

Thursday, January 25, 2024

9:00 A.M.

BOARD ROOM

4800 Fournace Place, Bellaire, TX 77401

The meeting may be viewed online: <http://harrishealthtx.swagit.com/live>.

*Notice: Some Board Members may participate by videoconference.

Mission

Harris Health is a community-focused academic healthcare system dedicated to improving the health of those most in need in Harris County through quality care delivery, coordination of care and education.

AGENDA

- I. Call to Order and Record of Attendance Dr. Andrea Caracostis 1 min
- II. [Approval of the Minutes of Previous Meeting](#) Dr. Andrea Caracostis 1 min
 - [Board Meeting – December 7, 2023](#)
- III. Announcements / Special Presentations Dr. Andrea Caracostis 30 min
 - A. CEO Report Including Special Announcements – *Dr. Esmaeil Porsa* (10 min)
 - B. [Consideration of Approval of Harris Health Appointments to the Harris Health Strategic Fund Board](#) (5 min)
 - C. [Special Announcement Regarding the Harris County Hospital District Foundation and the Harris Health Strategic Fund](#) (10 min)
 - [Harris County Hospital District Foundation Presentation Regarding the \\$1 Million Pledge to the Harris Health Strategic Fund](#)
 - D. Board Member Announcements Regarding Board Member Advocacy and Community Engagements (5 min)
- IV. [Public Comment](#) Dr. Andrea Caracostis 3 min
- V. Executive Session Dr. Andrea Caracostis 25 min
 - A. [Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Report of the Medical Executive Board in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including the Harris Health System Quality, Safety Performance Measures, Good Catch and Zero Harm, and Possible Action Regarding this Matter Upon Return to Open Session – Dr. Andrea Caracostis, Dr. Steven Brass and Dr. Yashwant Chathampally](#) (10 min)

- B. [Medical Executive Board Report and Credentialing Discussion, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff – *Dr. Martha Mims and Dr. Bradford Scott*](#) (10 min)
- C. [Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Including Credentialing Discussion and Operational Updates, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002 and Tex. Gov't Code Ann. §551.071 to Receive Peer Review and/or Medical Committee Report with Possible Action Upon Return to Open Session – *Dr. Otis Ekins*](#) (5 min)
- VI. Reconvene to Open Meeting** Dr. Andrea Caracostis 1 min
- VII. General Action Item(s)** Dr. Andrea Caracostis 10 min
- A. General Action Item(s) Related to Quality: Medical Staff
1. [Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff – *Dr. Martha Mims*](#) (2 min)
2. [Consideration of Approval of Revisions to Core Neurology Privileges – *Dr. Martha Mims*](#) (2 min)
- B. General Action Item(s) Related to Quality: Correctional Health Medical Staff
1. [Consideration of Approval of Credentialing Changes for Members of the Harris Health System Correctional Health Medical Staff – *Dr. Otis Ekins*](#) (2 min)
- C. General Action Item(s) Related to Community Health Choice
1. [Consideration of Approval of Reappointment of Members to the Community Health Choice, Inc. \(CHC\) and Community Health Choice Texas, Inc. \(CHCT\), collectively “Community”, Board of Directors – *Ms. Lisa Wright, CEO, Community Health Choice*](#) (2 min)
2. [Consideration of Approval of Appointment of Chair and Vice Chair Positions to the Community Health Choice, Inc. \(CHC\) and Community Health Choice Texas, Inc. \(CHCT\), collectively “Community”, Board of Directors – *Ms. Lisa Wright, CEO, Community Health Choice*](#) (2 min)
- VIII. New Items for Board Consideration** Dr. Andrea Caracostis 10 min
- A. [Consideration of Approval of CEO Evaluation Advisory Workgroup Charter](#) (5 min)
- B. Consideration of Approval of Appointment of Ms. Carol Paret and Mr. Jim Robinson to the Ambulatory Surgical Center at LBJ Governing Body (5 min)
- IX. Strategic Discussion** Dr. Andrea Caracostis 30 min
- A. Harris Health System Strategic Plan Initiatives
1. [November 7, 2023 Election Analysis Report – *Ms. Olga Rodriguez and Mr. Paul Rivera, Outreach Strategist*](#) (15 min)

B. [January Board Committee Meeting Reports:](#)

- [Governance Committee – Dr. Cody Pyke](#)
- [Quality Committee – Dr. Andrea Caracostis](#)
- [Joint Conference Committee – Dr. Andrea Caracostis](#)
- [DEI Committee – Ms. Marcia Johnson](#)

X. Consent Agenda Items

Dr. Andrea Caracostis 5 min

A. Consent Purchasing Recommendations

1. [Consideration of Approval of Purchasing Recommendations \(Items A1 through A77\) – Mr. DeWight Dopslauf and Mr. Jack Adger, Harris County Purchasing Office](#)
[\(See Attached Expenditure Summary: January 25, 2024\)](#)

B. Consent Committee Recommendations

1. [Consideration of Approval of 2024 Governance Committee Goals \[Governance Committee\]](#)
 - [Cultivate Continuing Education Among Board Members](#)
 - [Continue to Refine the Elections Process for the Board Officer Positions](#)
 - [Continue to Develop and Expand Board Self-Evaluation Processes](#)
 - [Develop Recommendations Around the Strategic Planning Process](#)
2. [Consideration of Approval of Revised 2024 DEI Reporting Schedule \[Diversity, Equity and Inclusion Committee\]](#)

Dr. Cody Pyke

C. Consent Grant Recommendations

1. [Consideration of Approval of Grant Recommendation \(Items C1-C3\) – Dr. Jennifer Small](#)
[\(See Attached Expenditure Summary: January 25, 2024\)](#)

D. New Consent Items for Board Approval

1. [Consideration of Acceptance of the Harris Health System November 2023 Financial Report Subject to Audit – Ms. Victoria Nikitin](#)
2. [Consideration of Approval to Enter into a Behavioral Health Constable Transportation Agreement with Harris County Constable Precinct One – Ms. Elizabeth Hanshaw Winn and Dr. Amy Smith](#)

E. Consent Reports and Updates to the Board

1. [Harris Health System Council-At-Large November 13, 2023 Meeting Minutes – Dr. Jennifer Small](#)

{End of Consent Agenda}

XI. Item(s) Related to the Health Care for the Homeless Program	Dr. Andrea Caracostis	20 min
<p>A. Review and Acceptance of the Following Reports for the Health Care for the Homeless Program (HCHP) as Required by the United States Department of Health and Human Services, which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act – <i>Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge</i></p> <ul style="list-style-type: none"> <li data-bbox="217 499 704 527">• HCHP January 2024 Operational Update 		(16 min)
<p>B. Consideration of Approval of the HCHP Consumer Advisory Council Report – <i>Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge</i></p>		(1 min)
<p>C. Consideration of Approval of the HCHP 1966 Budget Fund Grant – <i>Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge</i></p>		(1 min)
<p>D. Consideration of Approval of the HCHP C8E Capital Board Changes – <i>Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge</i></p>		(1 min)
<p>E. Consideration of Approval of the HCHP Quality Management Report – <i>Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge</i></p>		(1 min)
XII. Executive Session	Dr. Andrea Caracostis	65 min
<p>D. Employment Matters Regarding Community Health Choice Texas, Inc. and Community Health Choice, Inc., Pursuant to Tex. Gov't Code Ann. §551.085 and Tex. Gov't Code Ann. §551.071, and Possible Action Upon Return to Open Session – <i>Ms. Sara Thomas</i></p>		(10 min)
<p>E. Consultation with Attorney Regarding Dialysis Center Governing Body Bylaws, Pursuant to Tex. Gov't Code Ann. §551.071, and Possible Action Upon Return to Open Session, Including Consideration of Approval of Governing Body Bylaws of the Harris Health System Dialysis Center at Quentin Mease Health Center – <i>Ms. Sara Thomas, Ms. Katie Rutherford and Mr. Matthew Reeder</i></p>		(15 min)
<p>F. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Health Care Program Requirements, Including Status of Fraud and Abuse Investigations, Pursuant to Tex. Health & Safety Code Ann. §161.032 – <i>Ms.Carolynn Jones</i></p>		(10 min)
<p>G. Discussion Regarding Evaluation and Employment Matters Related to the Chief Executive Officer (CEO), Pursuant to Tex. Gov't Code Ann. §551.071 and Tex. Gov't Code Ann. §551.074, and Possible Action Upon Return to Open Session, Including Consideration of Approval of FY2024 CEO Objectives and Approval of FY2023 CEO Evaluation – <i>Board of Trustees</i></p>		(30 min)
XIII. Reconvene	Dr. Andrea Caracostis	1 min
XIV. Adjournment	Dr. Andrea Caracostis	1 min

MINUTES OF THE HARRIS HEALTH SYSTEM BOARD OF TRUSTEES

Board Meeting

Thursday, December 7, 2023

9:00 am

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATION
I. Call to Order and Record of Attendance	<p>The meeting was called to order at 9:02 a.m. by Andrea Caracostis, MD, MPH, Chair. It was noted that a quorum was present and the attendance was recorded. Dr. Johnson stated while some of Board members are in the room with us today, others will participate by videoconference as permissible by state law and the Harris Health Videoconferencing Policy. The meeting may be viewed online: http://harrishealthtx.swagit.com/live.</p>	<p>A copy of the attendance is appended to the archived minutes.</p>
II. Approval of the Minutes of Previous Meeting	<ul style="list-style-type: none"> Board Meeting – October 26, 2023 	<p><u>Motion No. 23.12-167</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve the minutes of the October 26, 2023 meeting. Motion carried.</p>
	<ul style="list-style-type: none"> HRSA Special Call Board Meeting – November 9, 2023 	<p><u>Motion No. 23.12-168</u> Moved by Ms. Jennifer Tijerina, seconded by Ms. Sima Ladjevardian, and unanimously passed that the Board approve the minutes of the November 9, 2023 meeting. Motion carried.</p>

<p>III. Announcements/ Special Presentations</p>	<p>A. CEO Report Including Special Announcements</p> <ul style="list-style-type: none"> • Bond Election Results • Introduction of Harris Health Strategic Fund Board Members and an Announcement of Gift <p>Dr. Esmail Porsa, President and Chief Executive Officer (CEO), delivered the CEO Report, including special announcements. He thanked the voters of Harris County, Harris Health employees, medical staff and the Board for their vote of confidence and support in the approval of a \$2.5B Harris Health Bond Proposal. He stated that Harris Health plans to break ground on the new hospital no later than May 2025. Dr. Porsa shared that Harris Health, in partnership with The University of Texas Health Science Center at Houston, has expanded its Food Farmacy Program to high-risk pregnant women patients. Through generous philanthropic support, Harris Health was able to provide expecting mothers with flower bouquets during the Thanksgiving holiday to further create a sense of connectedness and make patients feel cared for. Dr. Porsa stated that on Thursday, December 19, 2023, Harris Health will host its annual sandwich making contest at Lyndon B. Johnson (LBJ) Hospital. He mentioned that last year Harris Health provided 730 lunch bags (sandwich, drink and chips) to its community in partnership with Destined for Empowerment. This year, the goal is to feed 1,500 members through additional partnerships with Bread of Life and Super Neighborhoods covering Cashmere Elementary and Key Middle School. Dr. Porsa encouraged the Board members to create a team or to participate individually in this initiative. Additionally, Dr. Porsa introduced the esteemed members of the Harris Health Strategic Fund Board, which includes Ms. Beth Robertson, Chair; Mr. Ed Allday; Ms. Sonceria “Sonny” Messiah Jiles; and Ms. Ginni Mithoff. A copy of the CEO Report is available in the permanent record.</p>	<p>As Presented.</p>
	<p>B. Board Member Announcements Regarding Board Member Advocacy and Community Engagements</p> <ul style="list-style-type: none"> • First Friday’s will Resume in February <p>Ms. Olga Rodriguez, Vice President, Corporate Communications & Board Services, announced that due to the upcoming holiday season, the First Friday Tours have been cancelled and will resume in February 2024.</p>	<p>As Presented.</p>
<p>V. Executive Session</p>	<p>At 9:15 a.m., Dr. Caracostis stated that the Board would enter into Executive Session for Items V. ‘A through C’ as permitted by law under Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Ann. §151.002, Tex. Occ. Code Ann. §160.007, and Tex. Gov’t. Code Ann. §551.071.</p>	

	<p>A. Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Report of the Medical Executive Board in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including the Harris Health System Quality, Safety Performance Measures, Good Catch and Zero Harm, and Possible Action Regarding this Matter Upon Return to Open Session</p>	<p>No Action Taken.</p>
	<p>B. Medical Executive Board Report and Credentialing Discussion, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff</p>	<p>No Action Taken.</p>
	<p>C. Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Including Credentialing Discussion and Operational Updates, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002 and Tex. Gov't Code Ann. §551.071 to Receive Peer Review and/or Medical Committee Report with Possible Action Upon Return to Open Session</p>	<p>No Action Taken.</p>
<p>VI. Reconvene to Open Meeting</p>	<p>At 9:27 a.m., Dr. Caracostis reconvened the meeting in open session; she noted that a quorum was present and that no action was taken in Executive Session.</p>	
<p>VII. General Action Item(s)</p>		
	<p>A. General Action Item(s) Related to Quality: Medical Staff</p>	
	<p>1. Approval of Credentialing Changes for Members of the Harris Health System Medical Staff</p> <p>Dr. Martha Mims, Chair, Medical Executive Board, presented the credentialing changes for members of the Harris Health System Medical Staff. For December 2023, there were thirty – four (34) initial appointments, thirty – five (35) reappointments, two (2) change/add privileges, and twenty (20) resignations. A copy of the credentialing report is available in the permanent record.</p>	<p><u>Motion No. 23.12-169</u> Moved by Ms. Sima Ladjevardian, seconded by Ms. Carol Paret, and majority passed that the Board approve agenda item VII.A.1. Ms. Jennifer Tijerina opposed the motion. Motion carried.</p>

	<p>B. General Action Item(s) Related to Quality: Correctional Health Medical Staff</p>	
	<p>1. Approval of Credentialing Changes for Members of the Harris Health System Correctional Health Medical Staff</p> <p>Dr. Otis Ekins, Chief Medical Officer, Harris Health Correctional Health, presented the credentialing changes for members of the Harris Health System Correctional Health Medical Staff. For December 2023, there were six (6) initial appointments. A copy of the Correctional Health credentialing report is available in the permanent record.</p>	<p>Motion No. 23.12-170 Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item VII.B.1. Motion carried.</p>
<p>IV. Public Comment</p>	<p>Item Taken Out of Order</p> <p>Commissioner Adrian Garcia, Harris County Precinct 2, recognized the Board on the passing of Harris Health’s \$2.5B bond proposal. He noted that Harris Health provides lifesaving care to children and families of Harris County without insurance. Commissioner Garcia expressed his thanks to Dr. Porsa, Harris Health leadership and staff for their dedication to improving the health of those most in need.</p>	
<p>VIII. New Items for Board Consideration</p>		
	<p>A. Board Officer Elections for the Positions of Chair, Vice Chair and Secretary for the 2024 Calendar Year</p> <p>Dr. Caracotis stated per Article V, Section 1, of the Harris Health Board of Trustees Bylaws, the Board must conduct annual elections of officers of the Chair, Vice Chair, and Secretary. Therefore, the Board will need to conduct elections for the Board officers for calendar year 2024. Dr. Caracotis noted that prior to this meeting, a communication was sent to solicit interest for 2024 Board officer positions, and the following nominations were received:</p> <ul style="list-style-type: none"> I. Dr. Andrea Caracostis: Board Chair II. Dr. Cody M. Pyke: Vice Chair III. Ms. Carol Paret: Secretary <p>Dr. Caracotis requested nominations from the floor for the offices of Chair, Vice Chair, and Secretary. There were no nominations received from the floor.</p>	

	<p>Dr. Caracostis motioned for a roll call vote for Board Chair as follows:</p> <ul style="list-style-type: none">○ Ms. Sima Ladjevardian – yes○ Ms. Carol Paret – yes○ Dr. Cody M. Pyke – yes○ Ms. Jennifer Tijerina – yes○ Dr. Andrea Caracostis – yes <p>The final results were announced with five (5) votes in favor of Dr. Andrea Caracostis as the Chair.</p> <p>Dr. Caracostis motioned for a roll call vote for Vice Chair as follows:</p> <ul style="list-style-type: none">○ Ms. Sima Ladjevardian – yes○ Ms. Carol Paret – yes○ Dr. Andrea Caracostis – yes○ Ms. Jennifer Tijerina – yes○ Dr. Cody M. Pyke – yes <p>The final results were announced with five (5) votes in favor of Dr. Cody M. Pyke as the Vice Chair.</p> <p>Dr. Caracostis motioned for a roll call vote for Secretary as follows:</p> <ul style="list-style-type: none">○ Ms. Sima Ladjevardian – yes○ Ms. Carol Paret – yes○ Dr. Andrea Caracostis – yes○ Dr. Cody M. Pyke – yes○ Ms. Jennifer Tijerina – yes <p>The final results were announced with five (5) votes in favor of Ms. Carol Paret as the Secretary.</p>	<p><u>Motion No. 23.12-171</u> Moved by Dr. Andrea Caracostis, seconded by Ms. Sima Ladjevardian, and unanimously passed that the Board approve the appointment of Dr. Caracostis as the Board Chair.</p> <p><u>Motion No. 23.12-172</u> Moved by Dr. Andrea Caracostis, seconded by Ms. Sima Ladjevardian, and unanimously passed that the Board approve the appointment of Dr. Pyke as the Vice Chair.</p> <p><u>Motion No. 23.12-173</u> Moved by Dr. Andrea Caracostis, seconded by Ms. Sima Ladjevardian, and unanimously passed that the Board approve the appointment of Ms. Paret as the Secretary.</p>
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	<p>B. Approval of the Appointment of 2024 Committee Members</p> <p>Dr. Caracostis presented the appointment of the 2024 Committee members as follows:</p> <p><u>Quality Committee:</u></p> <ul style="list-style-type: none">• Dr. Andrea Caracostis, Chair• Ms. Afsheen Davis• Dr. Cody M. Pyke• Ms. Sima Ladjevardian <p><u>Compliance and Audit Committee</u></p> <ul style="list-style-type: none">• Ms. Barbie Robinson, Chair• Ms. Jennifer Tijerina• Ms. Carol Paret <p><u>Governance Committee</u></p> <ul style="list-style-type: none">• Dr. Cody M. Pyke, Chair• Ms. Afsheen Davis• Ms. Marcia Johnson <p><u>Diversity, Equity and Inclusion</u></p> <ul style="list-style-type: none">• Ms. Marcia Johnson, Chair• Dr. Cody M. Pyke• Ms. Jennifer Tijerina <p><u>Budget and Finance Committee</u></p> <ul style="list-style-type: none">• Ms. Marcia Johnson, Chair• Ms. Carol Paret• Mr. Jim Robinson <p><u>Joint Conference Committee</u></p> <ul style="list-style-type: none">• Dr. Andrea Caracostis, Chair• Ms. Sima Ladjevardian	<p><u>Motion No. 23.12-174</u></p> <p>Moved by Dr. Cody M. Pyke, seconded by Ms. Sima Ladjevardian, and unanimously passed that the Board approve the appointment of 2024 Committee Members. Motion carried.</p>
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	<p>C. Approval of the Tentative Harris Health System 2024 Board of Trustees Calendar</p>	<p>Motion No. 23.12-175 Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve the Harris Health System 2024 Board of Trustees Calendar. Motion carried.</p>
	<p>D. Approval of Revisions to the Joint Conference Committee Charter</p>	<p>Motion No. 23.12-176 Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve the revisions to the Joint Conference Committee Charter. Motion carried.</p>
<p>IX. Strategic Discussion</p>		
	<p>A. Harris Health System Strategic Plan Initiatives</p>	
	<p>1. Presentation Regarding Harris Health Strategic Plan Update: LBJ Hospital Expansion Project</p> <p>Ms. Olga Rodriguez, Vice President, Corporate Communications & Board Services, presented an overview of community engagements and MWBE outreach events. Ms. Patricia Darnauer, Executive Vice President and Administrator, LBJ, delivered a presentation regarding Harris Health Strategic Plan: LBJ Hospital Expansion Project. She touched upon the design development meetings, campus plan, site, and exterior development. Mr. Patrick Casey, Senior Vice President, Facility, Construction and Systems Engineering, provided an overview of the hospital’s sustainability and schedule of project planning. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>

	<p>B. November Board Committee Meeting Reports:</p> <p><u>Governance Committee</u> Dr. Andrea Caracostis stated that the Governance Committee met on November 7, 2023, and the following topics were covered:</p> <ul style="list-style-type: none"> • Dr. Caracostis provided an update regarding the 2024 Board Officer Nominations. • The Committee discussed the proposed 2024 Board of Trustees Calendar and meeting frequency. • The Committee discussed 2024 Committee Agenda Items and Goals. • Ms. Sara Thomas, Chief Legal Officer, opened the discussion on the draft Standard Operating Procedures compiled with Board member input. Dr. Pyke facilitated a robust discussion on all of outstanding issues in the Standard Operating Procedures and the committee voted to recommend revised Procedures to the Board at the December meeting. <p><u>Quality Committee</u> Dr. Caracostis noted that the following topics were covered in open session at the Quality Committee meeting on November 7, 2023:</p> <ul style="list-style-type: none"> • The monthly High Reliability Organization (HRO) Video “Communication for Safer Care” was displayed. • Research is an integral part of the mission and vision of Harris Health System. The annual research report highlighted the human subject research activities within the Harris Health System conducted in collaboration with our academic partners. <p><u>Joint Conference Committee</u> Dr. Caracostis stated that the Joint Conference Committee met on November 9, 2023, and the following topics were covered:</p> <ul style="list-style-type: none"> • The Committee received an update from Dr. Martha Mims, Chair, MEB and Dr. Kunal Sharma, Vice Chair, MEB, regarding the Medical Executive Board. • The Committee received an update from Dr. Tien Ko, Chief of Staff, LBJ and Dr. Sandeep Markan, Chief of Staff, Ben Taub Hospital, related to the System’s pavilions. • The Committee received an update from Dr. Mohammad Zare, Vice Chief of Staff, ACS and Dr. Markan (<i>in lieu of Dr. Fareed Khan</i>) related to Ambulatory Care Services. • The Committee discussed capacity management at acute pavilions. • Dr. Mims presented recommendation of revisions to the Harris Health System Medical Staff Bylaws. • The Committee discussed agenda items and 2024 Joint Conference Committee meeting frequency. • Dr. Brass led the discussion regarding the Harris Health Core Value Awards. 	<p>As Presented.</p>
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Budget & Finance Committee

Dr. Caracostis (*in lieu of Ms. Marcia Johnson, Committee Chair*) stated that the Budget and Finance Committee met on November 9, 2023 and the following topics were covered:

- Ms. Victoria Nikitin, Chief Financial Officer, delivered a presentation of the Harris Health System Fourth Quarter Fiscal Year 2023 Investment Report.
- Ms. Nikitin presented on the Harris Health System Third Quarter Calendar Year 2023 Pension Plan Report.
- Ms. Nikitin presented on the Harris Health System September 2023 Quarterly Financial Report Subject to Audit.
- Ms. Pollie Martinez, Associate Administrator, Patient Access, presented on the Subsidy Payments to Community Health Choice, Inc. for the Health Insurance Marketplace non-federal premium payments for eligible Harris Health patients for Calendar Year 2024.

Diversity, Equity & Inclusion (DEI) Committee

Dr. Caracostis (*in lieu of Ms. Marcia Johnson, Committee Chair*) mentioned that the Diversity, Equity, and Inclusion Committee met on November 17, 2023, and the following items were presented:

- Mr. Derek Holmes, Administrative Director, Contracting Diversity, delivered an update regarding Harris Health’s Minority/Woman-Owned Business Enterprises.
- Ms. Ashley Smith, Manager, Employee Experience and Culture, delivered an update regarding Harris Health’s Employee Engagement.
- Dr. Chethan Bachireddy, Senior Vice President, Chief Health Officer, delivered a presentation regarding health disparities and an extensive follow-up discussion was held.

The Committee discussed future agenda topics. Dr. Porsa proposed a calendar of topics enabling a more robust presentation.

Compliance & Audit Committee

Dr. Caracostis (*in lieu of Ms. Barbie Robinson, Committee Chair*) noted that the Compliance & Audit Committee met on November 9, 2023 and the following topics were covered:

- A presentation regarding the Harris Health System Independent Auditor’s pre-audit communication for the Fiscal Year Ended September 30, 2023 was presented by Mr. Chris Clark with FORVIS for information purposes only.
- The Committee had a discussion regarding the 2024 Compliance and Audit Committee Meeting frequency and agreed to maintain quarterly meetings with a commitment to meet more frequently if needed.

	<p>The following items were presented by the Chief Assistant County Auditor for information purposes only:</p> <ul style="list-style-type: none">• Internal Audit Annual Status Update:<ul style="list-style-type: none">• Overview of audit team’s organization and credentials.• Summary of Post-Engagement Survey results – 29% survey response rate; Internal Audit received ratings ranging from 4.5 to 4.8 on a 5.0 scale.• FY2023 Audit Plan status – Thirteen (13) audits completed; four (4) audits in progress (Baylor Provider Invoicing, Medical Device Security, MWBE Program & Policy, HIPAA Privacy Controls); one (1) audit delayed (Non- Formulary Drug Process Audit).• Overview of four (4) recently-completed audits – Follow-up on 2019 Guidehouse Grant Accounting Process Assessment; Cybersecurity Training Compliance; Physician Preference Cards Consulting Engagement; PeopleSoft Change Management.• Overview of outstanding management action plans (MAPs) – Fourteen (14) MAPs from seven (7) prior audits (UT Provider Invoicing; Vendor Payment Timeliness; Procurement; PeopleSoft Change Management; Business Continuity and Disaster Recovery; Telemedicine; Follow-up on Guidehouse Grant Accounting Process Assessment). There were two (2) past-due, high-priority MAPs from the Business Continuity and Disaster Recovery and Telemedicine audits.• Highlights from FY2024 Annual Risk Assessment and Audit Plan Process. <p>The following items were recommended by the Committee for approval to the full Board of Trustees and will appear on the Board’s Consent Agenda for approval:</p> <ul style="list-style-type: none">• Harris Health System Internal Audit Charter;• FY 2024 Internal Audit Plan;• FY 2024 Compliance Program (including Information Security) Plan; and• FY 2024 Internal Quality Audit (Accreditation) Plan. <p><u>ASC at LBJ Governing Body – PULLED</u></p>	
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X. Consent Agenda Items		
	A. Consent Purchasing Recommendations	
	<p>1. Approval of Purchasing Recommendations (Items A1 through A74)</p> <p>Mr. DeWight Dopslauf, Purchasing Agent, Harris County Purchasing Agent, noted a correction to the purchasing recommendation for Item A2: Cigna Health & Life Insurance Company has a renewal ending term in 2023 and it should be 2024. Copies of the purchasing recommendations are available in the permanent record.</p>	<p><u>Motion No. 23.12-177</u> Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.A.1. with noted corrections. Motion carried.</p>
	B. Consent Committee Recommendations	
	<p>Item Taken Out of Order</p> <p>1. Approval of Revisions to the Harris Health System Board Standard Operating Procedures</p>	<p><u>Motion No. 23.12-179</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and majority passed that the Board approve agenda item X.B.1, the revisions to the Harris Health System Board Standard Operating Procedures. Ms. Jennifer Tijerina opposed the motion. Motion carried.</p>
	<p>2. Acceptance of the Harris Health System Fourth Quarter Fiscal Year 2023 Investment Report</p>	<p><u>Motion No. 23.12-178</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B.2 – 7. Motion carried.</p>
	<p>3. Acceptance of the Harris Health System Third Quarter Calendar Year 2023 Pension Plan Report</p>	<p><u>Motion No. 23.12-178</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B.2 – 7. Motion carried.</p>

	<p>4. Acceptance of the Harris Health System September 2023 Quarterly Financial Report Subject to Audit</p>	<p><u>Motion No. 23.12-178</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B.2 – 7. Motion carried.</p>
	<p>5. Approval for Subsidy Payments to Community Health Choice, Inc. for the Health Insurance Marketplace Non-Federal Premium Payments for Eligible Harris Health Patients for Calendar Year 2024</p>	<p><u>Motion No. 23.12-178</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B.2 – 7. Motion carried.</p>
	<p>6. Approval of the Harris Health System FY2024 Internal Audit Charter by the Harris Health System Board of Trustees</p>	<p><u>Motion No. 23.12-178</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B.2 – 7. Motion carried.</p>
	<p>7. Approval of Revisions to the Harris Health System Medical Staff Bylaws</p>	<p><u>Motion No. 23.12-178</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B.2 – 7. Motion carried.</p>

	C. Consent Grant Recommendations	
	1. Approval of Grant Recommendations (Item C1)	Motion No. 23.12-180 Moved by Ms. Sima Ladjevardian, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.C. and X.D. Motion carried.
	D. New Consent Items for Board Approval	
	1. Acceptance of the Harris Health System YTD Ended October 31, 2023 Financial Report Subject to Audit	Motion No. 23.12-180 Moved by Ms. Sima Ladjevardian, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.C. and X.D. Motion carried.
	2. Approval of the Harris Health System Investment Policy	Motion No. 23.12-180 Moved by Ms. Sima Ladjevardian, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.C. and X.D. Motion carried.
	3. Approval to Amend the Lease with Farha International, Inc. for the Monroe Health Center, Located at 8539 Gulf Freeway, Houston, Texas 77017	Motion No. 23.12-180 Moved by Ms. Sima Ladjevardian, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.C. and X.D. Motion carried.

	<p>E. Consent Reports and Updates to the Board</p>	
	<p>1. Updates Regarding Pending State and Federal Legislative and Policy Issues Impacting Harris Health System</p>	<p>For Informational Purposes Only</p>
	<p>2. Harris Health System Council-At-Large October Meeting Minutes <i>{End of Consent Agenda}</i></p>	<p>For Informational Purposes Only</p>
<p>XI. Item(s) Related to Health Care for the Homeless Program</p>		
	<p>A. Review and Acceptance of the Following Report(s) for the Health Care for the Homeless Program (HCHP) as Required by the United States Department of Health and Human Services, which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act</p> <ul style="list-style-type: none"> • HCHP December 2023 Operational Update <p>Ms. Tracey Burdine, Director, Health Care for the Homeless Program, delivered a presentation regarding the Health Care for the Homeless Program December 2023 Operational Update including Patient Services, Budget Summary Report, and Patient Satisfaction Report. Ms. Burdine reported that there were 506 new adult patients, eighteen (18) returning telehealth patients, and forty – three (43) new pediatric patients associated with the program. She stated that for the month of October, HCHP served 1,236 unduplicated patients, of which 972 patients were seen for family practice services. She also noted that there were 2,411 completed visits during the month of October. Ms. Burdine presented the Q3 Budget Summary Report, stating that the program has utilized approximately 38% of the overall budget year – to – date, and it has utilized less than 20% of the allocated funds towards operating costs such as travel, equipment and other expenses. She noted that the capital project funds are earmarked for the renovation of the program’s Open Door Mission clinic project. She stated that although the project was temporarily suspended while awaiting multiple approvals from The Health Resources and Services Administration (HRSA) regarding program requirements, HCHP is currently moving forward with the renovations. Ms. Burdine presented the HCHP Patient Satisfaction Report, noting that corrective action plans will include recommending provider/provider listens to ensure that all nurses and providers improve their communications skills. Dr. Pyke recommended including the response rate as it relates to how many patients have completed the surveys. A copy of the presentation is available in the permanent record.</p>	<p><u>Motion No. 23.12-181</u> Moved by Ms. Carol Paret, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XI.A. Motion carried.</p>

	<p>B. Approval of the HCHP Budget Summary Report</p>	<p><u>Motion No. 23.12-182</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XI.B. Motion carried.</p>
	<p>C. Approval of the HCHP Patient Satisfaction Report</p>	<p><u>Motion No. 23.12-183</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XI.C. Motion carried.</p>
<p>XII. Executive Session</p>	<p>At 10:24 a.m., Dr. Caracostis stated that the Board would enter into Executive Session for Items XII. 'D through G' as permitted by law under Tex. Gov't Code Ann. §418.183, Tex. Gov't Code Ann. §551.071, Tex. Gov't Code Ann. §551.074, Tex. Gov't Code Ann. §551.085, Tex. Gov't Code Ann. §551.089, Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code. Ann. §160.007 and Tex. Occ. Ann. §151.002.</p>	
	<p>D. Consideration of Approval of the 2024 Operating and Capital Budget for Community Health Choice Texas, Inc. and Community Health Choice, Inc., Pursuant to Tex. Gov't Code Ann. §551.085 Upon Return to Open Session</p>	<p><u>Motion No. 23.12-184</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XII.D. Motion carried.</p>
	<p>E. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Health Care Program Requirements, Including Status of Fraud and Abuse Investigations, Pursuant to Tex. Health & Safety Code Ann. §161.032, Including Consideration of Approval of the Compliance Program Audit Plan and Internal Quality Audit Plan Upon Return to Open Session</p>	<p><u>Motion No. 23.12-185</u> Moved by Dr. Cody M. Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XII.E. Motion carried.</p>

	F. Consideration of Approval of the Harris County Auditor’s FY2024 Internal Audit Plan, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §151.002, Tex. Gov’t Code Ann. §418.183 and Tex. Gov’t Code Ann. §551.089 Upon Return to Open Session	Motion No. 23.12-186 Moved by Ms. Sima Ladjevardian, seconded by Ms. Carol Paret, and unanimously passed that the Board approve agenda item XII.F. Motion carried.
	G. Discussion and Consultation with Attorney Regarding the Evaluation and Employment Matters Related to the Chief Executive Officer (CEO), Pursuant to Tex. Gov’t Code Ann. §551.071 and Tex. Gov’t Code Ann. §551.074	No Action Taken.
XIII. Reconvene	At 11:50 a.m., Dr. Caracostis reconvened the meeting in open session; she noted that a quorum was present and that no action was taken in Executive Session. The Board took action on Items “D, E, and F” of the Executive Session agenda, as reflected above.	
XIV. Adjournment	Moved by Ms. Sima Ladjevardian, seconded by Ms. Carol Paret, and unanimously approved to adjourn the meeting. There being no further business to come before the Board, the meeting adjourned at 11:51 a.m.	

