Bank	UMB Bowser Construction Loan	Capital Related (4)	5.60%	7/3/2027	Monthly	637,113	-	21,333	615,780
Texas Capital Bank	Texas Capital Bank	Capital Related (6)	4.63%	4/1/2030	Monthly/05/01/2026	13,500,000	-	-	13,500,000
						<u>31,034,814</u>	<u>4,609,299</u>	<u>10,374,678</u>	<u>25,269,435</u>

**INVESTMENT STATEMENT FEB 2024**

<b>Account</b>	<b>Description</b>	<b>Investment Date</b>	<b>Maturity Date</b>	<b>Amount Invested</b>	<b>Current Price</b>	<b>APY</b>	<b>Gain/(Loss)</b>
Board Reserve Account #3344	US TREASURY BILLS OID 07/11/2024 DUE 07/11/2024	10/27/2023	7/11/2024	833,010.75	850,546.91	5.40%	17,536.16
Board Reserve Account #3344	US TREASURY BILLS OID 04/25/2024 DUE 04/25/2024	10/27/2023	4/25/2024	832,888.41	851,011.00	5.40%	18,122.59
Board Reserve Account #3344	US TREASURY BILLS OID 10/31/2024 DUE 10/31/2024	10/27/2023	10/31/2024	842,754.50	848,418.02	4.35%	5,663.52
Board Reserve Account #3344	CASH & CASH ALTERNATIVES	-	-	440.40	440.40	-	-
				<b>2,509,094.06</b>	<b>2,550,416.33</b>	<b>-</b>	<b>41,322.27</b>

<b>Account</b>	<b>Description</b>	<b>Investment Date</b>	<b>Maturity Date</b>	<b>Amount Invested</b>	<b>Current Price</b>	<b>APY</b>	<b>Gain/(Loss)</b>
Housing Account #K995	US TREASURY BILLS OID 04/25/2024 DUE 04/25/2024	10/27/2023	4/25/2024	737,828.50	744,385.50	4.35%	6,557.00
Housing Account #K995	US TREASURY BILLS OID 02/27/2024 DUE 02/27/2024	2/28/2024	5/30/2024	741,000.85	744,526.38	4.35%	3,525.53
Housing Account #K995	CASH & CASH ALTERNATIVES	-	-	199.67	199.67	-	-
				<b>1,479,029.02</b>	<b>1,489,111.55</b>		<b>10,082.53</b>

Altshuler Center for Education	Communities Foundation of Texas	6/1/2015		100,000.00	159,563.97	5.55%	59,563.97
				<b>4,088,123.08</b>	<b>4,199,091.85</b>	<b>-</b>	<b>110,968.77</b>



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Facilities Planning & Construction Updates	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Kevin J. Boyd – Chief Facilities Planning & Construction Officer	<b>DATE PREPARED</b> April 17, 2024

### Capital Projects

#### Hillside Campus

Site – work continues for storm drainage improvements.

Structure – Structural steel for the Clinic is 80% complete. Structural concrete for Client Services is 80% complete.

Building Services – rough in work continues for plumbing, electrical, and gas.

Retaining wall – Work on the wall continues. Currently, the wall is 95% complete.

Westmoreland Improvements – work began on the hooded left turn.

MWBE/SBE Contracting – Please see included report.

#### LK-SNOP Campus

Design Phase – KAI continues working on the LK-SNOP design. The current schedule has design wrapping up September 20, 2024.

General Contractor - We are currently seeking qualifications for a general contractor, with construction expected to start October 2024 and estimated to be complete December 2025.

### Facility Operations

All other operations continued as planned.

Respectfully submitted,

Kevin J. Boyd

[Kevin.boyd@metrocareservices.org](mailto:Kevin.boyd@metrocareservices.org)









## BOARD COMMUNICATION

<b>AGENDA ITEM</b>	<b>BOARD MEETING DATE</b>
Housing and Homeless Services Report	April 25, 2024
<b>PREPARED BY</b>	<b>DATE PREPARED</b>
Ikenna Mogbo, Chief Housing Officer	April 17, 2024

### Report for Housing & Homeless Services Division – March 2024

#### Homeless Services:

- The Projects for Assistance in Transition from Homelessness (PATH) team is attempting to hire two Outreach Case Managers for the new funding we recently received.

#### Supportive Housing:

- The Unsheltered Housing grant is now up to 15 program participants. We have staffing in place for at least 35 more and are ready to receive referrals for our Housing ACT Team from collaborative partners. Our staff will be participating in a Housing ACT Team training with the Meadows Foundation in late April.
- The Safe Haven grant closed out the grant year. We continue to seek alternative sources of funding since HUD will not provide cost of living adjustments for this grant. The just ended grant year had an approximate shortfall of \$60,000 in funding. On a positive note, we were able to negotiate no rent increase for the new grant cycle.
- The Leasing grant is dependent on Housing Forward for referrals for potential program participants, through the Community Access System (CAS). Unfortunately, due to Housing Forward's focus on ramping up the encampment decommissioning related to the Unsheltered Housing grant, the referrals for this grant had slowed considerably. After extensive communication with Housing Forward, we agreed to place some of the higher acuity unsheltered homeless in this program in the future. We should start to see this pipeline begin to flow in April.

