

# QUALITY OF CARE & PATIENT SAFETY BOARD COMMITTEE

## Agenda

### Committee Members

Chair: Elizabeth Palacios, MD  
Eric G. Bing, MD, PhD  
Byron Cryer, MD  
Todd Furniss, JD  
Farida Minner, RN

Agenda for the *Quality of Care and Patient Safety Board Committee* meeting of the Dallas County Hospital District is scheduled for **Wednesday, August 27, 2025, at 10:00 AM**, at 5200 Harry Hines Blvd (WISH Building) Dallas, TX 75235, Executive Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) A quorum will be physically present at the location of the meeting. Videoconferencing access is also possible via WebEx. That application is available at <https://www.webex.com/downloads.html>. Teleconferencing access is possible by calling +1-415-655-0001. Both virtual access forms require inputting (meeting number: 2307 293 3762; meeting password: 1234) to join the meeting. The *Quality of Care and Patient Safety Board Committee* reserves the right to exercise discretion and may convene in Executive Session as permitted by Texas Government Code §§551.071 (consultation with attorney), 551.072 (deliberations regarding real estate), 551.074 (personnel matters), 551.076 (deliberations regarding security devices or security audits), 551.078 and/or 551.0785 (deliberations by medical committee or by governmental body that administers a public insurance, health or retirement plan regarding individuals' medical or psychiatric records), 551.085 (deliberation by governing board of certain providers of health care services), 551.087 (deliberation regarding economic development negotiations), 551.088 (deliberation regarding test item); Texas Government Code §418.183 (deliberation of information under §§418.175 – 418.182 for purposes of disaster management or disaster planning); Texas Health & Safety Code §161.032 (medical committee or medical peer review committee records, information or reports; and/or medical committee or medical peer review committee proceedings under Tex. Health & Safety Code Chapter 161 and/or Tex. Occ. Code Chapters 151 and 160); and/or as otherwise authorized by law on any item listed below. The *Quality of Care and Patient Safety Board Committee* may consider any of the agenda items in open or executive session and may continue the meeting as necessary to accomplish the business at the time and place designated by the Chair to reconvene.

	TIME (MIN)	PRESENTER(S)
<b>I. Opening</b>	5	Chair
<b>A. Call to Order</b>		
<b>B. Determine the Presence of a Quorum Present</b>		
<b>C. Recitation of Mission Statement</b> <i>Advance Wellness   Relieve Suffering   Develop and Educate</i> <b>I CARE:</b> Integrity Compassion and Collaboration Accountability Respect Equity  This agenda has been developed by the Chief Governance Officer in consultation with the Board Chair, CEO, and reviewed and affirmed by Counsel.		
<b>D. Opening Remarks</b>		
<b>E. Public Comments (Agenda Items)</b> <i>See public comment registration information and rules at <a href="https://www.parklandhospital.com/board-of-managers">https://www.parklandhospital.com/board-of-managers</a></i>		
<b>II. Executive Session: Quality &amp; Patient Safety Operations (QSO)</b> Tex. Health & Safety Code §§161.032 & 161.0315 and Tex. Occupations. Code §160.007		
<b>A. Update and Report by Chief Quality and Safety Officer</b> <i>Includes briefing from Executive Quality Committee (EQC)</i>	10	Mike Lane, MD, MBA, MPHS, MSc, FIDSA, CPPS – Senior Vice President, Chief Quality and Safety Officer
<b>B. Review of Safety Event Cause Analysis (CA) Case(s)</b> <i>Shared learnings from recent safety event(s) with associated guide</i>	30	Case presenters and guests
<b>C. Update and Report Regarding Quality-Related Key Performance Indicators (KPIs)</b> <i>Reports for quality improvement project(s) throughout the enterprise</i>		

		TIME (MIN)	PRESENTER(S)
1.	Workforce Safety Update <i>Biannual report on workplace violence and efforts to reduce events</i>	10	Karen Garvey, MPA/HCA, BSN, RN, DFASHRM, CPHRM, CPPS - Vice President, Safety & Clinical Risk Management
2.	Department Performance Improvement Committee (PIC)/ Clinical Quality Committee (CQC) Annual Presentation(s) <i>Annual report from service lines related to quality and safety</i>		
a.	Anesthesia CQC	8	Omaira Azizad, MD - Associate Chief Quality and Safety Officer; Director, Anesthesia Quality and Safety
D.	Update and Report Regarding Patient Satisfaction: Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) <i>Biannual report for patient satisfaction scores and activities</i>	10	Shauntee Mayfield, EdD, SHRM-CP, CDP, MT(ASCP) – Vice President and Chief Experience Officer
<b>E.</b>	<b>Possible Deliberation Regarding the Following</b>		
1.	Executive Summaries <i>Overview of QSO departmental reports</i>		
2.	Hospital Clinical Excellence Operating Review Update <i>Monthly update of quality key performance indicators (KPIs) for Inpatient Care</i>		
3.	Population Health Clinical Excellence Operating Review Update <i>Monthly update of quality key performance indicators (KPIs) for Population Health</i>		
4.	Cause Analysis (CA) Log <i>List of upcoming cause analysis case reviews</i>		
5.	Quality and Safety Operations FY2026 Annual Budget <i>Annual summary of QSO budget</i>		
6.	Update and Report Regarding Contracts Oversight Committee <i>Biannual summary of quality monitoring for contracted patient services</i>		
7.	Parkland Policy: IP 1-00 Authority Statement and Program Elements for Infection Prevention – Executive Summary		
8.	Parkland Policy: IP 1-00 Authority Statement and Program Elements for Infection Prevention – redline version		
9.	Parkland Policy: IP 1-00 Authority Statement and Program Elements for Infection Prevention – clean version		

~ end of Quality Portion of QBOM Agenda

	TIME (MIN)	PRESENTER(S)
<b>III. Executive Session: Medical Executive Committee (MEC)</b> Tex. Health & Safety Code §§161.032 & 161.0315 and Tex. Occupations Code §160.007	15	James D. Griffin, MD – <i>Chief of Anesthesia; Medical Staff President</i>
A. Consideration and Appropriate Action Regarding Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers		
1. Medical Staff and Non-Physician Clinical Providers to Parkland Health		
a. Credentialing Report		
b. Delineation of Privileges (DoPs)		
i. Core Privilege FPPE Resolution – Update		
ii. Pathology DoP – Full Revision		
iii. OB/Gyn Triage – Add HIPEC		
<b>IV. Executive Session: Discussion regarding report and/or information provided by the Chief Quality Safety Officer and related items on this agenda.</b> See Health & Safety Code § 161.032 & 161.0315 and Tex. Occupations. Code §160.007	10	Chair
<b>V. Executive Session: Discussion regarding report and/or information provided by the Medical Executive Committee President and related items on this agenda.</b> See Health & Safety Code § 161.032 & 161.0315 and Tex. Occupations. Code §160.007	10	Chair
<b>VI. Action Items (Open Session)</b>	5	Chair
A. Consideration and Appropriate Action Regarding: Policy: IP 1-00 Authority Statement and Program Elements for Infection Prevention		
B. Consideration and Appropriate Action Regarding Quality & Safety Operations Department FY26 Budget Report		
C. Consideration and Appropriate Action Regarding MEC Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers		
1. Credentialing Report		
2. Delineation of Privileges (DoPs)		
a. Core Privilege FPPE Resolution – Update		
b. Pathology DoP – Full Revision		
c. OB/Gyn Triage – Add HIPEC		
<b>VII. Follow-Up Requests: None</b>		
<b>VIII. Closing Remarks</b>		Chair
<b>IX. Adjourn</b>		Chair