

DALLAS METROCARE SERVICES

**BOARD OF TRUSTEES
MEETING MINUTES OF**

June 23, 2005

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REGULAR MONTHLY MEETING of the BOARD OF TRUSTEES

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A Regular Meeting of the Board of Trustees of Dallas Metrocare Services convened at 1:50 p.m. in the Conference Room of the Hillside Campus located at 1353 N. Westmoreland in Dallas, Texas on June 23, 2005.

I. Call To Order/Roll Call

Ms. Green called the meeting to order at 1:50 pm, there was not a quorum was present.

The following Trustees were present:

Ms. Green
Mr. Migl
Dr. Nace
Mr. Poffenbarger

The following Trustee(s) were absent: Mr. Cooper, Mr. Driver, Mr. Garza, Mr. Martinez and Mr. Orr.

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

II. INVOCATION: Mr. Thomas Harris, present employee of Dallas Metrocare Services, gave the invocation.

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

IV. ISSUES TO BE CONSIDERED:

1. Approval of the meeting Minutes of May 26, 2005 – Regular Board Meeting:

Ms. Green said that the Meeting Minutes for May 26, 2006 would be tabled until the next Board meeting when a quorum was present.

2. Chairman's Report – Ms. Green introduced Ms. Linda Thompson and Ms. Thompson presented the following report;

➤ **Board Liaison Reports:**

- ✓ **Texas Community Solutions:** Ms. Thompson gave a brief report on the last meeting of the Texas Community Solutions (TCS) she attended in Austin. At that meeting the question was what direction TCS would be taking in the future. Currently the mission of TCS is to develop managed care businesses and provide

Centers submit their suggestions regarding the role and function of TCS going

forward. Based on these suggestions the board will make a decision on the direction of TCS and they will decide if there is a need for TCS in the future. Another meeting has been scheduled for July. There were no questions posed for this item.

- ✓ **Meetings Schedule:** Ms. Green said that for the month of July the Committee meetings would meet on July 21st, including the Audit Committee, with no Board meeting scheduled for July. There will be a combined July/August Board meeting on August 4th, with no Committee meetings in August. In September the Committee meetings and the Board meeting will go back to their regular schedule.

3. Chief Executive Officer's Report: Dr. Baker introduced Mr. Walter Barton of the Assertive Community Team (ACT). Mr. Barton is the Caseworker noted on a *Dallas Morning News* story when clients were stepped down from the ACT Team.

- **Success Story:** Assertive Community Team (ACT) - Presenter – Walter Barton
Mr. Barton was assigned a client that had been diagnosed with severe depression, bipolar and anxiety disorders, and had also had five hospitalizations prior to coming to the ACT Team. Mr. Barton worked with this client for the following 16 months increasing the client's area of safety one area at a time. Eventually this client was able to manage to go inside a grocery store by himself or with his mother, after that the bank and eventually he was able to accompany his sister on a trip to visit his grandmother. The client can now get to the clinic without any assistance and has become very invested in his own treatment. Mr. Barton considers this a very successful story. There were no questions posed for this item.
- **In the Spirit of Diversity:** Dr. Baker introduced Ms. Clara Miller. Ms. Miller is a client of Dallas Metrocare Services (DMS) and her artwork is exhibited throughout the Westmoreland Clinic and the DMS Board Room. Ms. Miller started her artwork after a particular episode where she had to call the DMS crisis line. The voice on the other end of the phone asked her to take out her sketchbook and to draw a picture. Ms. Miller has not stopped since. Ms. Miller stated that as a patient with DMS she has received encouragement with her drawings from both doctor's and staff.
- **Centerwide Benchmarks:** Dr. Baker said that the Centerwide Benchmarks have been very consistent month to month over the last several months. Most of the problems on the financial measures reflect the early difficulties with mental health related to the rate changes ValueOptions (V/O) implemented last September. In May there was a write-off for the staffing reductions related to the fixed dollar funding arrangement with ValueOptions. One financial area that was of concern in May was the MR Provider net-income that fell below goal. They are presently addressing this problem and they will continue to address it aggressively over the next several weeks. The medical records documentation parameter also dropped, particularly in mental health. Dr. Baker said that in an attempt to bring the score up, more restricted reviewing and monitoring was put in place and this actually brought it down initially. It is expected that this score will go up again. There is an on-going dialogue with other community stakeholders around the jail mental health issue. They are presently trying to come up with a consensus to share with the Jail Health Committee and with the Commissioner's Court. The next meeting is schedule for the following week. Dr. Baker spoke of House Bill 2572 vetoed by Governor Perry. Discussion ensued.

