

**DALLAS METROCARE SERVICES**

**BOARD OF TRUSTEES  
MEETING MINUTES OF**

**October 27, 2005**

# DALLAS METROCARE SERVICES

## REGULAR MONTHLY MEETING of the BOARD OF TRUSTEES

### MINUTES OF October 27, 2005

A Regular Meeting of the Board of Trustees of Dallas Metrocare Services convened at 1:35 p.m. in the Board Room on October 27, 2005 at 1360 River Bend Drive, Dallas, Texas.

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

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

The following Trustees were present:

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

**Staff Present:** Dr. James Baker, Kyle Munson, Dr. Greg Graves, and other DMS staff.

**II. INVOCATION:** Mr. Vincent Alexander, employee of Dallas Metrocare Services, gave the invocation.

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

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

##### **1. Approval of the meeting Minutes of September 22, 2005 – Regular Board Meeting:**

Mr. Cooper called for any comments or corrections to the meeting minutes of September 22, 2005. There were no comments or corrections presented. Ms. Green made motion to approve. The minutes were approved as written.

##### **2. Chairman's Report – Mr. Cooper announced the following:**

- Texas Community Solutions Report: Dr. Baker presented the Texas Community Solutions report for Ms. Thompson, explaining that Ms. Thompson was out of town attending another meeting. Dr. Baker said that the Texas Community Solutions had its last Board meeting this week. Dr. Baker gave a brief explanation on the reason why the Texas Community Solutions was set up. He said this organization was set-up as a potential shell organization to do manage care compatibly with organizations such as ValueOptions. Many Community Mental Health and Mental Retardation Centers were not interested in going this direction and the organization was

dismantled at the beginning of September of this year. There were no questions posed for this item.

- Quality Council Report: Dr. Nace reported that the Quality Council met on Thursday, October 6<sup>th</sup>. The council is charged with reviewing an extensive array of reports from different aspects of the overall program and makes an effort at selecting certain functions for monitoring and quality control. Ms. Thompson has asked all the members to come up with some areas which they particularly think worth monitoring more closely. There were no questions posed for this item.
- MR Planning Advisory Report: Mr. Dixon said that at all the MR/PAC meetings they review the Local Plan and the Quality Management Review. At this time there are no comments from the discussions of these two items to bring to the Board, however at the last meeting of the MR/PAC the 2006 Proposed Budget was reviewed. He said that Mr. Munson was there to answer all of the committee's questions and it was the recommendation of the MR/PAC to accept the proposed budget. Mr. Dixon said the MR/PAC and the Network Advisory Committee (NAC) along with the Center will be sponsoring a Townhall Meeting in December. This meeting will provide information on the changes going on in Austin and the impact this will have on the Local Centers. Mr. Dixon made an invitation for everyone to come and bring their questions along. There were no questions posed for Mr. Dixon.

❖ **RECOMMENDATION(s) FOR APPROVAL:**

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

**Consideration of Approval of Contract of Employment of Chief Executive Officer:**

Mr. Cooper presented each Board member with a copy of the evaluation results as well as a copy of the current contract for the CEO. Mr. Cooper said that the evaluations had been distributed among the Commissioner's Court, stakeholders, the Center's senior management staff and the Board members. Mr. Doug Barnes, the Center's legal advisor, said that the results received back were very positive and after reviewing the contract he has approved it. There were no major changes to the contract but for a 10% increase to Dr. Baker's salary. The contracts start day is July 1, 2005 and it runs through June 30, 2006. Mr. Cooper asked if there were any questions or further discussion. There were no questions posed for this item. Ms. Green moved to approve, seconded by Mr. Garza.

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby approves the **Contract of Employment of the Chief Executive Officer**

All were in favor, motion carried.

- Mr. Cooper announced the resignation of Mr. Martinez from the DMS Board due to pressing new responsibilities at the Dallas Independent School District.
- Mr. Cooper announced that there are no committee meetings in November. Packets will be mailed out as usual.
- There will be a combined November/December Board meeting held on December 1<sup>st</sup>. There is no training schedule for that day, the meeting will start at 1:30 pm.

**3. Chief Executive Officer's Report:**

Dr. Baker thanked the Board and specifically Mr. Cooper for being his mentor for the past three years.