#### Housing Development/Acquisition:

- The Rawlins Chateau property was visited by the new CEO of the Local Initiatives Support Corporation (LISC), which provided the mortgage financing for the purchase. The CEO was very impressed with the renovations and said he looks forward to doing new projects with us in the future. We continue to make progress on renovations of the formerly occupied units. The month ended with 24 units completed, 9 units at various stages of renovation, and 1 still occupied. We are also in the process of seeking bids for the renovation of a two-story storage building in the parking lot. The plan is to create space for onsite behavioral services and an apartment for a safety officer.
- At the Bowser property we are still fully occupied and transitioning the property management contract to Perry Guest.

Respectfully submitted,

Ikenna.mogbo@metrocareservcies.org

**FY 2024 KEY PERFORMANCE INDICATORS**  
**March 2024**

**KPI 13: To grow the mission of the Center and to meet community need, Metrocare will increase the total number of unsheltered individuals placed into housing by 20% year over year.**

Monthly Performance: 460 individuals

Goal: 523 individuals

Baseline: 436 individuals

Measurement Tool: Housing Report

Pillar: Thriving Agency

*Aligned Objective: Grow the Mission*

**KPI 6: To grow the mission of the Center and meet community need, Metrocare will increase the agency program participants housing stability rate by increasing the median length of stay for individuals in supportive housing before transitioning to other housing options or exiting the program by 10% year over year.**

Monthly Performance: 2459 days

Goal: 2561 days

Baseline: 2328 days

Measurement Tool: Housing Report

Pillar: Quality Care

*Aligned Objective: Client Improvement*



## BOARD COMMUNICATION

<b>AGENDA ITEM</b> Strategic Initiatives Report	<b>BOARD MEETING DATE</b> April 25, 2024
<b>PREPARED BY</b> Tate Ringer, Chief Strategy Officer	<b>DATE PREPARED</b> April 16, 2024

***Strategic Initiatives' vision is to create a grounded and thriving organization; to drive effective organizational strategy; to generate sustainable revenue; to support a culture of caring, responsive employees through clear, consistent communication; and ultimately, to build Metrocare as a community change maker.***

### **KPIs**

**Innovative Collaborator:** To ensure best in class facilities while sustaining the Center's strong financial position, Metrocare will receive \$5M commitment for the Hillside Capital Campaign in FY24. **Status: \$1,030,274.57**

### **FY24 Benchmarks**

- Increase donations by 20% (\$285,484) Year-to-Year. Baseline: \$215,404. **Status: \$65,975**
- Educate and drive awareness of Metrocare throughout the community at 175 events reaching 10,000 people. **Status: 108 Events reaching 6,121 people (+37 events from this time last year)**

### **Strategic Initiatives Departmental Activities for the month of March:**

#### **CULTURE CHAMPIONS:**

- Metrocare's Chief Diversity Officer participated on a panel entitled, "*The Impact of Institutional Racism on Mental Health*," hosted by the city of Dallas' Office of Equity & Inclusion; Metrocare was an event sponsor. The event was held at the African American Museum.

#### **PHILANTHROPY:**

- **Submitted:**
  - **\$5,250,000 state funds and \$5,250,000 match funds** (\$10,500,000 total) – **HHSC Construction Grants for Mental Health Facilities**, to develop a 30-unit permanent supportive housing property for mothers with serious mental illness (SMI) raising minor children in Dallas County. The project aims to include comprehensive support services, including access to mental health care.
  - **\$2,000,000 – SAMHSA Treatment Drug Courts** to implement Metrocare's Treatment & Recovery Drug Court Program for adults in Dallas County, with co-occurring mental health and substance use disorders involved in the criminal justice system.

**149272**

- **\$1,799,904 – HRSA Transition for Youth with Autism and/or Epilepsy Demonstration Projects, to implement the Family Autism Wellness Center at Metrocare**, for youth and young adults in Dallas County aged 13 to 26 with Autism Spectrum Disorder (ASD) and their families.
- **\$168,000 – Lyda Hill Philanthropies’ Nonprofit Empowerment Fund** to enhance Metrocare’s Supplier Diversity initiative.
- Hosted a tour of Hillside for The Dallas Foundation leadership team and a donor representing the PKW Fund at The Dallas Foundation.
- Attended the Crystal Charity Ball check presentation; Metrocare received the remaining funds owed (\$376,810) as a FY23 Beneficiary.
- Hosted United Way of Metropolitan Dallas for grant mid-year site visit at Lancaster/Kiest; funding supports Metrocare’s Care Coordination Services.
- Conducted financial desk monitoring visit with Texas Veterans + Families Alliance collaborative partner, The Brave Fight.
- Conducted a direct mail lapsed donor campaign to engage 148 past donors. To date, two donors have responded and given a total of \$200.
- Held a vendor session, in partnership with Dallas County’s Small Business Enterprise division, for local contractors to raise awareness of business opportunities with Metrocare, as part of our Supplier Diversity initiative. More than 40 individuals attended.

*VOLUNTEER ENGAGEMENT*

- Five (5) employees from Abbott Laboratories donated a bookshelf and over 200 children’s books collected during a book drive to the Cohen Clinic at Metrocare.