I certify that the foregoing are the Minutes of the Harris Health System Board of Trustees Meeting held on December 7, 2023

Respectfully Submitted,

Andrea Caracostis, MD, MPH, Chair

Minutes transcribed by Cherry A. Pierson, MBA

Thursday, December 7, 2023

Harris Health System Board of Trustees Board Meeting – Attendance

Note: For Zoom meeting attendance, if you joined as a group and would like to be counted as present, please submit an email to:

BoardofTrustees@harrishealth.org before close of business the day of the meeting.

BOARD MEMBERS PRESENT	BOARD MEMBERS ABSENT
Dr. Andrea Caracostis (<i>Presiding Chair</i>)	Ms. Afsheen Davis
Ms. Barbie Robinson	
Ms. Carol Paret	
Dr. Cody M. Pyke	
Ms. Jennifer Tijerina	
Mr. Jim Robinson	
Ms. Marcia Johnson	
Ms. Sima Ladjevardian	

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Amineh Kostov	Dr. Glorimar Medina
Amy Smith	Dr. Hemant Roy
Anna Mateja (<i>Community Health Choice</i>)	Jack Adger (<i>Harris County Purchasing Office</i>)
Anthony Williams	Dr. Jackie Brock
Antoinette “Toni” Cotton	Jennifer Zarate
Beth Robertson (<i>Harris Health Strategic Fund</i>)	Jerry Summers
Carolynn Jones	Jessey Thomas
Cherry Pierson	John Matcek
Christian Menefee (<i>Harris County Attorney’s Office</i>)	Jonathan Fombonne (<i>Harris County Attorney’s Office</i>)
Commissioner Adrian Garcia (<i>Harris County Precinct 2</i>)	Dr. Joseph Kunisch
Daniel Smith	Kari McMichael
Derek Curtis	Dr. Kunal Sharma
DeWight Dopslauf (<i>Harris County Purchasing Office</i>)	Lisa Wright (<i>Community Health Choice President & CEO</i>)
Ebon Swofford (<i>Harris County Attorney’s Office</i>)	Louis Smith
Ed Allday (<i>Harris Health Strategic Fund</i>)	Maria Cowles
Elizabeth Hanshaw Winn (<i>Harris County Attorney’s Office</i>)	Dr. Martha Mims
Dr. Esmail Porsa (<i>Harris Health System President & CEO</i>)	Dr. Matasha Russell
Dr. Esperanza “Hope” Galvan	Michael Hill
Gavin Parr	Nicholas J. Bell
Ginni Mithoff (<i>Harris Health Strategic Fund</i>)	Olga Rodriguez

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Omar Reid	Sharon Brantley Smith <i>(Harris County Auditor's Office)</i>
Dr. Otis R. Egin	Shawn DeCosta
Patricia Darnauer	Sonceria "Sonny" Messiah Jiles <i>(Harris Health Strategic Fund)</i>
Patrick Casey	Dr. Steven Brass
R. King Hillier	Tai Nguyen
Randy Bates	Dr. Tien Ko
Randy Manarang	Tracey Burdine
Sam Karim	Victoria Nikitin
Dr. Sandeep Markan	Vivian Ho-Nguyen
Sara Thomas <i>(Harris County's Attorney's Office)</i>	

Thursday, January 25, 2024

Consideration of Approval of the Harris Health Strategic Fund board positions available for appointment by the Harris Health System Board of Trustees.

The Bylaws of the Harris Health Strategic Fund (HH Strategic Fund) state that Harris Health shall appoint the majority number of Directors to the HH Strategic Fund Board.

- HH Strategic Fund Board shall consist of no fewer than three (3) and no more than fifteen (15) voting Directors, such number to be determined by the HH Strategic Fund Board.
- The Chair of the Harris Health Board of Trustees and the President and the Harris Health CEO are automatic voting directors of the Strategic Fund Board of Directors.
- Additionally, the positions available for appointment by the Harris Health Board of Trustees shall outnumber the positions elected by the Harris Health Strategic Fund.

The Harris Health Strategic Fund requests consideration of approval and appointment of the following individuals including community leaders and a Harris Health Board member to the Harris Health Strategic Fund Board of Directors.

Thank you.



Maria M. Cowles

Executive Vice President Chief Strategy Officer / Chief of Staff



Harris Health Board of Trustees Meeting
January 25, 2024

Agenda Item

Consideration of Approval of the Harris Health Strategic Fund board of director positions available for appointment by the Harris Health System Board of Trustees.

Background Information:

Composition of Harris Health Strategic Fund (HH Strategic Fund) Board of Directors as stated in the Strategic Fund By-Laws are as follows:

1. The HH Strategic Fund Board shall consist of no fewer than three (3) and no more than (15) voting Directors. The number of Directors shall always be an odd number and the positions available for appointment by the Harris Health Board of Trustees (Harris Health Board) shall always outnumber the positions elected by the HH Strategic Fund.
2. The Board shall be comprised as follows:
 - a. Chair of the Harris Health Board Chair or his or her designee
 - b. President and Chief Executive Officer of Harris Health or his or her designee
 - c. Up to eight (8) Directors (including (a) and (b) above) appointed by the Harris Health Board, or by delegation order of the Harris Health Board, with no more than two (2) such appointees (in addition to (1) above) to be active Harris Health Board members (appointed Directors)
 - d. Up to seven (7) Directors elected by majority vote of the HH Strategic Fund (elected Directors)

HH Strategic Fund requests consideration by the Harris Health Board of Trustees for the appointment of the following individuals to the Harris Health Strategic Fund Board Directors as Harris Health Appointed Directors :

1. Edwin (Ed) Allday
2. Sonceria Messiah (Sonny) Jiles
3. Ginni Mithoff
4. Carol Paret, Harris Health Trustee
5. Beth Robertson, HH Strategic Fund Board Chair
6. Massey Villareal

Thursday, January 25, 2024

Harris County Hospital District Foundation (HCHD Foundation) updating the Harris Health System Board on the \$1 million pledge to the Harris Health Strategic Fund

The HCHD Foundation's Board of Trustees has unanimously approved a \$1 million pledge to the Harris Health Strategic Fund to be paid over a 5-year period in the amount of \$200,000.00 per year beginning on 3/15/24.

Theo Franklin, HCHD Foundation Board Chair, will be presenting a large check to Beth Robertson, Harris Health Strategic Fund Board Chair, in the amount of \$1 million.

The HCHD Foundation is pleased to support the future of the Harris Health System and all of the excellent care provided by all of the doctors, nurses and staff to all of the citizens of Harris County.



Maria M. Cowles

Executive Vice President Chief Strategy Officer / Chief of Staff

Public Comment Request and Registration Process

Pursuant to Texas Government Code §551.007, members of the public are invited to attend the regular meetings of the Harris Health System Board of Trustees and may address the Board during the Public Comment segment regarding an official agenda item that the Board will discuss, review, or take action upon, or regarding a subject related to healthcare or patient care rendered at Harris Health System. Public Comment will occur prior to the consideration of all agenda items. If you have signed up to attend as a Public Speaker virtually, a meeting link will be provided. Note: Public Speakers will be removed from the meeting after speaking and have the option to join the meeting live via <http://harrishealthtx.swagit.com/live>.

How to Request to Address the Board of Trustees

Members of the public must register in advance to speak at the Harris Health System Board of Trustees meetings. To register, members of the public must contact the Board of Trustees Office during core business hours, Monday through Friday between 8:00 a.m. to 5:00 p.m. Members of the public must submit the registration no later than 4:00 p.m. on the day before the scheduled meeting and may only register in one of the following manners:

1. Providing the requested information located in the “Speak to the Board” tile found at: <https://www.harrishealth.org/about-us-hh/board/Pages/public-comment-request-and-registration-process.aspx>.
2. Printing and completing the downloadable registration form found at: <https://www.harrishealth.org/about-us-hh/board/Pages/public-comment-request-and-registration-process.aspx>.
 - 2a. A hard-copy may be scanned and emailed to BoardofTrustees@harrishealth.org.
 - 2b. Mailing the completed registration form to 4800 Fournace Pl., Ste. E618, Bellaire, TX 77401.
3. Contacting staff at (346) 426-1524.

Prior to submitting a request to address the Harris Health System Board of Trustees, please take a moment to review the rules to be observed during the Public Comment Period.

Rules During Public Comment Period

The presiding officer of the Board of Trustees or the Board Secretary shall keep the time for speakers.

Three Minutes

A speaker, whose subject matter, as submitted, relates to an identifiable item of business on the agenda, will be requested by the presiding officer to come to the podium where they will be provided three (3) minutes to speak. A speaker, whose subject matter, as submitted, does not relate to an identifiable item of business on the agenda, will also be provided three (3) minutes to speak. A member of the public who addresses the body through a translator will be given at least twice the amount of time as a member of the public who does not require the assistance of a translator.

Thursday, January 25, 2024

Executive Session

Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Report of the Medical Executive Board in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including the Harris Health System Quality, Safety Performance Measures, Good Catch and Zero Harm, and Possible Action Regarding this Matter Upon Return to Open Session.



Dr. Yashwant Chathampally


Associate Chief Medical Officer, Senior Vice President – Quality & Patient Safety

- Pages 28 – 29 Were Intentionally Left Blank -

Thursday, January 25, 2024

Executive Session

Medical Executive Board Report and Credentialing Discussion, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff.



Dr. Yashwant Chathampally
Associate Chief Medical Officer, Senior Vice President – Quality & Patient Safety

- Pages 31 – 53 Were Intentionally Left Blank -

Thursday, January 25, 2024

Executive Session

Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Including Credentialing Discussion and Operational Updates, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002 and Tex. Gov't Code Ann. §551.071 to Receive Peer Review and/or Medical Committee Report with Possible Action Upon Return to Open Session.

Otis R. Ekins

Otis R. Ekins, MD, CCHP-P
Chief Medical Officer of Correctional Health

- Pages 55 – 56 Were Intentionally Left Blank -

Thursday, January 25, 2024

Consideration of Approval Regarding Credentialing Changes for Members of the
Harris Health System Medical Staff

The Harris Health System Medical Executive Board approved the attached credentialing changes for the members of the Harris Health System Medical Staff for January 2024.

The Harris Health System Medical Executive Board requests the approval of the Board of Trustees.

Thank you.



Dr. Yashwant Chathampally
Associate Chief Medical Officer, Senior Vice President – Quality & Patient Safety

Board of Trustees



January 2024 Medical Staff Credentials Report

Medical Staff Initial Appointments: 40

BCM Medical Staff Initial Appointments - 23

UT Medical Staff Initial Appointments - 15

HCHD Medical Staff Initial Appointments - 2

Medical Staff Reappointments: 112

BCM Medical Staff Reappointments - 44

UT Medical Staff Reappointments - 67

HCHD Medical Staff Reappointments - 1

BCM/UT/Harris County Hospital District (Harris Health) Medical Staff Changes in Clinical Privileges: 8

BCM/UT/HCHD Medical Staff Resignations: 48

For Information

Temporary Privileges Awaiting Board Approval - 11

BCM/UT/Harris County Hospital District (Harris Health) Medical Staff Files for Discussion: 3

Medical Staff Initial Appointment Files for Discussion - 2

Medical Staff Reappointment Files for Discussion - 1

Thursday, January 25, 2024

Consideration of Approval of Revisions to Core Neurology Privileges

The Harris Health System Medical Executive Board approved the attached Revisions to Core Neurology Privileges.

The Harris Health System Medical Executive Board requests the approval of the Board of Trustees.

Thank you.



Dr. Yashwant Chathampally
Associate Chief Medical Officer, Senior Vice President – Quality & Patient Safety

Thursday, January 25, 2024

Executive Summary
Changes to the Neurology Clinical Privileges

A request was made to add an ambulatory/outpatient section to the Neurology Clinical Privileges to accommodate neurologists working solely in the ambulatory clinics. Criteria from Family & Community Medicine were modified to the Neurology Service. The Chiefs of Service at BT and LBJ have reviewed and are in agreement with the changes being presented.

The Medical Executive Board has approved the revisions to the Neurology Clinical Privileges and requests the approval of the Board of Trustees.

Summary Table:

Page(s)	Type of Change	Subject	Comments/Notes
Page 5 of 10	Addition	Ambulatory	Created a section for ambulatory privileges
Page 5 of 10	Addition	Qualifications	Qualifications for neurologist to practice in an outpatient setting for appointment and reappointment
Page 5 of 10	Addition	Competency	Patient contact in an ambulatory setting at appointment and reappointment in order to qualify for the requested privilege
Pages 9 – 10	Signature Lines	Approval	To allow sign-off of approval from Clinical Leadership within an Ambulatory setting

Board of Trustees



January 2024 Medical Staff Credentials Report

New Business

Core Neurology Privileges Page 1-10



**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 1 of 10

Applicant Name: _____

Initial Application **Reappointment Application**

All new applicants must meet the following requirements as approved by the governing body effective:
____/____/____.

If any privileges are covered by an exclusive contractual agreement, physicians who are not a party to the contract are not eligible to request the privilege(s), regardless of education, training, and experience. Exclusive contracts are indicated by [EC].

Applicant: Check off the “Requested” box for each privilege requested. New applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, and other qualifications and for resolving any doubts related to qualifications for requested privileges. If you wish to exclude any procedures, please strike through those procedures you do not wish to request, then initial and date.

Department Chair/Chief: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements:

1. Note that privileges granted may be exercised only at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
2. This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR NEUROLOGY

To be eligible to apply for core privileges in neurology, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in neurology.

OR

Specialty Board Certified by the AOA, an ABMS affiliated Specialty Board or one of the affiliated Boards of the Royal College of Physicians and Surgeons of Canada.

OR

Required Previous Experience: Neurological services to at least 24 inpatients, reflective of the scope of privileges requested, within the past 12 months or successful completion of an ACGME- or AOA-accredited residency or clinical fellowship within the past 12 months.

BOT 1/26/23; Revised 11/02/23

**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 2 of 10

Applicant Name: _____

Reappointment Requirements - To be eligible to renew privileges in adult neurology, the applicant must meet the following criteria:

Current demonstrated competence and an adequate volume of experience (10 inpatients) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.

NEUROLOGY CORE PRIVILEGES

The core privileges in neurology require that physicians are able to admit, evaluate, diagnose, treat and provide consultation to patients with disorders involving the central and peripheral nervous systems using a combination of clinical evaluation, imaging, and therapeutic interventions in all outpatient, emergency center, inpatient, and intensive care unit settings. The core privileges in neurology include performing a history and physical exam, and performing a lumbar puncture. Neurologists with specialized training and experience may request privileges to perform and interpret these procedures as listed below under Optional diagnostic testing/ and or therapeutic interventions.

Additional qualifications for privileges in neurology are: certification in Neurology by the American Board of Psychiatry and Neurology and/or successful completion of an ACGME approved residency in neurology and demonstrated current competence and experience in the core privileges listed above.

Optional Diagnostic Testing and/or Therapeutic Interventions: The granting of privileges to perform and interpret the studies listed below requires demonstration to the appropriate pavilion Chief of Neurology of adequate training in the performance and interpretation of the procedure during either an ACGME-accredited neurology residency program or an appropriate neurology subspecialty fellowship program or through substantial post-graduate medical education professional experience. Renewal of privileges to perform and interpret these procedures requires demonstration to the appropriate pavilion Chief of Neurology of continued high quality procedural and interpretation skill.

Neurology Core Procedures List

This list is a sampling of procedures included in the core. This list is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

1. Telemedicine- Evaluate and diagnose patients, and provide treatment recommendations to an originating site physician(s), advanced practice professional(s), registered nurse(s), and technician(s) for patients with conditions listed in the provider’s primary hospital privileges, using Harris Health System’s approved telemedicine platform(s) for which the applicant has been trained.
2. Electromyography & nerve conduction velocity testing
3. Nerve and muscle biopsies
4. Evoked potentials
5. EEG
6. Intraoperative EEG
7. Electroconvulsive therapy

Neurology Core Procedures List (Cont.)

BOT 1/26/23; Revised 11/02/23

**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 3 of 10

Applicant Name: _____

- 8. Electroencephalography
- 9. Vagal nerve stimulator interrogation and adjustment
- 10. Botulinum toxin injections
- 11. Deep Brain Stimulation interrogation and adjustment
- 12. Transcranial Doppler (TCD) ultrasonography
- 13. Greater Occipital Nerve Blocks

NEUROLOGY CORE PRIVILEGES REQUESTED

QUALIFICATIONS FOR NEUROCRITICAL CARE (NCC)

To be eligible to apply for core privileges in Neurocritical Care, the initial applicant must meet the following criteria:

- 1. Current certification or active participation in the examination process leading to certification in Neurology by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry
- AND**
- 2. Current certification or active participation in the examination process leading to certification in Neurocritical Care from the United Council for Neurologic Subspecialties (UCNS), Committee on Advanced Subspecialty Training (CAST), or ACGME fellowship boards.
- OR**
- 3. Current board certification in Critical Care Medicine and Completion of Emergency Neurologic Life Support (ENLS) course with certificate of completion

Required Previous Experience: Neurocritical care services to at least 50 inpatients, reflective of the scope of privileges requested, within the past 24 months or successful completion of an ACGME- or AOA-accredited residency or clinical fellowship within the past 12 months.

Reappointment Requirements: To be eligible to renew privileges in neurocritical care, the applicant must meet the following criteria:

Current demonstrated competence and an adequate volume of experience (10 inpatients) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.

Neurocritical Care (Neurology) Core Procedures List:

This list is a sampling of procedures included in the core. This list is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

- 1. Privileges to admit, evaluate, diagnose, consult, perform history and physical, and provide treatment to patients presenting with critical illnesses or injuries of the neurologic systems, and to admit patients to the intensive care unit
- 2. Central venous catheter placement; dialysis catheter placement
- 3. Pulmonary artery catheterization

BOT 1/26/23; Revised 11/02/23

**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 4 of 10

Applicant Name: _____

4. Management of mechanical ventilation, including CPAP/BiPAP ventilation
5. Administration of vasoactive medications (hemodynamic augmentation and hypertension lysis)
6. Maintenance airway and ventilation in non-intubated, unconscious patients
7. Interpretation and performance of bedside pulmonary function tests
8. Direct laryngoscopy
9. Endotracheal intubation
10. Performance and interpretation of transcranial Doppler
11. Administration of analgesedative medications, including conscious sedation and barbiturate anesthesia
12. Interpretation of continuous EEG monitoring
13. Interpretation and management of ICP and CPP data
14. Jugular venous bulb catheterization
15. Interpretation of SjvO₂ and PbtO₂ data
16. Management of external ventricular drains
17. Management of plasmapheresis and IVIG
18. Administration of intravenous and intraventricular thrombolysis
19. Interpretation of CT and MR standard neuroimaging and perfusion studies and biplane contrast neuraxial angiography
20. Perioperative and postoperative clinical evaluation of neurosurgical and interventional neuroradiology patients
21. Performance of lumbar puncture and interpretation of cerebrospinal fluid results
22. Induction and maintenance of therapeutic coma and hypothermia
23. Insert arterial and central venous catheters
24. Manage mechanical ventilation and vasopressors
25. Bronchoscopy
26. Thoracentesis
27. Tube thoracostomy
28. Bedside percutaneous tracheostomy
29. Interpretation of electroencephalography (EEG)
30. Goal directed critical care ultrasound
31. Transcranial Doppler

NEUROCRITICAL CARE (NEUROLOGY) CORE PRIVILEGES REQUESTED

BOT 1/26/23; Revised 11/02/23

Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges

Page 5 of 10

Applicant Name: _____

NEUROLOGY Outpatient and Urgent Care ** Ambulatory Department Chair/Chief Sign-Off Required **

Required previous experience: Applicants must be able to demonstrate successful provision of care in an ambulatory setting.

Core privileges for Ambulatory Neurology: Core privileges for Neurology include being able to evaluate, and treat patients at or above 16 years of age for common illnesses and injuries including disorders common to old age. Privileges include the privileges listed in the **Neurology Core Privileges**.

QUALIFICATIONS FOR NEUROLOGY

To be eligible to apply for outpatient privileges in neurology, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in neurology.

OR

Specialty Board Certified by the AOA, an ABMS affiliated Specialty Board or one of the affiliated Boards of the Royal College of Physicians and Surgeons of Canada.

OR

Required Previous Experience: Neurological services to at least 24 patients in neurology outpatient clinic, reflective of the scope of privileges requested, within the past 12 months or successful completion of an ACGME- or AOA-accredited residency or clinical fellowship within the past 12 months.

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Reappointment Requirements - To be eligible to renew privileges in adult neurology, the applicant must meet the following criteria:

Current demonstrated competence and an adequate volume of experience, 10 patients in the ambulatory setting, with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.

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Neurology Outpatient and Urgent Care Core Privileges Requested

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and maintenance of clinical competence acceptable to the department chair/chief.

- 1. _____

BOT 1/26/23; Revised 11/02/23



**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 6 of 10

Applicant Name: _____

2. _____

3. _____

SPECIAL PROCEDURES LISTED ABOVE REQUESTED

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Harris County Hospital District, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies, Rules & Regulations applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signature _____ **Date** _____

BOT 1/26/23; Revised 11/02/23



**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 7 of 10

Applicant Name: _____

Ben Taub DEPARTMENT CHAIR/CHIEF RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege	Condition/Modification/Explanation
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

I recommend that the above-named applicant be considered for the following category of the medical staff:

- Active Staff - may provide clinical care and has admitting privileges AND meets activity requirements*)
- Affiliate Staff- (may provide clinical care and has admitting privileges; DOES NOT meet activity requirements*)
- Consulting Staff - (may provide clinical care but may NOT admit patients).
- Honorary Staff - (may NOT provide clinical care and may NOT admit patients).

***Activity Requirements:** (serves on an inpatient, consulting or procedural service at least one month per year OR participates in clinical or administrative activities for at least 100 hours per year).

Notes:

Ben Taub Department Chair/Chief Signature _____ **Date** _____

BOT 1/26/23; Revised 11/02/23



**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 8 of 10

Applicant Name: _____

Lyndon B. Johnson DEPARTMENT CHAIR/CHIEF RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege	Condition/Modification/Explanation
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

I recommend that the above-named applicant be considered for the following category of the medical staff:

- Active Staff - may provide clinical care and has admitting privileges AND meets activity requirements*)
- Affiliate Staff- (may provide clinical care and has admitting privileges; DOES NOT meet activity requirements*)
- Consulting Staff - (may provide clinical care but may NOT admit patients).
- Honorary Staff - (may NOT provide clinical care and may NOT admit patients).

***Activity Requirements:** (serves on an inpatient, consulting or procedural service at least one month per year OR participates in clinical or administrative activities for at least 100 hours per year).

Notes:

Lyndon B. Johnson Department Chair/Chief Signature _____ **Date** _____

BOT 1/26/23; Revised 11/02/23



**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 9 of 10

Applicant Name: _____

Check Here, if the Applicant is not Applying for Ambulatory

Ben Taub Ambulatory DEPARTMENT CHAIR/CHIEF RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege	Condition/Modification/Explanation
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

I recommend that the above-named applicant be considered for the following category of the medical staff:

- Active Staff - may provide clinical care and has admitting privileges AND meets activity requirements*)
- Affiliate Staff- (may provide clinical care and has admitting privileges; DOES NOT meet activity requirements*)
- Consulting Staff - (may provide clinical care but may NOT admit patients).
- Honorary Staff - (may NOT provide clinical care and may NOT admit patients).

*Activity Requirements: (serves on an inpatient, consulting or procedural service at least one month per year OR participates in clinical or administrative activities for at least 100 hours per year).

Notes: _____

Ben Taub Ambulatory Department Chair/Chief Signature _____

Date _____

Ben Taub Ambulatory Department Chair/Chief Signature _____

Date _____

BOT 1/26/23; Revised 11/02/23



**Record of Clinical Privileges Requested and Granted
Neurology Clinical Privileges**

Page 10 of 10

Applicant Name: _____

Check Here, if the Applicant is not Applying for Ambulatory

Lyndon B. Johnson Ambulatory DEPARTMENT CHAIR/CHIEF RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege	Condition/Modification/Explanation
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

I recommend that the above-named applicant be considered for the following category of the medical staff:

- Active Staff - may provide clinical care and has admitting privileges AND meets activity requirements*)
- Affiliate Staff- (may provide clinical care and has admitting privileges; DOES NOT meet activity requirements*)
- Consulting Staff - (may provide clinical care but may NOT admit patients).
- Honorary Staff - (may NOT provide clinical care and may NOT admit patients).

***Activity Requirements:** (serves on an inpatient, consulting or procedural service at least one month per year OR participates in clinical or administrative activities for at least 100 hours per year).

Notes:

Lyndon B. Johnson Ambulatory Department Chair/Chief Signature _____

Date _____

BOT 1/26/23; Revised 11/02/23

Thursday, January 25, 2024

Consideration of Approval of Credentialing Changes for Members of the
Harris Health System Correctional Health Medical Staff

Otis R. Ekins

Otis R. Ekins, MD, CCHP-P
Chief Medical Officer of Correctional Health

Board of Trustees



January 2024 Correctional Health Credentials Report

Medical Staff Initial Appointments: 4

Correctional Health Medical Staff Files for Discussion: NA

Thursday, January 25, 2024

Consideration of Approval of Reappointment of Members to the Community Health Choice, Inc. (CHC) and Community Health Choice Texas, Inc. (CHCT), collectively "Community", Board of Directors

Article III, Section II of the Amended and Restated Bylaws reads, in part:

"The members of the Board of Directors shall serve a two (2) year term and the terms of such Directors shall be staggered as on the date of adoption of these Amended and Restated Bylaws. The President/CEO shall allocate the terms among any future additional Directors in his or her good faith discretion."

NAME	INITIAL APPOINTMENT DATE	REAPPOINTMENT TERM
Vicki Keiser	08/29/2013	1/1/2024 to 12/31/2025
Anne Clutterbuck	05/25/2017	1/1/2024 to 12/31/2025
Dr. Stephen McKernan	09/14/2007	1/1/2024 to 12/31/2025

Recommendation: Approval of Harris Health System's Board of Trustees for reappointment of members to Community's Board of Directors.

Thank you.

Thursday, January 25, 2024

Consideration of Approval of Appointment of Chair and Vice Chair Positions to the Community Health Choice, Inc. (CHC) and Community Health Choice Texas, Inc. (CHCT), collectively "Community", Board of Directors.

Article IV, Section VIII. Vacancies of the Community Texas Corporate Bylaws reads, in part:

"A vacancy because of death, resignation, removal, disqualification, or otherwise in the office of an officer who is a Community Texas, CHC, or Harris Health employee shall be filled by the President/CEO and shall each be confirmed by the Board of Directors subject to approval by resolution of the Harris Health Trustees as described above. A vacancy for any reason in the office of President/CEO shall be filled by the Board of Directors subject to approval by resolution of the Harris Health Trustees as described above. A vacancy in an office held by a member of the Board of Directors shall be filled by election of the Corporation's Board of Directors subject to approval by resolution of the Harris Health Trustees as described above.

Recommendation: Approval from the Board of Trustees to the appointment of Rodney Lenfant as the Board of Directors Chair and Vicki Keiser as the Board of Directors Vice Chair of Community Health Choice, Inc. (CHC) and Community Health Choice Texas, Inc. (CHCT).

Title	Name
Chairperson	Rodney Lenfant
Vice Chairperson	Vicki Keiser

Recommendation: Approval of Harris Health System's Board of Trustees for appointment of members as Community's Board of Directors Chair and Vice Chair.

Thank you.

Thursday, January 25, 2024

Consideration of Approval of CEO Evaluation Advisory Workgroup Charter

Harris Health System Board of Trustees CEO Evaluation Advisory Workgroup Charter

The Harris Health Board of Trustees (Board) has the statutory and fiduciary duty to appoint, evaluate and retain a Chief Executive Officer (CEO) for Harris Health System (Harris Health). Harris Health's Board Officers shall comprise the CEO Evaluation Advisory Workgroup (Advisory Workgroup) and make recommendations to the Board on matters related to the CEO's evaluation and compensation. (Harris Health System Board of Trustees Bylaws, Article V section 1; adopted March 2023).

The purpose of the Advisory Workgroup is to provide direct consultation between the CEO and the Board on matters related to the CEO's employment including performance evaluation, compensation and retention. The Advisory Workgroup shall meet at least four (4) times per year.

The Advisory Workgroup shall:

- a. Make recommendations to the Board regarding CEO performance evaluation criteria in alignment with Harris Health's Strategic Plan and statutory duties as outlined in the Harris Health Board of Trustees Bylaws by the September Board meeting for a twelve (12) month evaluation period beginning July of the current year to July of the next year.
- b. Meet with the CEO to review performance metrics and measurement data supporting objective components of CEO performance evaluation criteria.
- c. Present the Board with recommendations related to the CEO's annual performance evaluation and compensation determinations no later than August so that the Board may complete and deliver the CEO evaluation by October 1.
- d. Ensure that recommendations made to the Board are in compliance with the CEO's employment agreement.
- e. Serve as a forum for the CEO to share ideas and feedback related to employment matters.

BOARD OF TRUSTEES
Meeting of the Board of Trustees

HARRISHEALTH
SYSTEM

Thursday, January 25, 2024

November 7, 2023 Election Analysis Report

Olga Rodriguez

Olga Llamas Rodriguez, MPA, MBA

Vice President – Community Engagement & Corporate Communications/Board Services



HARRISHEALTH

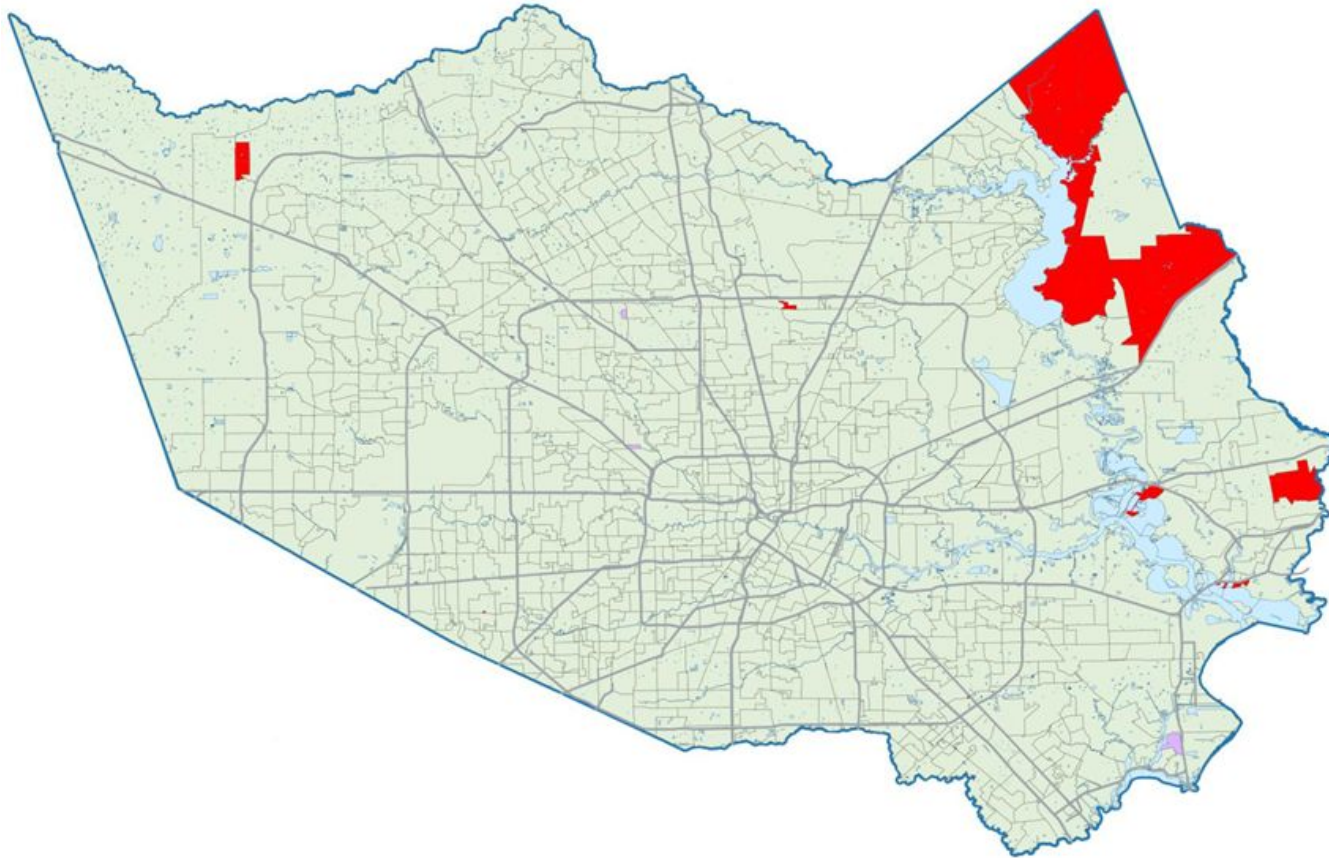
BOND 2023 - Proposition A Vote Analysis

Results and Geography

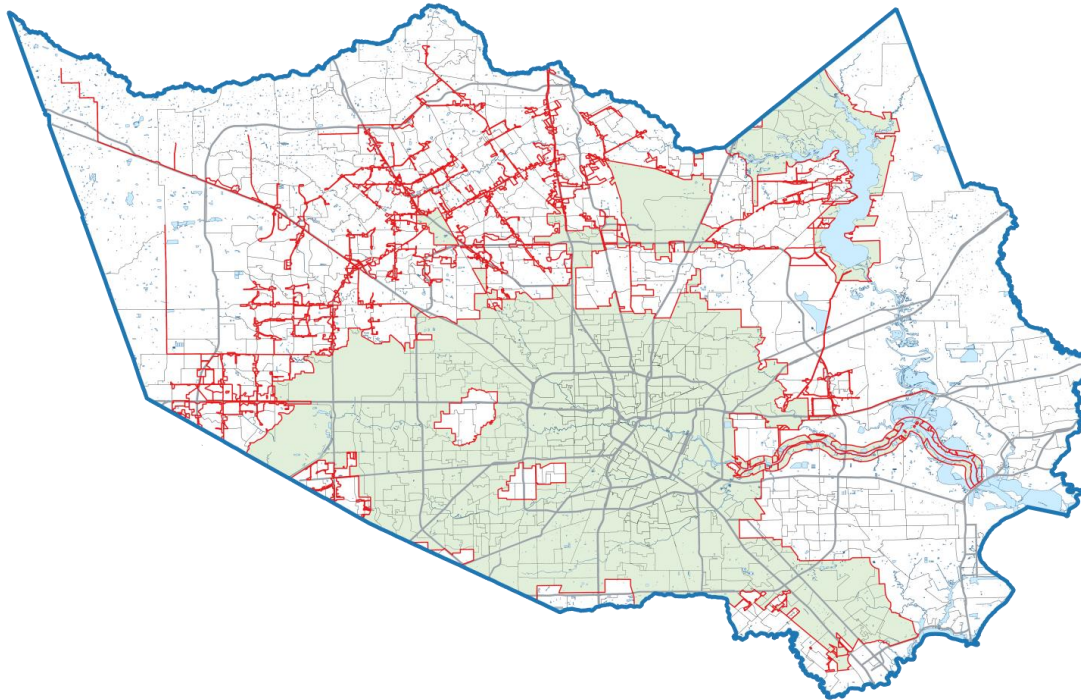
Proposition A passed with 72.3 % of the vote.