Dr. Baker reported that the employee appreciation day luncheon had been held the day before and 70% of the Center's staff were present, he thanked the staff that was in charge of the preparations for this event. Dr. Baker said that the Center has come a long way in the last three years. Mental Health Services has seen an increase of 33% in the number of mental health clients served this amount to 5,000 more clients. The Center has also doubled the number of people receiving Mental Retardation Services. For FY 06 the goal is to eliminate the wait list for all services in mental retardation. The Center has gone through 2 red ink periods and also one bankruptcy successfully. The administrative overhead is lower than all but three Centers across the State. Dr. Baker said that the Center is very proud of its accomplishments in the last three years and is looking forward to doing even better to serve those people we're here to serve this fiscal year.

- **Success Story:** Dr. Baker said that today's success story comes from the Family Preservation Program (FPP). To talk about this he introduced Ms. Yokitha Hamp and Heidi Parker. Ms. Hamp said that she works with kids at risk of being placed outside of their home. These kids have had multiple hospitalizations or have been in trouble with the Juvenile Detention. The FPP is an intensive program that last from 3-6 months and works primarily at home with the clients and their families. Ms. Hamp spoke of an 8 old client that she had been assigned to with destructive and oppositional behaviors. This client had had multiple hospitalizations and was constantly being brought to the clinic by his mom. Mom had no coping skills and the client was disruptive, constantly lying and leaving the house without permission, when the client threw his temper tantrums he would go into a rage and destroy property, was disrespectful to his mom and negate any authority that she tried to give him. Ms. Hamp with the help of her Team Leader started working with him four months ago and he has not been hospitalized for the last three months. Mom suffers from some ADHD and she was taught focusing skills with timers to help with her learning process. Mom was taught appropriate and immediate consequences, how to give effective commands, goal setting, how to deescalate techniques on how not to get into power struggles with her son. Mom was excellent and followed instructions. Ms. Hamp said that last year this client had failed all of his classes and this year she attended an ARD meeting at school and the client was passing all of his classes and placed in one mainstream course. The school is impressed and very please with his progress. Ms. Parker said that the referrals come from different sources such as the school districts, as well as Timberlawn and the Green Oaks hospitals. The families that qualify for this program are those that are the most intensive. What this means is that the child has suicidal or homicidal tenancies, they are acting out at school, they've had numerous hospitalizations or if the children have had a stressor that has occurred in the family. There were no questions posed for Ms. Hamp or
  
- **In the Spirit of Diversity:** Language Barriers: Ms. Sam Clark said that one of the main goals in the Diversity Council is to help DMS become culturally competent. If the Center cannot speak to the consumers in their native language we as a Center are not reaching them in the extent that we need to. The Diversity Council has been working on some plans to help with this. They have come up with the following 4 options that they are working with right now:
  - ✓ Bilingual compensation or a 4% to 6% stipend.
  - ✓ Training to be a better more effective translator.

- ✓ Offering training in how to work with the translator for the non-bilingual staff that is working with the translator
- ✓ Translation Service

The translation services is provided via telephone and they offer services in over 150 languages. Ms. Clark did a demonstration. The charges for these services are billed directly to ValueOptions. The phone has two receivers and the client can be on one of the receivers with the doctor/staff on the other.

- **Centerwide Benchmarks:** Dr. Baker said that the centerwide benchmarks are showing the changes proposed back in August. Two quality indicators were removed and replaced with outcome measures consistent with what the Center believes the Department of State Health Services (DSHS) is going to go to in terms of Performance Contract requirements through ValueOptions (V/O). Dr. Baker referred to page 8835 and the measures that were below goal by the area. He said that the financial underperformance was primarily driven by issues in the mental retardation provider services. They continue to work on strategies to enhance the productivity with these departments. Several of the new strategic and quality goals were below goal (refer to page 8838). This is associated with how the Center maximizes the use of MR Revenue for MR Services. The problem has consistently been that the Center authorizes enough services, but the provider network does not use all of the services that get authorized. To ensure that all the money gets used it was decided to remove everyone from the Wait Lists and try to manage the dollars this way. Dr. Baker referred to one of the new indicators, number 16. This indication is one that looks at outcome measures and the goal is to use all 13 of them. These numbers demonstrate the improvement of the clients with the services they receive from this Center. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

- Dr. Baker made reference to several handouts (distributed in each Board members folder) associated with correspondence between Dr. Baker and the Department of Aging and Disability Services (DADS). DADS is sanctioning the Center for \$14,000. The Center is appealing this decision.
- Dr. Baker said that last week a letter was received from DADS for plan of improvement around the documentation for the first quarter of FY 05. A plan of improvement was implemented with documentation indicating that the Center is going in that direction, but the Center is not where it would like to be yet. Dr. Graves is getting personally involved to make sure this gets better.
- The third correspondence is from DSHS starting approximately 1-2 weeks ago. DSHS has decided that this Center was billing Medicaid for non-NorthSTAR patients inappropriately. They are billing the Center \$75,000. DSHS would like this Center to do a Cost Study and Dr. Baker said it would cost the Center more money to do this cost study than the money we get from this one program. He said he would close the one program from which this dollars are emendating.