*COMMUNITY AND PARTNERSHIP MEETINGS:*

**March: 17 Events reaching 1,017 including but not limited to:**

- Rose of Sharon Baptist Church
- Neema Gospel Church
- Federal Reserve Bank Employee Lunch & Learn Event
- Barack Obama Male Leadership Academy
- 2<sup>nd</sup> Annual Carrollton Health & Safety Fair
- New Legacy Community Church
- Concorde Career College Mental Health Presentation Event

*LEGISLATION, MARKETING and COMMUNICATIONS:*

- Produced social media video campaign featuring Metrocare employees for National Autism Awareness Month (April)
- Produced, printed, and received FY23 Annual Report.
- Created Hillside Campaign one-page flyer and dedicated webpage.
- Implemented four-part advertising campaign with Dallas Morning News digital edition. Ads include mental health, IDD/cultural humility, housing crisis, and Capital Campaign and will run four consecutive Tuesday in April and May.

## Upcoming Icon Days - May

Mental Health Awareness Month - May

Asian American & Pacific Islander Heritage Month – May

SAMHSA's National Prevention Week - second week of May

Children's Mental Health Awareness Day – May 7



I CAN'T  
TALK ABOUT  
MENTAL HEALTH

Last year, Metrocare helped 11,419 children and teens and 29,543 adults with their mental health challenges.

Help provide your neighbors with better access to mental healthcare [here](https://metrocareservices.org).

[metrocareservices.org](https://metrocareservices.org)

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Find yourself here




Respectfully submitted,

Tate Ringer

[Tate.ringer@metrocareservices.org](mailto:Tate.ringer@metrocareservices.org)

Philanthropy Grant Report as of March 31, 2024



<div style="text-align: center;">  </div>							
FY24 Award Total			\$ 16,543,008.20				
Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization	
1	HHSC - ACER PRSP (Psychiatric Residents Stipend Program) - RU 500	Program Support: <b>ACER</b>	\$ 300,000	Year 1 of 1	Jamaica Chapple	84%	
Summary of Grant			Notations - Changes Since Last Report				
<p>The educational purpose of this program is to provide psychiatric residents with the instruction and experience necessary to acquire skills and proficiency in the evaluation and care of patients with chronic and persistent mental illness who are receiving services in a community mental health setting. Resident skill development encompasses learned methods in assessment, diagnostic evaluation, treatment planning, and quality psychiatric care. This is a one-year reimbursement grant totaling \$300,000. <b>Grant term: 9/1/2023 – 8/31/2024</b></p>			<p>As of March 31, 2024, the grant program has supported 31 psychiatric residents. Grant activities for the month of March included:</p> <ol style="list-style-type: none"> <li>1) assessing patients for possible admission to the state hospitals;</li> <li>2) performing psychiatric interviews and diagnostic evaluation;</li> <li>3) collaborating with other mental health professionals in a multidisciplinary setting;</li> <li>4) developing appropriate treatment plans in conjunction with the clinical team;</li> <li>5) providing psychiatric care to patients; and treating serious co-morbid medical conditions in patients in the community mental health setting.</li> </ol>				
Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization	
2	UnitedHealthcare - RU 676	Program Support: <b>C&amp;A</b>	\$ 65,000	Year 2 of 2	Regina Walker	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>This grant supports one full-time Clinical Case Manager to implement its EMPOWER (Educating Minds to Promote Ownership and Wellness in Everyday Routines) program at Nova Academy. The EMPOWER program at Metrocare aims to educate youth and teachers at Nova Academy to gain ownership in mental health wellness with access to school-based intervention and resources. This is a two-year award totaling \$129,045. <b>Grant term: 1/1/2023 - 12/31/2024</b></p>			<p>The EMPOWER program is currently serving at two Duncanville ISD elementary school campuses (Hastings Elementary/Merrifield Elementary), an alternative school campus (Summit Education Center with Duncanville ISD), one Richardson ISD elementary school campus (Audelia Creek) and one Richardson ISD middle school campus (Liberty). Richardson ISD has expressed interest in expanding the EMPOWER program throughout the district. The EMPOWER program continues to support Nova Academy students and faculty at Harmony Science Academy High School Dallas and is currently expanding in the both the elementary and middle school campuses. The EMPOWER program will launch in April 2024, at Lancaster ISD. The EMPOWER has one pending Memorandum of Understanding with DeSoto ISD, and one executed Memorandum of Understanding with Irving ISD. A total of four Youth School Based Clinical Case Manager IIs were hired. One Youth School Based Clinical Case Manager II position requisition was posted and we are currently interviewing.</p>				