- Proposition A won nearly every election precinct, and led in every political subdivision.
- Demographic analysis indicates strong support for Proposition A came from every ethnic subgroup, gender, and age cohort.
- Older voters across ethnic groups were the strongest supporters of Proposition A.
- Black Voters and Black Neighborhoods had the strongest levels of support for Proposition A.
- Hispanics were a disproportionately small portion of Harris County's 2023 electorate.
- Young people participated at very low levels.

Prop A - 1,077 out of 1,092 Election Precincts

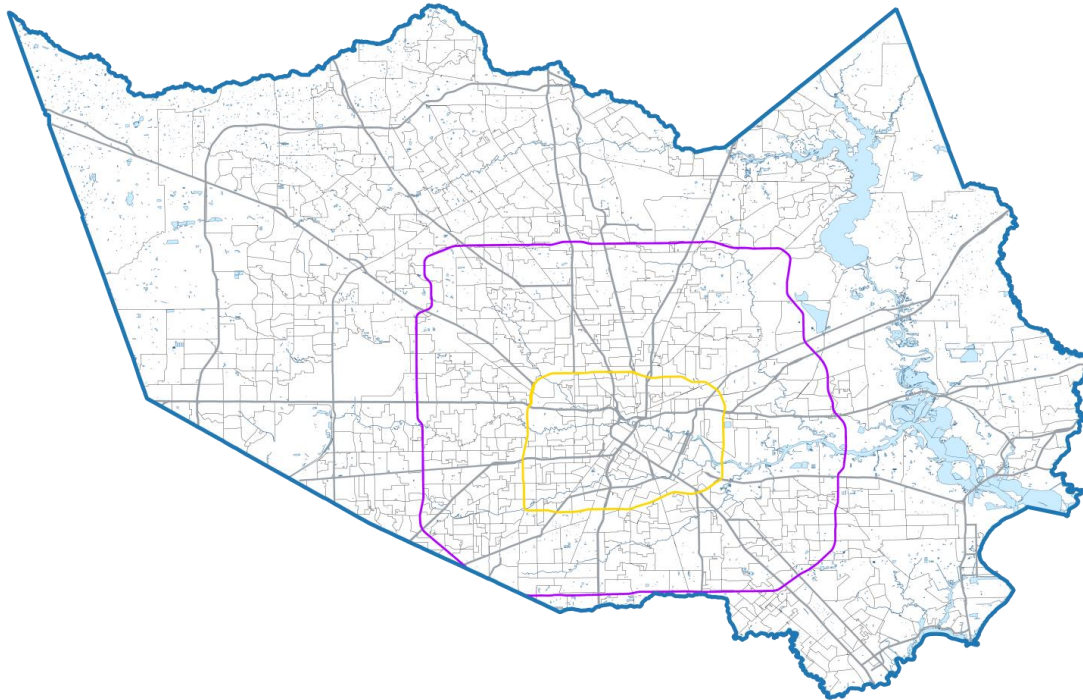


Houston & Rest of Harris County



Jurisdiction	FOR	AGAINST	Margin%
City of Houston	76.6%	23.4%	53.2%
Rest of Harris County	66.8%	33.2%	33.6%
Total	72.3%	27.7%	44.7%

Strong Performance Across Regions



Region	FOR	AGAINST	Margin%
Inside the Loop	81.2%	18.8%	62.4%
Loop to Beltway 8	77.9%	22.1%	55.7%
Outside Beltway 8	65.9%	34.1%	31.7%
Total	72.3%	27.7%	44.7%

Prop A Won Every District

County Commissioner	FOR	AGAINST	Margin%
PCT1 - Ellis	81.5%	18.5%	63.0%
PCT2 - Garcia	71.5%	28.5%	43.0%
PCT3 - Ramsey	63.5%	36.5%	27.1%
PCT4 - Briones	72.9%	27.1%	45.7%
Total	72.3%	27.7%	44.6%

CD	FOR	AGAINST	Margin%
2 - Crenshaw	60.9%	39.1%	21.7%
7 - Fletcher	78.6%	21.4%	57.2%
8 - Luttrell	68.5%	31.5%	37.1%
9 - Green	82.6%	17.4%	65.2%
18 - Jackson Lee	80.2%	19.8%	60.4%
22 - Nehls	63.6%	36.4%	27.2%
29 - Garcia	79.8%	20.2%	59.6%
36 - Babin	63.9%	36.1%	27.8%
38 - Hunt	65.6%	34.4%	31.2%
Total	72.3%	27.7%	44.6%

SD	FOR	AGAINST	Margin%
4 - Creighton	59.4%	40.6%	18.8%
6 - Alvarado	78.4%	21.6%	56.8%
7 - Bettencourt	63.9%	36.1%	27.8%
11 - Middleton	77.6%	22.4%	55.1%
13 - Miles	84.3%	15.7%	68.5%
15 - Whitmire	71.2%	28.8%	42.3%
17 - Huffman	68.5%	31.5%	37.1%
18 - Kolkhorst	63.7%	36.3%	27.4%
Total	72.3%	27.7%	44.6%

HD	FOR	AGAINST	Margin%
126 - Harless	64.8%	35.2%	29.6%
127 - Cunningham	60.4%	39.6%	20.7%
128 - Cain	58.0%	42.0%	16.0%
129 - Paul	64.5%	35.5%	29.0%
130 - Oliverson	58.3%	41.7%	16.6%
131 - Allen	83.6%	16.4%	67.2%
132 - Schofield	64.1%	35.9%	28.3%
133 - DeAyala	71.1%	28.9%	42.1%
134 - A. Johnson	79.2%	20.8%	58.4%
135 - Rosenthal	72.5%	27.5%	45.0%
137 - Wu	77.8%	22.2%	55.5%
HD	FOR	AGAINST	Margin%
139 - J. Johnson	78.3%	21.7%	54.7%
140 - Walle	80.6%	19.4%	61.2%
141 - Thompson	84.0%	16.0%	68.1%
142 - Dutton	81.2%	18.8%	62.3%
143 - Hernandez	79.0%	21.0%	58.0%
144 - Perez	72.1%	27.9%	44.1%
145 - Morales	79.7%	20.3%	59.3%
146 - Thierry	83.0%	17.0%	65.9%
147 - Jones	83.0%	17.0%	66.0%
148 - Morales Shaw	73.6%	26.4%	47.2%
149 - Vo	77.0%	23.0%	54.0%
150 - Swanson	61.2%	38.8%	22.4%
Total	72.3%	27.7%	44.7%

Voter Demographics

Demographics – Census and Modeling

By overlaying Census and modeled racial data, we can see how precincts across Harris County performed.

Plurality Ethnicity
From Census

Plurality Ethnicity	FOR Prop A
Black	84.1%
Asian	79.0%
Hispanic	77.2%
White	68.2%
Total	72.3%

Plurality Ethnicity	Turnout
White	20.0%
Black	14.6%
Asian	10.6%
Hispanic	10.4%
Total	17.5%

Modeled Ethnicity
For Voter File

Modeled Ethnicity	Turnout	Share
White	25.1%	59.1%
Black	17.8%	19.9%
Asian	11.8%	4.5%
Hispanic	9.6%	15.4%
Other	14.6%	1.1%
Total	17.5%	100.0%

Precincts were coded using **Census population data** to identify the plurality of a racial cohort, and then vote totals were aggregated and analyzed.

Ethnicity was **modeled for every voter in the voter file**. Then voter turnout and the share of the electorate were calculated for each ethnic cohort.

Older Voters Drove Participation

There are nearly 700,000 enrolled voters under the age of 35, and a little more than 500,000 enrolled voters who are 65 or older

However, seniors voted at nearly five times the rate as the voters under 35 and therefore were a larger share of the electorate.

	Age	Enrollment	Voters	Turnout	Share
Total	18-34	691,588	45,676	6.6%	10.5%
	35-49	637,041	94,593	14.8%	21.8%
	50-64	563,954	129,471	23.0%	29.9%
	65+	505,149	163,801	32.4%	37.8%

Demographics and Vote Method

Vote Share by Age and Voting Method

Age	BBM	EVPA	EDAY	Total
18-34	0.3%	34.5%	65.2%	100.0%
35-49	0.1%	39.2%	60.7%	100.0%
50-64	0.2%	52.1%	47.7%	100.0%
65+	10.1%	59.0%	31.0%	100.0%

Fewer young people voted by mail or through early voting, with 65.2 percent of those voters participating on Election Day.

A majority of seniors (69.1 percent) voted before Election Day.

Vote Share by Voting Method

	Mail Ballot	Early Vote	Election Day
For	82.4%	72.2%	71.6%
Against	17.6%	27.8%	28.4%
Margin	64.7%	44.5%	43.3%

Share of Vote Method by Age Cohort

Age	Mail Ballot	Early Vote	Election Day
18-34	0.8%	7.2%	14.9%
35-49	0.4%	17.1%	28.8%
50-64	1.6%	31.1%	31.0%
65+	97.2%	44.5%	25.4%

The crosswalk of voter results by voting method shows the strongest support is among mail ballot participants, who were also the oldest voters.

Findings & Recommendations

- Harris Health has the support of the most engaged people in Harris County – active, frequent voters.
- However, the earliest research indicated a general lack of awareness about Harris Health and its mission.
- The electoral data indicates many of the people who benefit the most from Harris Health did not participate in the 2023 election.
- Harris Health should expand engagement to the younger, more diverse audiences across the County who lack affinity with the institution – to cultivate a stronger coalition of support for the future.

[Thursday, January 25, 2024](#)

[January Board Committee Reports](#)

January Board Committee Meetings:

- Governance Committee – January 9, 2024
- Quality Committee – January 9, 2024 (Summary attached for your review)
 - HRO Safety Message – Video: Health Disparities
 - Population Health
- Joint Conference Committee – January 11, 2024
- DEI Committee – January 12, 2024

Board of Trustees – Executive Summary
Patient Safety & Quality Programs – Open Session Presentations
January 25, 2024



Please refer to reports presented at the Quality Committee Open Session on January 9, 2024 for additional details.

HRO Safety Message – Video: Health Disparities

Steven Brass, MD, MPH, MBA, FACHE

High-reliability Organizations (HROs) are those that successfully complete their missions despite massive complexity and high risk. Examples include the Federal Aviation Administration’s Air Traffic Control system, aircraft carriers, and nuclear power plants. In each case, even a minor error could have catastrophic consequences. Yet, adverse outcomes in these organizations are rare. Five principles of a High Reliability Organization (HRO) are: (1) Preoccupation with failure; (2) Reluctance to simplify interpretations; (3) Sensitivity to operations; (4) Commitment to resilience; and (5) Deference to expertise.

Population Health

Denise LaRue, MPH, MSHCT

Screening patients for health-related social needs (HRSN) and connecting those who want assistance to internal and external resources is a key activity in Harris Health’s health equity strategy. Among other updates, HRSN screening went live for all adult inpatient admissions on November 6, 2023. Adult inpatient HRSN screening includes asking patients about food insecurity, housing status, transportation needs, interpersonal safety, and utilities, fulfilling a new CMS requirement that must be reported starting this calendar year (2024).

CONFIDENTIAL & PRIVILEGED INFORMATION

Confidential, legally privileged, and protected from disclosure pursuant to Chapter 161 of the Texas Health and Safety Code and Chapters 151 and 160 of the Texas Occupations Code.



**De Wight Dopslauf, C.P.M., CPPO
Harris County Purchasing Agent**

January 12, 2024

Board of Trustees Office
Harris Health System

**RE: Board of Trustees Meeting – January 25, 2024
Budget and Finance Agenda Items**

The Office of the Harris County Purchasing Agent recommends approval of the attached procurement actions. All recommendations are within the guidelines established by Harris County and Harris Health System.

Sincerely,

A handwritten signature in blue ink that reads "J. Karen Bush". The signature is written in a cursive style.

DeWight Dopslauf
Purchasing Agent

JA/ea
Attachments



Budget and Finance Agenda Items for the Harris County Hospital District dba Harris Health System - Board of Trustees Report

Expenditure Summary: January 25, 2024 (Approvals)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A1	Community Health Choice, Inc. (GA-07003) MWBE Goal: N/A Government Entity	Marketplace Insurance for Harris Health System - To continue to assist in the enrollment of eligible Harris Health indigent patients into the appropriate Marketplace plans. Interlocal Agreement, Board Motion 22.12-166	Ratify Renewal January 01, 2024 through December 31, 2024	Holly Hernandez	\$ 3,000,000	\$ 22,000,000
A2	Maxim Healthcare Staffing Services, Inc. (HCHD-530) MWBE Goal: 30%	Temporary Nursing and Allied Health Services for Harris Health System - To continue providing temporary services by nursing and allied health personnel for Harris Health System. Public Health or Safety Exemption, Board Motion 23.01-08	Ratify Renewal Public Health or Safety Exemption September 12, 2023 through September 11, 2024	Pamela Russell	\$ 6,841,984	\$ 10,000,000
A3	GE Precision Healthcare LLC (HCHD-330) MWBE Goal: GPO/CO-OP Sourced	Maintenance Services for Radiological Imaging Equipment for Harris Health System - To provide operational inspections, preventative maintenance and corrective maintenance services, including routine and emergency repairs on radiological imaging equipment throughout Harris Health System. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08	Ratify Renewal December 21, 2023 through December 20, 2024	James Young	\$ 7,602,567	\$ 6,054,403
A4	CareFusion 303, Inc. MWBE Goal: GPO/CO-OP Sourced	IV Therapy Products – Infusion Devices and Device-dedicated Sets - To replace existing infusion pumps past their expected useful life and no longer supported by the manufacturer with new units for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 4,806,233
A5	Stryker Sales Corporation through Stryker Endoscopy Division MWBE Goal: N/A Public Health or Safety	Onsite Laparoscopic Surgical Services for the Harris Health System - To provide for continued laparoscopic surgical services to assist periOperative Services in operating room (OR) setup and equipment sterilization processing. Services are provided on a fee per case basis. Public Health or Safety Exemption, Board Motion 22.12-166	Renewal Public Health or Safety Exemption February 05, 2024 through February 04, 2025	Doug Creamer	\$ 3,323,616	\$ 3,323,616
A6	Stryker Sales, LLC dba Stryker Endoscopy MWBE Goal: GPO/CO-OP Sourced	Surgical Endoscopy - Rigid - To replace video endoscopy systems past their expected useful life throughout Harris Health System. Premier Healthcare Alliance, L.P. Contract	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 3,030,367
A7	WalkerHealthcare, LLC dba / Walker Healthforce (HCHD-489) MWBE Goal: 30%	Temporary Nursing and Allied Health Personnel for Harris Health System - To provide temporary nursing and allied health personnel at Harris Health hospitals. Public Health or Safety Exemption, Board Motion 22.12-166	Ratify Renewal Public Health or Safety Exemption August 26, 2023 through August 25, 2024	Pamela Russell	\$ 786,124	\$ 3,000,000
A8	Laboratory Corporation of America (HCHD-498) MWBE Goal: GPO/CO-OP Sourced	Clinical Reference Laboratory Testing Services for Harris Health System - To continue providing clinical reference laboratory testing services to Harris Health patients. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.12-166	Ratify Renewal January 01, 2024 through December 31, 2024	Michael Nnadi	\$ 2,408,592	\$ 2,649,451

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A9	Hologic Sales and Services LLC (PP-IM-295) MWBE Goal: GPO/CO-OP Sourced	Mammography Products/Consumables - To continue providing Harris Health System with mammography products such as breast biopsy devices, breast density analysis tools, consumables, disposables and breast biopsy markers. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.12-166	Ratify Funding Yr. 8 October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 2,547,175	\$ 2,547,175
A10	PartsSource, Inc. (HCHD-386) MWBE Goal: GPO/CO-OP Sourced	Biomedical Equipment Parts and Services for Harris Health System - To continue providing the PartsSource PRO Managed Service Platform to assist in procuring medical equipment parts and services for Harris Health System. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08	Renewal February 28, 2024 through February 27, 2025	James Young	\$ 2,089,177	\$ 2,415,930
A11	Clean Harbors Environmental Services, Inc. (GA-07375) MWBE Goal: GPO/CO-OP Sourced	Integrated Medical Waste Services for Harris Health System - Additional funds are required due to the extended term to provide continued medical and hazardous waste services for Harris Health System until the competitive procurement process is completed and a new agreement is in place. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.10-141	Ratify Additional Funds Extension December 01, 2023 through November 30, 2024	Chip Whitten	\$ 2,240,144	\$ 2,404,380
A12	See attached MWBE Goal: GPO/CO-OP Sourced	Gastrointestinal Endoscopy Products - To continue providing Harris Health System with biliary and esophageal stents, balloon dilators, extractors, baskets, snares, forceps and gastroesophageal reflux disease (GERD) treatments. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08	Funding Yr. 3 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 2,351,251	\$ 2,351,251
A13	New York Life Insurance Company dba Life Insurance Company of North America (HCHD-1170) MWBE Goal: 6%	Employee Benefits Coverage and Benefits Administration Services for Harris Health System - To provide Harris Health System with Employee Benefits Coverage including but not limited to Long-Term Disability and Short-Term Disability, and Benefit Administration Services including but not limited to FMLA (ADA, Military Leave and Paid Parental Leave), Claim Administration, and Financial and Management Reporting. Job No. 230212	Ratify Award Best proposal meeting requirements One (1) year initial term with six (6) one-year renewal options	Jamie Lard		*
A14	SafeGuard Health Plans, Inc. a part of Metropolitan Life Insurance Company (GA-06400) MWBE Goal: N/A Procured Prior to MWBE Program	Dental Health Maintenance Organization (DHMO) and Dental Preferred Provider Organization (DPPO) Insurance for Harris Health System - Additional funds are required to cover a higher demand than projected due to additional employees enrolling in benefits at Harris Health System. Job No. 150099, Board Motion 23.08-130	Additional Funds Best proposal meeting requirements October 01, 2023 through September 30, 2024	Amy Salinas	\$ 7,500,000	\$ 1,765,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A15	Fisk Electric Company MWBE Goal: Not Applicable to Request Walker Engineering, Inc. MWBE Goal: Not Applicable to Request Network Cabling Services, Inc. MWBE Goal: Not Applicable to Request	Structured Cabling, Audio/Visual Installations and Related Items for Harris Health System - To provide labor and materials for telephone and data infrastructure throughout Harris Health System Job No. 190290, Board Motion 23.01-08	Ratify Renewal November 01, 2023 through October 31, 2024	Douglas Creamer	\$ 350,000	\$ 1,613,122
A16	Enterprise Fleet Management, Inc. (HCHD-377) MWBE Goal: 0% Dropped Shipped	Lease of Vehicles for Harris Health System - To continue providing leased vehicles for Harris Health System. The Interlocal Purchasing System (TIPS), Board Motion 23.01-08	Renewal January 28, 2024 through January 27, 2025	Timothy Brown	\$ 219,975	\$ 1,109,249
A17	Abbott Laboratories Inc. (HCHD-424) MWBE Goal: N/A Sole Source	iStat Point of Care Products for Harris Health System - To continue providing products for existing iSTAT point of care blood analyzers. Sole Source Exemption, Board Motion 22.10-141	Ratify Renewal Sole Source Exemption November 19, 2023 through November 18, 2024	Michael Nnadi	\$ 845,558	\$ 930,114
A18	Sierra7, Inc. (GS-35F-235BA) MWBE Goal: N/A Specialized or Technical	Virtual Patient Observation (VPO) System for Harris Health - Additional funds are required for purchasing cameras and equipment for the virtual patient observation (VPO) system in the Ben Taub General Hospital Emergency Center and Mental Health units. The system is used to remotely monitor patients and address all patient safety precautions necessary to mitigate such risks as falls, elopement, self-harm, harm to others, etc. Public Health or Safety Exemption, Board Motion 23.09-146	Additional Funds Public Health or Safety Exemption	Maureen Padilla	\$ 5,820,433	\$ 856,161
A19	Favorite Healthcare Staffing (HCHD-647) MWBE Goal: 30%	Temporary Nursing and Allied Health Personnel Services for Harris Health System. - To continue to provide nursing and allied health personnel services for patients at Harris Health hospitals. Public Health or Safety Exemption, Board Motion 22.12-166	Ratify Renewal Public Health or Safety Exemption December 02, 2023 through December 01, 2024	Pamela Russell	\$ 883,281	\$ 750,000
A20	Abbott Laboratories, Inc. (HCHD-001063) MWBE Goal: N/A Public Health or Safety	Cardiac Rhythm Management for the Harris Health System - To provide Harris Health System with clinically preferred pacemakers, implantable cardioverter defibrillators (ICDs), cardiac resynchronization therapy pacemakers (CRT-Ps), cardiac resynchronization therapy defibrillators (CRT-Ds), implantable monitors, leads and products used for device implantation. Public Health or Safety Exemption	Award Public Health or Safety Exemption One (1) year initial term with one (1) one-year renewal options	Douglas Creamer		\$ 697,549

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A21	Waste Corporation of Texas LP dba GFL Environmental MWBE Goal: 0% Minimal MWBE Availability	Refuse Removal Services for Harris County, the Harris County Flood Control District and the Harris County Community Supervision & Corrections Department - To allow Harris Health to utilize the contract to provide refuse removal services at various Harris Health System locations. The estimated amount is higher than the previous year due to additional pickups from various Harris Health projects and the reopening of Quentin Mease Hospital and Sareen Health Center. <i>Job No. 210358, Board Motion 23.01-08</i>	Ratify January 01, 2024 through December 31, 2024	Timothy Brown	\$ 577,628	\$ 655,000
A22	Iron Mountain Information Management, LLC (Iron Mountain) (A-06094) MWBE Goal: N/A Procured Prior to MWBE Program	Off Site Storage and Maintenance of Medical Records, X-Ray Film, and Retrieval Services for Harris Health System - Additional funds cover destruction services for x-rays, business records and the addition of pathology slide storage at LBJ. <i>Job No. 130329, Board Motion 22.05-67</i>	Additional Funds May 12, 2022 through May 11, 2025	Anthony Williams Thomas Puig Michael Kaitschuck Priti Patel	\$ 6,408,303	\$ 615,917
A23	Hoar Program Management, LLC (HPM) MWBE Goal: 20%	Professional Services to Provide Audit Services for the Lyndon B. Johnson Hospital Expansion for Harris Health System - To provide audit services for the Lyndon B. Johnson Hospital expansion. <i>Job No. 230332</i>	Award Best proposal meeting requirements	Babak Zare		*
A24	Leica Microsystems Inc. MWBE Goal: GPO/CO-OP Sourced	Surgical Microscopes - To replace two (2) surgical microscopes that are past their expected useful life with new units at Lyndon B. Johnson Hospital. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 530,848
A25	Siemens Medical Solutions USA, Inc. MWBE Goal: GPO/CO-OP Sourced	Clinical Workflow Solutions - To provide Enterprise SyngoVia imaging software and maintenance to the CT, MRI, and Nuclear Medicine imaging departments in Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract</i>	Ratify Award Best Offer(s) Meeting Requirements	Ronald Fuschillo		\$ 508,112
A26	Protiviti Inc. (GA-07572) MWBE Goal: N/A Procured Prior to MWBE Program	Information Technology Consulting, Implementation and Staff Augmentation Services for Harris Health System - Additional funds are needed to cover an increase in need. <i>Job No. 180274, Board Motion 23.04-58</i>	Ratify Additional Funds May 21, 2023 through May 20, 2024	Jeffrey Vinson	\$ 1,600,000	\$ 500,000
A27	Broadus & Associates MWBE Goal: 35%	Construction Manager-Agent for Harris Health System - To provide construction manager-agent services for Harris Health System. <i>Job No. 200322, Board Motion 22.08-111</i>	Ratify Renewal June 06, 2023 through June 05, 2024	Patrick Casey	\$ 1,000,000	\$ 500,000
A28	Stryker Instruments (HCHD-1139) MWBE Goal: N/A Public Health or Safety	Preventative Maintenance and Repair Services for Harris Health System - To provide preventative maintenance and repair services for surgical power tool drills for Ben Taub and Lyndon B. Johnson Hospitals. <i>Public Health or Safety Exemption</i>	Ratify Award Public Health or Safety Exemption Two-year initial term	James Young		\$ 475,422

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A29	Capital Healthcare Planning, Ltd. (HCHD-1179) MWBE Goal: 12%	Consultant Services for Development and Management of Healthcare Services - To provide expert consultant services for development and management of Harris Health's Healthcare Services. Job No. 230335	Ratify Award Best proposal meeting requirements One (1) year initial term with six (6) one-year renewal options	Amineh Kostov		*
A30	SHC Services, Inc. d/b/a Supplemental Health Care (HCHD-870) MWBE Goal: N/A Procured Prior to MWBE Program	Temporary Nursing and Allied Health Personnel for Harris Health System - To continue providing nursing and allied health personnel to Harris Health System. Public Health or Safety Exemption, Board Motion 23.01-08	Ratify Renewal Public Health or Safety Exemption December 02, 2023 through December 01, 2024	Pamela Russell	\$ 532,210	\$ 400,000
A31	Aon Investments USA Inc. (HCHD-1151) MWBE Goal: Not Applicable to Request	Investment and Consulting Services for Harris Health System - To provide investment consultation and advisory services for Harris Health System. NA	Ratify Deferred Compensation Plans Exemption	Kari McMichael		\$ 362,000
A32	Insight Health Corporation dba RAYUS Radiology (HCHD-687) MWBE Goal: N/A Public Health or Safety	Lease of Mobile Magnetic Resonance Imaging (MRI) System for Harris Health System - The term is being extended to continue lease of mobile MRI unit at Ben Taub Hospital to prevent any disruption in MRI services until the new MRI space is fully operational. Additional funds are required for the extension. Public Health or Safety Exemption, Board Motion 23.01-08	Additional Funds Extension Public Health or Safety Exemption February 14, 2024 through February 13, 2025	Pedro Saldana	\$ 719,700	\$ 359,778
A33	Cardinal Health 414, LLC (PP-OR-2127) MWBE Goal: GPO/CO-OP Sourced	Surgical & Isolation Masks - To continue providing staff, patients, and visitors with protective covering for the face, mouth and nose used to prevent inhalation of dangerous substances for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Ratify Funding Yr. 2 January 01, 2024 through December 31, 2024	Douglas Creamer	\$ 339,844	\$ 350,039
A34	Precision Dynamics Corporation Healthcare (PP-NS-1616) MWBE Goal: GPO/CO-OP Sourced	Labels, Identification Bands and Related Products - To continue providing labels, identification bands and related products for Harris Health System. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.02-24	Ratify Funding Yr. 2 August 01, 2023 through July 31, 2024	Douglas Creamer	\$ 337,000	\$ 337,000
A35	Steris Corporation (GA-06885) MWBE Goal: N/A Public Health or Safety	Preventative Maintenance and Repair Services for Harris Health System - To continue to provide preventative maintenance and support services for sterilization systems, surgical monitor and lights, and operating room tables for Harris Health System. Public Health or Safety Exemption, Board Motion 22.10-141	Ratify Additional Funds Extension Public Health or Safety Exemption October 01, 2023 through September 30, 2024	James Young	\$ 299,140	\$ 336,022
A36	Hologic Sales and Services LLC MWBE Goal: GPO/CO-OP Sourced	Mammography Products and Services - To replace one (1) mammography machine that is past its expected useful life at Strawberry Health Center. Premier Healthcare Alliance, L.P. Contract	Ratify Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 322,434

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A37	Varian Medical Systems, Inc. MWBE Goal: N/A Sole Source	Brachytherapy Treatment Delivery System for Harris Health System - To replace one (1) brachytherapy afterloading system that is past its expected useful life with a new unit at Smith Clinic. Sole Source Exemption	Ratify Award Sole Source Exemption	Teong Chai		\$ 308,130
A38	HealthStream, Inc. (HCHD-516) MWBE Goal: N/A Public Health or Safety	Competency Development System for Harris Health System - To continue to provide an online competency assessment using videos and clinical scenarios to determine the level of registered nurses' ability to think critically and apply clinical judgement when caring for their patient population. Public Health or Safety Exemption, Board Motion 22.12.166	Ratify Renewal Public Health or Safety Exemption January 01, 2024 through December 31, 2024	Maureen Padilla	\$ 288,977	\$ 297,390
A39	3M Company (AD-OR-1904) MWBE Goal: GPO/CO-OP Sourced	Patient Warming - Convective Warming Blankets, Resistive Warming, OR Table Pads - To continue providing Harris Health System with products used to prevent hypothermia such as warming blower units, disposable gowns, operating room table pads and water blankets. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.06-83	Ratify Funding Yr. 3 October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 287,476	\$ 287,476
A40	Diagnostica Stago, Inc. (HCHD-717) MWBE Goal: GPO/CO-OP Sourced	Coagulation Analyzers, Reagents, Consumables and Service - To provide for continued Coagulation and Hemostasis testing at Ben Taub and Lyndon B. Johnson Hospitals, Smith Clinic and El Franco Lee Health Center. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.03-40	Funding Yr. 2 February 15, 2024 through February 14, 2025	Michael Nnadi	\$ 259,500	\$ 285,000
A41	3M Company (AD-OR-2072) MWBE Goal: GPO/CO-OP Sourced	Sterilization Assurance - To provide indicator tape, rapid biological indicators, Bowie Dick indicators, sterilization strips and accessories for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Ratify Funding Yr. 2 October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 265,532	\$ 273,498
A42	Crothall Facilities Management Inc. MWBE Goal: N/A Public Health or Safety	Maintenance and Repair Services for Biomedical Equipment for Harris Health System - To provide maintenance and repair services for biomedical equipment for Correctional Health. Public Health or Safety Exemption	Purchase Public Health or Safety Exemption One (1) year initial term with one (1) one-year renewal options	Tim Tatum		\$ 252,126
A43	Agiliti Health, Inc. (PP-NS-1659) MWBE Goal: GPO/CO-OP Sourced	Peak Use Rental Equipment - To continue providing rental of various equipment to supplement facilities during periods of high patient census. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.01-06	Ratify Funding Yr. 2 December 01, 2023 through November 30, 2024	Damien Wiley	\$ 221,612	\$ 243,773
A44	CareFusion Solutions, LLC (HCHD-749) MWBE Goal: GPO/CO-OP Sourced	Maintenance and Support of Pyxis Supply Distribution System for Harris Health - To provide maintenance and support of purchased automated supply chain cabinets and related technology equipment for the Harris Health System. Services will ensure that Harris Health System has ongoing support to assist in equipment inventory, charge, capture, and requisitioning. Premier Healthcare Alliance, L.P. Contract, Board Motion 21.12-113	Renewal February 17, 2024 through February 16, 2025	Doug Creamer, Supply Chain Management	\$ 164,470	\$ 235,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A45	AbbVie US LLC (PPPH18ABB02) MWBE Goal: GPO/CO-OP Sourced	Liletta Discount Program for Harris Health System - To purchase Liletta® for eligible locations under the discount program to provide additional savings. Premier Healthcare Alliance, L.P. Contract	Best Contract(s)	Michael Nnadi		\$ 227,163
A46	EFI Global, Inc. MWBE Goal: 20%	Professional Services for Asbestos and Environment Testing Services for the Lyndon B. Johnson Hospital Expansion Construction Project for the Harris Health System - To provide asbestos and environment testing services for the Lyndon B. Johnson Hospital expansion. Job No. 230303	Award Most qualified vendor(s) meeting requirements	Babak Zare		\$ 220,000
A47	Johnson & Johnson Healthcare Systems Inc. (PP-OR-2184) MWBE Goal: GPO/CO-OP Sourced	Arthroscopy Supplies - To provide Harris Health System with manual and powered equipment including fluid management consoles, endoscopic power shavers, and accessories for arthroscopic procedures. Premier Healthcare Alliance, L.P. Contract	Best Contract(s) June 01, 2023 through May 31, 2024	Douglas Creamer		\$ 215,838
A48	S2S Global (AD-NS-1539) MWBE Goal: GPO/CO-OP Sourced Breg, Inc (PP-NS-1534) MWBE Goal: GPO/CO-OP Sourced	Orthopedic Soft Goods - To continue to provide Harris Health System with orthopedic soft goods such as postoperative shoes, braces, splints and supports. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.09-126	Funding Yr. 3 December 01, 2023 through November 30, 2024	Douglas Creamer	\$ 209,122	\$ 209,122
A49	Wellsky Corporation (HCHD-514) MWBE Goal: N/A Public Health or Safety	Careport Care Management Solution for Harris Health System - This is the Careport Care Management Solution and Cloud Services. These services provide for an electronic care management solution to efficiently coordinate transitions of care for patients being discharged after a post-acute placement and service needs, therefore, increasing bed availability due to faster turnaround time to care for additional patients. Public Health or Safety Exemption	Ratify Renewal Public Health or Safety Exemption January 07, 2024 through January 06, 2025	Ruth Russell	\$ 207,908	\$ 207,908
A50	Vyair Medical (PP-OR-2226) MWBE Goal: GPO/CO-OP Sourced	Disposable Anesthesia Products - To provide Harris Health System with face masks, breathing circuits/bags, filters, gas sampling lines and other items used for general anesthesia for patients. Premier Healthcare Alliance, L.P. Contract	Best Contract(s) August 01, 2023 through July 31, 2024	Douglas Creamer		\$ 202,055
A51	Belimed, Inc. (PP-OR-2104) MWBE Goal: GPO/CO-OP Sourced Steris Corporation (AD-OR-2081) MWBE Goal: GPO/CO-OP Sourced	Instrument Cleaners and Enzymatics - To continue providing Harris Health System with detergents, enzymatics, rinses and lubricants for manual or mechanical cleaning of medical devices and instruments. Premier Healthcare Alliance, L.P. Contract	Ratify Funding Yr. 2 October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 179,723	\$ 185,114
A52	Hall Render Advisory Services LLC (HCHD-896) MWBE Goal: N/A Specialized or Technical	Compliance Coding Audit Services for Harris Health System - To continue providing compliance coding audit services for Harris Health System. Job No. 220044, Board Motion 22.12-166	Ratify Renewal January 13, 2024 through January 12, 2025	Anthony Williams	\$ 74,481	\$ 172,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A53	Cardinal Health 200, LLC (PP-OR-1889) MWBE Goal: GPO/CO-OP Sourced	OR Patient Positioning Products - To continue providing Harris Health System with pre-formed foam or gel positioners that aid in patient positioning and the prevention of pressure injuries during a surgical procedure. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.05-67	Ratify Funding Yr. 3 August 01, 2023 through July 31, 2024	Douglas Creamer	\$ 167,721	\$ 167,721
A54	Boston Scientific Corporation (PP-OR-1914) MWBE Goal: GPO/CO-OP Sourced	Surgical Incontinence Products - To continue providing Harris Health System with implants used to treat stress urinary incontinence and pelvic floor reconstruction. Premier Healthcare Alliance, L.P. Contract	Ratify Funding Yr. 3 September 01, 2023 through August 31, 2024	Douglas Creamer	\$ 155,535	\$ 163,312
A55	Rauland-Borg Corporation through Lone Star Communications Houston (PP-IT-256) MWBE Goal: GPO/CO-OP Sourced	Nurse Call Communication System Maintenance for Harris Health - This is the annual maintenance renewal for the Nurse Call Communications system, which provides wireless phones to the nursing staff in order to expedite response times for increased patient satisfaction and quality of care. Premier Healthcare Alliance, L.P. Contract, Board Motion 22.12-166	Ratify Renewal January 01, 2024 through December 31, 2024	Ronal Fuschillo	\$ 153,662	\$ 159,809
A56	King Benford Law Firm PLLC MWBE Goal: 100%	General Litigation and Real Property Matters Legal Services for Harris Health System - To continue providing special counsel for legal advice on general litigation and real property matters for Harris Health. Professional Services Exemption, Board Motion 23.03-41	Renewal Professional Services Exemption February 01, 2024 through January 31, 2025	Sara Thomas	\$ 150,000	\$ 150,000
A57	Innovation Associates, Inc. MWBE Goal: N/A Sole Source	Spare Parts for the Current Central Fill System for Harris Health - Central Fill technology spare parts are needed to support frequent malfunctions due to end of life state of the technology. Sole Source Exemption	Purchase Sole Source Exemption	Sunny Ogbonnaya		\$ 145,216
A58	AbbVie, Inc (PP-OR-2155) MWBE Goal: GPO/CO-OP Sourced	Breast Implants, Tissue Expanders and Related Products - To continue to provide silicone and saline breast implants, tissue expanders and sizers for Harris Health System. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.09-146	Funding Yr. 2 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 136,195	\$ 143,005
A59	Insight Direct USA, Inc. (PP-IT-241) MWBE Goal: 0% Non-Divisible	LinkedIn Online Recruitment and Networking Subscription Services for Harris Health System - To utilize online recruitment and networking subscription services for job postings, professional networking, and individual recruiter sourcing tools. Premier Healthcare Alliance, L.P. Contract	Ratify Award Only Offer Received One (1) year initial term with two (2) one-year renewal options	Omar Reid		\$ 142,907
A60	SHI Government Solutions, Inc. [DIR-TSO-4317] MWBE Goal: 100%	SolarWinds Maintenance Renewal - SolarWinds is an Oracle and Microsoft SQL database monitoring software, which allows IT support staff to monitor the Epic, PeopleSoft and Business Intelligence databases. State of Texas Department of Information Resources (DIR) Cooperative Contract	Purchase Low quote One (1) year initial term with two (2) one-year renewal options	Antony Kilty		\$ 138,331