Mr. Orr asked if the fines also applied to other Centers. There were no additional questions posed for this item.

## **BUSINESS AND FINANCE COMMITTEE**

**Chair Reports:** Mr. Orr, Chairperson of the Business and Finance Committee, asked Dr. Baker to present his report.

❖ **RECOMMENDATION(s) FOR APPROVAL:**

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

**4. Consideration of Approval of Attachment I – Local Match Request:**

Dr. Baker said that the Center was asked to increase its “local match” for mental retardation services beginning next fiscal year. Dr. Baker said that this Center’s match has been running \$800,000 for the last several years. According to the documentation received from DADS calculations (formula outline on this report) there are 1.2 million dollars to match. The Center was asked to do an amendment to the contract indicating that the Center will get to this level of the local match by FY 09. Dr. Baker is recommending an attachment indicating that the Center will make an attempt to get this match up. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby **approves to Attempt a Match over the Next Couple of Years of Attachment I - Local Match Request**

This was a Committee recommendation. All were in favor, motion carried.

**5. Update on DMS contracts, executed with UTMB as part of the NorthSTAR 340b Projects:**

Dr. Baker said that the information provided in today’s training covered most of his written report. He said that as part of the 340b pharmacy program rollout, the Center entered into a contractual agreement with UTMB regarding the administration and interpretation of a health risk assessment tool developed by UTMB. DMS will be receiving payment from UTMB and DMS will provide physical space to UTMB to be used for telemedicine conferencing between consumers and UTMB medical staff in Galveston. To date the Center has not received any money and it is not anticipating to until this program gets approved by next May. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

❖ **RECOMMENDATION(s) FOR APPROVAL:**

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

**6. Consideration of Approval of Financial Report for September 2005 (Unaudited):**

Mr. Munson said that for the month of September the Net Income revenues exceeded expenses by approximately \$134,000 per month. Overall our revenues were \$194,000 below plan. GR dollars were below plan due to the increase of staff in mental retardation services. The other area below plan continues to be the contracts with the Early Childhood Intervention Program (ECI). Expenses are running below plan primarily because of vacant staff positions. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby **approves the Financial Report for September 2005 (Unaudited)**

This was a Committee recommendation. All were in favor, motion carried.

**7. Diversification Report:** Mr. Munson said that this is the process used to streamline the funds that come through our door through the different grants DMS receives. Mr. Jesse

Aguilera has been the lead person in charge of writing and applying for the different grants. These grants help fund mental health and medical clinics, vehicles, consumer education, housing for the homeless, crisis counseling and outreach. Mr. Aguilera has submitted three applications for grants to help those evacuees affected by the Katrina Hurricane. We are still waiting to hear from other grants DMS has applied for. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

- 8. Report on Investment in Human Assets:** Mr. Munson said that efforts continue to attract and retain staff. Mr. Munson listed four objectives for the new year:
- 1) Reduce employee turnover: For the month of September this stayed at 3.0%, both voluntary and involuntary.
  - 2) The attitude survey: This year this will be a new objective to improve morale and satisfaction amongst staff.
  - 3) Fill rate to fill vacant medical staff positions: The market has proven to be tight for physicians, but DMS continues in its efforts to attract them to our services.
  - 4) Maintain employee training: Goal was not achieved in September, actual was at 89% and the plan is to have this at 90%.

There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

## **SERVICE AND PROGRAM COMMITTEE**

**Chair Reports:** Dr. Nace, Chairperson of the Service and Program Committee, asked Dr. Baker to present this report on behalf of Ms. Thompson.

- 9. Mental Retardation Authority Services Report:** Dr. Baker referred to the general revenue dollars in Ms. Thompson's report and said that DMS will be receiving between \$400,000 and \$500,000 in general revenue dollars. Based on this information a decision was made to remove everyone that is currently on the MRA Waiting Lists for all services with the exception of the few people that want the ICF/MR home services. Currently there are no vacancies in any of the ICF/MR homes. Dr. Baker said that there is little financial risk in providing these clients with the services they want and lots of gain for them. This last fiscal year DMS authorized all of the dollars it was assigned, but the network providers did not spend all of the dollars that they were authorized. Dr. Baker referred to page 8853 and said that DADS has specific Performance Measures in the contract and Ms. Thompson will be monitoring the outcome targets. For this month the Center met goal. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).
- 10. Quarterly Report on Grant Monitoring:** Dr. Baker said that this is a new report being provided by the Quality Management Division to monitor all of the programs funded by grants and to assure that the Center is in compliance with the requirements of this grants. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).
- 11. Report on Mental Retardation Medicaid Waiver Provider Programs:** Dr. Graves presented a written report and said that the mental retardation Medicaid waiver programs are the Center's providers for services funded by HCS and Texas Home Living. These services are primarily provided in the home and include foster care homes. Due to the financial struggles in this program it is being monitored very closely. DMS is trying to attract more