Philanthropy Grant Report as of March 31, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
3	SAMHSA - Children's Mental Health Initiative - RU 422	Program Support: <b>C&amp;A</b>	\$ 999,324	Year 1 of 4	Justin Bayles	15%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Healthy Transitions Program is a System of Care that focuses on preparing Dallas County transitional age youth (ages 15-21) with or at risk of Serious Emotional Disturbances (SED) and/or Serious Mental Illness (SMI) for a healthy transition to adulthood. This is a four-year award totaling \$3,374,569. <b>Grant term: 9/30/2023 - 9/29/2027</b></p>			<p><b>Grant Management:</b> We met with the Grant Program Officer to discuss reporting questions and reviewed program status. The continuation application is pending approval. March 31st marked the end of the second quarter and quarter 2 data will be submitted for review in April. Reporting: The Project Manager has manually tracked reports in the absence of a Project Evaluator. As this is the first month of data to report on, we have identified existing shortcomings in current modes of tracking and made corrections to ensure all data are properly accounted for.</p> <p><b>Personnel:</b> In March, two dual clinical case managers completed New Employee Orientation, and a Lead Family Coordinator applicant began the hiring process. HR approved an existing Metrocare Program Evaluator to be split 50/50, beginning in April. The psychiatrist and therapist positions remain vacant and we are interviewing candidates. The two remaining dual clinical case manager roles have been opened and we are interviewing candidates. In the absence of a dedicated program therapist, the program has begun to utilize a floating therapist to provide services in the interim.</p> <p><b>Budget Utilization:</b> The program has unobligated 35% funds as positions are actively being filled and services began in March. A plan is in place to increase allocated funds for marketing and travel for the SAMHSA conference. If funds continue to be unobligated, the program will request carryover into year 2.</p> <p><b>Services:</b> Since beginning service provision March 1st, 23 clients have been referred to the program, seven of whom are now enrolled and being provided services.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
4	Metro Dallas Homeless Alliance, Dallas' R.E.A.L Time Rapid Rehousing Initiative - RU 343	Program Support: <b>Care Coordination</b>	\$ 500,000	Year 2 of 2	Elda Hudson	97%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding supports the development of a Community Integration Pilot in conjunction with Housing Forward. This two-year award totals \$1,000,000. <b>Grant term: 7/15/2022 - 9/30/2024</b></p>			<p>In the month of March, 15 new client referrals received. Referrals from Housing forward have not been consistent despite meeting biweekly with Housing Forward staff. Programmatic staff have recommended to Housing Forward staff that their process for screening referrals is too stringent and needs to be loosened. Programmatic staff have offered to sit with Housing Forward staff to help develop new screening process that will allow for an influx of referrals.</p>				

Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
5	United Way of Metro Dallas - Care Coordination - RU 353	Program Support: <b>Care Coordination</b>	\$ 185,000	Year 2 of 3	Elda Hudson	105%	
Summary of Grant			Notations - Changes Since Last Report				
Three-year award totaling \$550,000 (\$185,000 annually) to support care coordination. <b>Grant term: 7/1/2022 - 6/30/2025</b>			In the month of March, we served 43 new unique individuals bringing the total census for year 2 to 499. This month, programmatic staff had the opportunity to present to United Way staff and were able to share successes, including being on track to meet and exceed all current measures. Staff were also able to share two client success stories.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
6	Cohen Veterans Network - RU 590	Operational Support: <b>Cohen Clinic</b>	\$ 2,816,812	Year 8 of 9	Chelsea Fiduccia	91%	
Summary of Grant			Notations - Changes Since Last Report				
For the Steven A. Cohen Military Family Clinic at Metrocare to provide mental health services to post-9/11 veterans, active-duty service members, and their family members. This is a \$12.4 million commitment. <b>Grant term: 5/1/2016 - 4/30/2025</b>			Through March (month 11), the clinic initiated 652 episodes of care (89% on pace toward goal of 800) and 5,818 clinical hours (79% on pace toward goal of 8,000). We filled our last clinical vacancy in mid-March, and we anticipate a full-time unlicensed clinician starting in mid-April. We have already seen access gains and expect continued improvements as these new staff build their caseloads. As one example, median time from first call to initial clinical assessment was 21 days in March (vs. 29 in February), and 71% of these assessments occurred within 4 weeks from their first call (vs. 56% in February). In-person clinical services comprised 15% of total services. The clinic served 302 unique individuals this month.				

Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
7	HHSC TV+FA North Texas Collaborative - RU 597	Operational Support: <b>Cohen Clinic</b>	\$ 1,190,881	Year 1 of 2	John Montoya	80%	
Summary of Grant			Notations - Changes Since Last Report				
Supports the Phase VI of the North Texas Veterans & Families Collaborative program. This is a collaborative effort comprised of the Cohen Clinic, Equest, The Headstrong Project, The Brave Fight, and Meadows Mental Health Policy Institute. This is a two-year reimbursement award totaling \$4,763,524 (state award and match). <b>Grant term: 9/1/2023 - 8/31/2025</b>			For the first quarter of grant fiscal year 2024 (Dec 2023 to Feb 2024), the collaborative served 684 unduplicated participants (156% of the quarter 2 goal of 440). Of those who completed treatment, 59% experienced improvement in depression symptoms, 28% experienced improvement in Post-traumatic Stress Disorder (PTSD) symptoms, and 66% experienced improvement in anxiety symptoms. Expenditures are tracking well for all external partners. The collaborative's expenditures are on track to fully expend grant funds.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
8	Town of Addison - RU 590	Program Support: <b>Cohen Clinic</b>	\$ 2,500	Year 1 of 1	Chelsea Fiduccia	100%	
Summary of Grant			Notations - Changes Since Last Report				
The Cohen Clinic was granted our fourth award from the Town of Addison to expand Mental Health First Aid (MHFA) training. The total award amount is \$2,500 over a 1-year term and is paid in semiannual installments. <b>Grant term: 10/2022 - 9/2023</b>			Through March (month 6), we have trained 24 people in Mental Health First Aid (MHFA) and begun promoting our second annual Children's Gala. The Gala will be held at 1345 River Bend on April 27th, open to all community members. Additionally, we will have several additional MHFA and Applied Suicide Intervention Skills Training (ASIST) offerings within the grant period.				

Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
9	United Way of Tarrant County - Mission United - RU 598	Program Support: <b>Cohen Clinic</b>	\$ 88,000	Year 1 of 1	Chelsea Fiduccia	100%	
Summary of Grant			Notations - Changes Since Last Report				
The Cohen Clinic was awarded \$88,000 from United Way of Tarrant County's Mission United Fund to serve 90 veterans and their families who reside in Tarrant County, with matching funds provided by CVN. <b>Grant term: 7/2023-6/2024</b>			In March, 17 individuals were served. Through March (month 9), the clinic initiated 112 episodes of care (166% on pace toward goal of 90). Including individuals who initiated care in the prior grant period, 103 individuals completed their episode of care (153% on pace toward goal of 90).				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
10	UT-Dallas (Dept of Defense) - RU 593	Program Support: <b>Cohen Clinic</b>	\$ 116,436	Year 5 of 5	Chelsea Fiduccia	40%	
Summary of Grant			Notations - Changes Since Last Report				
Supports the study of CPT-rTMS for PTSD investigating the treatment effects of Cognitive Processing Therapy (CPT) and Repetitive Transcranial Magnetic Stimulation (rTMS) on PTSD. Goal: to successfully recruit 105 post 9/11 combat veterans for enrollment. UT-Dallas CPT-rTMS for PTSD Study resumed in September 2020 after a pause during the pandemic. <b>Grant runs 10/2020 to 7/2024 (Dates are estimates)</b>			Out of 40 people recruited and referred to UTD for assessment, 21 were denied/withdrawn before enrolling, 0 are doing initial assessments to determine eligibility for enrolling, 2 are mid-treatment, 3 dropped out mid-treatment, and 14 have finished treatment. UTD staff have begun working toward extension opportunities for the study.				

Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
11	DSHS (Department of State Health Services) - CSC (Coordinated Specialty Care) - RU 502 & 503	Program Support: ePep	\$ 2,040,000	Year 5 of 5	Jasmine Brown	100%	
Summary of Grant			Notations - Changes Since Last Report				
For our Enhanced Program for Early Psychosis provides holistic Coordinated Specialty Care for First Episode Psychosis through a multidisciplinary team that includes a psychiatrist, licensed therapist, certified family partner, certified peer support specialist, and supportive employment and education specialists. This is a one-year award totaling \$2,040,000. <b>Grant term: 09/1/2023 – 8/31/2024</b>			In March, 87 individuals were served. The ePEP program has successfully hired all members of the management team. This consists of 1 Clinical Manager and 3 fully licensed Team Leads. We have completed interviews to fill vacant positions and are in preparation to make offers for vacancies.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
12	United Way - Dallas - HOPES - RU 779	Program Support: <b>Flourishing Family (IDD)</b>	\$ 175,855	Year 1 of 1	Selena Milles	73%	
Summary of Grant			Notations - Changes Since Last Report				
Funding to implement Flourishing Family, a home visitation program for new mothers and newborns that includes providing resources, abuse prevention, and assessing for medical needs. This is a one-year award totaling \$260,022. This is the second year we've received funding through the UW HOPES grant. <b>Grant term: 9/1/2023 – 8/31/2024</b>			In March, 14 families were served. The program now has all positions for this grant filled, which will increase the utilization of grant funds. The program launched group support services for families in March to complement 1:1 services.				

Philanthropy Grant Report as of March 31, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
13	United Way - Dallas: Texas Home Visiting Program - RU 779	Program Support: <b>Flourishing Family (IDD)</b>	\$ 183,271	Year 1 of 1	Selena Milles	73%	
Summary of Grant			Notations - Changes Since Last Report				
Funding from United Way of Metropolitan of Dallas from the Texas Home Visiting Program (THVP) to Flourishing Family supports home visits to new mothers and newborns, including providing resources, abuse prevention and assessing for medical needs. This is a one-year award totaling \$150,089. <b>Grant term: 9/1/2023 – 8/31/2024</b>			In March, 15 families were served. Home Visitor vacancy was successfully filled in March. The program now has all positions for this grant filled, which will increase the utilization of grant funds.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
14	HHSC PATH GRANT (Projects for Assistance in Transitioning from Homelessness) - RU 310	Program Support: <b>Housing</b>	\$ 475,176	Year 5 of 5	Hope Stedman	100%	
Summary of Grant			Notations - Changes Since Last Report				
Supports outreach and assistance for individuals transitioning from homelessness. This is a five-year award totaling. <b>Grant term: 9/1/2023 - 8/31/2024</b>			The PATH team contacted 12 individuals during the month of March. Of those 12 individuals, 8 were new and became enrolled in the program and 4 were found ineligible for the program. Since September 1, 2023, there have been a total of 153 individuals contacted by the program, either at a shelter/day services center or on the streets, with 83 of those enrolling in the program. We are on track to spend all funds this fiscal year. We have 1 vacancy in street outreach and will have a new employee starting NEO on April 8th on the clinic team.				