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A61	ECRI Institute (PP-SV-402) [GA-04923] MWBE Goal: GPO/CO-OP Sourced	Healthcare Assessment Technology Program for Harris Health System - To provide medical supply and equipment cost benchmarking, product comparison, on-demand reporting, safety alert recall notifications and additional services. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.10-158</i>	Renewal February 08, 2024 through February 07, 2025	Teong Chai	\$ 134,146	\$ 134,146
A62	Bio-Rad Laboratories, Inc. (HCHD-586) MWBE Goal: N/A Public Health or Safety	Geenius Reader and HIV1/2 Supplemental Assay for Harris Health System - To provide continued confirmatory testing for HIV positive results received from Harris Health System patients. <i>Public Health or Safety Exemption, Board Motion 22.12-166</i>	Ratify Renewal Public Health or Safety Exemption December 22, 2023 through December 21, 2024	Michael Nnadi	\$ 120,783	\$ 132,861
A63	Philips Healthcare MWBE Goal: GPO/CO-OP Sourced	General Radiography - To add one (1) radiographic system to the School of Radiology at Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 131,000
A64	Becton, Dickinson and Company (AD-OR-2006) MWBE Goal: GPO/CO-OP Sourced	Surgical Instruments - To continue providing reusable surgical instruments to facilitate a surgical operation for Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08</i>	Funding Yr. 2 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 118,436	\$ 130,280
A65	Sedgwick Claims Management Services, Inc. (GA-07153) MWBE Goal: N/A Procured Prior to MWBE Program	Worker's Compensation Third Party Administration and Associated Services for Harris Health System - To provide comprehensive Worker's Compensation claims management, medical cost containment, and a Risk Management Information System and its associated services for Harris Health System. <i>Job No. 170196, Board Motion 22.10-141</i>	Ratify Renewal January 01, 2024 through December 31, 2024	Ajana Clayton	\$ 130,250	\$ 130,250
A66	Letourneau Interests, Inc. MWBE Goal: GPO/CO-OP Sourced	Furniture and Systems, Seating and Accessories - To provide chairs for the "Commit to Sit" program at Ben Taub and Lyndon B. Johnson Hospitals. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Lowest Offer	David Riddle		\$ 116,881
A67	Advanced Sterilization Products MWBE Goal: N/A Public Health or Safety	Preventative Maintenance and Repair Services for Harris Health System - To provide preventative maintenance and repair services for Evotech Endoscope Reprocessors and STERRAD Sterilizers located at Ben Taub and Lyndon B. Johnson Hospitals. <i>Public Health or Safety Exemption</i>	Ratify Purchase Public Health or Safety Exemption One (1) year initial term with two (2) one-year renewal options	James Young		\$ 115,978
A68	Smiths Medical ASD, Inc. (AD-OR-1902) MWBE Goal: GPO/CO-OP Sourced	Patient Warming - Blood and Fluid Warming - To continue providing Harris Health System with blood and fluid warming disposable tubing, power sources, connectors and accessories used to prevent hypothermia in patients. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 22.06-83</i>	Ratify Funding Yr. 3 October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 104,504	\$ 114,954

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A69	Boston Scientific Corporation (PP-OR-2264) MWBE Goal: GPO/CO-OP Sourced	Surgical Disposable Scopes - To provide single-patient-use disposable scopes and accessories that provide the visualization to see and record images inside the body for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Best Contract(s) November 01, 2023 through October 31, 2024	Douglas Creamer	\$ 131,545	\$ 113,858
A70	Depuy Synthes Sales Inc. (HCHD-0801) MWBE Goal: N/A Public Health or Safety	Neurovascular Care Products for the Harris Health System - To continue providing Harris Health System with consignment of EmboTrap III used for neuro interventional procedures. Public Health or Safety Exemption	Ratify Renewal Public Health or Safety Exemption November 22, 2023 through November 21, 2024	Douglas Creamer	\$ 106,179	\$ 106,179
A71	O&M Halyard, Inc. (AD-OR-2227) MWBE Goal: GPO/CO-OP Sourced	Sterilization Wrap - To provide Harris Health System with disposable fabric used to wrap instruments for safe and sterilized storage until needed for procedure. Premier Healthcare Alliance, L.P. Contract	Best ASCEND Contract October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 107,069	\$ 104,927
A72	Verathon Inc. MWBE Goal: GPO/CO-OP Sourced	Surgical Disposable Scopes - To provide single-patient-use disposable scopes and accessories that provide the visualization to see and record images inside the body for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Best ASCEND Contract November 01, 2023 through October 31, 2024	Douglas Creamer	\$ 102,186	\$ 102,675
A73	3M Company (PP-OR-2136) MWBE Goal: GPO/CO-OP Sourced	Medical and Surgical Respiratory, Services and Accessories - To continue to provide disposable medical-grade N95 masks that provide protection for patient and healthcare workers from air particulates. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.05-73	Ratify Funding Yr. 2 January 01, 2024 through December 31, 2024	Douglas Creamer	\$ 97,571	\$ 102,450
A74	Covidien Sales LLC (AD-OR-1943) MWBE Goal: GPO/CO-OP Sourced	Endotracheal Tubes and Related Products - To provide Harris Health System with endotracheal tubes, stylets and pharyngeal airways and holders. Premier Healthcare Alliance, L.P. Contract	Ratify Funding Yr. 3 January 01, 2024 through December 31, 2024	Douglas Creamer	\$ 101,726	\$ 101,726
A75	US Foods, Inc. (PP-DI-001D) MWBE Goal: GPO/CO-OP Sourced	Participation and Utilization Incentive for Harris Health System - To allow participation in Premier Direct Parent Participation and Utilization Rebate Program with US Foods, Inc. Rebate program provides a 1% rebate on the aggregate purchases of all Harris Health System facilities. Premier Healthcare Alliance, L.P. Contract	Ratify Award Only Offer Received July 01, 2023 through June 30, 2025	Shweta Mirsa		\$ (82,765)
A76	The Harris Center for Mental Health and IDD (The Harris Center) [HCHD-309] MWBE Goal: N/A Government Entity	Laboratory Services Agreement - To continue providing clinical laboratory testing services for The Harris Center. Interlocal Agreement, Board Motion 22.10-141	Ratify Renewal November 15, 2023 through November 14, 2024	Michael Nnadi	\$ 65,000	\$ (65,000)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A77	Returns R Us, Inc. an Illinois Corporation d/b/a Pharma Logistics, Ltd. (GA-07359) (PPPH26PLG01) MWBE Goal: GPO/CO-OP Sourced	Onsite Box & Ship Returned Goods Service - To provide Harris Health System with the pick up and processing of outdated, recalled, and overstocked prescription drugs. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.12.-176	Funding Yr. 2 February 01, 2024 through January 31, 2025	Michael Nnadi	\$ 520,865	\$ (450,000)
					Total Expenditures	\$ 88,416,077
					Total Revenue	\$ (597,765)

Budget and Finance Agenda Items for the Harris County Hospital District dba Harris Health System - Board of Trustees Report

Expenditure Summary: January 25, 2024 (Transmittals)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B1	Houston Business Journal (HCHD-15) MWBE Goal: 0% Non-Divisible	Advertising Space in Local Publications for Harris Health System - To provide advertising space in local publications. Job No. 190026	Renewal July 26, 2023 through July 25, 2025	Amanda Callaway	\$ 50,000	\$ 100,000
B2	Carahsoft Technology Corporation [DIR-TSO-4288] MWBE Goal: 0% Non-Divisible	DocuSign E-Signature Solution - DocuSign eSignatures is a legal & secure way to electronically sign documents remotely, as this solution provides seamlessly integration capabilities with PeopleSoft to increase productivity by sending documents for electronic signatures from a PeopleSoft application. This integration with PeopleSoft provides a streamlined signature collection for approvals and contracts with audit trail. State of Texas Department of Information Resources (DIR) Cooperative Contract	Purchase Only quote January 20, 2024 through January 19, 2025 with one (1) one-year renewal options	Antony Kilty		\$ 99,524
B3	Craneware, Inc. (GA-07749) MWBE Goal: N/A Sole Source	Chargemaster Toolkit® Software for Harris Health System - To provide Craneware's software solution to assist the hospital to effectively price, charge, code, and retain earned revenue for patient care services and supplies. This solution optimizes reimbursement, increases operational efficiency, minimizes compliance issues, and helps increase revenue. Sole Source Exemption	Renewal Sole Source Exemption December 31, 2023 through December 30, 2024	Ronald Fuschillo	\$ 91,453	\$ 96,026
B4	Whitmire & Munoz LLC (HCHD-763) MWBE Goal: 100%	Consulting Services for Community Engagement Efforts for Harris Health System - To let the vendor continue assist Harris Health System with developing a comprehensive strategy and engagement efforts to help raise public awareness of Harris Health, and its value to all residents of Harris County. Personal Services Exemption, Board Motion 23.03-41	Renewal Personal Services Exemption October 01, 2023 through September 30, 2024	Olga Rodriguez	\$ 57,000	\$ 96,000
B5	Hologic Sales and Services LLC MWBE Goal: GPO/CO-OP Sourced	Bone Densitometry - To replace a malfunctioning bone densitometer past its expected useful life at Smith Clinic. Premier Healthcare Alliance, L.P. Contract	Award Lowest Offer	Teong Chai		\$ 92,800
B6	Cactus Software, LLC [GA-06599] MWBE Goal: N/A Sole Source	Visual Cactus Multi-Entity Software Renewal - To renew the maintenance associated with the Visual Cactus software, which has products that include the Credentialing and Application Manager Software applications. This software is a credentialing, privileging, and payer enrollment system. The Amendment for the Server Upgrade is also included. Sole Source Exemption	Renewal Sole Source Exemption December 05, 2023 through December 04, 2024	Antony Kilty Celesta Chelf Jessey Thomas	\$ 81,691	\$ 91,160
B7	Sentact LLC (GA-06698) MWBE Goal: N/A Procured Prior to MWBE Program	Tracer Template Program for Harris Health System - To continue to provide best practice tracer templates used to capture Det Norske Veritas (DNV) measures of success and provide a centralized method of validating levels of compliance. Public Health or Safety Exemption	Renewal Public Health or Safety Exemption February 23, 2024 through February 22, 2025	Vivian Ho-Nguyen	\$ 66,960	\$ 88,856

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B8	SHI Government Solutions, Inc. (DIR-TSO- 4092) (HCHD-566) MWBE Goal: 100%	Microsoft Enterprise Agreement Software Maintenance Renewal - The original amount approved by the Board of Trustees on December 7th, 2023, was under reported. Additional funds are being added to bring the amount up to the correct amount of \$2,612,321. State of Texas Department of Information Resources (DIR) Cooperative Contract, Board Motion 23.12-176	Additional Funds January 01, 2024 through December 31, 2024	Ronald Fuschillo	\$ 2,534,694	\$ 77,627
B9	The Vein Academy Phlebotomy School MWBE Goal: N/A Specialized or Technical	Mobile Phlebotomy Services for Harris Health System - To provide court ordered forensic testing of Correctional Health inmates so that victims of sexual assault can be notified if their assailant tests positive for any STIs. Public Health or Safety Exemption	Award Public Health or Safety Exemption One (1) year initial term with one (1) one-year renewal options	Kiki Teal		\$ 75,000
B10	Flexicare Incorporated (AD-OR-1728) MWBE Goal: GPO/CO-OP Sourced	Laryngoscope Systems - To provide laryngoscope blades and handles for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Best Contract(s) August 01, 2023 through July 31, 2024	Douglas Creamer	\$ 73,479	\$ 73,479
B11	EBSCO Information Services MWBE Goal: N/A Public Health or Safety	Nursing Reference Database Access for Harris Health System - To continue to provide access to information through the Nursing Reference Database. It provides support for evidence-based practice, point of care research and reference. Public Health or Safety Exemption	Renewal Public Health or Safety Exemption January 01, 2024 through December 31, 2024	Maureen Padilla	\$ 64,764	\$ 66,706
B12	Capital Inventory, Inc. (PPPH25CI101) MWBE Goal: GPO/CO-OP Sourced	Pharmacy Physical Inventory Services for Harris Health System - To provide for inventory of pharmacy drugs and devices in Harris Health System pharmacies and at Harris County correctional pharmacies. Premier Healthcare Alliance, L.P. Contract	Renewal December 19, 2023 through December 18, 2024	Sunny Ogbonnaya	\$ 65,500	\$ 65,500
B13	Cotton Commercial USA, Inc (OMNIA Partners contract R191605) MWBE Goal: 0% Emergency Procurement	Emergency restroom trailer rental - Rental of four (4) restroom trailers at MLK Clinic from August 4, 2023 through September 23, 2023. OMNIA Partners, Public Sector Cooperative Purchasing Program	Purchase Only quote	Roger Singleton		\$ 62,451
B14	Optum360, LLC (HCHD-1097) MWBE Goal: N/A Sole Source	CPT and HCPCS Codes for Harris Health System - Current Procedural Terminology or "CPT" and Healthcare Common Procedural Coding System or "HCPCS" codes are used to classify medical diagnoses, procedures, diagnostic tests, treatments, and equipment and supplies. These user-friendly descriptions need to be in English and Spanish. Sole Source Exemption	Purchase Sole Source Exemption	Antony Kilty Amber Wingo		\$ 61,910
B15	Diligent Corporation (GA-07143) MWBE Goal: N/A Sole Source	Diligent Boards Software Subscription for Harris Health System - To provide software that is used by the Board of Trustees to access all of the agendas, documents, annotations and discussions of board meetings on-line through a secure portal. Sole Source Exemption	Renewal Sole Source Exemption February 13, 2024 through February 12, 2025	Antony Kilty	\$ 55,682	\$ 58,466

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B16	DeRoyal Industries, Inc. (AD-OR-1938) MWBE Goal: GPO/CO-OP Sourced	Temperature Monitoring Products - To continue providing devices that monitor a patient's temperature during surgery and post-operatively for Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract</i>	Funding Yr. 3 March 01, 2024 through February 28, 2025	Douglas Creamer	\$ 57,844	\$ 57,844
B17	Inova Diagnostics, Inc. (GA-07354) MWBE Goal: N/A Specialized or Technical	Fully Automated or Semi-Automated Autoimmune Disease Testing Analyzer(s), including Reagents, Consumables and Service for Harris Health System - To provide for continued autoimmune disease testing of Harris Health System patients. <i>Job No. 170023</i>	Renewal October 05, 2023 through October 04, 2024	Michael Nnadi	\$ 51,760	\$ 56,936
B18	The StayWell Company, LLC (GA-06947) MWBE Goal: N/A Public Health or Safety	Healthcare Content Library for Harris Health System - To provide a license for access to The StayWell Company, LLC's content library which includes a variety of health topics including wellness and prevention. <i>Public Health or Safety Exemption</i>	Renewal Public Health or Safety Exemption November 30, 2023 through November 29, 2024	Maria Cowles	\$ 54,500	\$ 54,500
					Total Expenditures	\$ 1,374,785
					Total Revenue	\$ (0)

Thursday, January 25, 2024

Consideration of Approval of 2024 Governance Committee Goals

The following 2024 Governance Committee Goals were approved at the January 9, 2024 Governance Committee:

- Cultivate Continuing Education Among Board Members
- Continue to Refine the Elections Process for the Board Officer Positions
- Continue to Develop and Expand Board Self-Evaluation Processes
- Develop Recommendations Around the Strategic Planning Process

Thursday, January 25, 2024

Consideration of Approval of Revised 2024 DEI Reporting Schedule

Attached for review is the revised 2024 Diversity, Equity and Inclusion (DEI) Reporting Schedule, approved at the January 12, 2024 DEI Committee.

REVISED 2024 DEI REPORTING SCHEDULE

January 2024	Employee Engagement Survey Findings, Food Bank Update
February 2024	DEI Survey Analysis
March 2024	CHW Home Visits
April 2024	MWBE Annual Report
May 2024	DEI Consultant Findings
June 2024	Patient Perspectives on Access to Care
July 2024	Break (<i>No Committee meetings scheduled for the month of July</i>)
August 2024	Community Engagement
September 2024	Health-Harming Legal Needs Medical-Legal Partnership
October 2024	Apprenticeship Updates
November 2024	Administrative Harms & Unfulfilled Public Benefits
December 2024	Break (<i>No Committee meetings scheduled for the month of December</i>)

Thursday, January 25, 2024

Consideration of Approval of Grant Recommendations (Items C1 through C3)

Grant recommendations:

C1. Baylor College of Medicine – Ratification of Cancer Prevention and Research Institute of Texas (CPRIT) Grant

- Term: August 1, 2022 – March 19, 2023
- Award Amount: \$279,554.00
- Project Owner: Dr. Jennifer Small

C2. The City of Houston Department of Health, Funded by the Centers for Disease Control and Prevention – Renewal of Agreement

- Term: January 1, 2024 – December 31, 2024
- Award Amount: \$150,000.00
- Project Owner: Dr. Jennifer Small

C2. The United States Department of Health Resources and Services Administration (HRSA) – Renewal of Grant

- Term: January 1, 2024 – December 31, 2024
- Award Amount: \$256,567.00
- Project Owner: Dr. Jennifer Small

Grant Agenda Items for the Harris County Hospital District dba Harris Health System, Board of Trustees Report
Grant Agreement Summary: January 25, 2024

No.	Grantor	Description/Justification	Action, Basis of Recommendation	Term	Project Owner	Award Amount
C1	The City of Houston	Consideration of Approval to Ratify a Grant Agreement between the Harris County Hospital District d/b/a Harris Health System and Baylor College of Medicine to fund the Strengthening Safety-Net Health Systems to Improve Cervical and Colorectal Cancer Screening & follow-up project.	Ratification	August 31, 2022 through March 19, 2023	Dr. Jennifer Small	\$ 279,554.00
C2	The City of Houston Department of Health, funded by the Centers for Disease Control and Prevention	Consideration of Approval of a Renewal Agreement between the Harris County Hospital District d/b/a Harris Health System and The City of Houston Department of Health, funded by the Centers for Disease Control and Prevention to provide Routine HIV Screening Services at Harris Health's Ambulatory Care Services, Ben Taub, and Lyndon B. Johnson Hospitals.	Renewal	January 1, 2024 through December 31, 2024	Dr. Jennifer Small	\$ 150,000.00
C3	United States Department of Health Resources and Services Administration (HRSA)	Consideration of Approval of a Grant Award Renewal from the United States Department of Health Resources and Services Administration (HRSA) to the Harris County Hospital District d/b/a Harris Health System Funded by Part C of the Ryan White HIV/AIDS Treatment Extension Act of 2009 to Provide Early Intervention Primary Medical Care to HIV Positive Patients of Harris Health System.	Renewal	January 1, 2024 through December 31, 2024	Dr. Jennifer Small	\$ 256,567.00
TOTAL AMOUNT:						\$ 686,121.00

BOARD OF TRUSTEES

Meeting of the Board of Trustees

HARRISHEALTH
SYSTEM

Thursday, January 25, 2024

Consideration of Acceptance of the Harris Health System November 2023
Financial Report Subject to Audit

Attached for your review and consideration is the November 2023 Financial Report.

Administration recommends that the Board accept the financial report for the period ended November 30, 2023, subject to final audit.

Victoria Nikitin

Victoria Nikitin
Executive Vice President – Chief Financial Officer



Financial Statements

As of November 30, 2023
Subject to Audit



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Financial Highlights Review

As of November 30, 2023

Operating income for November was \$29.2 million compared to a budgeted income of \$9.6 million.

Total net revenue for November of \$226.7 million was \$10.4 million or 4.8% more than budget. The favorable variance was driven primarily by a \$7.6 million increase in net patient revenue.

In November, total expenses of \$197.5 million were \$9.1 million or 4.4% less than budget. Total labor costs were \$8.1 million less than budget. Purchased services for medical insurance subsidies contributed \$2.3 million to the decrease due to the Marketplace plan pricing effective for calendar year 2023.

Also in November, total patient days and average daily census increased 3.3% compared to budget. Inpatient case mix index, a measure of patient acuity, was 1.6% higher than planned with length of stay 3.6% more than budget. Emergency room visits were 2.3% higher than planned for the month. Total clinic visits, including telehealth, were 6.2% lower compared to budget. Births were down 7.5% for the month.

Total cash receipts for November were \$68.7 million. The System has \$1,166.0 million in unrestricted cash, cash equivalents and investments, representing 186.2 days cash on hand. Harris Health System has \$179.3 million in net accounts receivable, representing 93.1 days of outstanding patient accounts receivable at November 30, 2023. The November balance sheet reflects a combined net receivable position of \$286.5 million under the various Medicaid Supplemental programs. The current portion of ad valorem taxes receivable is \$906.1 million, which is offset by ad valorem tax collections as received. Deferred ad valorem tax revenue is \$757.5 million, and is released as ad valorem tax revenue is recognized. As of November 30, 2023, no current ad valorem tax collections were received and \$151.5 million in current ad valorem tax revenue was recognized.

Income Statement

As of November 30, 2023 and 2022 (in \$ Millions)

	MONTH-TO-MONTH			YEAR-TO-DATE				
	CURRENT YEAR	CURRENT BUDGET	PERCENT VARIANCE	CURRENT YEAR	CURRENT BUDGET	PERCENT VARIANCE	PRIOR YEAR	PERCENT VARIANCE
REVENUE								
Net Patient Revenue	\$ 65.7	\$ 58.1	13.1%	\$ 117.5	\$ 116.4	1.0%	\$ 118.6	-1.0%
Medicaid Supplemental Programs	69.8	68.0	2.6%	137.8	136.1	1.3%	95.5	44.3%
Other Operating Revenue	9.9	9.9	0.2%	21.0	20.1	4.6%	18.9	11.1%
Total Operating Revenue	\$ 145.4	\$ 136.0	6.9%	\$ 276.3	\$ 272.5	1.4%	\$ 233.1	18.6%
Net Ad Valorem Taxes	74.8	74.7	0.1%	149.6	149.4	0.1%	138.5	8.0%
Net Tobacco Settlement Revenue	-	-	0.0%	-	-	0.0%	-	0.0%
Capital Gifts & Grants	-	-	0.0%	-	-	0.0%	-	0.0%
Interest Income & Other	6.5	5.5	17.3%	13.6	11.1	22.4%	6.0	126.0%
Total Nonoperating Revenue	\$ 81.3	\$ 80.3	1.3%	\$ 163.2	\$ 160.5	1.7%	\$ 144.5	12.9%
Total Net Revenue	\$ 226.7	\$ 216.3	4.8%	\$ 439.5	\$ 433.0	1.5%	\$ 377.6	16.4%
EXPENSE								
Salaries and Wages	\$ 73.7	\$ 79.0	6.7%	\$ 152.9	\$ 158.2	3.4%	\$ 141.9	-7.7%
Employee Benefits	26.6	29.5	9.7%	55.7	59.0	5.6%	45.3	-22.9%
Total Labor Cost	\$ 100.3	\$ 108.5	7.5%	\$ 208.5	\$ 217.2	4.0%	\$ 187.2	-11.4%
Supply Expenses	25.7	25.9	0.8%	51.1	52.5	2.6%	47.8	-6.9%
Physician Services	37.2	37.3	0.2%	73.9	74.5	0.8%	70.8	-4.4%
Purchased Services	24.4	26.8	9.3%	44.8	53.6	16.5%	43.5	-2.9%
Depreciation & Interest	10.0	8.2	-21.9%	17.8	16.4	-8.6%	14.7	-21.0%
Total Operating Expense	\$ 197.6	\$ 206.7	4.4%	\$ 396.2	\$ 414.2	4.4%	\$ 364.1	-8.8%
Operating Income (Loss)	\$ 29.2	\$ 9.6		\$ 43.3	\$ 18.9		\$ 13.5	
Total Margin %	12.9%	4.5%		9.9%	4.4%		3.6%	

Balance Sheet

November 30, 2023 and 2022 (in \$ Millions)

	<u>CURRENT YEAR</u>	<u>PRIOR YEAR</u>
<u>CURRENT ASSETS</u>		
Cash, Cash Equivalents and Short Term Investments	\$ 1,166.0	\$ 1,068.9
Net Patient Accounts Receivable	179.3	131.1
Net Ad Valorem Taxes, Current Portion	906.1	136.7
Other Current Assets	386.1	193.1
Total Current Assets	\$ 2,637.5	\$ 1,529.8
<u>CAPITAL ASSETS</u>		
Plant, Property, & Equipment, Net of Accumulated Depreciation	\$ 525.9	\$ 416.4
Construction in Progress	146.7	175.7
Right of Use Assets	42.4	45.3
Total Capital Assets	\$ 714.9	\$ 637.3
<u>ASSETS LIMITED AS TO USE & RESTRICTED ASSETS</u>		
Debt Service & Capital Asset Funds	\$ 41.3	\$ 40.2
LPPF Restricted Cash	1.6	15.5
Capital Gift Proceeds	55.5	45.6
Other - Restricted	1.0	1.0
Total Assets Limited As to Use & Restricted Assets	\$ 99.3	\$ 102.4
Other Assets	30.1	25.4
Deferred Outflows of Resources	237.5	188.5
Total Assets & Deferred Outflows of Resources	\$ 3,719.3	\$ 2,483.4
<u>CURRENT LIABILITIES</u>		
Accounts Payable and Accrued Liabilities	\$ 182.3	\$ 189.9
Employee Compensation & Related Liabilities	136.2	126.6
Deferred Revenue - Ad Valorem	757.5	-
Estimated Third-Party Payor Settlements	19.3	13.5
Current Portion Long-Term Debt and Capital Leases	20.0	20.4
Total Current Liabilities	\$ 1,115.3	\$ 350.5
Long-Term Debt	315.6	332.1
Net Pension & Post Employment Benefits Liability	778.5	599.1
Other Long-Term Liabilities	9.8	8.0
Deferred Inflows of Resources	112.6	218.7
Total Liabilities	\$ 2,331.8	\$ 1,508.5
Total Net Assets	\$ 1,387.5	\$ 975.0
Total Liabilities & Net Assets	\$ 3,719.3	\$ 2,483.4

Cash Flow Summary

As of November 30, 2023 and 2022 (in \$ Millions)

	MONTH-TO-MONTH		YEAR-TO-DATE	
	CURRENT YEAR	PRIOR YEAR	CURRENT YEAR	PRIOR YEAR
CASH RECEIPTS				
Collections on Patient Accounts	\$ 66.0	\$ 50.9	\$ 130.8	\$ 103.2
Medicaid Supplemental Programs	(7.7)	6.6	395.7	459.3
Net Ad Valorem Taxes	0.0	0.0	0.1	0.0
Tobacco Settlement	-	-	-	-
Other Revenue	10.4	50.6	25.8	57.0
Total Cash Receipts	\$ 68.7	\$ 108.1	\$ 552.4	\$ 619.5
CASH DISBURSEMENTS				
Salaries, Wages and Benefits	\$ 106.7	\$ 102.3	\$ 225.1	\$ 204.8
Supplies	22.5	23.9	46.9	45.1
Physician Services	31.4	30.9	67.2	65.0
Purchased Services	18.5	19.6	40.6	33.9
Capital Expenditures	10.9	9.6	27.3	22.4
Debt and Interest Payments	0.3	0.3	0.5	0.6
Other Uses	(13.9)	(5.9)	(8.5)	1.7
Total Cash Disbursements	\$ 176.4	\$ 180.8	\$ 399.1	\$ 373.5
Net Change	\$ (107.6)	\$ (72.7)	\$ 153.3	\$ 246.1
Unrestricted Cash, Cash Equivalents and Investments - Beginning of year			\$ 1,012.6	
Net Change			153.3	
Unrestricted Cash, Cash Equivalents and Investments - End of period			\$ 1,166.0	

Performance Ratios

As of November 30, 2023 and 2022 (in \$ Millions)

	MONTH-TO-MONTH		YEAR-TO-DATE		
	CURRENT YEAR	CURRENT BUDGET	CURRENT YEAR	CURRENT BUDGET	PRIOR YEAR
<u>OPERATING HEALTH INDICATORS</u>					
Operating Margin %	12.9%	4.5%	9.9%	4.4%	3.6%
Run Rate per Day (In\$ Millions)	\$ 6.4	\$ 6.7	\$ 6.3	\$ 6.6	\$ 5.8
Salary, Wages & Benefit per APD	\$ 2,377	\$ 2,663	\$ 2,373	\$ 2,614	\$ 2,253
Supply Cost per APD	\$ 609	\$ 636	\$ 582	\$ 632	\$ 576
Physician Services per APD	\$ 881	\$ 915	\$ 841	\$ 897	\$ 852
Total Expense per APD	\$ 4,678	\$ 5,072	\$ 4,507	\$ 4,984	\$ 4,382
Overtime as a % of Total Salaries	3.5%	2.9%	3.7%	2.9%	3.8%
Contract as a % of Total Salaries	5.1%	4.4%	5.0%	4.5%	6.1%
Full-time Equivalent Employees	10,435	10,190	10,359	10,210	9,912
<u>FINANCIAL HEALTH INDICATORS</u>					
Quick Ratio			2.3		4.3
Unrestricted Cash (In \$ Millions)			\$ 1,166.0	\$ 745.8	\$ 1,068.9
Days Cash on Hand			186.2	112.7	186.7
Days Revenue in Accounts Receivable			93.1	87.6	67.4
Days in Accounts Payable			51.1		44.8
Capital Expenditures/Depreciation & Amortization			201.0%		176.0%
Average Age of Plant(years)			10.7		10.6