BUSINESS AND FINANCE COMMITTEE

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

❖ RECOMMENDATION(s) FOR APPROVAL:

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

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

Mr. Munson referred to page 8669 of the financials and said that for the month of May the Center had a Net-Income loss of \$391,000, including an extraordinary loss of almost \$350,000 paid out in salaries, paid leave and severance directly attributable to the reduction in force that took place the second week of May. Contract positions for the month of May exceeded plan by almost \$50,000. As of this week mental health services is where it should be to make budget. There were no questions posed for this item. (Please refer to the June 23, 2005, Board packet for a detailed account).

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

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

There were no questions posed for these item(s). Approval was deferred to next meeting for lack of a quorum.

5. FY 05 3rd Quarter Reports: Mr. Munson presented a written report. There were no questions posed for this item. (Please refer to the June 23, 2005, Board packet for a detailed account).

- Financial Investments:
These reflect that during the 2nd week of June the Center received its 4th Quarter general revenue payment and the ValueOptions monthly distribution.
- Goods, Services and Equipment>\$15,000
There was one purchase in excess of \$15,000 and this was associated with the renovation of the air conditioning system at the Altshuler Clinic.
- Leases>\$25,000
There is one lease that exceeded the \$25,000. This lease will terminate in December 2005.
- Community Services Contracts>\$100,000
The Community Services Contracts are general revenue dollars paid to service providers for the services they provide to the Center's MR population. The total paid out through the month of May totaled approximately 1.4 million dollars.
- Non-Community Services Contracts>\$25,000
There is one contract that exceeded the \$25,000. This is for the external auditor.
- Legal Expenses:
They have remained low.

As part of the mid-year budget, management proposed salary adjustments for staff in accordance with Board Policy 5.01. The Board approved this recommendation during the April Board meeting. The following positions were awarded salary adjustments in excess of \$5,000:

- Nurse Practitioners
 - Center Medical Director

 - Region Medical Director
 - Chief Financial Officer
 - Assistant Director of Clinical Operations
 - Deputy CEO
 - General and Child Psychiatrists
 - Operations Managers
- Participation by Historically Underutilized Businesses
This is consistent with recent history.
- Information Technology Project Update
A status summary of critical IT projects was provided and this included:
- Storage System
 - Server Systems
 - Desktop Systems/Equipment Inventory
 - Back Office Systems
 - Application Implementation

- 6. Human Resources Management Report:** Mr. Evans reported that the Center is actively recruiting for key positions that include RN's, MD's, APN's, psychologists, speech, occupational and physical therapists. Under the cultural competency and diversity report Mr. Evans said that the Center participated in the NAMI Walk and earned two awards. The Center had the highest number of participants. Staff turnover went up from 3.0% to 4.0% during the month. He said that this trend is not unusual after a reduction-in-force. Under the safety report Mr. Evans said that the gross total paid has gone down considerably compared to six years ago. Mr. Evans said that on his HR Metrics report, the month of May was difficult. Operating expenses and salary expenses went up. Profit per-employee went down. Voluntary turnover went up from the month before. Mr. Evans said that he is anticipating that this will stay even or go down as things settle after the force reduction. Mr. Evans reported that Workers Compensation payments have gone down. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

SERVICE AND PROGRAM COMMITTEE

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

- 7. Report on Development Activities:** Mr. Aguilera reported on the newer projects they are presently working on;
- ✓ A grant application was submitted to the Substance Abuse and Mental Health Services Administration (SAMHSA SOAR Grant). The Strengthening Older Adults' Resiliency and Recovery (SOAR) Project proposes to increase the Dallas Metrocare Services capacity to serve older adults. The SOAR Project will provide outreach, screening, prevention, early intervention and treatment services specifically tailored to the needs of older adults. Mr. Aguilera said that this grant is for \$400,000 and there is strong national competition for it.
 - ✓ Presently pursuing two housing projects, a renewal and a new project;

amount of \$272,500 to fund a Tenant Based Rental Assistance program. This would continue to provide rental assistance to ten (10) chronic homeless individuals living with a mental illness and 10 homeless families with children receiving treatment for a mental illness.

- The new project is the Single Room Only (SRO) Housing Development, Project-Based Rental Assistance in the amount of \$1,500,000. The Single Room Only (SRO) Housing Development, Project-Based Rental Assistance for eighty (80) chronically homeless individuals living with a mental illness, many of whom will be dually diagnosed, will provide housing for DMS

consumers as well as consumers of the Veterans Administration. This will be in partnership with the VA and The Urban League of Greater Dallas. This project would benefit the homeless population living in the Ledbetter/Lancaster areas.