Philanthropy Grant Report as of March 31, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
15	Charles Schwab Bank - RU 314	Program Support: <b>Housing</b>	\$ 20,000	Year 1 of 1	Ikenna Mogbo	100%	
Summary of Grant			Notations - Changes Since Last Report				
Provides assistance with cost of living increases and basic necessities for individuals in housing programs with severe and persistent mental illness. This is a one-year award totaling \$20,000. <b>Grant term: 1/1/2024 – 12/31/2024</b>			No updates were reported by the grant manager for March.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
16	HUD - Safe Haven - RU 314	Program Support: <b>Housing</b>	\$ 404,065	Year 1 of 1	Ikenna Mogbo	100%	
Summary of Grant			Notations - Changes Since Last Report				
Provides intensive homeless services for individuals with severe and persistent mental illness. This is a one-year award totaling \$404,065. <b>Grant term: 6/28/2023 – 6/27/2024</b>			No updates were reported by the grant manager for March.				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
17	HUD Leasing - RU 554	Program Support: <b>Housing</b>	\$ 4,113,870	Year 1 of 1	Ikenna Mogbo	100%	
Summary of Grant			Notations - Changes Since Last Report				
Funding to provide permanent supportive housing for individuals who are chronically homeless. This is a one-year award totaling \$4,113,870. <b>Grant term: 11/27/2022 – 11/26/2023</b>			No updates were reported by the grant manager for March.				

Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
18	Texas Council for Developmental Disabilities - 843	Program Support: <b>IDD</b>	\$ 120,314	Year 1 of 5	Carrie Parks	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding to provide Metrocare's Disability Cultural Humility Training for Elected Officials. The project is designed to review current gaps in the training available to elected officials through literature reviews and focus meetings with advisory groups and to fill those gaps through the creation of more robust training. This is a five-year award totaling \$720,314. <b>Grant term: 3/1/2023 – 2/29/2028</b></p>			<p>The videos were shown to a 12-participant focus group, The Self Determination Group, on March 16th. The videos were also shared with the project advisory committee. The first elected official and his staff will be trained April 3rd.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
19	City of Dallas - UpSkilling Dallas - RU 760	Program Support: <b>IDD</b>	\$ 125,000	Year 1 of 2	Carrie Parks	65%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding has been provided by the City of Dallas' Small Business Center to develop a workforce development campaign for low- and moderate-income Dallas residents. Metrocare's Center for Children with Autism and Altshuler Center for Education and Research have developed a six-week Registered Behavioral Technician training program and will be training 54 qualifying Dallas residents over two years; the goal is to empower participants to earn a living wage by obtaining a certification in a high-demand field. This is a two-year award totaling \$250,000. <b>Grant term: 5/18/2023 – 5/17/2025</b></p>			<p>The four interns in the program completed training this month. All four are registered with the Board Analyst Certification Board and scheduled to sit for the Registered Behavior Technician exam in April. Also, all four were interviewed for positions within the CCAM program to fill 2 current vacancies and with LEAP, an external ABA provider.</p>				



Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
20	SAMHSA - Integrative Treatment of Complex Trauma Program - RU 351	Operational Support: <b>Mental Health</b>	\$ 351,869	Year 3 of 5	Justin Bayles	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Funding from the Substance Abuse and Mental Health Services Administration supports the implementation of evidence-based treatment for complex trauma in children and adolescents. The total award amount is \$1,777,050 over a 5-year term. <b>Grant term: 9/30/2020 – 9/29/2025</b></p>			<p><b>Grant Management:</b> Project Director (PD) and SAMHSA Grant Director meet weekly to review progress with goals, objectives and tracking metrics. The PD and SAMHSA Grant Director met the SAMHSA Grant Program Officer (GPO) on March 21, 2024, for the quarterly meeting. They discussed programmatic progress, and coordination of All Network SAMHSA Conference scheduled for May 14th-16th, in Maryland.</p> <p><b>Reporting:</b> Director of SAMHSA Grants and Project Director uploaded the Continuation Application and Budget Narrative for Year 2024 to eRA Commons Federal Grant Reporting System and are awaiting the final approval of the continuation application and budget narrative from SAMHSA.</p> <p><b>Personnel:</b> All allocated positions are filled.</p> <p><b>Budget Utilization:</b> The program is 42% through the year and has utilized 47% of the budget. The program is on track to utilize the budget at 100%.</p> <p><b>Services:</b> 65 clients enrolled in Integrated Treatment for Complex Trauma (ITCT). 54 unique individuals were served in March and provided 249 services.</p>				