Harris Health System Key Indicators



Statistical Highlights

As of November 30, 2023 and 2022

	MONTH-TO-MONTH			YEAR-TO-DATE				
	CURRENT YEAR	CURRENT BUDGET	PERCENT CHANGE	CURRENT YEAR	CURRENT BUDGET	PERCENT CHANGE	PRIOR YEAR	PERCENT CHANGE
Adjusted Patient Days	42,220	42,558	-0.8%	87,879	85,015	3.4%	83,081	5.8%
Outpatient % of Adjusted Volume	60.6%	61.1%	-0.9%	61.5%	61.1%	0.5%	60.2%	2.2%
Primary Care Clinic Visits	41,602	44,580	-6.7%	88,361	94,485	-6.5%	91,626	-3.6%
Specialty Clinic Visits	19,744	19,680	0.3%	40,541	41,305	-1.8%	41,222	-1.7%
Telehealth Clinic Visits	9,228	10,980	-16.0%	19,292	22,073	-12.6%	21,651	-10.9%
Total Clinic Visits	70,574	75,240	-6.2%	148,194	157,863	-6.1%	154,499	-4.1%
Emergency Room Visits - Outpatient	10,632	10,506	1.2%	22,418	21,661	3.5%	22,323	0.4%
Emergency Room Visits - Admitted	1,764	1,609	9.6%	3,682	3,218	14.4%	3,613	1.9%
Total Emergency Room Visits	12,396	12,115	2.3%	26,100	24,879	4.9%	25,936	0.6%
Surgery Cases - Outpatient	896	826	8.5%	1,936	1,620	19.5%	1,669	16.0%
Surgery Cases - Inpatient	819	842	-2.7%	1,677	1,681	-0.2%	1,587	5.7%
Total Surgery Cases	1,715	1,668	2.8%	3,613	3,301	9.5%	3,256	11.0%
Total Outpatient Visits	115,418	122,187	-5.5%	240,159	256,253	-6.3%	252,038	-4.7%
Inpatient Cases (Discharges)	2,528	2,605	-3.0%	5,470	5,325	2.7%	5,510	-0.7%
Outpatient Observation Cases	888	865	2.7%	1,871	1,837	1.9%	1,664	12.4%
Total Cases Occupying Patient Beds	3,416	3,470	-1.6%	7,341	7,162	2.5%	7,174	2.3%
Births	442	478	-7.5%	870	963	-9.7%	1,007	-13.6%
Inpatient Days	16,641	16,546	0.6%	33,856	33,031	2.5%	33,085	2.3%
Outpatient Observation Days	2,882	2,357	22.3%	5,843	5,006	16.7%	5,162	13.2%
Total Patient Days	19,523	18,903	3.3%	39,699	38,037	4.4%	38,247	3.8%
Average Daily Census	650.8	630.1	3.3%	650.8	623.6	4.4%	627.0	3.8%
Average Operating Beds	696	702	-0.9%	696	702	-0.9%	681	2.2%
Bed Occupancy %	93.5%	89.8%	4.2%	93.5%	88.8%	5.3%	92.1%	1.6%
Inpatient Average Length of Stay	6.58	6.35	3.6%	6.19	6.20	-0.2%	6.00	3.1%
Inpatient Case Mix Index (CMI)	1.721	1.694	1.6%	1.684	1.694	-0.6%	1.657	1.6%
Payor Mix (% of Charges)								
Charity & Self Pay	45.3%	44.3%	2.5%	45.5%	44.3%	2.9%	47.4%	-4.0%
Medicaid & Medicaid Managed	20.5%	22.7%	-9.5%	20.2%	22.7%	-10.6%	22.3%	-9.0%
Medicare & Medicare Managed	11.3%	11.4%	-0.6%	11.5%	11.4%	0.6%	10.9%	5.6%
Commercial & Other	22.8%	21.7%	5.2%	22.8%	21.7%	5.0%	19.5%	17.0%
Total Unduplicated Patients - Rolling 12				247,560			245,092	1.0%
Total New Patient - Rolling 12				88,370			84,712	4.3%

Harris Health System

Statistical Highlights

November FY 2024

Cases Occupying Beds - CM

Actual	Budget	Prior Year
3,416	3,470	3,383

Cases Occupying Beds - YTD

Actual	Budget	Prior Year
7,341	7,162	7,174

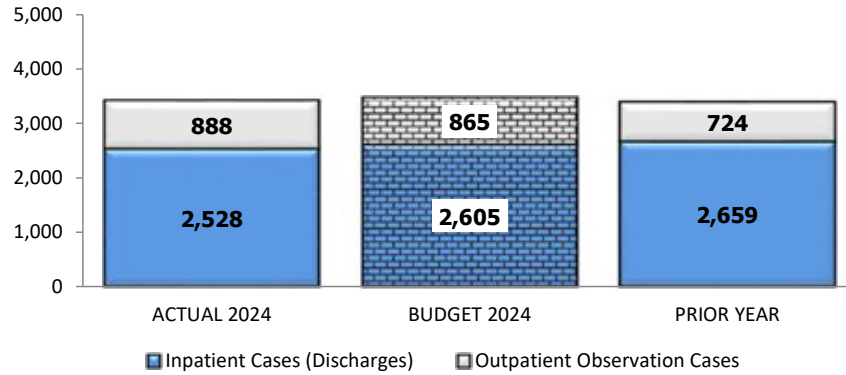
Emergency Visits - CM

Actual	Budget	Prior Year
12,396	12,115	12,165

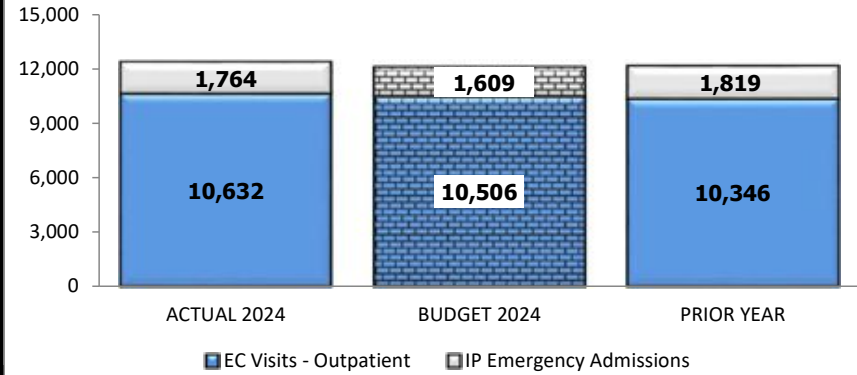
Emergency Visits - YTD

Actual	Budget	Prior Year
26,100	24,879	25,936

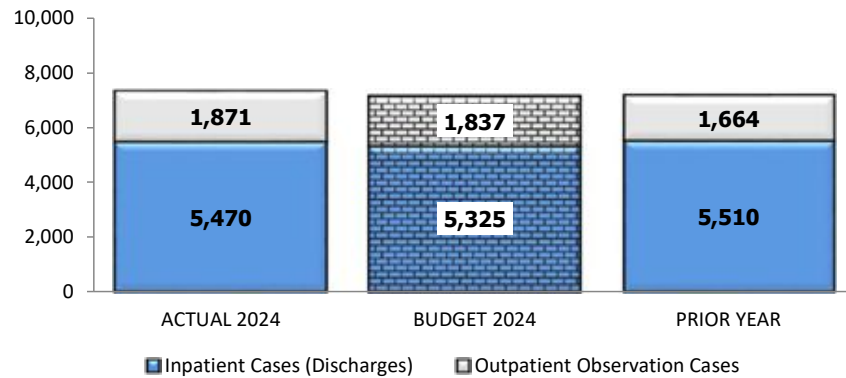
Cases Occupying Beds - Current Month



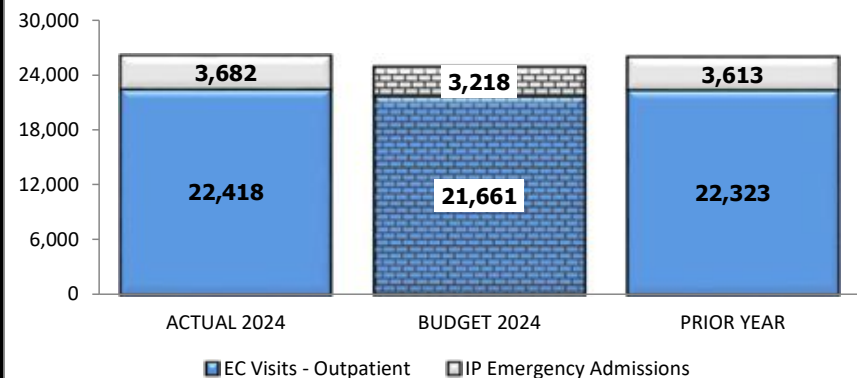
Emergency Visits - Current Month



Cases Occupying Beds - YTD



Emergency Visits - YTD



Harris Health System

Statistical Highlights

November FY 2024

Surgery Cases - CM

Actual	Budget	Prior Year
1,715	1,668	1,631

Surgery Cases - YTD

Actual	Budget	Prior Year
3,613	3,301	3,256

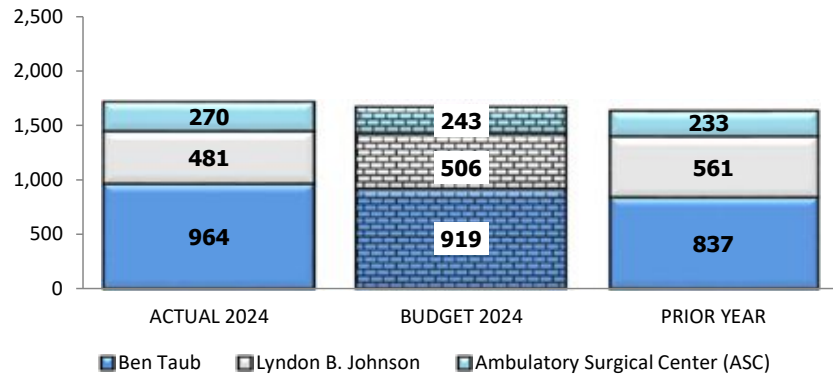
Clinic Visits - CM

Actual	Budget	Prior Year
70,574	75,240	73,591

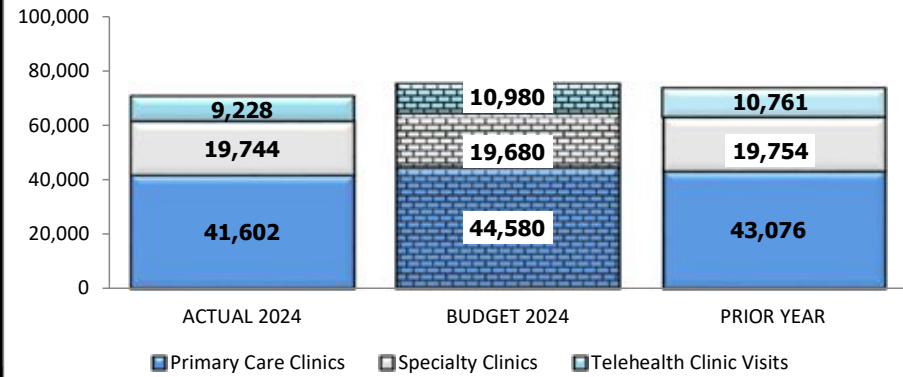
Clinic Visits - YTD

Actual	Budget	Prior Year
148,194	157,863	154,498

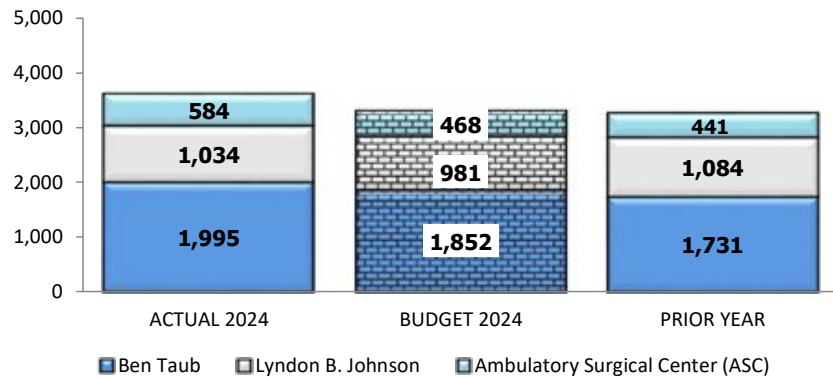
Surgery Cases - Current Month



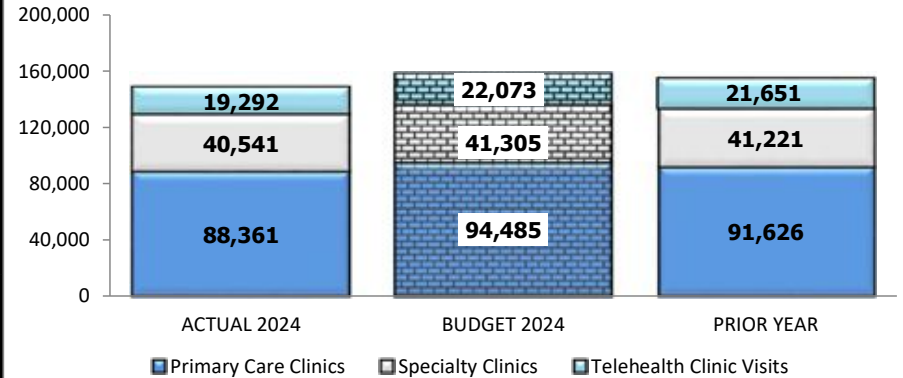
Clinic Visits - Current Month



Surgery Cases - YTD



Clinic Visits - YTD



Harris Health System

Statistical Highlights

November FY 2024

Adjusted Patient Days - CM

42,220

Adjusted Patient Days - YTD

87,879

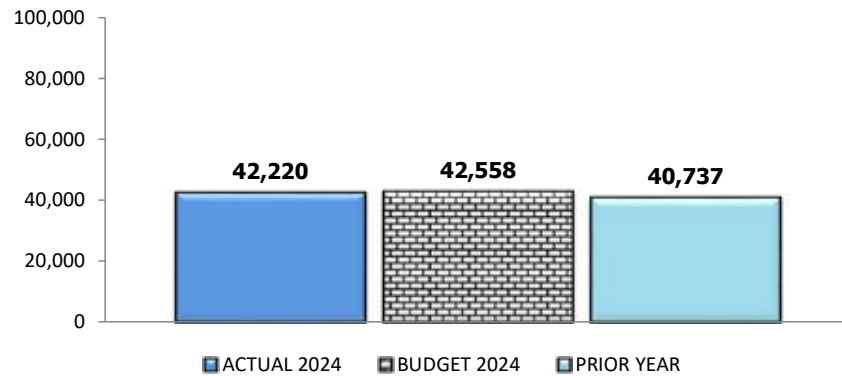
Average Daily Census - CM

650.8

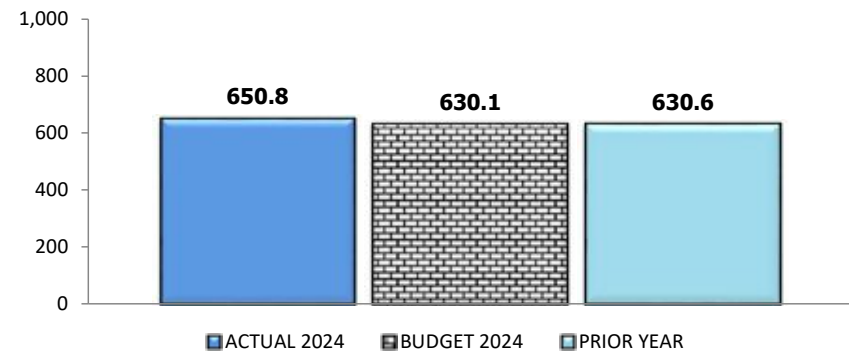
Average Daily Census - YTD

650.8

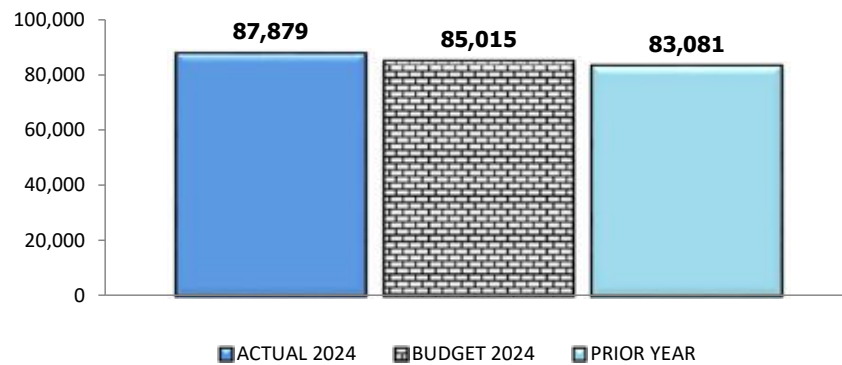
Adjusted Patient Days - Current Month



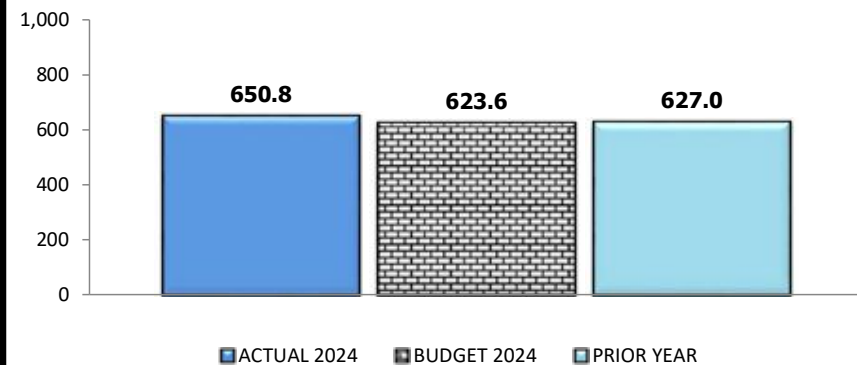
Average Daily Census - Current Month



Adjusted Patient Days - YTD



Average Daily Census - YTD



Harris Health System

Statistical Highlights

November FY 2024

Inpatient ALOS - CM

6.58

Inpatient ALOS - YTD

6.19

Case Mix Index (CMI) - CM

Overall

Excl. Obstetrics

1.721

1.897

Case Mix Index (CMI) - YTD

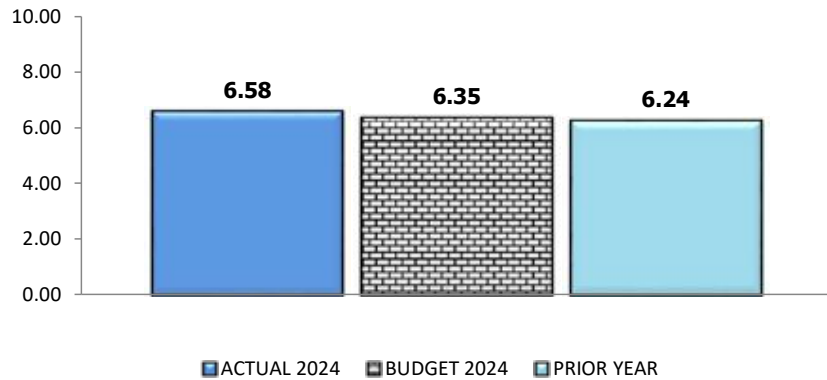
Overall

Excl. Obstetrics

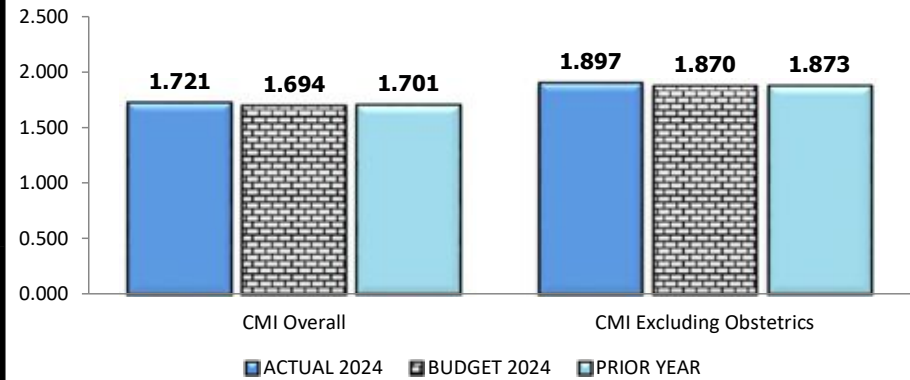
1.684

1.858

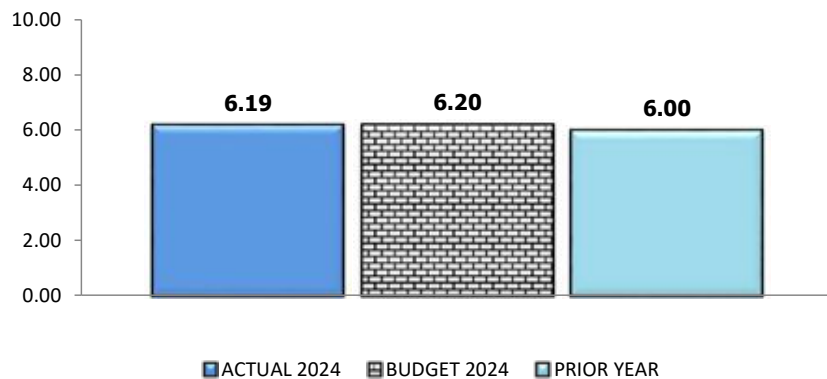
Inpatient ALOS - Current Month



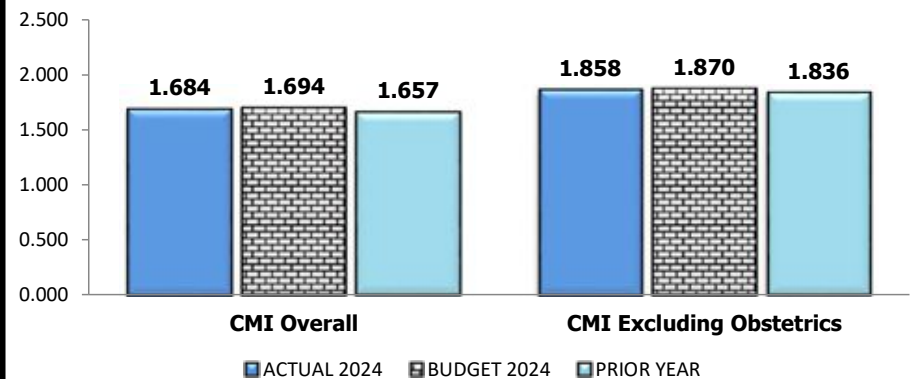
Case Mix Index - Current Month



Inpatient ALOS - YTD



Case Mix Index - YTD

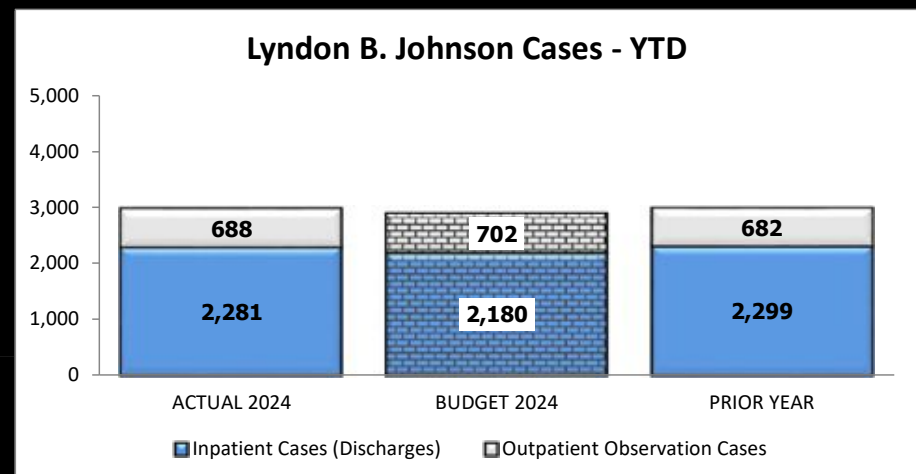
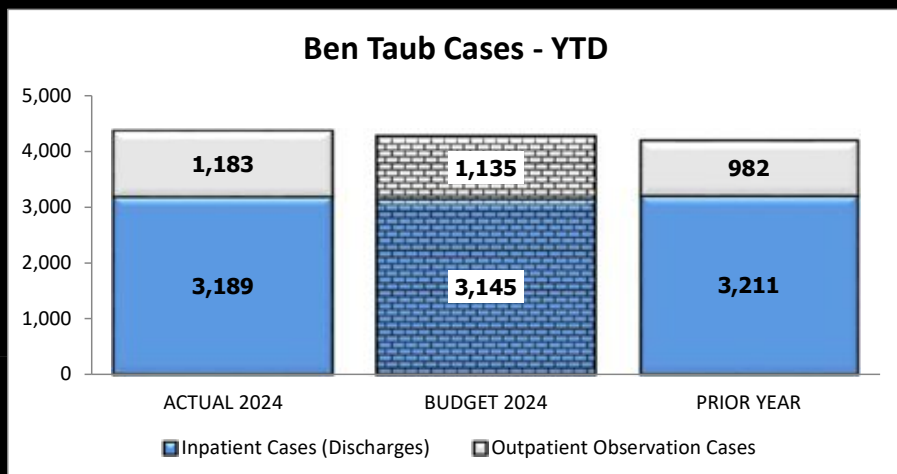
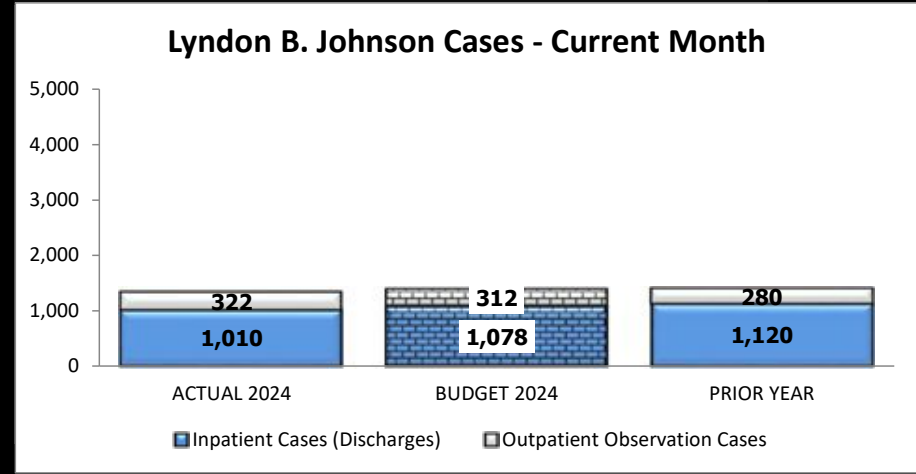
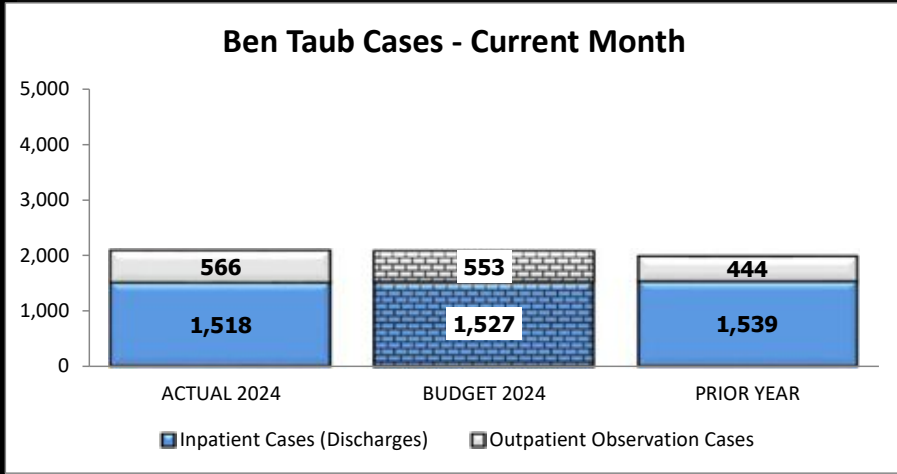


Harris Health System

Statistical Highlights - Cases Occupying Beds

November FY 2024

<u>BT Cases Occupying Beds - CM</u>			<u>BT Cases Occupying Beds - YTD</u>			<u>LBJ Cases Occupying Beds - CM</u>			<u>LBJ Cases Occupying Beds - YTD</u>		
Actual	Budget	Prior Year	Actual	Budget	Prior Year	Actual	Budget	Prior Year	Actual	Budget	Prior Year
2,084	2,080	1,983	4,372	4,280	4,193	1,332	1,390	1,400	2,969	2,882	2,981



Harris Health System

Statistical Highlights - Surgery Cases

November FY 2024

BT Surgery Cases - CM

Actual	Budget	Prior Year
964	919	837

BT Surgery Cases - YTD

Actual	Budget	Prior Year
1,995	1,852	1,731

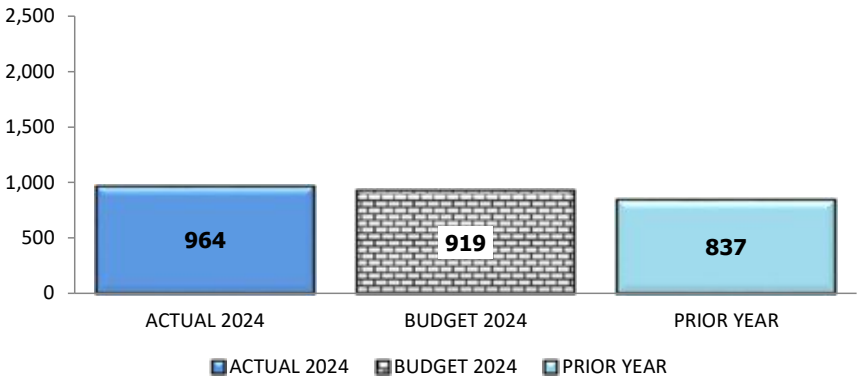
LBJ Surgery Cases - CM

Actual	Budget	Prior Year
751	749	794

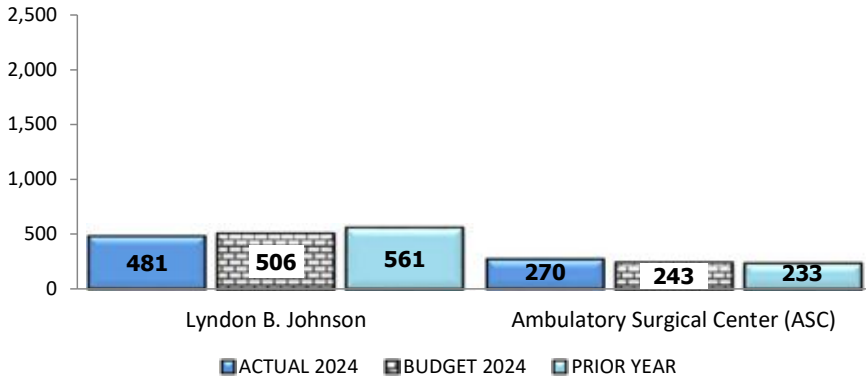
LBJ Surgery Cases - YTD

Actual	Budget	Prior Year
1,618	1,449	1,525

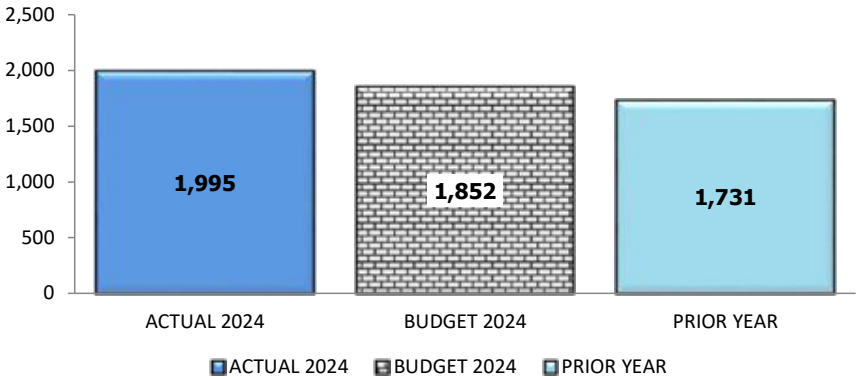
Ben Taub OR Cases - Current Month



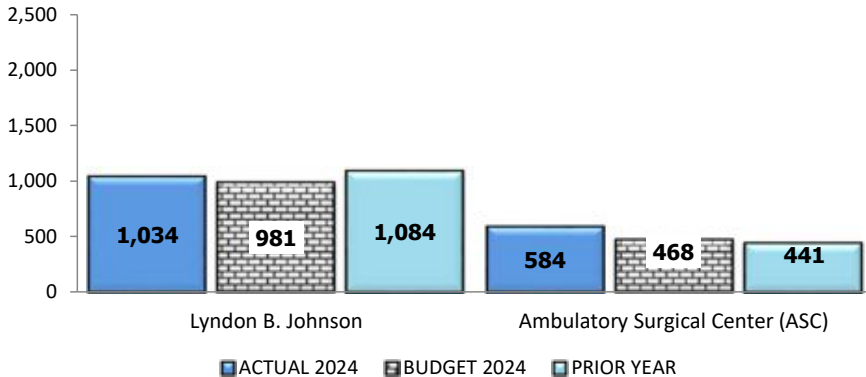
Lyndon B. Johnson OR Cases - Current Month