- ✓ An application in development is the Health and Human Services, Administration for Children and Families: Family and Youth Services Bureau, Basic Center Program. The request for \$198,603 was submitted and this Basic Target Program will target runaway and homeless youth. This proposal was designed to provide temporary safe shelter for up to 15 days plus provide counseling to youth and families to encourage reunification or develop safer alternative housing. A Host Home model will be implemented to provide the temporary shelter. This proposal is designed to serve up to 144 runaway youth in a twelve-month period. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

8. Report on Community Affairs Activities: Mr. Luna presented a written report with quarterly updates and highlights regarding community relation activities. Some of those activities included participation in community events as well as internal events taking place at the Center. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

9. Provider Services Monthly Report: Dr. Graves said that after the signing of the new contract with ValueOptions (V/O), Mental Health Services is adjusting to the changes. In mid May, the Center did a staff reduction to bring staffing down to the level required in the budget. Many of the staff were relocated to other units and are in the process of learning new skills. The next step will be to move more consumers to lower levels of care as part of the new contract with V/O.

Mental Retardation Services is working to develop its marketing capacity for Early Childhood Intervention (ECI), Vocational Services and Behavioral Psychiatric Services (BPS).

Focus continues on the five target areas: 1) insuring authorizations are requested timely; 2) insuring productivity meets and/or exceeds target; 3) monitoring denials and factors that may contribute to denial increases; 4) insuring services are charted when provided but no later than end of next business day; 5) and improving the quality of documentation. All of these areas show improvement with the exception of the charting quality. Team Leaders are conducting audits of these charts to assure better quality of documentation and they are also training staff in proper charting procedures.

Dr. Graves said that authorization submission timeliness has dropped significantly down from 13 to 3 days. There was a significant drop in productivity after the staff reduction, but this is beginning to trend upwards. Authorization denials went up slightly in May due primarily to one unit. They are working closely with this unit to balance between

authorization verification. Late charting improved significantly. Charting quality had a slight drop. Dr. Graves briefly spoke of some projects being worked on. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

Southwest Region: Dr. Balleza, Medical Director and David Aston, Operations Manager: Dr. Balleza reported that they continue to focus on services at the 10th and Zang location and to do outreach into the vicinity of the clinic. One incentive was an Open House for the boarding homes and businesses in the area. The clinic is also advertising free screenings for mental health, depression and bipolar disease and will be open to adults, children and adolescents. In addition they continue to focus on

productivity. ECI continues to increase referrals to that program. Dr. Balleza added that he and Mr. Aston had visited several houses for people living with HIV and AIDS and they are hoping to build a relationship with Parkland to offer help with mental services to people with HIV and AIDS. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

East Region: Dr. Grable, Medical Director and Daniel Byrd, Operations Manager: Dr. Grable said that they are focusing on productivity and that their biggest challenge at this time is the decrease in number of mental health clinicians and the re-assigning of caseloads. MH Services is presently going through a step-down-program and they are concentrating on educating staff on new processes. Dr. Grable reported that Mr. Byrd is working on a HOGG Grant and with DISD on a grant application to benefit the children in the Pleasant Grove area. There were no questions for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

10. Mental Retardation Authority Services Report: Ms. Thompson said that on June 3rd, DMS hosted a provider meeting for families and providers to meet and for families to choose the provider of their choice. Some of the services being offered were behavioral, respite, vocational and therapy services. Seven providers and over 150 families showed up. Staff is presently working on paperwork to get authorizations in place. Year to date approximately 2.5 million dollars have been spent on general revenue services. The goal for Determination of Mental Retardation (DMR) assessments was increased to facilitate getting the new families into the system and eligible to receive the services they require. This goal was not met due to the unit being down by one staff. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed account).

11. Quality Management Report: Ms. Thompson presented a written report with the activities that occurred during the month of May. She reported that to date there have been no confirmed Class I abuse and neglect incidents. Under the abuse and neglect report there were four allegations. One physical abuse allegation and one sexual abuse allegation were unconfirmed. One exploitation allegation that involved identity theft did not meet criteria for investigation by TDFPS, but it was referred to law enforcement and now the DA's office has the case. There was one neglect allegation that was referred back to DMS for disposition, as it did not meet criteria for investigation by TDFPS. DMS is now investigating that. Ms. Thompson said that there has been an upward trend in complaints since the beginning of this fiscal year. These relate primarily to the mental retardation division and the HCS wait list. This is due to miscommunication and inadequate communication to families about the process of getting on the wait list and the process of getting off the wait list. There were 8 deaths reported for the month of May. Four of the deaths involved consumers in the mental health division. Six of the deaths were attributed to medical conditions. In two cases the Medical

cause of death. None of the above deaths have been attributed to services provided by DMS. Under Health and Safety, there were primarily medication errors. At one of the external provider sites a consumer received someone else's medication. There were no adversary effects reported and the consumer was reported to be doing fine. On several occasions consumers did not receive their medication in a timely manner due to them not being present at their units at the time medication was due. There were 8 restraints applied to one individual during the month of May due to his aggressive behavior towards other non-ambulatory clients. This individual has been referred to BPS for services. There were no questions posed for this item. (Please refer to the June 23, 2005 Board packet for a detailed

V. EXECUTIVE SESSION: There were no issues to discuss

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

Minutes approved by:

Charles M. Cooper, Chairperson

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