Philanthropy Grant Report as of March 31, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
21	SAMHSA - Metrocare's Medication-Assisted Treatment Program - RU 352	Operational Support: <b>Mental Health</b>	\$ 524,084	Year 3 of 5	Justin Bayles	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>For expanding substance use disorder services for Opioid Use Disorder (OUD) to allow Dallas County residents to receive medication-assisted treatment outside of ambulatory detox for a longer-term basis. The total award amount is \$2,620,420 over a 5-year term. <b>Grant term: 9/30/2021 – 9/29/2026</b></p>			<p><b>Grant Management:</b> The Project Manager and Operations team continues to meet weekly for program successes and challenges. The continuation application was submitted, and we continue to await review/approval.</p> <p><b>Reporting:</b> No reporting is currently due. The next programmatic progress report is due 12/28/2024.</p> <p><b>Personnel:</b> In March, the program had one vacancy for a Licensed Chemical Dependency Counselor (LCDC). Operations completed interviews and is in the processes for onboarding new staff with a scheduled start date of 4/8/2024.</p> <p><b>Budget Utilization:</b> The program is 42% through the year and has utilized 40% of the budget. The program is on track to utilize the budget at 100%.</p> <p><b>Services:</b> The MAT program has reached a coverage rate of 109% with an overall census of 109 unique individuals (35 individuals enrolled in Year 3) and served 33 unique individuals in March.</p> <p><b>Success Stories:</b> An individual who has remained in the program for over a year has gained stable employment with a full-time job.</p>				

Philanthropy Grant Report as of March 31, 2024



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	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
22	SAMHSA - Certified Community Behavioral Health Clinic - Improvement and Advancement - RU 354	Operational Support: <b>Mental Health</b>	\$ 1,345,745	Year 2 of 4	Justin Bayles	100%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Supports the creation of an After-Hours Clinic. Total funding will be \$3,984,485 over 4 years. The After-Hours Clinic will operate Monday through Friday from 5:00 p.m. to 10:00 p.m., as well as offer services on Saturday and Sunday. The flexible service hours will expand access to individuals, families, and the community. <b>Grant term: 9/30/2022 – 9/29/2026</b></p>			<p><b>Grant Management:</b> In March, the Project Director met with the Grant Program Officer for status update on the grant programmatic narrative revisions.  <b>Reporting:</b> In March, the Project Director submitted a revised programmatic narrative with an updated format request from the Grant Program Officer. The next report due is the quarterly Infrastructure Development, Prevention, and Mental Health Promotion (IPP) on 04/26/24.  <b>Personnel:</b> The program has 1 vacancy (one Peer Support Specialist). The After-Hours Clinic is expanding to include additional Qualified Mental Health Professionals. The Operations team has begun interviewing to fill vacancies.  <b>Budget Utilization:</b> The program is 42% through the year and has utilized 40% of the budget. The program is on track to utilize the budget at 100%.  <b>Services:</b> In March, the program served 367 unique individuals while providing 761 services.</p>				
	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
23	McKesson Foundation - RU 451	Community Engagement: <b>Pharmacy Services</b>	\$ 199,806	Year 1 of 2	Min Seo Cheon Kim	36%	
Summary of Grant			Notations - Changes Since Last Report				
<p>Metrocare's Pharmacy Community Engagement Program (MPCEP) will provide outreach, information, education, and referral opportunities to the community based on the four foundational principles: 1) Improve access to care by conducting free health screenings at locations throughout the community; 2) Foster community partnerships with organizations &amp; institutions; 3) Respond to both patient and community needs; 4) Promote patient-centered, trauma-informed, culturally and linguistically appropriate care and population health. Total funding is \$399,612 over 2 years. <b>Grant term: 09/1/2023-08/31/2025</b></p>			<p>In March 2024, our Community Outreach Pharmacy Program excelled in engaging 1,284 individuals, embodying our commitment to four foundational principles that actively address healthcare disparities: conducting free health screenings, fostering key community partnerships, responding to patient and community needs, and promoting patient-centered, trauma-informed care. Our responsive approach, both to individual patient concerns and broader community needs, contributed to a more patient-centric and inclusive healthcare experience.</p>				

Philanthropy Grant Report as of March 31, 2024



	Funding Source	Intended Use of Funds	FY23 Award	Grant Term	Program Manager	Budget vs. Actual Revenue	Utilization
24	City of Dallas - DALLAS HEALS - RU 107	Education and Outreach: <b>Strategic Initiatives</b>	\$ 200,000	Year 1 of 2	Tate Ringer	0%	
	Summary of Grant		Notations - Changes Since Last Report				
	<p>City of Dallas, Office of Community Care awarded \$400,000 over two years for the DALLAS HEALS campaign. Metrocare's Strategic Initiatives developed the DALLAS HEALS campaign—a mental health education and outreach campaign designed to serve the most stressed and most vulnerable populations in Dallas: low-income communities, historically underserved communities, Qualified Census Tracts, and communities of color. <b>Grant term: 11/3/2023-5/9/2025</b></p>		<p>We have made progress in hiring the key position for this grant and at the time of this writing are making an offer to a bilingual, licensed candidate. Furthermore, our Community Outreach Coordinator has completed the certification to be a Mental Health First Aid (MHFA) trainer. We have a contract in the works with Dallas Housing Authority to train 250 of their staff which will exceed our grant requirements for both years.</p>				

<u>UTILIZATION KEY</u>	
OPERATING AHEAD OF SCHEDULE	
ON TRACK or NEW PHILANTHROPIC GRANT	
TRACKING BEHIND BUDGET BEING MONITORED CLOSELY	
POTENTIAL CONCERN	