Ben Taub OR Cases - YTD



Lyndon B. Johnson OR Cases - YTD



Harris Health System

Statistical Highlights - Emergency Room Visits

November FY 2024

BT Emergency Visits - CM

Actual	Budget	Prior Year
6,609	5,905	6,039

BT Emergency Visits - YTD

Actual	Budget	Prior Year
13,736	12,033	12,502

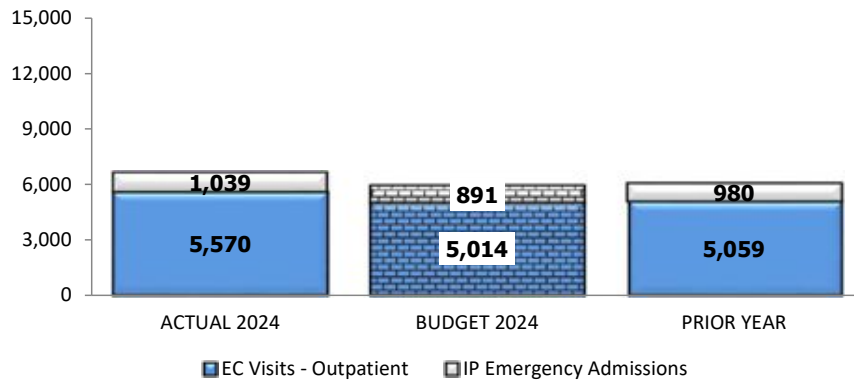
LBJ Emergency Visits - CM

Actual	Budget	Prior Year
5,787	6,210	6,126

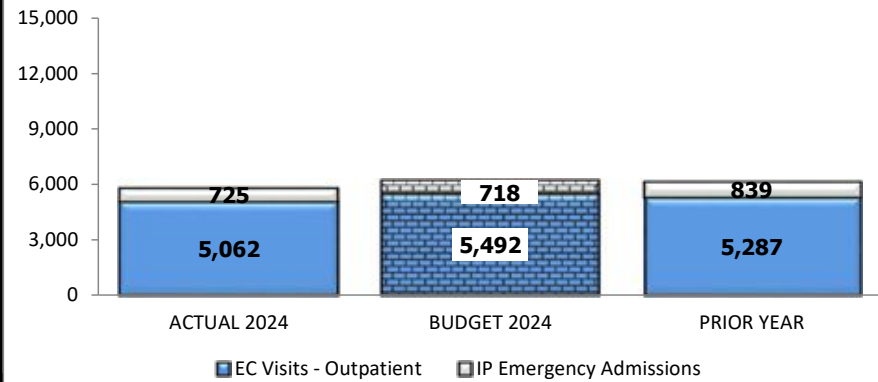
LBJ Emergency Visits - YTD

Actual	Budget	Prior Year
12,364	12,846	13,434

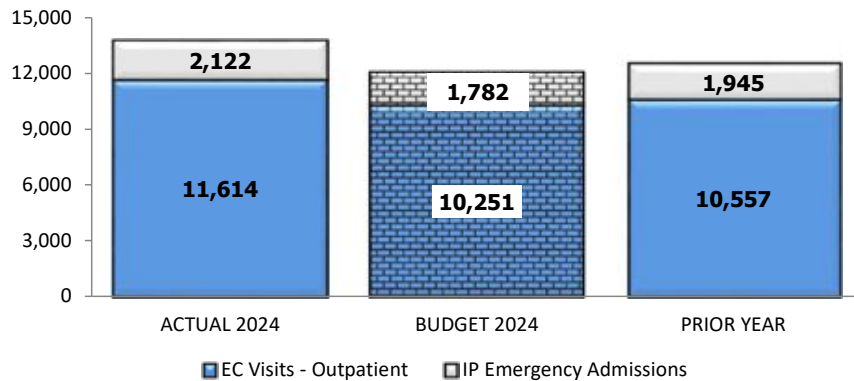
Ben Taub EC Visits - Current Month



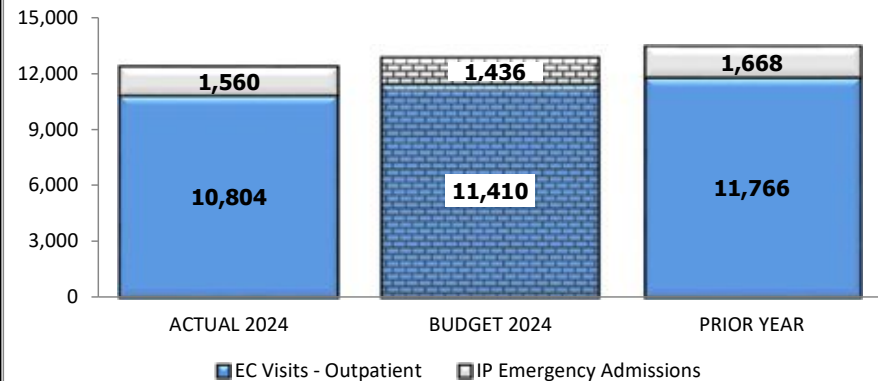
Lyndon B. Johnson EC Visits - Current Month



Ben Taub EC Visits - YTD



Lyndon B. Johnson EC Visits - YTD

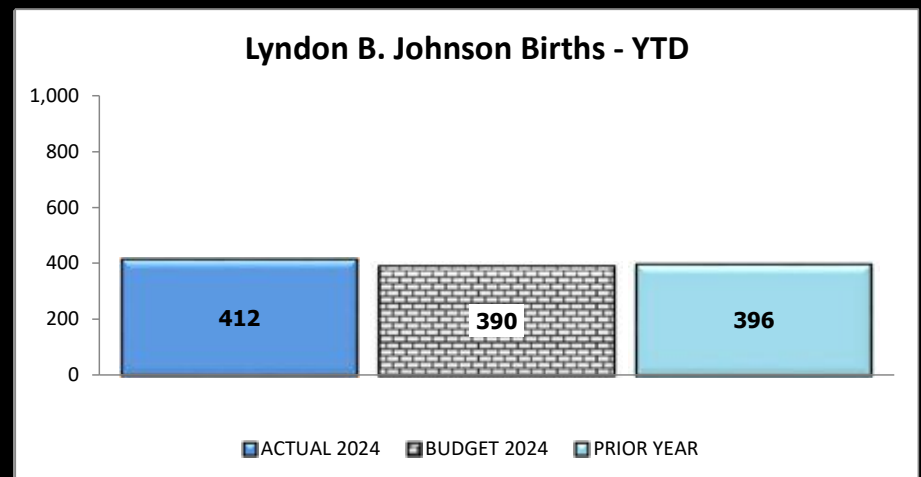
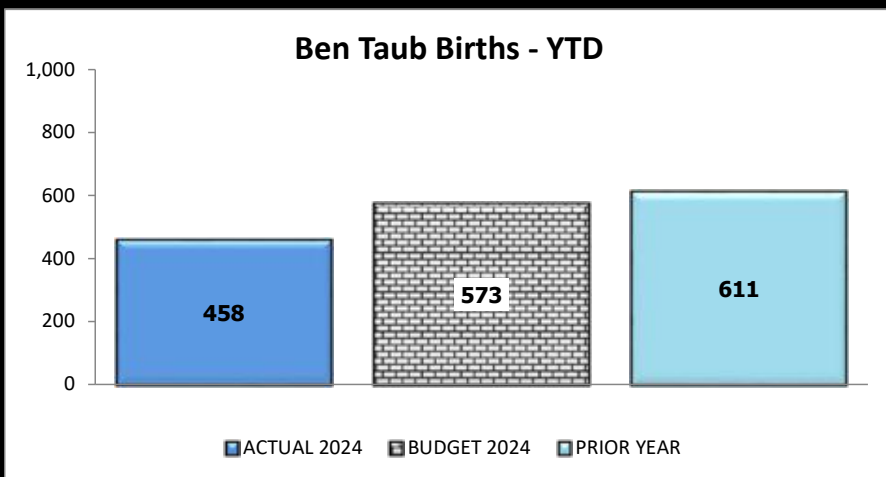
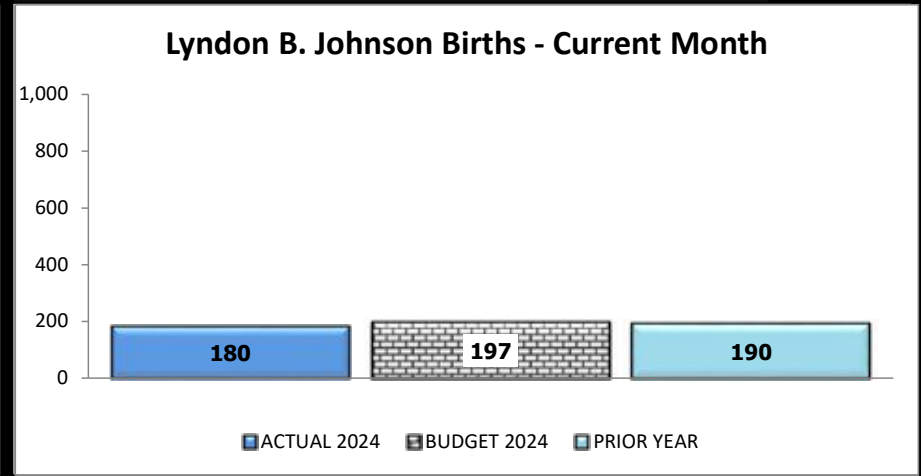
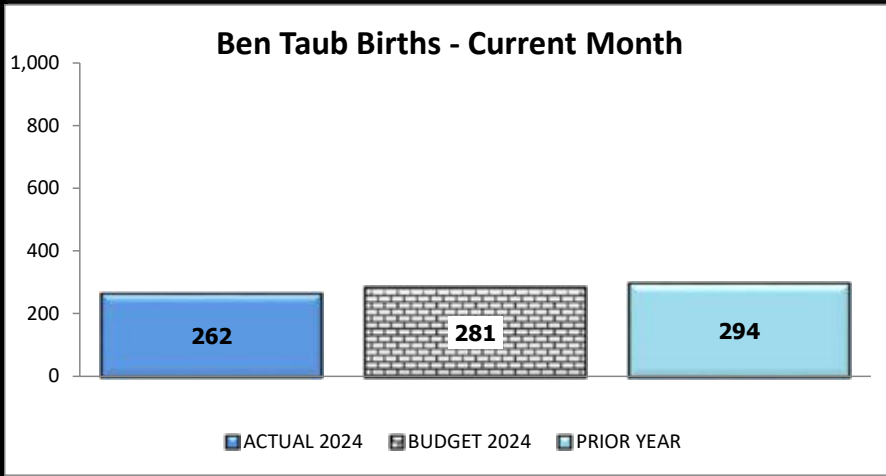


Harris Health System

Statistical Highlights - Births

November FY 2024

<u>BT Births - CM</u>			<u>BT Births - YTD</u>			<u>LBJ Births - CM</u>			<u>LBJ Births - YTD</u>		
Actual	Budget	Prior Year	Actual	Budget	Prior Year	Actual	Budget	Prior Year	Actual	Budget	Prior Year
262	281	294	458	573	611	180	197	190	412	390	396



Harris Health System

Statistical Highlights - Adjusted Patient Days

November FY 2024

BT Adjusted Patient Days - CM

20,909

BT Adjusted Patient Days - YTD

43,339

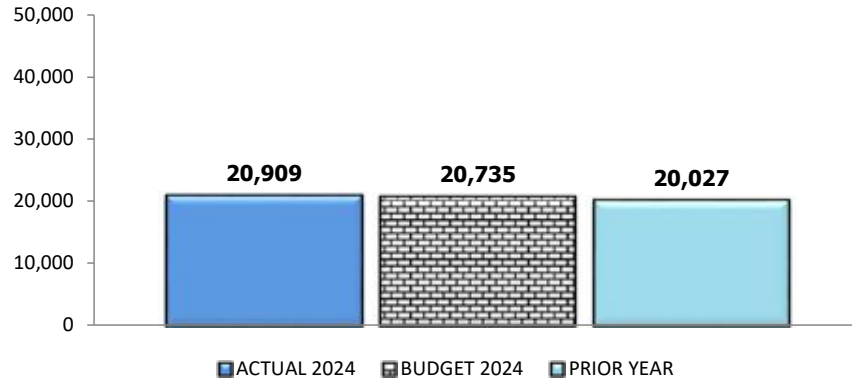
LBJ Adjusted Patient Days - CM

13,231

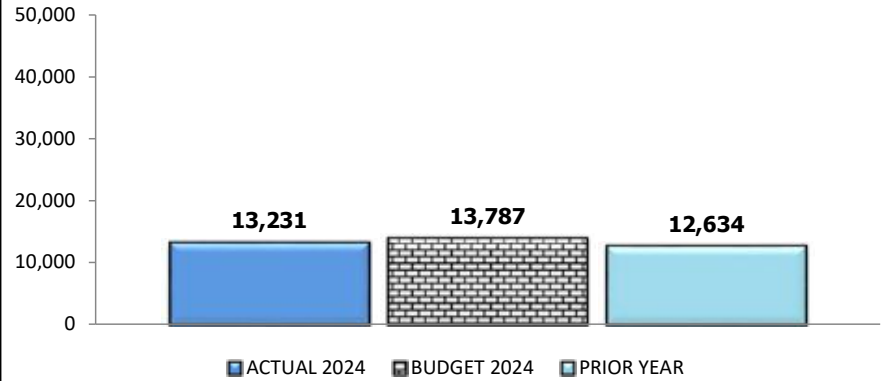
LBJ Adjusted Patient Days - YTD

27,541

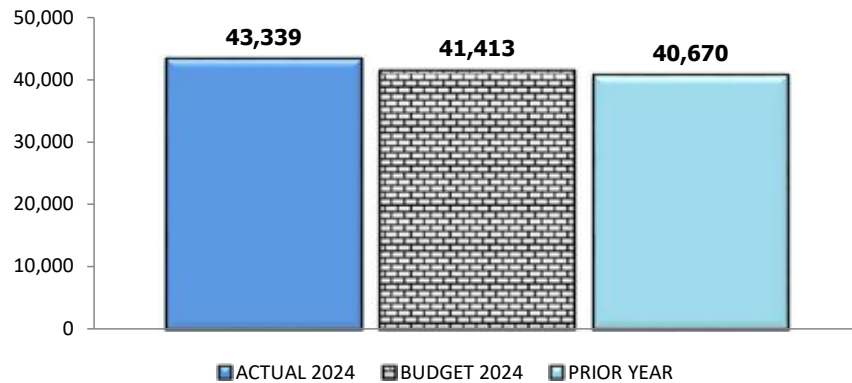
Ben Taub APD - Current Month



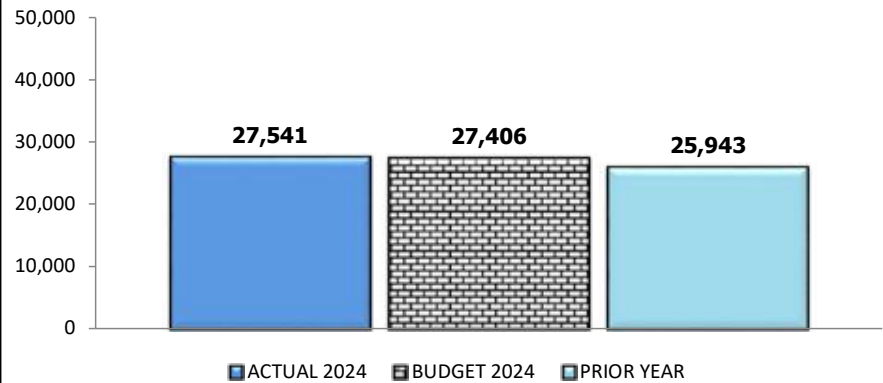
Lyndon B. Johnson APD - Current Month



Ben Taub APD - YTD



Lyndon B. Johnson APD - YTD



Harris Health System

Statistical Highlights - Average Daily Census (ADC)

November FY 2024

BT Average Daily Census - CM

422.0

BT Average Daily Census - YTD

420.4

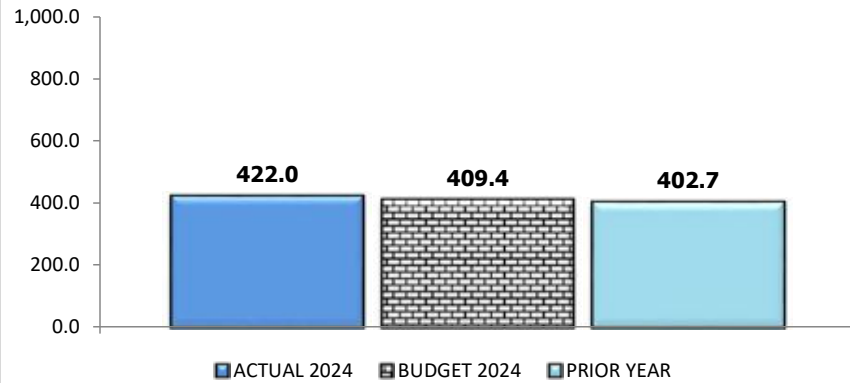
LBJ Average Daily Census - CM

228.8

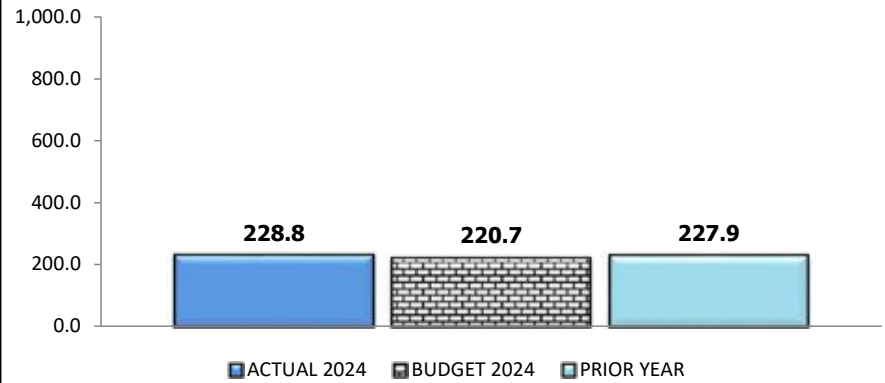
LBJ Average Daily Census - YTD

230.4

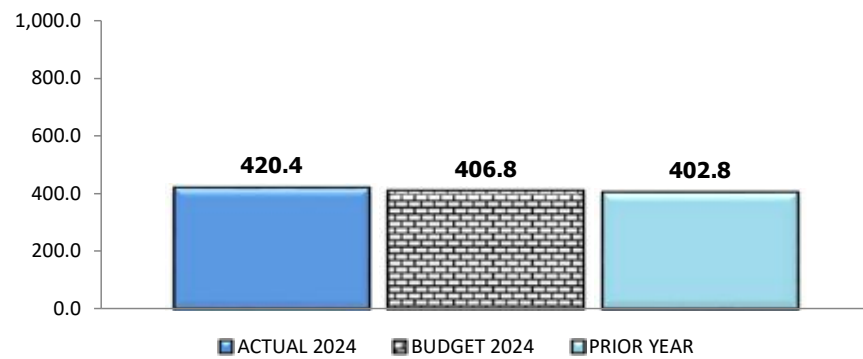
Ben Taub ADC - Current Month



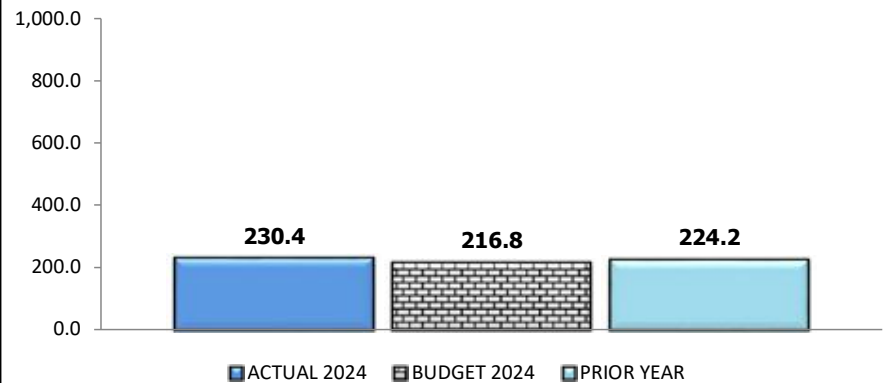
Lyndon B. Johnson ADC - Current Month



Ben Taub ADC - YTD



Lyndon B. Johnson ADC - YTD



Harris Health System

Statistical Highlights - Inpatient Average Length of Stay (ALOS)

November FY 2024

BT Inpatient ALOS - CM

7.03

BT Inpatient ALOS - YTD

6.81

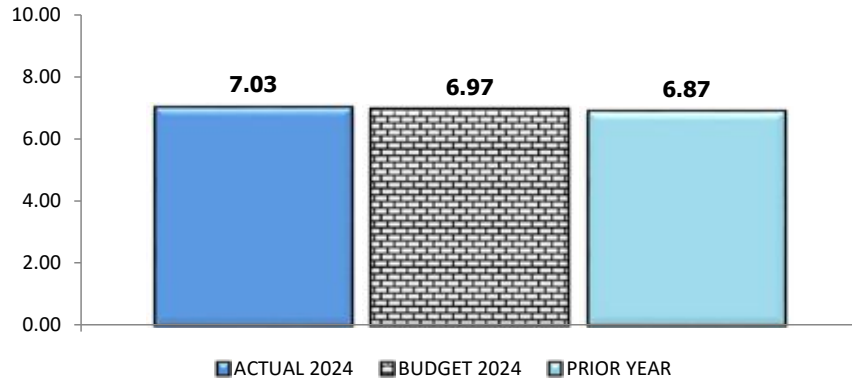
LBJ Inpatient ALOS - CM

5.90

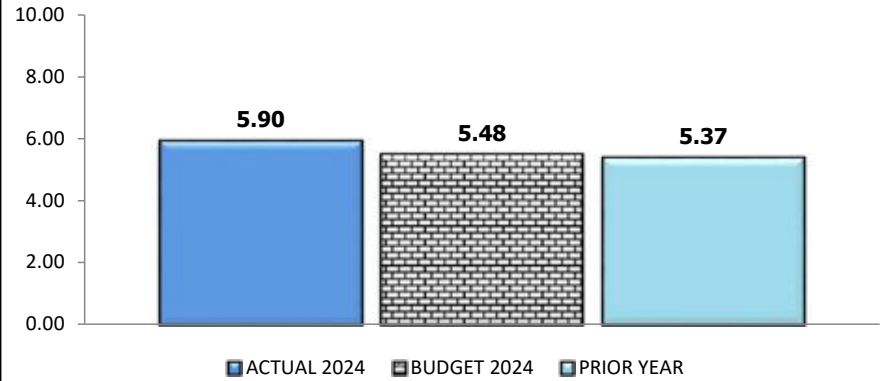
LBJ Inpatient ALOS - YTD

5.33

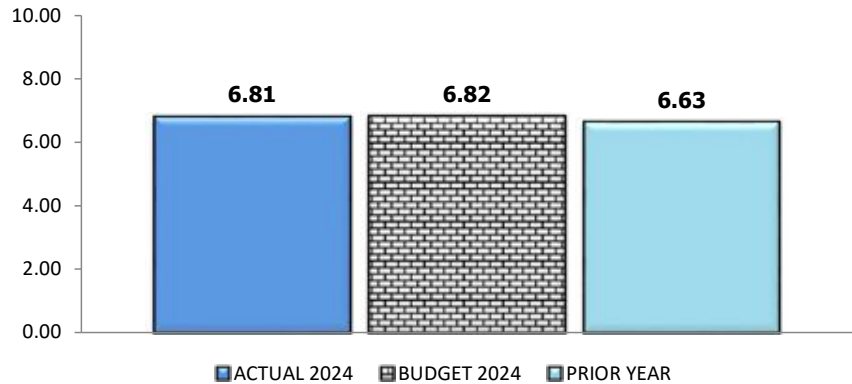
Ben Taub ALOS - Current Month



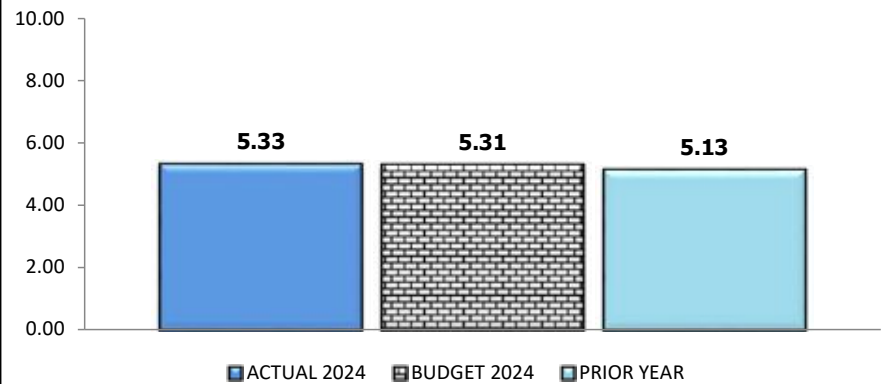
Lyndon B. Johnson ALOS - Current Month



Ben Taub ALOS - YTD



Lyndon B. Johnson ALOS - YTD



Harris Health System

Statistical Highlights - Case Mix Index (CMI)

November FY 2024

BT Case Mix Index (CMI) - CM

Overall	Excl. Obstetrics
1.782	1.966

BT Case Mix Index (CMI) - YTD

Overall	Excl. Obstetrics
1.782	1.968

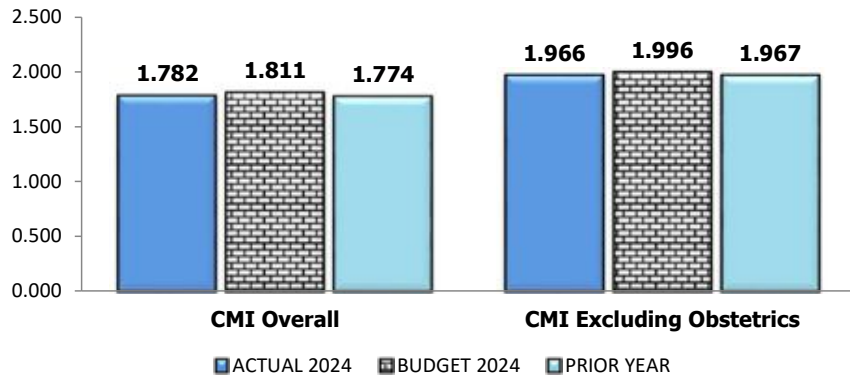
LBJ Case Mix Index (CMI) - CM

Overall	Excl. Obstetrics
1.630	1.792

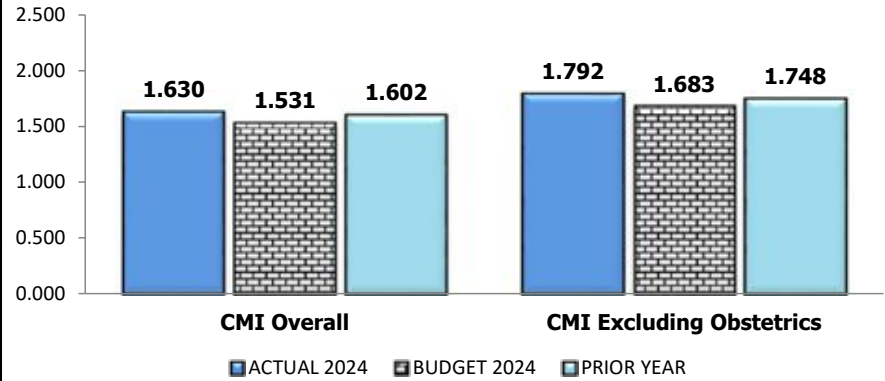
LBJ Case Mix Index (CMI) - YTD

Overall	Excl. Obstetrics
1.548	1.702

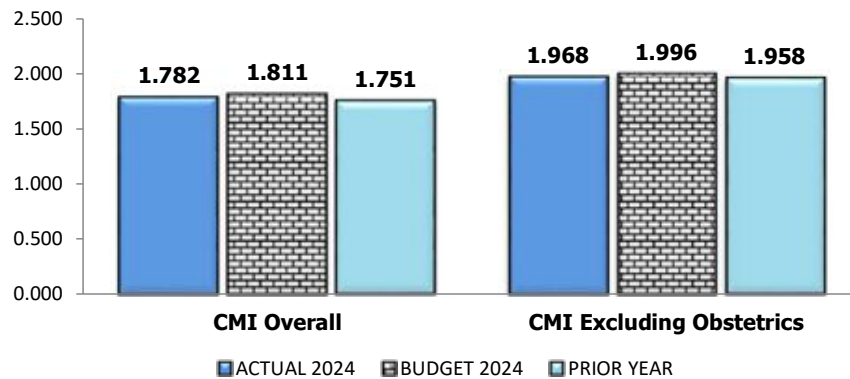
Ben Taub CMI - Current Month



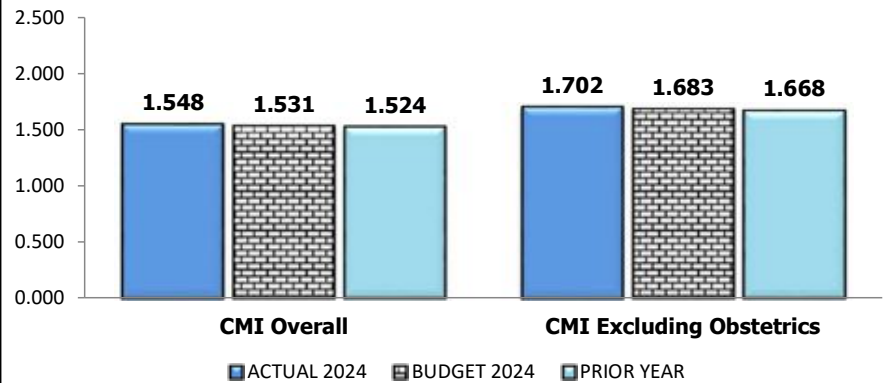
Lyndon B. Johnson CMI - Current Month



Ben Taub CMI - YTD



Lyndon B. Johnson CMI - YTD



Thursday, January 25, 2024

Consideration of Approval to Enter into a Behavioral Health Constable Transportation Agreement with Harris County Constable Precinct One

Request: Administration requests approval for Harris Health System to enter into a new agreement for behavioral health patient transportation with Harris County Constable Precinct One for continued support of Harris County Constables transporting Harris Health involuntary behavior health patients to external psychiatric facilities. The Agreement contains the same terms and provisions as the previous Agreement approved by this Board except as addressed below.

Overall Purpose: Without adequate space for treating mental health patients, Harris Health hospitals are forced to place all of its psychiatric patients in its general center alongside patients with no psychiatric condition. This placement may result in harm to other patients, Harris Health staff, and creates increased costs associated with hiring additional security and psychiatric sitters. Transportation to external psychiatric facilities reduces this harm.

New Provision: The new agreement will contain an automatic annual adjustment rate based on the compensation rate approved via the annual budgeting approval process by both the Harris Health Board of Trustees and the Commissioners Court of Harris County, Texas, with the current appropriated rate for two full-time deputy Constables set at \$232,800 (\$116,400 per deputy). The below services and the breakdown of the compensation descriptions are unchanged and are included for background information only:

- Services: In addition to the services already provided by C1, one dedicated two-person team of deputies from C1's Mental Health Special Operations Unit ("the Team") will be assigned to transport psychiatric patients from either Ben Taub Hospital or LBJ Hospital to the designated mental health facility in a Warrant Transfer Order or to another designated mental health facility as permitted by law on an established weekly schedule.
- Breakdown of Compensation:
 - i. Salaries of the Team;
 - ii. Employee benefits provided to the Team by Harris County;
 - iii. Cost for use of sufficient number of designated automobiles for transport of law enforcement personnel and psychiatric patients;
 - iv. Cost of any reasonably necessary equipment for providing transportation services required by this Agreement; and
 - v. All travel expenses incurred while performing the duties set out in this Agreement, such as gas, automobile repair, etc.

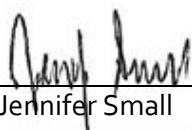
Recommendation: Administration recommends approval of the Behavioral Health Patient Transportation Agreement between Harris Health System and Harris County Constable Precinct One.