- consumers to this program and it has participated in several consumer fairs and done several presentations attract more consumers. The Texas Home Living passed its first survey from DADS in August. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).
- 12. Report on ICF-MR Program:** Dr. Graves said that the primary focus moving forward is effective management of agency resources. For the month of September this program showed a negative variance from budgeted net. The plan to resolve this is to sale both the Forest and Inwood homes and move the residents there to two ICF-MR homes owned by the Center. DMS is currently waiting to receive the approval from the Department of Aging and Disability Services. During the month of September the program passed two external surveys completed by the Department of Aging and Disability Services. There were no questions posed for this item. (Please refer to the Board packet of October 27, 2005).
  - 13. Report on Mental Health Programs:** Dr. Graves reported that for the month of September, mental health provider services, which include the East, West, South, Intensive and Northeast Regions all had favorable variances. Currently all managers are been engaged in developing procedures to clearly address each one of these target areas to staff. All of the targeted areas had problems during the month of September. Not everyone is clear on the rolls of these measures. Dr. Graves said that at the bottom of his report he gave a brief summary of what DMS is doing to increase referrals and the marketing strategies being used to attract foster parents and staff to these programs. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).
  - 14. Report from the East Provider Region:** Dr. Grable reported said that they are breaking down the general port to focus on one region, this being the East Region. The East Region netted \$6K for the month of September. As far as the operational target areas the productivity was at 98%, the barrier being staff vacancies. Authorization denials goal is less than 5% and they were at 7%. The perceived barriers to this involved the timeliness in receiving authorizations from V/O and internal problems with grant funded programs staff performance. The charting qualities goal is 90% and the region had 85%, with the main barrier to this being individual staff performance. They are currently coming up with a plan to standardize the way this is managed across the agency. Uniform Assessment authorization requests submission timeliness goal is 1% and the region was at 1.3%. This is also attributed to individual staff performance. Charting timeliness was also below goal the goal being 5% and they were at 16%. They are working on leads to help with some of the staff vacancies. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).
  - 15. Clinical Outcomes Report:** Dr. Graves said that this report refers back to Dr. Baker's report earlier on his Centerwide Benchmarks. These are the 10 outcomes measures that the Center is anticipating DSHS is going to be moving towards and DMS is preparing for this. These measures, along with 4 others are to be developed jointly with V/O, will be monitored quarterly. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).
  - 16. Community Partnerships Report:** Dr. Graves presented this report and said that the Center continues to partner with community stakeholders in helping with the hurricane evacuees. DMS is actively participating in health fairs to bring information to the community on the services DMS provides. The Center continues to plan for the March for Respect Walk for 2006 as lead agency. There were no questions posed for this item. (Please refer to the October 27, 2005 Board packet for a detailed account).

## AUDIT COMMITTEE

**Chair Reports:** Mr. Garza, Chairperson of the Audit Committee, presented this report.

- 17. Consideration of Approval of Engagement Letter with Weaver and Tidwell to Perform Internal Audit Risk Assessment:** Mr. Garza said that at the September Board meeting, the Audit Committee had made a recommendation to outsource the internal audit function. To this effect he introduced Mr. Weiser from the Auditing firm of Weaver and Tidwell. Mr. Weiser said that he met with DMS Management and a proposal was submitted for Board approval. It was a Committee recommendation to engage firm for Risk Assessment study, Mr. Weiser will be back in January to present a Risk Assessment Plan.

**BE IT RESOLVED** that the Board of Trustees of Dallas Metrocare Services hereby approves the **Approval of Engagement Letter with Weaver and Tidwell to Perform Internal Audit Risk Assessment**

- V. EXECUTIVE SESSION:** There were no issues to discuss
- VI. MEETING ADJOURNMENT:** There being no further business to come before the meeting, on motion duly made, seconded and carried, the meeting adjourned at 3:00 pm.

Minutes approved by:

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Charles M. Cooper, Chairperson

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