Funder	Award Amount	Pledge/Fully Funded/Partially Funded	Grant Term	Funding Notes	
Hillside Capital Campaign Funding - pledges and gifts received as of March 31, 2024					
1	Bette Rathjen for Emotional Well-Being Foundation	\$ 3,000,000.00	Fully Funded	Year 1 of 1	
2	McDermott Foundation	\$ 1,500,000.00	Fully Funded	Year 2 of 2	Original \$1M gift dated received on 8/30/21; addtl gift of \$500,000 received 8/22/23.
3	Lyda Hill Philanthropies	\$ 1,000,000.00	Fully funded	Year 1 of 1	
4	Simmons Sisters Fund	\$ 1,000,000.00	Fully Funded	Year 3 of 3	
5	Hillcrest Foundation	\$ 1,000,000.00	Fully Funded	Year 2 of 2	
6	Rees-Jones Foundation	\$ 1,000,000.00	Fully Funded	Year 1 of 1	Paid in full
7	Deedie Rose	\$ 1,000,000.00	Pledged	Year 1 of 3	\$400K received to date. (\$200k 10/2022; \$100k 7/2023; \$100k 10/2023)
8	Crystal Charity Ball	\$ 912,881.00	Fully Funded	Year 1 of 1	Pledged; 2023 Beneficiary for Child & Adolescent Mental Health Clinic. Full funding to be rec'd by March 2024. Payments towards pledge include: (Crowley-Carter Foundation - \$25k; Bank of America Fdn - \$25k; Roy & Gene Sturgis Fdn - \$25k; Kennington Family Fdn - \$12.5k; Aileen & Jack Pratt Fdn - \$3,571; Vizient - \$15k; Texas Bar Fdn - \$10k; Katherine C. Carmody Charitable Trust - \$25k; The Mark Fdn - \$20k; Moody - \$350k; Hattie Mae Lesley - \$25k; Crystal Charity Ball - \$376,810
9	Addy Foundation	\$ 500,000.00	Fully Funded	Year 2 of 2	
10	Meadows Foundation	\$ 500,000.00	Fully Funded	Year 1 of 1	Full amount considered grant.
11	Hoblitzelle Foundation	\$ 500,000.00	Fully Funded	Complete	
12	PKW Fund at The Dallas Foundation	\$ 400,000.00	Partially funded	Year 1 of 3	Second installment of \$100K received - \$200,000 rec'd to date; \$200K outstanding)
13	Dr. Bob & Jean Smith Foundation	\$ 350,000.00	Fully Funded	Year 1 of 3	
14	The Constantin Foundation	\$ 300,000.00	Fully Funded	Year 1 of 1	
15	Beasley Foundation	\$ 250,000.00	Fully Funded	Year 1 of 3	Final Installment \$100,000 received December '23
16	Hamon Family Foundation	\$ 200,000.00	Fully Funded	Year 1 of 2	
17	UMB Bank	\$ 200,000.00	Fully Funded	Year 1 of 1	Paid in full
18	Mike & Mary Terry Foundation	\$ 150,000.00	Fully funded	Year 3 of 3	Final installment of \$50,000 received.
19	Clara Miller Estate	\$ 109,600.61	Ongoing		Royalties from bequest
20	Amplify Energy, LLC	\$ 70,786.30	Ongoing		Royalties from bequest
21	The Dallas Foundation's Women In Philanthropy Institute	\$ 40,000.00	Fully Funded	Year 1 of 1	
22	Board Commitments	\$ 44,300.00	Partially Funded	Year 1 of 1	Remaining Installments - \$1,400
23	William T. & Gay F. Solomon Advised Fund at The Dallas Foundation	\$ 25,000.00	Fully Funded	Year 1 of 1	
24	Anonymous Donor	\$ 25,000.00	Fully Funded	Year 1 of 1	
25	UMB Charitable Foundation	\$ 25,000.00	Fully Funded	Year 1 of 1	
26	Sheppard/Mullin	\$ 15,000.00	Pledged	TBD	
27	Anonymous Donor	\$ 10,500.00	Fully Funded	Year 1 of 1	
28	Solender/Hall	\$ 35,000.00	Fully Funded		
29	McDonnough Family Fund	\$ 7,500.00	Fully Funded	Year 1 of 1	Received additional \$5,000 December '23
30	Individual Donors	\$ 4,100.00	Partially Funded	Year 1 of 5	
31	Karen Coder	\$ 2,500.00	Fully Funded	Year 1 of 1	
32	Energy Royalties	\$ 687.43	Ongoing		
	<b>Total Request Awarded</b>	<b>\$ 14,177,855</b>			
	<b>Pending Hillside Capital Campaign Requests</b>	<b>\$ 600,000.00</b>			Current pending requests from individual donors and private foundations to support the Hillside Capital Campaign. (Thomas E Bentley - \$50k ; John R McCune Charitable Trust - \$50k; Meadows Fdn - \$500k)

# EXECUTIVE SESSION

**RETURN TO OPEN SESSION**

**Consideration of Approval of the Purchase of  
Real Property Discussed in Executive Session**



# ADJOURNMENT