Thursday, January 25, 2024

Harris Health System Council-At-Large November 13, 2023 Meeting Minutes

Harris Health System Council-At-Large Meeting Minutes

- November 13, 2023



Jennifer Small

Executive Vice President, Ambulatory Care Services

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
I. Call to Order	<p>The WebEx meeting was called to order by Fadine Roquemore at 5:00pm.</p> <p>Council Members in Attendance:</p> <ul style="list-style-type: none"> • Baytown: Syphronia Garrett • Casa: Alicia Reyes, Daniel Bustamante • Gulfgate: Teresa Recio • Homeless: Ross Holland • LBJH: Velma Denby • MLK: Fadine Roquemore • Thomas St: Josh Mica • Vallbona: Cynthia Goodie <p>Harris Health System Attendees: Dr. Esmail Porsa, Binta Baudy, Louis Smith, Dr. Mahmood Hammad, Dr. Chetan Bachireddy, Sunny Ogbonnaya, Jon Hallaway, Babak Zare, Lydia Rogers, Gloria Glover, Lady Barrs, Melvin Prado, Collin Bentley, Leslie Gibson, Jenny Mondragon, Tracey Burdine, Vincent Stevens, Akilah Thomas, Precious Udensi, John Jabeen, Esperanza Galvan, Robin Luckett, Sarah Rizvi, Nina Jones</p>	
II. Moment of Silence	<p>Moment of Silence observed.</p>	
III. Approval of Minutes	<p>Motion granted and second to approve October minutes.</p>	
IV. Council Reports	<p>Acres Home – No Representative</p> <p>Baytown – Syphronia Garrett</p> <ul style="list-style-type: none"> • No report at this time. <p>Casa de Amigos – Daniel Bustamante</p> <ul style="list-style-type: none"> • The council held a meeting on 10/24/23. There were three council members present with staff. We had a special guest, Mrs. Maria Delacruz who talked about the food pharmacy. • The staff is doing well with construction. • New Podiatrist and Medical assistant will be joining soon. • The 1st week of December, Radiology and Laboratory will be moving into their new areas. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports (<i>continued</i>)</p> <ul style="list-style-type: none"> We had a good meeting there will be no meeting in November or December. <p>Gulfgate – Theresa Recio & Patricia Shepherd</p> <ul style="list-style-type: none"> Today is my last day as chairperson of the council. The council met today. The Administrative report was presented; For October, facility recommendations is 88.1%, the staff scored 90.3%. Staff will receive a five on their evaluations. Finance is under budgeted by 3.2%. Gift cards will be given to families for Thanksgiving. The center has raised \$260. On December 2nd, there will be a toy drive. Donations being accepted. Santa Claus will be distributing to patients’ children on December 16th. New Officers: Patricia Shepard, Chairperson; Louis Alvarez, Vice Chairperson; Connie Espinosa, Secretary; Teresa Recio, Parliamentarian <p>Homeless – Ross Holland</p> <ul style="list-style-type: none"> The Council met on November 7th. Dental Unit is being outfitted and will soon be available for use. We reviewed the monthly reports. Overall, scores are on a decline but management is working on a plan to improve those scores. There were 5,545 unduplicated patient visits. We receive the update on quality report. Congratulations sent out on the bond passing. <p>MLK – Fadine Roquemore</p> <ul style="list-style-type: none"> MLK Report: For the month of October, we had 4,769 visits. Operation scorecard was reviewed. There was one fall out -No Show Rate. Nursing staff is calling patients to remind them of their appointment. Which is very important. Overall, patient satisfaction was 87.2% and year to date it is 87.7%. We are working on a marketing campaign to attract new patients. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports (continued)</p> <p>Thomas Street – Josh Mica</p> <ul style="list-style-type: none"> I want to ask Administration, whose keeping an eye on the parking lot and how full it’s getting. There is not enough parking and the purpose of us moving to Quentin Mease is because of more space and better parking. November 14th is Thomas Steet Annual Thanksgiving Day and December 19th is our food drive for Thomas Street patients. <p>Vallbona – Cynthia Goodie</p> <ul style="list-style-type: none"> In person council meeting held November 9th. All HEDIS scores were met for the month of October. Patient Satisfaction; recommended facility for October was 89.2%, the goal was 88.1%. New physician starting November 27th. The physician will work part time in Family Practice and Part time in Pediatrics. There is a plan to expand radiology and replace Mammogram and Xray units. This will include some remodeling of the current location. <p>Ben Taub Hospital – No Representative</p> <p>Lyndon B. Johnson Hospital – Velma Denby</p> <ul style="list-style-type: none"> Had a general conversation with our site Administration concerning the bond passing. She also provided general site updates. 	
<p>V. Old Business</p>	<p>No Old Business</p>	
<p>VI. Updates/Guest</p>	<p>Population Health, Dr. Chetan Bachireddy</p> <p>Advancing Health Equity (❖) Population Health Roadmap (-) Priority Initiatives</p> <ul style="list-style-type: none"> ❖ Build a platform for health equity -Social Needs & Demographic Data Collection ❖ Address social drivers of health 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Population Health (<i>continued</i>)</p> <ul style="list-style-type: none"> -SNAP Benefits -Food RX Expansion ❖ Develop community-based models of care -RPM Expansion -THEAL for Breast Cancer -Correctional Health -MVP expansion <p>Questions/Comments</p> <ul style="list-style-type: none"> ○ Josh Mica commented, you have an equity plan for the patients. But do you have one for the staff as well? <i>Dr. Bachireddy responded, yes. I've learned a lot from our Human Resources staff and they believe this is their job. So, we collaborate with Omar Reid and his team closely. My team is more focused on patient care, community partnerships and they are focused on employees. But we are one Harris Health system.</i> ○ Mrs. Reyes asked your plan is to collaborate with the communities. Does that include council input? Have you been or plan to attend any of the council meetings? Many of the council members have history. Its good to have had a retreat with the leaders, but what about the community council. Will you be willing to include them in your planning? <i>Dr. Bachireddy responded, yes. I welcome the opportunity to do that.</i> <p>Mrs. Roquemore stated we would like to be apart of your research.</p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
<p>VII. Community Medicine</p>	<p>Dr. Hammad Mahmood</p> <p>Primary Care Operations Scorecard:</p> <ul style="list-style-type: none"> Over the past three months no show rate has been on the uptick. As mentioned earlier, staff efforts to call patients to remind them of their upcoming appointments and also texting them to keep their appointments. This is affecting our medical home and no-show rates slightly. Cycle time for family practice is within goal. 3rd new appointment is within goal and 3rd return appointment availability is also within goal. <i>See report</i> <p>Primary Care Pediatric Scorecard:</p> <ul style="list-style-type: none"> No Show rates are above expected goal. Cycle time is within goals. 3rd available appointment is a little on the upside. Open access newborn is at 20 days. Video for open access newborn is at 89 days. Pediatric new appointments are at 57 days, open access well child is 64 days. <i>See report.</i> <p>HEDIS Scorecard Data Reporting Period:</p> <ul style="list-style-type: none"> HEDIS looks good. Year to date, we are exceeding Harris Health goal for all metrics. Three goals are exceeding Harris Health goal but are not at the National Benchmark level (Hemoglobin A1c, Controlling High Blood Pressure, Colorectal Cancer screening). We are putting in all efforts, from the appointment center as well as our staff making sure patients are returning stool screening kits. <p>Questions/Comments:</p> <ul style="list-style-type: none"> Mrs. Reyes asked were those acceptable fallouts for pediatrics/newborns? <i>Dr. Mahmood responded yes. Newborn in person is within goal at 20 days. Cleveland Odom and Danny Jackson numbers are falling out because of staffing and we trying our best to improve those numbers.</i> Mrs. Reyes stated, on the other primary scorecard you have four sites, Aldine, Settegast MLK and Northwest who are chronically out of range. Are those because of staffing? 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
<p>Administration</p>	<p>Community Medicine (<i>continued</i>)</p> <p><i>Dr. Mahmood responded no show rate is patient dependent.</i></p> <p>Dr. Esmaeil Porsa, President/CEO</p> <ul style="list-style-type: none"> • The Bond passed. Almost 73% of Harris County voters, voted to support our bond which is phenomenal. We should be able to break ground on the new campus of LBJ in April or May of next year. • Harris Health held a Pink Out event at Smith Clinic to celebrate Breast Cancer. The event was well attended and well done. • 2nd Annual Celebrate You event was held at Fournace Place. It was open to our employees, medical staff and their families. It's a way of appreciating our staff and medical staff for everything they do. • On last week, I had the pleasure of signing an agreement with Houston Community College for a new apprenticeship program. Houston Community College is going to be training some of the future healthcare technicians who are going to be trained at Harris Health and later employed by us. • In response to Josh question about parking at Quentin Mease. Yes, we are aware of the situation. We are actively looking for offsite parking to at least remove our employees from the parking lot and allow more patient parking. <p>Questions/Comments: None</p> <p>Binta Baudy, VP of Operations on behalf of Dr. Jennifer Small, Executive Vice President, Ambulatory Care Service</p> <ul style="list-style-type: none"> • We are excited to announce the holiday party this year. The celebration is scheduled for Monday, December 11 at the Holiday Inn Houston NRG Mesquite Room. We look forward to celebrating the end of a great year and the year to come. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued)</p> <ul style="list-style-type: none"> • As Dr. Porsa mentioned, we celebrated Breast Cancer last month. In addition to that, we also had the Smith Clinic Health Fair in October. We offered free mammograms and representative from MD Anderson and our Baylor College of Medicine partners were there. It was a great event and well attended. • From a community engagement perspective, Settegast Life expectancy in partnership with Harris Health Population Health team have been engaged in a lot of activities that have occurred since their initial meeting earlier this year. Engaging with patients in the Settegast community and focusing on their experiences. Along with the information Dr. Bachireddy shared, we’re really excited about the potential collaborations. There have been a lot of community engagement with Settegast Super Neighborhood and the Settegast Block Party. • Sareen Same Day Clinic opened on November 6th. It is now open Monday through Friday from 8am to 5pm, so please share. • This is our 3rd year of Dental Service partnership with UT Health. Harris Health leadership team as well as UT leadership team celebrated with staff and physicians who’ve worked tirelessly to expand dental service across the health centers and our homeless programs. <p>Questions/Comments: None</p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued)</p> <p>Dr. Sunny Ogbonnaya, Admin. Director Outpatient Pharmacy & Pharmacy Business</p> <ul style="list-style-type: none"> Pharmacy Service highlights: <ul style="list-style-type: none"> -Meds-To-Bed: This program provides discharge medications and medication indications to all patients admitted as inpatient to bedside at time of discharge. It eliminates the need for discharge patients to go to pharmacy and wait for their prescriptions to be filled. We also make follow-up calls with patients discharged with diagnosis of MI (Heart Attack), CHF (Congestive Heart Failure) and COPD (Chronic Obstructive Pulmonary Disease) within 24 to 72 hours of discharge to find out how they are doing and offer any opportunity to answer any medication questions. We implemented prescription status notification using our interactive voice response system. This system is able to call or send text messages to patients letting them know their prescription is ready for pickup or it has been shipped to their home. These messages go out daily from 8am to 7pm Monday through Friday for all sites and 8am to 7pm, 7days a week for LBJ Campus. These messages give you the option to opt out. However, we encourage you to use this notification process. In the month of October, 71% of all prescriptions filled were delivered to our patient’s home. 75% of all requests were received and processed through MyHealth. We thank our patients for the opportunity to provide home delivery service and for using MyHealth. <p>Questions/Comments: None</p> <p>Jon Hallaway, Program Director, Department of Public Safety (DPS)</p> <ul style="list-style-type: none"> For information purposes, at Quentin Mease we have an agreement with the church to use their parking lot. There shouldn’t be any reason were running out of parking spots. We will monitor that a little bit better and make sure the church gate is open. <p>Questions/Comments: None</p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
November 13, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued)</p> <p>Babak Zare on behalf of Patrick Casey, SVP Facilities, Construction & Systems Engineering</p> <ul style="list-style-type: none"> • Casa De Amigos: we are looking at completing the phase 1 project by the end of November and transitioning to phase 2 right after that. • Quentin Mease 5th floor: we are still on target to complete that project by the middle of February. For the garage at Quentin Mease, consultants are looking at the capacity to see what options we have for building a garage either onsite or offsite. <p>Questions/Comments: None</p> <p>Omar Reid, Executive Vice president, Chief People Officer, Human Resources – Not present</p>	
<p>VIII. Updates/New Business</p>	<p>Hope Galvan</p> <p>FoodRx Expansion Plan Update:</p> <ul style="list-style-type: none"> • Last quarter we launched High Risk Clinic at Ben Taub Towers. • Partnership with Door Dash and Good Fresh for home deliveries. • In December, we'll be launching LBJ/ Smith clinic chronic kidney disease initiative. Which is a home delivery program for food prescriptions. • Food lockers will be located at Casa De Amigos (early 2024) and Quentin Mease will be getting another locker (2nd quarter of 2024). 	
<p>IX. Adjournment</p>	<p>Motion to adjourn the meeting granted at 6:12pm.</p>	<p>Next Meeting: January 8, 2024</p>

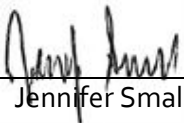
Thursday, January 25, 2024

Review and Acceptance of the Following Report for the Healthcare for the Homeless Program as Required by the United States Department of Health and Human Services Which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act

Attached for review and acceptance:

- **HCHP Operational Updates**

Administration recommends that the Board accept the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

HARRIS HEALTH SYSTEM

Health Care for the Homeless Monthly Update Report – January 2024

Jennifer Small AuD, MBA, CCC-A, Executive Vice President, Ambulatory Care Services
Tracey Burdine, Director, Health Care for the Homeless Program

Agenda

- Operational Update
 - Patient Services
 - Consumer Advisory Council Report
 - 1966 Budget Fund Grant
 - C8E Capital Board Changes
 - Quality Management Report

Patients Served

Telehealth Visits

- Telehealth New Patients: 0
- Telehealth Return Patients: 18

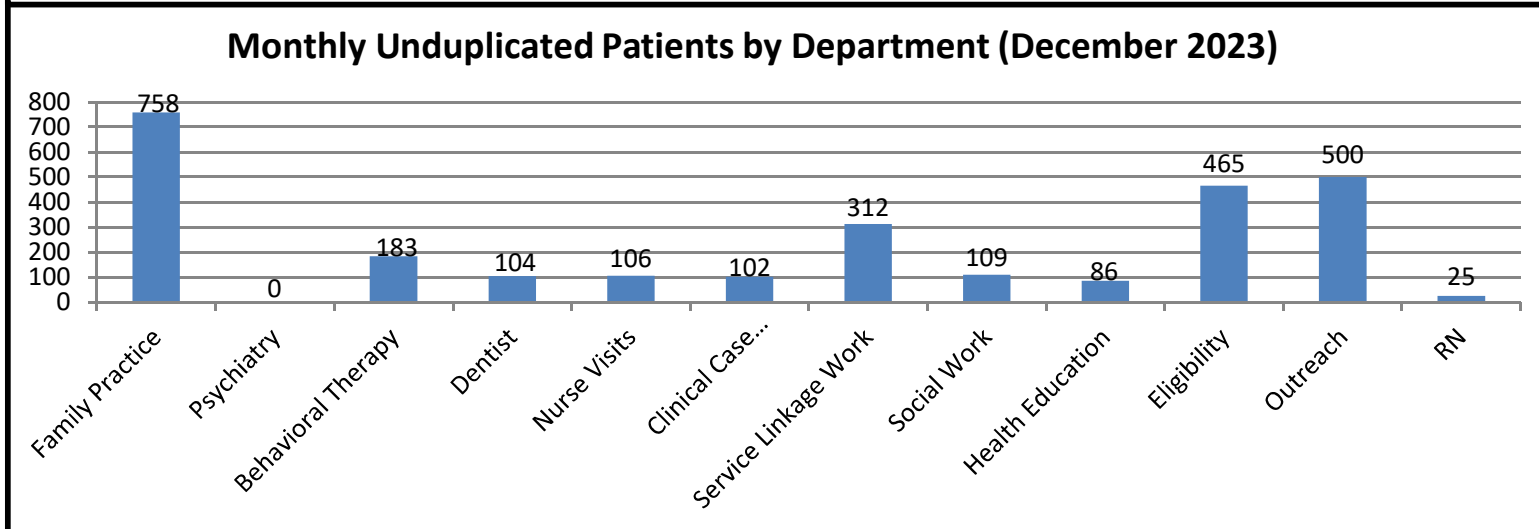
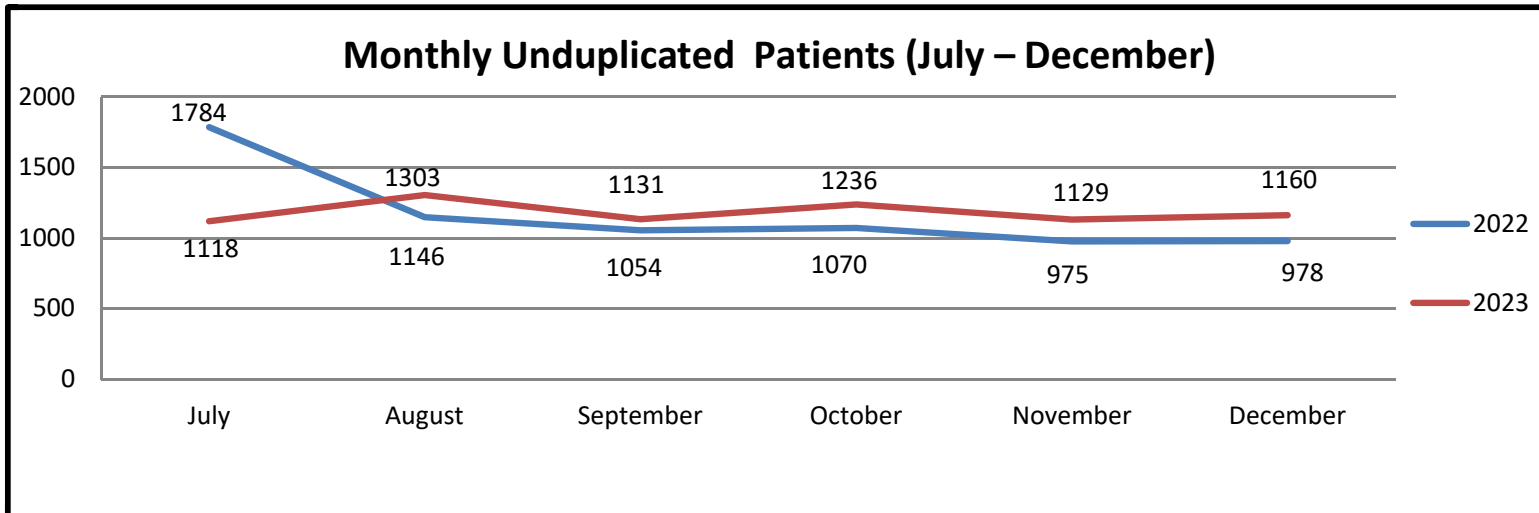
New Patient Visits

- Adult New Patients: 361
- Pediatric New Patients: 12

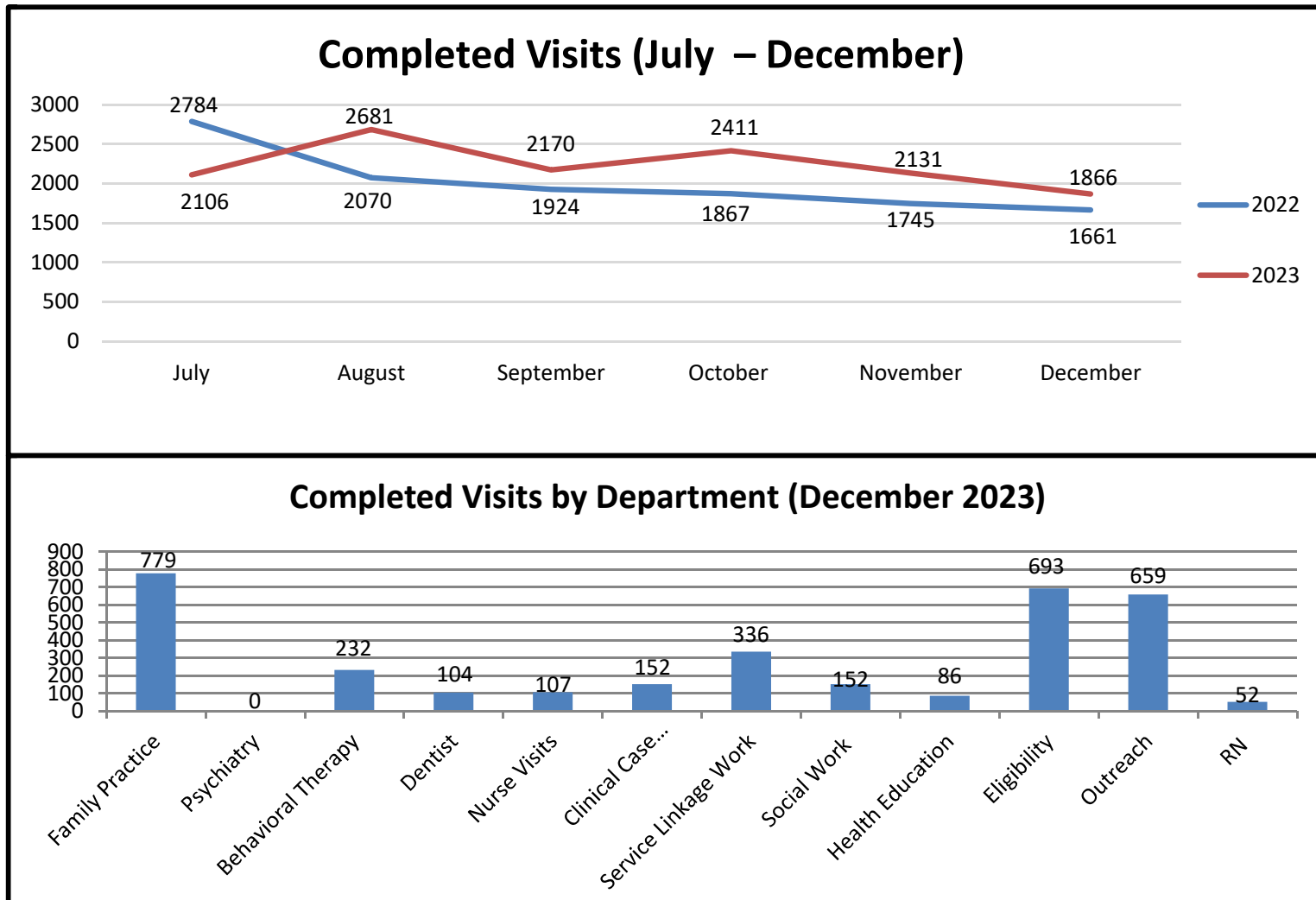
HRSA Target: 9775

- Unduplicated Patients: 7,219
- Total Complete Visits: 27,327

Operational Update



Operational Update



Operational Update

Consumer Advisory Council

Highlights of Council Activities from August 2023 – October 2023

- The council was informed of the clinic schedule changes related to staffing shortages and the corrective action plan to recruit staff.
- The council was informed of new funding received from the Health Resources and Services Administration including the Bridge Access Program and the Ending the HIV Epidemic-Primary Care HIV Prevention grants.
- The council was informed that the mobile dental unit would be out of service for the rest of the year for repairs, maintenance, and refurbishment. The dental services will be provided at the Harmony House Dental satellite clinic.
- The council was informed of new collaborations with the Harris Health OBAT program and the Harris County Drug Court.

Operational Update

Cervical Cancer Screening Incentives Grant

Award Date: December 8, 2023

- Pending Board Approval
- Funding Amount: **\$7,000**
- Focus: To encourage uptake of cervical cancer screenings.
- Services Provided
 - Shorties (Panties)
 - Sports Bras

Operational Update

2022 Employee Giving Campaign: 1966 Restricted Donation Fund

Cervical Cancer Screening Incentives Grant

Start Date : 12/08/2023

End Date : 04/08/2025

Project Expenses	1966 Funding	Other Funding/ In Kind	Description
Project Materials/ Equipment :			
Shorties(Panties) @ \$5.99 x 631 units = \$3,780	\$3,780		\$3,780 worth of shorties (panties) for 631 women experiencing homelessness to encourage uptake of cervical cancer screenings
Sports Bras @ \$11.50 x 280 = \$3,220	\$3,220		\$3,220 worth of sports bras for 280 persons experiencing homelessness to encourage uptake of cervical cancer screenings.
Total Project Cost :			\$7,000

C8E Capital Board Changes

Requested changes from original grant application:

- Changing location to Open Door Mission
- Change to renovation and equipment only project
- Removal of administrative office space from floor plan

Operational Update

C8E Capital Grant : Equipment for Multiple Sites

Award Date: November 20, 2023

- Pending Board Approval
- Funding Amount: **\$77,649**
- Focus: New equipment to enhance delivery of care.
- Equipment Purchase
 - Workstation on Wheels
 - Vitals Monitors
 - Pharmacy Cabinets

Operational Update

C8E Capital Grant : Equipment

Start Date : 09/15/2021

End Date : 09/14/2024

Type	Description	Unit Price	Quantity	Total Price
Non Clinical	Workstation on Wheels: Cart has charging dock, charging station, battery, barcode scanner, barcode printer, wired signature terminal, proximity reader, mounting components, shelves, etc.	\$7,154	3	\$21,462
Clinical	EarlyVue VS30 Vitals monitor	\$5,267	9	\$47,403
Non Clinical	Pharmacy cabinet	\$1,464	6	\$8,784
Total :			18	\$77,649

Operational Update

C8E Capital Grant : Open Door Mission Renovation

Award Date: November 20, 2023

- Pending Board Approval
- Funding Amount: **\$535,530**
- Focus: To optimize clinic infrastructure to increase accessibility to medical and supporting services
- Renovation
 - Nurses Station
 - Phlebotomy Room
 - Social Work Room
 - Storage Room
 - Shower

Operational Update

C8E Capital Grant : Open Door Mission Renovation

Start Date: 09/15/2021

End Date: 09/14/2024

Description	Allowable Costs	Total Cost
Costs for the architectural and engineering fees	\$51,500	\$51,500
Construction Total costs for renovation at Open Door Mission and expansion of space, of 1,250 square feet.	\$420,000	\$420,000
Equipment to enhance delivery of care.	\$43,030	\$43,030
The maximum of 5% allowed of Lines, 7, 8, and 9 that will be included for contingencies.	\$21,000	\$21,000
Total :		\$535,530

HARRIS HEALTH SYSTEM

Health Care for the Homeless Quality Management Report – QTR 3 2023

LaResa A. Ridge MD, MBA, Health Care for the Homeless Medical Director,
Ambulatory Care Services

Data Trending 2023 Q3

Quality Measure - 2023	UDS Benchmark	HCHP Goal	23-Jul	23-Aug	23-Sep	Trend
Childhood Immunization Status	>36%	50%	25%**	25%**	0%**	
Cervical Cancer Screening	> 48%	70%	78%	77%	80%	
Breast Cancer Screening	> 48%	50%	58%	57%	63%	
Child BMI % Diet & Physical Activity Counseling	> 66%	82%	0%**	0%**	0%**	
Adult BMV/F/U Plan	> 57%	85%	97%	97%	96%	
Tobacco Screening/Counseling/ Pharmacotherapy	> 79%	90%	98%	98%	99%	
Statin Therapy	> 76%	80%	87%	89%	88%	
IVD & Aspirin	> 78%	85%	87%	90%	88%	
Colorectal Cancer Screening	> 37%	50%	65%	57%	60%	
HIV Screening	> 82%	85%	94%	95%	97%	
Depression Screening / F/U	> 65%	80%	85%	85%	80%	
Depression Remission at 12 months	>17%	20%	0%**	0%**	9%**	
Hypertension BP < 140/90	> 62%	65%	69%	68%	68%	
Diabetes A1C > 9	< 32%	45%	33%***	31%	34%***	

• = Metrics that are not meeting HCHP goal but meeting the UDS Benchmark (National Average)

** = Metrics that are not meeting both the UDS Benchmark and HCHP goal

*** = Metrics that are not meeting the UDS Benchmark but are meeting the HCHP goal

Problem Statement: The following metrics did not meet either the program’ internal goal or the UDS benchmark goals for the SECOND quarter of 2023.

Quality Measures			Q4 (2022)		Q1 (2023)			Q2 (2023)			Q3 (2023)		
Quality Measures	HHS Goal	UDS Goal	November	December	January	February	March	April	May	June	July	August	September
Breast Cancer Screening	>50%	>48%	46%	39%	30%	28%	26%	27%	25%	27%	58%	57%	63%
Diabetes A1C>9	<45%	<32%	39%	40%	52%	52%	50%	51%	53%	45%	33%	31%	34%
Childhood Immunization	>50%	>36%	0%	0%	20%	14%	0%	0%	0%	0%	25%	25%	0%
Depression Remission	>20%	>17%	78%	78%	0%	4%	0%	0%	0%	0%	0%	0%	0%
Cervical Cancer Screening	>70%	>48%	73%	66%*	73%	70%	67%*	70%	71%	66%*	78%	77%	80%

Plan (Root Cause-Based on analysis of the problem)-WHY?	Do-(Action, Responsible Person, Implementation Date)
<p>1. Breast Cancer Screening Fall outs due to 1) Mammograms not ordered 2) Ordered mammograms not scheduled 3) Patient failing to keep appointments</p> <p>2. Diabetes A1C> 9 Fall out due to 1) Inclusion of non-clinical provider stats 2) Inclusion of non-clinical visits 3) A1C results not obtained due to provider and patient factors</p> <p>3. Childhood Immunization Fall outs due to 1) Failure to adequately assess immunization status 2) Failure to adequately immunize patient 2) Patients presenting beyond qualified age</p> <p>4. Depression Remission Fall outs due to 1)Failing to reassess PHQ9 within assessment period. 2) Failure to achieve adequate remission of depression</p> <p>5. Cervical Cancer Screening: Fall out due to 1) Patients electing to refuse/defer screening 2)A new appointment for the screening not made at time of discharge</p>	<p>Responsible Persons: LaResa Ridge, MD, James Ronk ,RN Jaden Jacobs , QAC</p> <p>1. Breast Cancer Screening: 1) Nursing will consistently perform pre-visit planning or PVP to screen the patient’s status and generate an order for a mammogram if deficient. 2) Case Manager will track and assist patients with appointments 3) Targeted monthly chart reviews by Medical Director to monitor progress (Implementation date: 08/14/2023)</p> <p>2. Diabetes A1C>9: 1)QAC to coordinate with IT to ensure only clinical providers and visits are included 2) Standardized means of communicating orders (NP to Nursing Staff) to ensure A1C is ordered and appointment made prior to patient discharge 3) Targeted monthly chart reviews by Medical Director to monitor progress (Implementation date: 08/14/2023)</p> <p>3. Childhood Immunization: 1) Nursing will consistently perform PVP which evaluates the patient’s vaccination status and generates an order for deficient vaccines. 2) (Implementation date: 08/14/2023)</p> <p>4. Depression Remission: 1) Best Practice Alerts presented to Alert User Group and approved at last meeting (11/13/2023) 2) IT is working to develop effective alerts to inform staff of the need to address deficient depression screening and follow up. (Implementation date: TBA)</p> <p>5. Cervical Cancer Screening: 1) Nursing staff will consistently perform PVP which evaluates the patient’s cancer screening status and generates an order if deficient. 2) Standardized means of communicating orders (NP to Nursing Staff) to ensure Gyn appointment are scheduled at discharge. 3) Targeted monthly chart reviews by Medical Director to monitor progress (Implementation date: 08/14/2023)</p>
Check (How will you measure effectiveness)	<p>ACT– Quarterly compliance percentage since Q3/2022</p> <p>Cervical cancer: 68/64/66/68</p> <p>Breast cancer: 49/39/26/25</p> <p>Childhood immun.: 0/0/8/0</p>
<p>Via the monthly UDS Dashboard Report and targeted monthly chart reviews by Medical Director.</p>	

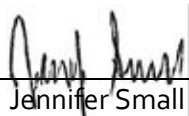
Thursday, January 25, 2024

Review and Acceptance of the Following Report for the Healthcare for the Homeless Program as Required by the United States Department of Health and Human Services Which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act

Attached for approval:

- **HCHP Consumer Advisory Council Report**

Administration recommends that the Board approve the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

HCHP Consumer Advisory Council Report

Highlights of Council Activities from August 2023 – October 2023:

- Members received updates on ongoing operational changes at Harris Health and the Health Care for the Homeless Program (HCHP).
- Members reviewed reports related to quality and performance improvement, productivity, and patient satisfaction, with corresponding corrective action plans.
- The council was informed of the clinic schedule changes related to staff shortages and the plan of action to recruit staff.
- The council received updates on the various grant projects.
- The council was informed of new funding received from the Health Resources and Services Administration including the Bridge Access Program and the Ending the HIV Epidemic-Primary Care HIV Prevention grants.
- The council was informed that the mobile dental unit would be out of service for the rest of the year for several repairs, maintenance, and refurbishment. The dental team would provide services at the Harmony House dental operatory.
- The council was informed of new collaborations including with the Harris Health OBAT program and the Harris County Drug Court.
- The council requested and received information on COVID-19 statistics.
- The council was updated on the ongoing process of the 2023 needs assessment.
- The chair shared information from the council-at-large meetings.
- Council members participated in the Health Center Week HCHP celebration.


Thursday, January 25, 2024

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Attached for approval:

- **HCHP 1966 Budget Fund Grant**

Administration recommends that the Board approve the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

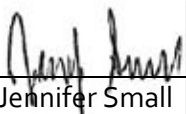
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Attached for approval:

- **HCHP C8E Capital Board Changes**

Administration recommends that the Board approve the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

BUDGET JUSTIFICATION: Open Door Mission Renovation

Project Number: 195087-01

Project Type: Alteration/Renovation (A/R) of an Existing Facility

Total Federal Funding Request: \$535,530

Total Project Cost: \$535,530

Project Area (in SQ Ft): 1,250 SQ Ft

Project Description: Renovation of interior of part of homeless shelter building that contains a health care for the homeless clinic and equipment.

Project Completion Timeline (MM/YYYY): 08/2024

	ALLOWABLE COSTS	OTHER ALLOWABLE COSTS	UNALLOWABLE COSTS	TOTAL COST
Line 1— Administrative and legal expenses	\$0 No costs are anticipated for this classification.	\$0	\$0	\$0
Line 2— Land, structures, right-of-way, appraisals, etc.	\$0 No additional land is required for this project. No costs are anticipated for this classification.	\$0	\$0	\$0
Line 3— Relocation expenses and payments	\$0 No costs are anticipated for this classification.	\$0	\$0	\$0
Line 4— Architectural and engineering fees	\$51,500 Costs for the architectural and engineering fees, which will cover the following: schematic design, design development, construction documents, construction administrative fees, 3D representation of each space showing location of furniture), and reimbursable (including permit fee).	\$0	\$0	\$51,500
Line 5— Other architectural and engineering fees	\$0 No other architectural or engineering fees are anticipated for this project.	\$0	\$0	\$0
Line 6— Project inspection fees	\$0 No costs are anticipated for this classification.	\$0	\$0	\$0
Line 7—Site work	\$0 No costs are anticipated for this classification.	\$0	\$0	\$0
Line 8— Demolition and removal	\$0 No costs are anticipated for this classification, as will be in construction	\$0	\$0	\$0

	quote and completed by same company.			
Line 9— Construction	\$420,000 Total costs for renovation at Open Door Mission and expansion of space, of 1,250 square feet. The project includes moving internal walls and doors to increase the size of the pharmacy and storage space in the current clinic, make an existing area in the clinic into a nursing station, add a sliding window, and to knock a wall to access additional shelter rooms to use as a break room, a phlebotomy room, and a social work room for the clinic, replace a door, and to add a shower to a women’s bathroom.	\$0	\$0	\$420,000
Line 10— Equipment	\$43,030 Equipment to enhance delivery of care.	\$0	\$0	\$43,030
Line 11— Miscellaneous	\$0 No costs are anticipated for this classification.	\$0	\$0	\$0
Line 12— SUBTOTAL	\$514,530 The sum of Lines 1 through 11.			\$514,530
Line 13— Contingencies	\$21,000 The maximum of 5% allowed of Lines, 7, 8, and 9 that will be included for contingencies.	\$0	\$0	\$21,000
Line 14— SUBTOTAL	\$535,530 The sum of Lines 12 and 13			\$535,530
Line 15— Project (program) income	\$0 None	\$0	\$0	\$0
Line 16— TOTAL PROJECT COSTS	\$535,530 Costs for the total project.			\$535,530
Line 17— GRANT (Note: round to the nearest whole dollar	\$535,530 Grant funding requested.			\$535,530

amount)		
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BUDGET JUSTIFICATION — Harris County Hospital District (dba Harris Health System)

Project Name: Multiple Sites

Equipment

Project Type: Equipment

Project Address: Multiple Sites

Total C8E (ARP-Capital)—Capital Funding Request = \$77,649

Total Project Cost = \$77,649

Insert Project Narrative. Also include project timeline/schedule to include milestones and dates, showing project completion prior to the project period end date.

	ALLOWABLE COSTS— C8E- ARP Capital	UNALLOWABLE COSTS
Line 1— Administrative and legal expenses	\$0	\$0
Line 2—Land, structures, right- of-way, appraisals, etc.	\$0	\$0
Line 3—Relocation expenses and payments	\$0	\$0
Line 4— Architectural and engineering fees	\$0	\$0
Line 5—Other architectural and engineering fees	\$0	\$0

	ALLOWABLE COSTS— C8E- ARP Capital	UNALLOWABLE COSTS
Line 6—Project inspection fees	\$0	\$0
Line 7—Site work	\$0	\$0
Line 8—Demolition and removal	\$0	\$0
Line 9— Construction Choose one: Construction of a New Facility OR Construction/Expansio n of Existing Facility OR Alteration/Renovation of an Existing Facility	\$0	\$0

	ALLOWABLE COSTS— C8E- ARP Capital	UNALLOWABLE COSTS
Line 10— Equipment	\$77,649	\$0

	ALLOWABLE COSTS— C8E- ARP Capital	UNALLOWABLE COSTS
Line 11— Miscellaneous	\$0	\$0
Line 12— SUBTOTAL (Allowable and Unallowable Costs)	\$77,649	\$0
Line 13— Contingencies	\$0	\$0
Line 14— SUBTOTAL	\$77,649	\$77,649
Line 15—Project (program) income	\$0	\$0
Line 16—TOTAL PROJECT COSTS (Allowable and Unallowable)	\$77,649	\$0
Line 17—GRANT funding requested (Note: round to the nearest whole dollar amount)	\$77,649	\$0



Recipient Information

- 1. Recipient Name
Harris Health System
4800 Fournace Pl
Bellaire, TX 77401-2324
- 2. Congressional District of Recipient
18
- 3. Payment System Identifier (ID)
1741536936A1
- 4. Employer Identification Number (EIN)
741536936
- 5. Data Universal Numbering System (DUNS)
086976214
- 6. Recipient's Unique Entity Identifier
R68MDCGVWQ15
- 7. Project Director or Principal Investigator
Tracey Burdine
Director
tracey.burdine@harrishealth.org
(281)906-0646
- 8. Authorized Official
Nelson Gonzalez
nelson.gonzalez@harrishealth.org
(346)426-0701

Federal Agency Information

- 9. Awarding Agency Contact Information
Tya T Renwick
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
trenwick@hrsa.gov
(301) 594-0227
- 10. Program Official Contact Information
Kathryn Brothers
Bureau of Primary Health Care (BPHC)
Kbrothers@hrsa.gov
(301) 443-2304

Federal Award Information

- 11. Award Number
6 C8ECS44701-01-05
- 12. Unique Federal Award Identification Number (FAIN)
C8E44701
- 13. Statutory Authority
American Rescue Plan Act of 2021 (P.L. 117-2)
- 14. Federal Award Project Title
Health Center Infrastructure Support
- 15. Assistance Listing Number
93.526
- 16. Assistance Listing Program Title
FIP Verification
- 17. Award Action Type
Administrative
- 18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/15/2021 - End Date 09/14/2024	
20. Total Amount of Federal Funds Obligated by this Action	\$0.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	\$0.00
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$613,179.00
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
25. Total Federal and Non-Federal Approved this Budget Period	\$613,179.00
26. Project Period Start Date 09/15/2021 - End Date 09/14/2024	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$613,179.00

- 28. Authorized Treatment of Program Income
Addition
- 29. Grants Management Officer – Signature
Tya Renwick on 11/20/2023

30. Remarks

Prior Approval Request Tracking Number PA-00119986



Notice of Award
Award Number: 6 C8ECS44701-01-05
Federal Award Date: 11/20/2023

Bureau of Primary Health Care (BPHC)

<p>31. APPROVED BUDGET: (Excludes Direct Assistance)</p> <p><input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation</p> <table style="width:100%; border-collapse: collapse;"> <tr><td>a. Salaries and Wages:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>b. Fringe Benefits:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>c. Total Personnel Costs:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>d. Consultant Costs:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>e. Equipment:</td><td style="text-align: right;">\$120,679.00</td></tr> <tr><td>f. Supplies:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>g. Travel:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>h. Construction/Alteration and Renovation:</td><td style="text-align: right;">\$471,500.00</td></tr> <tr><td>i. Other:</td><td style="text-align: right;">\$21,000.00</td></tr> <tr><td>j. Consortium/Contractual Costs:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>k. Trainee Related Expenses:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>l. Trainee Stipends:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>m. Trainee Tuition and Fees:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>n. Trainee Travel:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>o. TOTAL DIRECT COSTS:</td><td style="text-align: right;">\$613,179.00</td></tr> <tr><td>p. INDIRECT COSTS (Rate: % of S&W/TADC):</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> i. Indirect Cost Federal Share:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> ii. Indirect Cost Non-Federal Share:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>q. TOTAL APPROVED BUDGET:</td><td style="text-align: right;">\$613,179.00</td></tr> <tr><td> i. Less Non-Federal Share:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> ii. Federal Share:</td><td style="text-align: right;">\$613,179.00</td></tr> </table>	a. Salaries and Wages:	\$0.00	b. Fringe Benefits:	\$0.00	c. Total Personnel Costs:	\$0.00	d. Consultant Costs:	\$0.00	e. Equipment:	\$120,679.00	f. Supplies:	\$0.00	g. Travel:	\$0.00	h. Construction/Alteration and Renovation:	\$471,500.00	i. Other:	\$21,000.00	j. Consortium/Contractual Costs:	\$0.00	k. Trainee Related Expenses:	\$0.00	l. Trainee Stipends:	\$0.00	m. Trainee Tuition and Fees:	\$0.00	n. Trainee Travel:	\$0.00	o. TOTAL DIRECT COSTS:	\$613,179.00	p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00	i. Indirect Cost Federal Share:	\$0.00	ii. Indirect Cost Non-Federal Share:	\$0.00	q. TOTAL APPROVED BUDGET:	\$613,179.00	i. Less Non-Federal Share:	\$0.00	ii. Federal Share:	\$613,179.00	<p>33. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 5px;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 20%;">YEAR</th> <th>TOTAL COSTS</th> </tr> </thead> <tbody> <tr> <td colspan="2" style="text-align: center;">Not applicable</td> </tr> </tbody> </table> <p>34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)</p> <table style="width:100%; border-collapse: collapse;"> <tr><td>a. Amount of Direct Assistance</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>b. Less Unawarded Balance of Current Year's Funds</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>c. Less Cumulative Prior Award(s) This Budget Period</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION</td><td style="text-align: right;">\$0.00</td></tr> </table> <p>35. FORMER GRANT NUMBER</p> <p>36. OBJECT CLASS 41.11</p> <p>37. BHCNIS#</p>	YEAR	TOTAL COSTS	Not applicable		a. Amount of Direct Assistance	\$0.00	b. Less Unawarded Balance of Current Year's Funds	\$0.00	c. Less Cumulative Prior Award(s) This Budget Period	\$0.00	d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00
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d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00																																																						
<p>32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:</p> <table style="width:100%; border-collapse: collapse;"> <tr><td>a. Authorized Financial Assistance This Period</td><td style="text-align: right;">\$613,179.00</td></tr> <tr><td>b. Less Unobligated Balance from Prior Budget Periods</td><td></td></tr> <tr><td> i. Additional Authority</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> ii. Offset</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>c. Unawarded Balance of Current Year's Funds</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>d. Less Cumulative Prior Award(s) This Budget Period</td><td style="text-align: right;">\$613,179.00</td></tr> <tr><td>e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td><td style="text-align: right;">\$0.00</td></tr> </table>		a. Authorized Financial Assistance This Period	\$613,179.00	b. Less Unobligated Balance from Prior Budget Periods		i. Additional Authority	\$0.00	ii. Offset	\$0.00	c. Unawarded Balance of Current Year's Funds	\$0.00	d. Less Cumulative Prior Award(s) This Budget Period	\$613,179.00	e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$0.00																																								
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<p>38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:</p> <p>a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.</p>																																																							
<p>39. ACCOUNTING CLASSIFICATION CODES</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 15%;">FY-CAN</th> <th style="width: 15%;">CFDA</th> <th style="width: 15%;">DOCUMENT NUMBER</th> <th style="width: 15%;">AMT. FIN. ASST.</th> <th style="width: 15%;">AMT. DIR. ASST.</th> <th style="width: 15%;">SUB PROGRAM CODE</th> <th style="width: 15%;">SUB ACCOUNT CODE</th> </tr> </thead> <tbody> <tr> <td>21 - 398A878</td> <td>93.526</td> <td>21C8ECS44701C6</td> <td>\$0.00</td> <td>\$0.00</td> <td>N/A</td> <td>21C8ECS44701C6</td> </tr> </tbody> </table>		FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE	21 - 398A878	93.526	21C8ECS44701C6	\$0.00	\$0.00	N/A	21C8ECS44701C6																																								
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HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. This revised Notice of Award is issued to approve the Capital Update (Prior Approval Request Tracking #: PA-00119986). This award also updates the funding allocation as submitted in the revised budget. Project -01 has been relocated to the service site at 5803 Harrisburg Blvd., Houston, Texas 77011. The Federal share percentage is 100%.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Nelson Gonzalez	Point of Contact, Authorizing Official	nelson.gonzalez@harrishealth.org
Tracey Burdine	Program Director	tracey.burdine@harrishealth.org

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).

Project Number 195087-01 (This is a HRSA #, not a Harris Health Project #)

Project Name Open Door Mission Renovation

Project Description The project includes moving internal walls and doors to increase the size of the pharmacy and storage space in the current clinic, make an existing area in the clinic into a nursing station, and to knock a wall to access additional shelter rooms to use as a break room, a phlebotomy room, and a social work room for the clinic, to replace a door, to add a sliding window, and to add a shower to an existing women's bathroom. Cost for equipment.

OMB Number: 0915-0285 OMB Expiration Date: 3/31/2023

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration EQUIPMENT LIST		FOR HRSA USE ONLY			
		Grant Number	C8ECS4	Application Tracking #	195087
		Project Tracking #	195087-01	Project Type	Renovation
		Project Title	Open Door Mission Renovation		
List of Equipment					
Type	Description	Unit Price	Quantity	Total Price	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Workstation on Wheels: Cart has charging dock, charging station, battery, barcode scanner, barcode printer, wired signature terminal, proximity reader, mounting components, shelves, etc.	\$7,154	1	\$7,154	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	EarlyVue VS30 Vitals monitor	\$5,267	2	\$10,534	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Pharmacy cabinet	\$1,464	2	\$2,928	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Computers/monitors	\$180	1	\$180	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Computer headsets	\$163	2	\$326	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	iPads	\$499	4	\$1,996	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	iPad cases	\$75	4	\$300	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Television for education	\$250	1	\$250	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Supply cabinets	\$1,088	2	\$2,176	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Desk for SW room	\$601	1	\$601	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Desk chair for SW room	\$537	1	\$537	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Patient chairs for SW room	\$301	2	\$602	

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration EQUIPMENT LIST		FOR HRSA USE ONLY			
		Grant Number	C8ECS4 4701	Application Tracking #	195087
		Project Tracking #	195087-01	Project Type	Renovation
		Project Title	Open Door Mission Renovation		
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Utility table	\$854	1	\$854	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Tall chairs for registration room	\$384	3	\$1,152	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Chairs for break room	\$65	4	\$260	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Table for break room	\$250	1	\$250	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Refrigerator for break room	\$650	1	\$650	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	Power exam table	\$4,937	1	\$4,937	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	Centrifuge	\$2,244	1	\$2,244	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Label printer for patient labels	\$589	1	\$589	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	Label printer for beaker labels	\$413	1	\$413	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	Supplies cart	\$200	1	\$200	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Wall-mount for computer	\$509	1	\$509	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Printer	\$300	1	\$300	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	Phlebotomy chair	\$2,488	1	\$2,488	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Office phones	\$300	1	\$600	
TOTAL			42	\$43,030	

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0285. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

Project Number 195087-02 (This is a HRSA #, not a Harris Health Project #)

Project Name Equipment for Multiple Sites

Project Description There will be equipment only projects for multiple sites to enhance care of delivery. The sites are on the scope, including, Harmony House, Lord of the Streets, Navigation Center, Star of Hope Men’s Development Center, Star of Hope Cornerstone, and Salvation Army Adult Rehabilitation Center.

OMB Number: 0915-0285 OMB Expiration Date: 3/31/2023

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration EQUIPMENT LIST		FOR HRSA USE ONLY			
		Grant Number	C8ECS44 701	Application Tracking #	195087
		Project Tracking #	195087-02	Project Type	Equipm ent
		Project Title	Multiple Sites Equipment		
List of Equipment					
Type	Description	Unit Price	Quantity	Total Price	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Workstation on Wheels: Cart has charging dock, charging station, battery, barcode scanner, barcode printer, wired signature terminal, proximity reader, mounting components, shelves, etc.	\$7,154	3	\$21,462	
<input checked="" type="checkbox"/> Clinical <input type="checkbox"/> Non Clinical	EarlyVue VS30 Vitals monitor	\$5,267	9	\$47,403	
<input type="checkbox"/> Clinical <input checked="" type="checkbox"/> Non Clinical	Pharmacy cabinet	\$1,464	6	\$8,784	
<input type="checkbox"/> Clinical					
<input type="checkbox"/> Non Clinical					
<input type="checkbox"/> Clinical					
<input type="checkbox"/> Non Clinical					
		TOTAL	18	\$77,649	

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0285. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

Thursday, January 25, 2024

Executive Session

Consultation with Attorney Regarding Dialysis Center Governing Body Bylaws, Pursuant to Tex. Gov't Code Ann. §551.071, and Possible Action Upon Return to Open Session, Including Consideration of Approval of Governing Body Bylaws of the Harris Health System Dialysis Center at Quentin Mease Health Center.

- Pages 183 – 185 Were Intentionally Left Blank -

**GOVERNING BODY BYLAWS OF
HARRIS HEALTH SYSTEM DIALYSIS CENTER
AT QUENTIN MEASE HEALTH CENTER**

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PREAMBLE

WHEREAS, Harris Health System Dialysis Center at Quentin Mease Health Center (“HHDC”) is an end stage renal disease facility, as defined in Title 25, Part I, Chapter 117, of the Texas Administrative Code, as amended; and

WHEREAS, HHDC is wholly owned and operated by the Harris County Hospital District d/b/a Harris Health System (“Harris Health”), which is organized under the laws of the State of Texas and pursuant to Chapter 281 of the Texas Health and Safety Code Ann., as amended; and

WHEREAS, HHDC is a distinct facility that operates exclusively for the purpose of providing outpatient chronic dialysis services to patients with end stage renal disease; and

WHEREAS, subject to oversight by Harris Health Board of Trustees, the Harris Health System Dialysis Center at Quentin Mease Health Center Governing Body (“HHDC Governing Body”) assumes full legal responsibility for management, control, and operation of the facility including implementing policies governing the center’s operation, monitoring the quality and safety of medical care provided, and holding the medical staff of the center accountable to fulfill the obligations to its patients; and

THEREFORE, the HHDC and its facility staff shall carry out the functions delegated to it by the HHDC Governing Body in compliance with these Harris Health System Dialysis Center at Quentin Mease Health Center Bylaws (“Bylaws”), the Medical Staff Bylaws of Harris Health System, and 25 T.A.C. Part 1, Chapter 117 and 42 C.F.R. § 494.180.

DEFINITIONS

1. The term “Medical Staff” means all practitioners (as such terms is defined below) who maintain privileges to treat patients in HHDC.
2. The term “Medical Director” shall refer to the person filling that office pursuant to Article VI.
3. The term “HHDC Governing Body” means the body with governing authority of the HHDC, subject to the oversight of the Harris Health Board of Trustees. This Governing Body has responsibility for the organization, management, control, and operation of the facility, including the appointment of a medical director, implementing policies governing the center’s operation, monitoring the quality and safety of medical care provided, and holding the medical staff of the center accountable to fulfill the obligations to its patients

ARTICLE I: NAME

The name of the organization governed by these Bylaws shall be Harris Health System Dialysis Center at Quentin Mease Health Center.

ARTICLE II: PURPOSE

The purposes of this organization are:

1. To operate a licensed, certified, and accredited ambulatory dialysis center;
2. To provide the best possible care for all patients admitted to the HHDC;
3. To provide the community with a facility in which dialysis services can be safely carried out on a regular and routine schedule; and
4. To ensure a high level of professional performance of all Medical Staff members authorized to practice in the HHDC through appropriate delineation of the clinical privileges that each Medical Staff member may exercise and through an ongoing review and evaluation of each Medical Staff member's performance.

ARTICLE III: HHDC GOVERNING BODY

Section 1 Governing Body

The HHDC shall be under the management, direction, and control of a Governing Body. The HHDC Governing Body shall have full power and authority to oversee and provide direction regarding the affairs of the HHDC. In exercising this power, the HHDC Governing Body may take any action that is consistent with Harris Health's enabling statute; these Bylaws; and federal, state and local law, including, but not limited to, 25 T.A.C. Part 1, Chapter 117, 42 C.F.R. § 494.180, and state licensure requirements.

The HHDC Governing Body may delegate day-to-day operational responsibilities to administrative, medical, or other personnel, but retains the ultimate responsibility for the overall operations of the HHDC and quality of its services. Any delegation of the HHDC Governing Body's authority must be documented in writing.

Section 2 General Responsibilities

The HHDC Governing Body is responsible for:

1. Appointing an Administrator and a Medical Director to serve on the HHDC Governing Body and leadership team;
2. Appointing medical staff and credentialing in accordance with the law, including physicians, physician assistants, nurse practitioners, and clinical nurse specialists;
3. Developing, implementing, and enforcing policies and procedures for all services provided by the facility;
4. Ensuring that the Medical Staff has current bylaws, rules and regulations that are adopted, implemented, and enforced;
5. Ensuring that effective administrative rules, regulations, and policies designed to protect the health and safety of patients are implemented and reviewed annually;

6. Ensuring that there is a quality assessment and performance improvement (QAPI) program to evaluate the provision of patient care. The HHDC Governing Body shall review and monitor QAPI activities quarterly and communicate the expectations to medical staff regarding staff participation in improving the quality of medical care provided to facility patients;
7. Ensuring that all facility staff are qualified (i.e., advanced practice registered nurse, physician assistant, registered nurse, licensed vocational nurse, licensed master social worker, registered dietitian, patient care technician, and other technical staff) to serve the complex needs of dialysis patients and deliver dialysis services. The registered nurse, licensed vocational nurse, patient care technician and other technical staff must demonstrate and sustain the skills needed to perform the specific duties of their positions;
8. Ensuring adequate numbers of qualified personnel, including a registered nurse, are present whenever patients are undergoing dialysis so that the patient/staff ratio is appropriate to the level of dialysis care given and meets the needs of patients;
9. Reviewing and approving the facility's training program for staff, patients, and/or patient's caregiver and ensuring all staff, including the medical director, have appropriate orientation to the facility and an opportunity for continuing education and related development activities;
10. Developing, implementing, and enforcing policies and procedures relating to the facility's disaster preparedness plan, to meet the requirements of §117.45(b)(5) of the Texas Administrative Code (relating to Provision and Coordination of Treatment and Services) and 42 CFR §494.180(g). The plan shall address the continuity of essential building systems including emergency power and water, or a contract with another licensed End State Renal Disease (ESRD) facility to provide emergency contingency care to patients to meet the requirements of §117.91(h) of the Texas Administrative Code (relating to Fire Prevention, Protection, and Emergency Contingency Plan);
11. Ensuring that all equipment utilized by facility staff and/or patients is properly maintained in accordance with the manufacturer's direction for use;
12. Ensuring a physical environment that protects the health and safety of patients, personnel, and the public. The physical premises of the facility and those areas of the facility's surrounding physical structure that are used by the patients (including stairwells, corridors, and passageways) shall meet the local building and fire safety codes as they relate to design and space requirements for safe access and patient privacy;
13. Developing, implementing, and enforcing policies and procedures regarding disruptive patients or family members to ensure the health and safety of patients, personnel and the public;
14. Ensuring that personnel shall be assigned to assist a social worker(s) with ancillary tasks (e.g., assistance with financial services, transportation, administrative, clerical, etc.), when the patient load, including all modalities, exceeds 100 patients per facility. The maximum patient load, including all modalities, per full-time equivalent qualified social worker, with assigned personnel assistance, is 125 patients;
15. Developing an internal grievance process so that the patient may file an oral or written grievance with the facility without reprisal or denial of services. The grievance process must include: a clearly explained procedure for the submission of grievances, timeframes for reviewing the grievance, and a description of how the patient or the patient's designated representative will be informed of steps taken to resolve the grievance;

16. Ensuring that all staff follow the facility's patient discharge and transfer policies and procedures;
17. Ensuring that data and information for ESRD program administration is available and furnished as requested;
18. Cooperating, receiving and acting upon recommendations from the ESRD Network.

Section 3 Number, Appointment, Membership, Term, and Vacancy

The HHDC Governing Body shall consist of five (5) members. The HHDC Governing Body shall include the Administrator, the Medical Director, the Nursing Director and two (2) active members of the Harris Health Board of Trustees. All shall be voting members of the HHDC Governing Body.

The Administrator, Medical Director, and Nursing Director shall each be appointed by the remaining members of the HHDC Governing Body in a manner and for a term consistent with their appointment or employment with Harris Health. The HHDC Governing Body shall review the appointment of the Administrator, Medical Director, and Nursing Director upon execution of these Bylaws and every five (5) years thereafter. These three (3) members shall hold such office so long as such member continues to hold such title. A vacancy in the position of Administrator, Medical Director, and Nursing Director shall be filled by appointment by the HHDC Governing Body upon recommendation and approval of the Harris Health CEO/President or designee.

The two (2) members from the Board of Trustees shall be selected by the Harris Health Board of Trustees. Each of these two (2) members who are also members of the Board of Trustees shall hold office for two (2) years or until his/her resignation, retirement, removal, disqualification or his/her successor is appointed by the Board of Trustees. These two (2) members are eligible for reappointment at the discretion of the Board of Trustees.

Section 4 Powers Reserved to the Harris Health Board of Trustees

The following powers are reserved to the Harris Health Board of Trustees and the HHDC Governing Body is prohibited from taking any action of the following matters without the prior approval by resolution (or other appropriate written form of approval) of the Harris Health Board of Trustees acting as Harris Health's governing body under Chapter 281 of the Texas Health and Safety Code:

- a. Adoption, amendment, or revocation of the Bylaws of the HHDC.
- b. Appointment and removal of the Harris Health Board of Trustees members serving on the HHDC Governing Body.

ARTICLE IV: MEETING OF GOVERNING BODY

Section 1 Regular Meetings

The HHDC Governing Body shall meet a minimum of four (4) times per year with one meeting serving as the annual meeting of the HHDC Governing Body. The meetings shall be held at such place as the

HHDC Governing Body may designate. Additional meetings may be held at the discretion of the HHDC Governing Body to conduct the business of the HHDC.

Regular meetings shall include, without limitation, the following items:

- a. Disposition of minutes of previous meetings;
- b. Consent Items;
- c. Reports and recommendations from the Medical Executive Committee regarding credential and peer review and from the Quality Review Council regarding quality of care for the HHDC Governing Body's consideration;
- d. Items relating to fiscal affairs, including statistical and financial reports, together with cumulative reports for the fiscal year-to-date;
- e. Reports and items from standing committees; if any;
- f. Reports and items from special committees; if any;
- g. Medical Staff appointments, if any;
- h. Miscellaneous items;
- i. Medical Director's Report; and
- j. Executive session items.

Section 2 Special or Emergency Meetings

Special meetings of the HHDC Governing Body may be called by the Chair or another Member of the HHDC Governing Body. A special meeting shall be for the purpose of considering the item or items on the agenda for such a meeting.

Section 3 Notice of Meetings

For all regular meetings, the members shall be notified in writing not less than seventy-two (72) hours in advance of the scheduled meeting.

A schedule of regular meetings of the HHDC Governing Body shall be published annually.

For special or emergency meetings, dependent upon the time available and the urgency of the occasion, members may be notified by mail, telephone, e-mail, or facsimile transmittal, setting out the date, time, and specific purpose of the special or emergency meeting.

Notice of each meeting shall be posted as required by the Texas Open Meetings Act.

Section 4 Quorum

The presence of the Medical Director and at least two (2) other members of the HHDC Governing Body voting members shall constitute a quorum for the transaction of business.

Section 5 Attendance

Each member of the HHDC Governing Body is expected to attend at least 70% (seventy percent) of the regularly scheduled meetings, including appropriate committee meetings during any 12-month period.

Section 6 Manner of Acting

Except as otherwise provided in these bylaws, the act of the majority of the members present at a meeting at which a quorum is present shall be the act of the HHDC Governing Body.

Section 7 Public Meetings

All meetings of the HHDC Governing Body shall be open to the public except that the HHDC Governing Body may hold Executive Sessions in accordance with the Texas Open Meeting Act.

Section 8 Committees of the HHDC Governing Body

The HHDC Governing Body, by resolution adopted by a majority of the members of the HHDC Governing Body present at a meeting at which a quorum is present, may designate members to constitute committees, standing or special. The committees shall make recommendations to the HHDC Governing Body.

Section 9 Rules of Order

- a. The most recent version of Robert’s Rules of Order Newly Revised shall govern the proceedings of the meetings of the HHDC Governing Body in all matters not inconsistent with these Bylaws or the Constitution and the laws of the State of Texas. Notwithstanding the foregoing, the Chair of the HHDC Governing Body may vote on any matter before the HHDC Governing Body.
- b. If any member or members in the minority on any question wishes to present a written minority opinion to the HHDC Governing Body Secretary, such opinion shall be filed with the permanent records of the HHDC Governing Body.
- c. The HHDC shall not entertain any motions or resolutions involving the expenditure of Harris Health Funds of the HHDC Center until the availability of such funds is certified to the HHDC Governing Body by the Chief Financial Officer of Harris Health or his/her designee.

ARTICLE V: OFFICERS

Section 1 Officers of the HHDC Governing Body

The HHDC Governing Body at its annual meeting to be held in January of each year shall elect a Chair, and may elect such other officers, which may include a Vice Chair, a Secretary, and other officers and assistant officers, as the HHDC Governing Body deems necessary or advisable for the efficient operation

of the HHDC's affairs. Any two or more offices may be held by the same person, except that the Chair and Secretary may not be the same person.

Section 2 Election and Term

Officers of the HHDC Governing Body, if any, shall be elected annually by the HHDC Governing Body at the January Annual Meeting. Each officer shall hold office until his successor shall have been duly elected or until his or her prior death, resignation, or removal.

Section 3 Duties of the Officers

Chair

The Chair shall preside at all meetings of the HHDC Governing Body. With the approval of the HHDC Governing Body, the Chair may appoint various committees as necessary to accomplish the goals of the HHDC Governing Body.

Vice Chair

The Vice Chair shall perform duties of the chair in the Chair's absence or in the event of the Chair's resignation, death, disability, or removal pending election of a successor Chair.

Secretary

The Secretary shall see that suitable records are maintained of each meeting of the HHDC Governing Body and committees of the HHDC Governing Body, and shall submit the minutes at the next meeting of the HHDC Governing Body or committee, as applicable. After approval, such records shall be read and signed by the Chair or the member presiding, and attested by the Secretary of the meeting if applicable.

The Secretary shall cause all member of the Board to be notified of all Board meetings in the following fashion:

- a.** For all regular meetings, the members shall be notified in writing not less than seventy-two (72) hours in advance of the scheduled meeting.
- b.** For special or emergency meetings, dependent upon the time available and the urgency of the occasion, members may be notified by mail, telephone, e-mail, or facsimile transmittal, setting out the date, time, and specific purpose of the special or emergency meeting.

ARTICLE VI: ADMINISTRATION

Section 1 HHDC Governing Body Responsibilities

Medical Staff

The HHDC Governing Body is responsible for the conduct of the members of the Medical Staff assigned to HHDC. The HHDC Governing Body delegates the appointment and reappointment of medical staff to the Harris Health System Board of Trustees pursuant to the Harris Health System Medical Staff Bylaws.

Administration

The HHDC Governing Body is responsible for the appropriate management and administration of the HHDC. In fulfillment of this responsibility, the HHDC Governing Body shall elect an appropriate qualified, competent Administrator; establish an annual operating budget; and establish such policies as are necessary to properly guide the HHDC's operations.

Quality Improvement

The HHDC Governing Body is responsible for utilization, quality, appropriateness of procedures, and the appropriateness of medical care rendered by and at the HHDC. In fulfillment of this responsibility, the HHDC Governing Body shall establish a Quality Improvement program, which will effectively monitor the quality of care and utilization of facilities with the reports of such activities, made to the HHDC Governing Body at least annually.

Standards

The HHDC Governing Body is responsible for maintaining the HHDC programs and services in line with the community and other appropriate standards. In fulfillment of this responsibility, the HHDC Governing Body directs that the HHDC meet and maintain standards for licensure as an end stage renal disease facility in the state of Texas, for participation in the Medicare program, and accreditation by an organization.

Section 2 Administrator

Appointment

The Administrator shall be appointed by the HHDC Governing Body.

Responsibilities

The Administrator shall exercise responsibility for the management of the facility and the provision of all dialysis services, including, but not limited to:

- a. Staff appointments;
- b. Fiscal operations;
- c. The relationship with the ESRD networks; and

- d. The allocation of necessary staff and other resources for the facility’s quality assessment and performance improvement program.

The Administrator is responsible for ensuring that the Harris Health System Board of Trustees is provided with HHDC operating and quality reports on at least a semiannual basis. The HHDC quality reports may be reported to the Harris Health Quality Governance Council, who reports to the Harris Health Board of Trustees.

Section 3 Medical Director

Appointment

The Medical Director shall be appointed by the HHDC Governing Body and is a physician who:

- a. Is board eligible or board certified in internal medicine or pediatrics by a professional board who has completed a board-approved training program in nephrology and has at least 12-months of experience providing care to patients receiving dialysis.

Responsibilities

The Medical Director is vested with the following duties and prerogatives:

- b. Is accountable to the HHDC Governing Body for the quality of medical care provided to patients;
- c. Ensures that there is a Quality Assessment and Performance Improvement program to evaluate the provision of patient care;
- d. Verifies staff education, training, and performance are ongoing and adequate;
- e. Participates in the development and implementation of policies and procedures;
- f. Participates in the development, periodic review and approval of a “patient care policies and procedures manual” for the facility; and
- g. Ensures all policies and procedures relative to patient admissions, patient care, infection control, and safety are adhered to by all individuals who treat patients in the facility, including attending physicians and non-physician providers; and
- h. Ensures the interdisciplinary team adheres to the discharge and transfer policies and procedures specified in § 494.180(f).

ARTICLE VII: GENERAL PROVISIONS

Section 1 Indemnification

The HHDC Governing Body may engage private legal counsel to represent a Board member in any legal matter arising out of the good faith performance of his/her public duties. To the extent permitted by law, each board member shall be indemnified by Harris Health System against any other costs, expenses, and

liabilities which are imposed upon or reasonably incurred by him/her by reason of his/her being or having been such member subject to Board approval of a not to exceed amount, reasonable legal fees and customary expenses shall be advanced to the Board member upon his/her execution of an undertaking letter to Harris Health agreeing that upon a finding of the HHDC Governing Body or a final court determination that the indemnified member was not acting in good faith that he/she shall reimburse Harris Health for advanced legal fees and expenses. The HHDC Governing Body may engage legal counsel to represent the HHDC Governing Body if the Harris County Attorney's Office is deemed by the HHDC Governing Body to have a conflict of interest in its representation of the HHDC Governing Body.

Section 2 Fiscal Year

The fiscal year of the HHDC begins on October 1 and ends on the last day of September.

Section 3 Amendments

Except as otherwise provided herein, these bylaws may be amended upon a majority vote of the HHDC Governing Body and approval by a majority of the Harris Health Board of Trustees.

Section 4 Minutes, Books, and Records

The HHDC shall keep correct and complete books and records and shall also keep minutes of the proceedings of the HHDC Governing Body and committees. The books, records, and papers of the HHDC shall be at all times, during reasonable business hours, subject to inspection as provided by the Texas Public Information Act.

Section 5 Review

These Bylaws shall be reviewed annually by the HHDC Governing Body.

Section 6 Conflict of Laws

If any provision of these Bylaws conflicts with any statute or other law of the State of Texas, such statute or law, as long as it is in effect, shall take precedence over these Bylaws.

Section 7 Adoption

These Bylaws become effective immediately upon the date of their acceptance and adoption by both the Harris Health Board of Trustees and the HHDC Governing Body.

Accepted and adopted by the Harris Health Board of Trustees of the Harris County Hospital District d/b/a Harris Health System in Harris County, Texas on _____.

Chair, Board of Trustees
Harris County Hospital District d/b/a
Harris Health System

Accepted and adopted by the HHDC Governing Body in Harris County, Texas on _____.

Date

Chair, HHDC Governing Body
Harris Health System Dialysis Center at Quentin Mease Health Center

Medical Director

Thursday, January 25, 2024

Executive Session

Discussion Regarding Evaluation and Employment Matters Related to the Chief Executive Officer (CEO), Pursuant to Tex. Gov't Code Ann. §551.071 and Tex. Gov't Code Ann. §551.074, and Possible Action Upon Return to Open Session, Including Consideration of Approval of FY2024 CEO Objectives and Approval of FY2023 CEO Evaluation.

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